Printed Documentation

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Children and Family Services

Policy and Procedure Manual

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About this New Format

This manual has been converted to a new format that provides new table of contents, search and glossary functionality.

- The contents button displays the table of contents in a collapsible/expandable book and page format.
- Click or double click the desired book or page in the table of contents to go to the specific page
- Bread crumbs at the top left of the page provide a way to navigate backwards.
- The search button lists pages that contain the search item. Click the desired page to go to the page.
- The glossary button displays the glossary. Click on the desired term - the definition displays in the "Definition:" window below the glossary item in the "Term" window.
- To print from the online manual: go to File, Print Preview and select the desired view in the "Select Content" drop down box (see table below).

As laid out on screen	Displays what is on the screen.
Only the selected frame	Displays the Table of Contents frame unless the cursor is placed in the Content frame.
All frames individually	Displays all pages of the section and allows previewing all individual pages that can then be selected for printing from the print dialog box.
As selected on screen	Displays the highlighted selection on the page. Note: There may be a delay while the preview is populated.

- Click the printer icon to display the Print dialog window.

Printed Documentation

- From the Print dialog window select the pages you wish to print or 'all', click the print button.
- To print the entire section without previewing, click in the content frame and then click the print icon. Note: Some sections can be up to 150 pages.
- A .pdf file is provided for easier printing options.

If errors are found or corrections needed, concerning web or display, feedback regarding the content of this manual, suggested revisions and/or general comments, please report them to Tammy Tompkins at Tammy.Tompkins@srs.ks.gov.

PPM Forms and Appendices

http://www.srs.ks.gov/agency/cfs/Pages/PPMFormsandAppendices.aspx

0000 General Information

0100 About This Manual

In this Policy and Procedure Manual (PPM) are statements of the principles and courses of action to use as guidelines by the Children and Family Services Division of the Kansas Department of Social and Rehabilitation Services staff. As such, it contains three types of entries:

A. Policies define required or prohibited actions

B. Procedures outline the manner in which a policy is carried out or documented;

C. Practice notes are discretionary guidelines and examples in order to clarify a policy or procedure or aid in its application.

0110 Policy Statements

Statements containing the terms shall, must and will indicate that a policy is applicable or a course of action will be taken. The term should is a policy statement that indicates there may be discretion.

0111 Policy Exceptions

Policies and procedures in this manual shall be followed. If, in unusual circumstances, decisions, assessments or other activities required by policy or procedure would result in outcomes not in the best interest of a particular child and the child s family, or if compliance with a policy is not possible or feasible in a particular case, an alternative course of action may be taken if the Regional CFS Program Administrator approves each exception.

The case file shall document the reasons for the decision and who was involved in making it. If the action or decision is required within a specified time, the date and/or time of the alternate action or decision must be documented in the case file.

0120 Procedure Statements

Procedures indicate the method or manner in which a policy shall be carried out. Procedure statements are not equivalent to the policies they implement. There is a narrow range of latitude in procedures. While the expectation is that a procedure shall be carried out, the procedure may vary somewhat if the intent is to implement the policy, and may also vary according to specific Regional practices.

Standardized forms and the instructions to complete them are procedure statements. Other procedure statements appear as clarifications, lists, outlines, sequential steps, etc.

0140 Delegation of Responsibilities

For the purposes of this manual, when the positions of Regional Director, Regional CFS Program Administrator, Assistant Regional Director of Operations, Social Work Supervisor or Director/Chief Executive Officer of an agency contracting with SRS are referred to, a person may be chosen to act in their stead (designee) and given the authority to carry out some or all of the duties of the named person or position the same as if that person had performed the act or function. The option to appoint a designee is acceptable wherever one of these named positions is referenced, unless the language or context indicate otherwise.

The person selected to function in this capacity is expected to have sufficient knowledge and experience to assess situations and make sound decisions. However, a designee is not allowed to perform functions requiring a license or other qualification unless the designee is licensed and otherwise qualified. It is a violation of law for a person without a license to act in the licensed capacity for a person who requires a license to practice.

0150 Questions, Concerns and Clarification

Despite every effort to be clear and to cover all situations, questions may arise regarding application of policy or procedures in a particular situation confronting a worker. Staff shall discuss any questions or concerns about appropriate actions with their supervisor. If staff encounter circumstances in which they feel pressured to report information other than what they feel is fair or accurate, they shall contact their supervisor. If questions or concerns persist, the supervisor shall consult with the Regional CFS Program Administrator or Regional SRS Attorney. The Regional CFS Program Administrator may authorize contact with the appropriate Children and Family Services staff, if additional clarification is needed.

0160 Glossary

A

Abuse

Physical Abuse means the infliction of physical harm on a child or the causation of a child's deterioration, or the likelihood of harm or deterioration.

Sexual Abuse Any contact or interaction with a child in which the child is being used for the sexual stimulation of the perpetrator, the child, or another person. Sexual abuse shall include allowing, permitting, or encouraging a child to engage in prostitution or to be photographed, filmed, or depicted in obscene or

pornographic material. Contact solely between children shall meet the criteria only if the contact also involves force, intimidation, difference in maturity, or coercion. KAR 30-46-10

Mental or Emotional Abuse means the infliction of mental or emotional harm to a child or the causation of a child's deterioration. This term may include, but shall not be limited to, maltreatment or exploitation of a child to the extent the child's health is likely to be harmed.
This term may include the following:

1. terrorizing a child, by creating a climate of fear or engaging in violent or threatening behavior toward the child or toward others in the child's presence that demonstrates a flagrant disregard for the child;
2. emotionally abandoning a child, by being psychologically unavailable to the child, demonstrating no attachment to the child, or failing to provide adequate nurturance of the child;
3. corrupting a child, by teaching or rewarding the child for unlawful, antisocial, or sexually mature behaviors.

Physical Neglect means any act or omission by a parent, guardian or person responsible for the care of a child resulting in harm to a child or presenting a likelihood of harm and the acts or omissions are not due solely to the lack of financial means of a child's parent or other custodian. This term may include but shall not be limited to: failure to provide the child with food, clothing, or shelter necessary to sustain the life or health of the child. KAR 30-46-10

Medical Neglect means any act or omission by a parent, guardian, or person responsible for the care of a child resulting in harm to a child or presenting a likelihood of harm and the acts or omissions are not due solely to the lack of financial means of a child's parent or other custodian.
This term may include the following:
failure to use resources available to treat a diagnosed medical condition if the treatment will make the child substantially more comfortable, reduce pain and suffering, correct or substantially diminish a crippling condition, or prevent the condition from worsening.
A parent legitimately practicing religious beliefs who does not provide specified medical treatment for a child because of religious beliefs shall not for that reason be considered a negligent parent. KAR 30-46-10

Lack of Supervision means any act or omission resulting in harm to a child or presenting a likelihood of harm and the act or omission are not due solely to the lack of financial means of a child's parent or other custodian. This term may include the following: failure to provide adequate supervision of a child or to remove a child from a situation that requires judgment or actions beyond the child's level of maturity, physical condition, or mental abilities and that result in bodily injury or the likelihood of harm to the child. KAR 30-46-10

Abandonment: means forsake, desert or cease providing care for the child without making appropriate provisions for substitute care. KSA 38-2202

Adjudication: A court hearing in which a determination is made whether a child is a CINC (child in need of care) or juvenile offender.

Adoption Assistance: Monies that a family adopting a child may receive when it is determined that the child will not go back to the family from which they have been removed. These payments may be for one-time adoption expenses, a monthly cash subsidy and/or medical assistance.

B

Basic Eligibility: Eligibility for IV-E federal reimbursement for administrative expenses for children whose families meet several basic IV-E criteria.

C

Case Number: A unique computer generated number assigned to each case.

Central Registry The Child Abuse and Neglect Central Registry is a computerized name-based list of persons who have been confirmed validated or substantiated for child abuse or neglect. The name of a perpetrator is not entered in the central registry unless and until they have been afforded an opportunity for an interview and have exercised their right of appeal or the time limit for appeal has expired without action.

Child: anyone under the age of 18 or any adult under the age of 21 and in the custody of the Secretary.

Child in Need of Care. The Kansas Code for Care of Children (K.S.A. 38-2202(d)) defines Child in Need of Care as a person less than 18 years of age who:

1. Has been physically, mentally or emotionally abused or neglected or sexually abused.
2. Has been abandoned or does not have a known living parent.
3. Is without the care or control necessary for the child's physical, mental or emotional health.
4. Resides in the same residence as a sibling or other person under 18 years of age who has been physically, mentally or emotionally abused or neglected or sexually abused.
5. While less that 10 years of age, commits an act which if done by an adult would constitute the commission of a felony or misdemeanor as defined by K.S. A. 21-3105 and amendments thereto OR knowingly possesses a firearm with a barrel less than 18 inches long.
6. Is willfully and voluntarily absent from the child's home without the consent of the child's parent or other custodian or is willfully and voluntarily absent at least a

second time from a court ordered or designated placement, if the absence is without the consent of the person with whom the child is placed.
7. Is without adequate parental care, control or subsistence and the condition is not due solely to the lack of financial means of the child's parents or other custodian.
8. Is not attending school as required by K.S.A. 72-977 or 72-1111, and amendments thereto.
9. Except in the case of a violation of K.S.A. 41-715 or 41-2721, and amendments thereto, does an act which, when committed by a person under 18 years of age, is prohibited by state law, city ordinance or county resolution but which is not prohibited when done by an adult.
10. Has been placed for care or adoption in violation of the law.
11. Permanent Custodian is no longer willing or able to serve.

Child in Need of Care Petition A petition filed with the clerk of the district court by the county/district attorney alleging a child or youth is a Child in Need of Care. Refer to K.S.A. 38-2233(b), concerning the filing of a Child in Need of Care petition by any other individual.

Child Support Enforcement: This agency has the responsibility of seeking child support for children in SRS custody and in an out-of-home placement.

Child Welfare Case Management Providers: Child Welfare Case Management Providers are private organizations that contract with SRS to provide adoption, foster care, reintegration and family preservation services using a philosophy which includes the community, immediate and extended families, and concerned kin in planning for the child's safety, permanency and well-being.

CINC-NAN Child in Need of Care (Non abuse/neglect). Children who come to the attention of the agency for reasons other than alleged abuse or neglect or juvenile offense and who meets one or more of the definitions in K.S.A. 38-2202(d).

Citizen Review Board A group of citizen volunteers appointed by a court to review child in need of care cases and make recommendations to the court.

Client Eligibility: All children who have been removed from their homes by a judge and placed in the custody of SRS must receive an eligibility determination for Title IV-E.

Client ID Number: A unique number assigned to each individual who is known to the KAECSES system. This number is cross referenced with FACTS, KS-CARES, KAN PAY and Child Support Enforcement systems.

Client Service Agreement: A three way service agreement between the client, provider and SRS. This is required for all services that are paid through SRS with the exception of referral services through foster care, adoption or family preservation providers.

COBRA: A federal amendment to the Social Security Act. It enables Title IV-E eligible foster children and adoption assistance children to receive Medicaid coverage in the state in which they physically reside.

Computer Systems:

CASIMS: Community Agency Supervision Information Management System is a comprehensive software package for the day-to-day management of juvenile supervision caseloads

Kansas Automated Eligibility System - (KAECSES)
KAECSES is a major computer system containing data for all children placed in state custody and removed from their home. All children entering foster care shall have
IV-E eligibility determined. This eligibility data is entered into cases. KAECSES can also be used to prepare manual emergency payments.

KanPay
KanPay is a sub-system of KAECSES. It creates an on-line eligibility process for vendor payments. This sub-system is used by CFS for Family Services cases. KanPay is used when the family has no involvement in other assistance programs.

FACTS
Family And Children Tracking System. The basic computerized child welfare information system for the department. Information in FACTS is used to support the department budget, internal management, and reports to the legislature, federal government and the general public. FACTS includes information about the outcomes of abuse and neglect investigations, the child abuse and neglect central registry and foster care and adoption information.

Finance, Accounting, & Reporting Management Systems - FARMS
FARMS is an accounting system used for tracking non-Medicaid payments made by SRS. When entering a new vendor number to pay a customer directly, put 3 in front of the SSN. A 3 is used with the SSN when reimbursing a customer; a 2 is used for purchases from non-customers.

Vendor Payment System - VenPay
Is a sub-system of FARMS used to generate, record and track specific payments. VenPay information is used to prepare the Family Services monthly report, Education Tuition Voucher tracking reports and the Independent Living services budget report.
VenPay includes payment information such as regional office, customer name, customer id, voucher number, voucher date, type of services or goods purchased, total payment amount and vendor. The variety of information available makes the system a valuable tool for tracking payments by Regional offices.

InterChange-Medicaid Management Information System - iC-MMIS
SRS staff utilize the iC-MMIS to enter or review Medicaid data.

Statewide Contractor Reimbursement Information and Payment Tracking System - SCRIPTS
SCRIPTS has three main purposes:

1. to make payments to the Child Welfare Contract Management Provider;
2. to produce the federal claim for IV-E funding; and
3. to submit referral information to the iC-MMIS for Medicaid services.

Referral information and IV-E customer eligibility is entered into FACTS and downloaded into SCRIPTS on a regular basis to maintain these functions. The federal claim is based on IV-E customer eligibility downloaded from FACTS and also based on Child Welfare Contract Management Provider services reported to SCRIPTS as encounter data.

Contractor/Contract Agency:
A person or agency who enters into a contractual agreement with SRS to provide specified services.
Court Appointed Special Advocate (CASA): A responsible adult other than an attorney or guardian ad litem appointed by the court to represent the best interests of a child. (K.S.A. 38-2202(f), 38-2206). A CASA may also be appointed under the Juvenile Offender Code.

Custody/Custodian:
Custody, whether temporary, protective or legal, means the status created by court order or statute which vests in a custodian, whether an individual or an agency, the right to physical possession of the child and the right to determine placement of the child, subject to restrictions placed by the court. (K.S.A. 38-2202(g)).

D

Dedicated WARDS Account: SSI money received for a youth in custody that is a lump-sum of at least 6 months worth of SSI benefits. Social Security deposits the lump-sum and must approve all withdrawals from this account.

Disposition: A court hearing following adjudication in which an order may be issued regarding services, custody, placement, sentencing for juvenile offenders or other matters.

E

Ex Parte Order: An order issued by a judge without a hearing.

F

Facility Homes and child care providers regulated by the Kansas Department of Health and Environment as well as such homes and providers which are legally exempt from regulation and homes or providers which are operating as unregulated services.
Facility includes

1. family foster homes,
2. residential child care facilities,
3. detention,
4. secure care
5. attendant care facilities
6. day care homes or centers.

For purposes of complaints alleging abuse or neglect, "facility" includes any of the above entities which are subject to regulation, whether operating within or without the law.

Family A family means any group of persons who act as a family system with or without a legal or biological relationship.

Family Centered Systems of Care This is a family driven, individualized, culturally competent, and strength-based approach. The family is seen as the expert on their strengths and needs. The family identifies natural resources, including kin and shall be included in all case planning activities, allowing the family to determine their choices and actions.

Foster Resource Family Home means "a private home in which care is given for 24 hours a day for a small number of children away from their parent or guardian" (K.A.R. 28-4-311 (d)).

Family Preservation Referral: A referral made to the Family Preservation Case Management Provider to provide services to keep the family intact and to prevent out of home placement for the child/children in the family, including pregnant women using substances, who may or may not have other children.

Family Services: Non-custody services provided directly to families by SRS social workers or through purchase of services by SRS. Family services are designed to meet identified needs or to support family strengths and are based on a safety or risk assessment of the child and family.

FC Referral: A referral made to a foster care provider to provide case management and supervision for children removed from the home and placed into court ordered SRS custody.

Food Stamps: A federal income subsidy to buy food for families who have marginal income.

G

Guardian Ad Litem: An attorney appointed by the court in Child in Need of Care proceedings to represent the best interests of the child.
Guardianship: A status in which the court gives a person specified rights to the custody and control of a child subject to ongoing review by the court of jurisdiction.

H

Harm: Physical or psychological injury or damage. K.S.A. 38-2202(k)

Healthwave 21: A Federal program to cover low income, uninsured children who do not qualify for Medicaid. This Children's Health Insurance Program (CHIP) is funded with Federal and State money. A small premium is charged depending on the family's income. This is only for children up to age 19.

I

Imminent implies more than speculation but less than certainty. An event is imminent if a reasonable person using common sense, training or experience concludes an event will occur without delay unless there is prompt intervention. K.A.R. Kansas Administrative
Regulations K.S.A. Kansas Statutes Annotated.

K

Kinship: Placement of a child in the home of the child's relative or with an adult with whom the child or parent has a close emotional attachment.

L

Likely (Likelihood) Reasonably to be expected. Likelihood implies more than speculation and less than certainty. An event is likely if a reasonable person using common sense, training or experience concludes that, given the circumstances, an event is probable without a change in those circumstances.

M

Medicaid: A government health care assistance program for families who are below the poverty level. Medicaid funds traditional medical services as well as a variety of behavior management services. A child removed from the home and placed in foster care usually qualifies for Medicaid since they are considered a family of one if their resources do not exceed the established limitations. The Medicaid program is funded with Federal and State money.

Mental Health Consortium: An affiliated group of mental health professionals and centers.
Multidisciplinary Team A group of persons with special knowledge regarding the detection, investigation or treatment of child abuse or neglect. The Kansas Code for Care of Children authorizes SRS to request, and the court to appoint, a multidisciplinary team "to assist in gathering information regarding a child who may be or is a child in need of care" (K.S.A. 38-2228).

N

Non-family/Unregulated Care Giver A person who is not the child's parent, guardian or other person who regularly cares for the child. (examples: teacher, coach, bib brother/sister, neighbor, etc.)

P

Parent when used in relation to a child or children, includes a guardian, conservator and every person who is by law liable to maintain, care for or support the child. (K.S.A. 38-2202(t)).

Payment Eligibility: Eligibility for IV-E federal reimbursement for maintenance expenses (primarily room and board) for children in custody who meet all IV-E eligibility criteria.

Permanency The child is being released from SRS custody after achieving reintegration, guardianship, finalization of adoption, or OPPLA.

Permanency Hearing A notice and opportunity to be heard is provided to interested parties, foster parents, pre-adoptive parents or relatives providing care for the child. The court, after consideration of the evidence, shall determine whether progress toward the case plan goal is adequate or reintegration is a viable alternative, or if the case should be referred to the county or district attorney for filing of a petition to terminate parental rights or to appoint a permanent guardian.

Protective Custody The status of a child believed by a law enforcement officer (Police Protective Custody) or a judge (Order of Protective Custody) that a child alleged to be a child in need of care needs to be removed from danger of harm and placed in a shelter or other emergency or temporary care pending a court hearing.

Protective Placement: The status of a child determined by a law enforcement officer (Police Protective Custody) or a judge (Order or Protective Custody) that the child is alleged to be a Child in Need of Care and should be removed from danger or harm, by placement into emergency or temporary care pending a court hearing.

Provider Agreement: An agreement between a provider of services and SRS for specific services the provider offers to families and children.

R

Redetermination: A re-assessment of IV-E eligibility criteria when a change in placement or circumstance occurs for a child in foster care.

Referral: Process of referring a child to a provider for out of home or in home services.

Resource Family A family willing to provide short term care or service as the adoptive or legal guardian for the child. The resource family is a valued member of the team and will participate in the case planning process, serve as a mentor to birth families, and will encourage parent/child interactions in a natural setting.

S

State Wards Foster children become wards of the state when both maternal and paternal rights have been terminated and the child has not been formally adopted. Child In Need of Care cases remain open under these circumstances and the SRS retains custody. For children who are directly relinquished to SRS, it will be necessary for the case managing entity and SRS to work together to approach the county/district attorney and request a Child In Need of Care petition.

T

Temporary Custody: Custody awarded by a Court based upon evidence in a hearing prior to disposition.
Truant: A child not attending school as required by law.

W

WARDS account: A separate accounting for each child for whom funds are received by SRS on behalf of the child in custody. These account shows all monetary transactions received for and paid out on behalf of the child in custody.

Working Day A day when the Department is open for business; does not including Saturdays, Sundays or official state holidays.

0210 Staff Safety

If there is a possibility that the safety of a family member, SRS staff, contractor staff or the public may be jeopardized during an investigation, assessment or provision of services, the appropriate law enforcement agency shall be contacted for assistance. SRS social workers are required by law to investigate and assess reports of alleged child abuse and neglect, but are not required to place their own safety in unreasonable jeopardy to do so.

The social worker should refer to the applicable regional safety plan when safety issues are a concern.

0220 Discrimination Prohibited by Law

All services shall be in compliance with Title VI of the Civil Rights Act of 1964, the Americans with Disabilities Act of 1990 and K.S.A. 44-1009. No individual/family will be denied services because of race, color, national origin, sex, religion and mental or physical disability. The provision of services will be provided based on need and eligibility criteria.

Title VI of the Civil Rights Act of 1964 makes it unlawful to discriminate on the basis of a person's race, color, national origin, sex, and religion.

The Americans with Disability Act of 1990 prohibits discrimination because of a person's mental or physical disability (i.e. blind/visually impaired, deaf/hard of hearing, mobility impairments, speech impairments).

K.S.A. 44-1009)(3) states, "It shall be unlawful discriminatory practice for any person to refuse, deny, make a distinction, directly or indirectly, or discriminate in any way against persons because of the race, religion, color, sex, disability, national origin or ancestry of such persons in the full and equal use and enjoyment of the services, facilities, privileges and advantages of any institution, department or agency of the State of Kansas or any political subdivision or municipality thereof."

0221 Limited English Proficiency

When working with individuals who are limited in their ability to communicate in English, reasonable steps shall be taken to ensure meaningful communication. This will normally include provision of an interpreter or providing written documents in their language, if available.

0230 Administrative Appeals

K.S.A. 75-3306 requires the Secretary of SRS to provide a fair hearing for any person who is an applicant, customer, inmate, other interested person, or taxpayer who appeals the decision or final action of any agent or employee of the Department of Social and Rehabilitation Services. K.A.R. 30-7-64 through 30-7-79 set out additional requirements concerning this administrative appeal process.

Adoptive staffing decisions are within the jurisdiction of the District Court pursuant to KSA 38-2270 and are likely to be dismissed by the Hearing Officer for Administrative Appeals.

Those wishing to appeal may do so by submitting a request in writing within 30 days of a decision of final action. An additional 3 days shall be allowed if this notice of final decision is mailed.

Such a request may relate to an agency action or a failure to act with reasonable promptness on a social service case. This could include undue delay in reaching a decision on eligibility or making a payment, refusal to consider a request for payment, undue delay in adjustment of payment, rejection or termination of services. Most appeals arise from findings as a result of a child abuse/neglect investigation. The denial or delay of an adoptive placement due to geographic boundaries may also be the basis for an appeal. For additional information, see http://www.oah.ks.gov/request.htm.

0240 Conflict of Interest

It is important for staff to avoid situations which present a conflict of interest or have the appearance of such a conflict. This protection is for both staff and the customer. SRS defines being a resource family for a child in the custody of the Secretary, while involved in a professional relationship with that child, as a conflict of interest.

SRS staff who carry out the work of the Department of SRS are prohibited from providing additional direct or indirect services to children in the Secretary's custody or to families of children in the Secretary's custody.

When an employee is given an assignment that is or could be construed as a conflict of interest, the employee shall notify the supervisor who shall, in consultation and concurrence with the Regional CFS Program Administrator, determine whether it is appropriate to continue the assignment in question or to reassign the work to another staff person.

Professional involvement with or case management responsibilities for a case involving a member of the family or a person with whom the worker has close personal or business ties, presents a conflict of interest.

Additionally, social workers are advised by the Social Work code of Ethics, not to be involved in dual relationships with customers.

0250 Removal from Home and Transporting Children Not in the Secretary's Custody.

SRS staff shall NOT take a child into physical custody without a written court order of custody. SRS staff shall NOT transport a child who is not in the Secretary's custody unless the child is accompanied by a parent or the parent has given written permission.

Only a law enforcement officer, court services officer, or the court has the authority to place a child in protective custody. When a law enforcement officer determines that

protective custody is appropriate, the officer, not SRS, should place the child as provided by statute (K.S.A. 38-2232). It is important to remember that SRS staff or contractor staff acting on behalf of SRS, do not have authority to transport a child placed in protective custody by a law enforcement officer. If SRS staff were to transport a child in the protective custody of law enforcement a potential legal liability exists for the Department, and the SRS staff person. A law enforcement officer or the care provider with whom the police place the child may transport the child.

0260 Court Orders

Staff shall make every effort to comply with every court order. When a court order is received, which appears to exceed statutory authority or requires actions that the Department has no ability to perform, a referral shall be made to the regional attorney for guidance and any necessary action.

0270 Subpoenas and Testifying in Court

When served with subpoenas or other court orders to produce records and/or testify in court concerning confidential information, staff shall:

A. Notify the regional attorney immediately.
B. When appearing to testify concerning information not authorized to be disclosed, provide the court and each attorney with a copy of this statement:

> The information you seek is confidential and privileged, and I am authorized to disclose that information only upon an order from the court to do so.

Reference: K.S.A. 38-2209 et seq.; Chapter 39-709b;

Testify further according to the ruling and instructions of the court.

This statement is to be used only when SRS does not have a role in the court hearing which is specified by statute or SRS policy. It is not to be used when the court action is being taken under the Kansas Code for Care of Children (child protection services, foster care, etc.) at the request of SRS.

Whenever possible inform the court and the attorneys before the proceedings that this statement will be made and that upon instruction from the bench testimony will be given.

0271 Protocol to Request CINC Court Hearing be Closed

K.S.A. 38-2247(a) provides that proceedings pertaining to adjudications under the revised code for care of children shall be open to the public, unless the court determines

closure or the exclusion of an individual is in the best interests of the child or is necessary to protect the privacy of the parents.

When circumstances appear to justify closure of a CINC adjudication hearing, a written request from SRS or the Child Welfare Case Management Provider shall be submitted to the Director of Children and Family Services 10 calendar days before the scheduled hearing if at all possible. If the request is directly from the Child Welfare Case Management Provider, the Regional Director shall be copied. The request shall summarize the facts of the case and the basis for believing closing the hearing is in the best interest of the child or necessary to protect the privacy of the parents.

The Director will review and submit the request with a recommendation to the Deputy Secretary and General Counsel. Upon receipt of the decision by the Deputy Secretary and General Counsel, the Director will notify the person who submitted the request.

0280 Consents

Persons authorized to give consent for matters involving a child depends on the purpose of the consent and the legal status of the child. Consents for children who are or may be in need of care are controlled primarily by K.S.A. 38-2217 for health care and K.S.A. 38-2218 for educational decisions. (K.S.A. 38-2217).
See PPM 5244 for information regarding children in the custody of the Secretary.

0290 Policy on Discipline

Discipline is an essential part of child rearing and when used positively it contributes to the healthy growth and development of a child and establishes positive patterns of behavior in preparation for adulthood. The object of discipline is to promote behaviors beneficial to the child's development and welfare and to change and/or eliminate behaviors which are injurious to his or her well-being. Therefore, we encourage positive discipline as a most important aspect of child rearing practices for children and youth for whom the Department of Social and Rehabilitation Services purchases and/or provides services and care.

Positive discipline when used for purposes of guiding and teaching the child, provides the child encouragement, a sense of satisfaction, and helps the child understand the consequences of his/her behavior. Effective, positive discipline imposes behavioral limitations on the child which can provide the child a sense of security, engender a respect for order, and effectively enlists the child's help rather than locking the child and adult into a power struggle or adversary, punishing relationship, and promotes the child's discovery of those values that will be of the greatest benefit to the child, both now and in the future.

There are laws which protect adults against actions which many children must endure and suffer under the guise of discipline. Many children who are in the care of SRS have

previously suffered too much physical pain, fear, humiliation, and emotional stress. We cannot perpetuate this when we assume the positive roles in our child-rearing practices - of which positive discipline is an essential part.

Therefore, SRS does not view as positive, acceptable discipline any action administered in a fashion which may cause any child to suffer physical or emotional damage. Disciplinary acts which cause pain, such as hitting, beatings, shaking, cursing, threatening, binding, closeting, prolonged isolation, denial of meals, and derogatory remarks about the child or his or her family or other acts of substantially the same nature or which have substantially the same effect are not acceptable.

IT IS THE POLICY OF THE DEPARTMENT OF SOCIAL AND REHABILITATION SERVICES THAT WE NOT PURCHASE OR CONTINUE TO PURCHASE SERVICES FROM THIRD PARTY PROVIDERS WHO USE DISCIPLINARY ACTS WHICH CAUSE PAIN SUCH AS HITTING, BEATINGS, SHAKING, CURSING, THREATENING, BINDING, CLOSETING, PROLONGED ISOLATION, DENIAL OF MEALS, AND DEROGATORY REMARKS ABOUT THE CHILD OR HIS OR HER FAMILY. NOR SHALL SUCH DISCIPLINARY ACTS BE TOLERATED WHEN PRACTICED BY SRS EMPLOYEES IN REGARD TO CHILDREN IN CARE OF THE AGENCY.

A. Physical Restraint

The purpose of physical restraint in a Youth Residential Center is to prevent a youth from causing injury to self or others and is used only when other means of behavior control is unsuccessful.

It is expected that therapeutic relationships among staff and residents will usually be sufficient to de-escalate incidents of out-of-control behavior of youth in care. When it is not possible to avoid the use of restraint in helping a youth regain control, passive physical restraint may be used to:

- end a disturbance which threatens physical injury to the youth
- end a disturbance that threatens physical injury to others;
- remove a dangerous object from a youth with which the youth has threatened harm.

Physical restraint shall not be used for the purpose of punishment or discipline.

The Department of Social and Rehabilitation Services will not purchase or continue to purchase services from providers who use physical restraint in a manner contrary to methods jointly approved by the Department of Social and Rehabilitation Services and the Department of Health and Environment or otherwise in violation of statute or regulations.

B. Use of Time Out in Residential Child Care Facilities

Time out is a procedure used to assist the individual to regain emotional control by removing the individual from his or her immediate environment and restricting the

individual to a quiet area or unlocked quiet room.

1. A resident in time out must never be physically prevented from leaving the time out area.
2. Time out may take place away from the area of activity or from other residents.
3. Staff must monitor the resident while he or she is in time out.

C. Emergency safety intervention

An emergency safety intervention must be performed in a manner that is safe, proportionate, and appropriate to the severity of the behavior, and the resident's chronological and developmental age, size, gender physical, medical, behavioral health and personal history must be taken into consideration.

The use of emergency safety interventions must be performed only through the use of nationally recognized restraint procedures applicable to this population designed to prevent a resident from harming self or others by exerting external control over physical movement. The approved interventions are listed in the YRC Standards and General Guidelines.

Physical restraint is the application of physical force without any mechanical device, for the purpose of restricting the free movement of a resident's body. Physical restraint should be used only as last resort after all verbal de-escalation techniques have failed and when the resident is at-risk of harming themselves or others.

Mechanical restraint is the use of mechanical devices to restrict the free movement of the resident's body, most often for purposes of preventing self-destructive behavior. Mechanical restraints are not allowed in YRC group or residential facilities.

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0309 Public Records

Pursuant to the Kansas Open Records Act (K.S.A. 45-215 et seq.) it is Department policy to provide access to public records and, unless otherwise prohibited, all public records may be inspected and copied by any person.

Public records include manual provisions, contracts, and Secretary's Letters. Information concerning or identifying specific individuals are not public. Personnel records, social service case information, treatment records are examples of records which contain personal information about individuals and are not, therefore, public. Communications to or from agency attorneys are not public records.

A request for records must be responded to by SRS staff within three days indicating, if the records are not produced, the cause of any delay and the earliest date when the records shall be available.

It is permissible to require individuals seeking access to schedule a convenient time for review. Anyone inspecting a public record shall, upon request and payment of an authorized fee, be provided a copy. The SRS fee policy is set out at K.A.R. 30-2-12. However, the office need not provide the copies immediately upon demand, but as soon as possible without disrupting flow of essential operations.

0310 Information Regarding a Child Alleged or Adjudicated as a Child in Need of Care

The provisions of K.S.A. 38-2209 et seq. control the release of information from records and reports involving children alleged or adjudicated in need of care.

When investigating an allegation a child may be in need of care, K.S.A. 38-2210 requires a free flow of information with others involved in the investigation.

The Department is required by K.S.A. 38-2212(c) to disclose information concerning children alleged to be in need of care to the extent necessary to carry out a lawful responsibility for the child. The intent of this section is to facilitate the sharing of information with entities to the extent they have a responsibility to diagnose, treat, care for or protect the child. The Department must determine what information should be shared. Generally children benefit when the adults responsible for providing care or making decisions are fully informed. Disclosure of information which identifies the reporter is, however, prohibited. If in doubt, consult a supervisor, regional attorney or the Regional CFS program administrator. It is agency policy that information is freely shared between SRS staff and contract staff involved with the family.

K.S.A. 38-134 specifically requires SRS to obtain information about the child and fully inform the foster parents.

0311 Case Record Requests of Child Abuse or Neglect Resulting in a Fatality or Near Fatality

The provisions of KSA 38-2212 (f) allows access to a case record of child abuse or neglect resulting in a fatality or near fatality. Except when the child was adopted and the record includes information about the child or birth parents prior to adoption, the record becomes a public record. A request to access a case record of a child abuse or neglect resulting in a fatality or near fatality needs to be provided in writing to SRS. The request shall contain the requester's name and address and information necessary to ascertain the records to which the requester desires access.

The person in receipt of the request shall ensure the Open Records Coordinator in the Secretary's Office, the Director of CFS, and the SRS regional Attorney and Program Administrator are notified of the request. The Director of CFS, or Designee and the SRS Regional Attorney and Program Administrator, or Designee(s) shall coordinate review of the case file and how to proceed

0312 Access to Information Regarding Closed Guardianship/Custodianship and Adoption Records

KSA 59-2122 provides for the opening of adoption records to parties of interest, their attorneys and the Department of Social and Rehabilitation Services (SRS). Parties of interest include the adopted parents of a minor child and the adult adoptee. Interested party status does not apply to the birth parents, once the adoption is final. Birth parents are only permitted to update medical records per KSA 59-2122.

Case File Information is available to:

A. The adoptive parents of the minor child in the event of a health or medical need
B. The adult adoptee for any reason

Identifying information shall not be shared with the birth parent without permission of the adoptive parents of the minor child or of the adult adoptee. SRS may share medical information with the adoptive parent of a minor child or adult adoptee.

0313 Public Knowledge Case

KSA 38-2212 allows the agency to provide disclosure of procedural details related to the handling of a case in the event the investigation of a case or the filing of a CINC petition becomes public knowledge.

The person in receipt of the request shall ensure the Open Records Coordinator in the Secretary's Office, the Director of CFS, and the SRS regional Attorney and Program Administrator are notified of the request. The Director of CFS, or Designee and the

SRS Regional Attorney and Program Administrator, or Designee(s) shall coordinate review of the case file and how to proceed.

0314 Adoption Records and Searches

A. Initiating Contact with Birth Relatives
It is the policy of the Department to offer all reasonable assistance to adults (age 18 or older) seeking information about:

1. Their own adoption and/or guardianship record
2. Their birth parents and birth siblings, (where a relationship had been established prior to out of home placement and birth sibling is currently 18 years old or older)

K.S.A. 59-2122 (b) gives SRS the authority to contact birth parents on behalf of an adult adoptee for any reason or the adoptive parents of a minor in the event of a medical or health need. Identifying information shall not be shared with the birth parents without the written permission of the adoptive parents of a minor child or the adult adoptee.

SRS may contact an adult adoptee at the request of the birth parents once the adult adoptee reaches age eighteen. An inquiry shall be made to ascertain whether the person is interested in establishing contact with the searching person. If everyone is in agreement, SRS staff shall facilitate the sharing of information between the two parties.

B. Requests for Information
There may be a charge for copies of case record material. The SRS fee policy is set out in K.S.A. 30-2-12.

If available at the local SRS or Child Welfare Case Management Provider office, the adult adoptee may obtain information from the agency record that was authored by either SRS or the Child Welfare Case Management Provider. Information written by someone other than SRS or Child Welfare Case Management Provider staff, shall not be shared without written permission from the author. If the required authorization is not available, the adult adoptee shall be informed of the availability of this information and be referred to the author. When the Child Welfare Case Management provider or SRS receives a request for information:

1. Inform the person(s) the information is available from SRS by contacting:
   - Children & Family Services (CFS)
   - 915 SW Harrison
   - DSOB, 5th Floor
   - Topeka, KS 66612-1570

2. Provide the person(s) with one of the following forms, as appropriate:

a) CFS 7002 Adult Adoptee Requesting Copy of Adoption Record

b) CFS 7003 Birth Parent Requesting Contact with Adult Adoptee

c) CFS 7004, Adult Requesting Search for Birth Sibling(s)

d) CFS 7005 Authorization to Release Information

A copy of the original birth certificate is to be sent with the request to initiate the search and retrieval of adoption records. Inform the adult adoptee that if they were born in Kansas, they will need to obtain their original Birth Certificate (this birth certificate was issued prior to the adoption - it will be stamped void) by contacting:

Kansas Department of Health and Environment (KDHE)
Center for Health and Environmental Statistics
1000 SW Jackson Street, Suite 120
Topeka, KS 66612-2221

C. Information if available, shall be released includes:

1. Social history including names, birth dates, addresses, telephone numbers, social security numbers of the adult adoptee's birth parents;
2. All birth and medical information completed by SRS
3. Progress reports prepared by SRS or Child Welfare Case Management Provider, (delete information which identifies resource parents and others who may have an expectation of privacy);
4. Correspondence addressed to the adult adoptee from the birth family;
5. Pictures of the birth family or adult adoptee;
6. Decree of adoption

D. SRS shall not release the following information:

1. Adoptive names and addresses of birth siblings, if 18 years of age or older, without their written permission;
2. Adoptive names and addresses of birth siblings, if under 18 years of age;
3. Names and addresses of extended family members, without their written permission;
4. Copies of Third Party information or reports completed by persons other than SRS or those individuals or agencies with whom SRS has contracted for services, without written permission from the author. The name of the agency and, if available, contact information to obtain such information or reports, shall be provided to the adult adoptee.

0315 Confidential Records

Consumers of social services have an expectation of privacy which shall be respected. Information obtained in the course of determining eligibility and/or providing services is confidential. However, children are best served when involved adults are informed and communicating openly.

Consistent with federal law, K.S.A. 39-709b limits the disclosure of confidential information to: (1) that which is reasonably necessary to assist the client to obtain and participate in services (administration of the program); (2) situations when the client provides written consent; (3) some limited emergency situations; and (4) when the court has issued an order or subpoena.

Information provided by other SRS programs such as Food Stamps, Economic & Employment Support (EES), Rehabilitation Services, Addiction and Prevention Services (AAPS), Child Support Enforcement (CSE) and Disability and Behavioral Health Services (DBHS) are covered by the provisions of K.S.A. 39-709b.

Case information shall be disclosed when the information is needed in the performance of official duties.

It is agency policy that information is freely shared between SRS staff and contract staff involved with the family. (See 0600 regarding Coordination of Services) Additionally, case information shall be shared as necessary to facilitate delivery of the service or to carry out SRS responsibilities with other agencies and entities with which the Department has contracted to perform specific services.

All case information shall be disclosed to auditors performing official auditing duties after they have adequately identified themselves by showing official identification credentials.

Court reports by or on behalf of SRS shall be made available to the attorneys, guardian ad litem, CASA, citizen review board, juvenile justice personnel involved in the court case and anyone else authorized by order of the court and subject to the conditions in the court's order. (K.S.A. 38-2211)

SRS investigative reports shall not be made available unless the Secretary or the attorney to whom the case has been referred for legal action or a court (including hearing officer) authorizes such disclosure in writing.

Third Party Information

Third party information is from non-SRS professionals/agencies and includes medical, psychiatric, investigative reports, social histories, substance abuse treatment records, school records, law enforcement reports etc. and SRS summaries of these documents.

Form MS 2122 (Community Mental Health Center Screening Assessment) or MS 2001 (Statement of Medical Necessity) and reports from family preservation,

reintegration/foster care, and adoption providers under contract with SRS are not considered to be third party reports.

Records provided to SRS because a child is or may be in need of care become SRS records pursuant to K.S.A. 38-2209 and are subject to the same requirements for access, disclosure, re-disclosure as all other agency records whether maintained in paper or electronic form.

Although third party information may be disclosed, the best source for information remains the professional who compiled the information.

When there is some question about access to or disclosure, re-disclosure, or use of information, consult a supervisor, regional attorney or the Regional CFS program administrator.

0316 Inappropriate Disclosure of Confidential Information

An SRS employee who knowingly discloses confidential information concerning a present or past consumer of services is in violation of the provisions set forth in this section may be subject to:

A. Appropriate disciplinary action (official reprimand, suspension, demotion, dismissal, etc.); and
B. Criminal prosecution

0317 General Procedures Regarding Disclosure of Social Services Information

A. Review the rules and guidelines in this manual section to determine if disclosure of information is restricted, allowed or required. When there is doubt consult with a supervisor or regional attorney.

B. Prior to disclosure:

1. Obtain required clearance or consent to disclose the information.
2. Consider and weigh the benefit for the child with privacy concerns of those involved.
3. Provide adequate supervision of the record when the request is for case record inspection or copying.

4. Document in the case record when a request for information has been received, from whom, the information shared, the basis for decision, whom information was disclosed or refused and the date of disclosure.

5. Case information shall not be disclosed over the telephone unless the other party is positively identified.

0318 The Health Insurance Portability and Accountability Act (HIPAA)

The Department of Social and Rehabilitation Services, as a single covered entity under HIPAA, understands that information we collect about our consumers and their health is personal. Keeping the health information of consumers private is one of our most important responsibilities. SRS and provider personnel will take all necessary precautions to ensure that consumer health information is kept private. Additional information is available at:

http://www.srskansas.org/hipaa_links.htm

A. Purposes of HIPAA

The federal Health Insurance Portability and Accountability Act of 1996 has two key purposes:

1. The "portability" portion protects health insurance coverage for workers and their families when they change or lose their jobs.

2. The "administrative simplification" portion requires national standards for electronic health care transactions, standard identifiers for providers, health plans and employers, privacy protection for health data in any medium, and security requirements for health data transmitted electronically. It addresses, through protections, the security and privacy of patient health data. The health data is referred to under HIPAA as "protected health information".

B. Protected Health Information

HIPAA regulations define health information as "any information whether oral or recorded in any medium that:

1. is created or received by a health care provider, health plan, public health authority, employer, life insurer, school or university, or health care clearinghouse; and

2. relates to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or future payment of health care to an individual if there is a reasonable basis to believe the information can be used to identify the individual.

Protected health information (PHI) under HIPAA means individually identifiable health information. Identifiable health information refers not only to data that is explicitly linked to a particular individual but also includes health information with data items which reasonably could be expected to allow individual identification.

C. HIPAA Permitted Uses and Disclosures

1. Treatment - may use or disclose health information to provide the necessary treatment for individuals.

2. Payment Functions - may use or disclose health information about a customer to determine eligibility for plan benefits, obtain premiums, facilitate payment for the treatment and services, determine program responsibilities for benefits, and to coordinate program benefits.

3. Health Care Operations - may use information about customers to carry out necessary program related activities.

4. Required by Law - may share information required by a court order.

5. Public Health - may disclose health information to public health authorities.

6. Disclosures of Victims of Abuse, Neglect, or Domestic Violence - may disclose protected health information about an individual whom SRS reasonably believes is a victim of abuse, neglect, or domestic violence.

7. Health Oversight Activities - may disclose information to health agencies during the course of audits, investigations, inspections, and other proceedings related to oversight of the agency programs.

8. Judicial and Administrative Proceedings - may disclose information in the course of any administrative or judicial hearing.

9. Law Enforcement - may disclose health information to a law enforcement official.

10. Coroners, Medical Examiners, and Funeral Directors - may disclose information in the course of an autopsy or death.

11. Organ and Tissue Donation - may disclose information in the course of an organ or tissue donation.

12. Public Safety - may disclose health information to an appropriate person in order to prevent or lessen a serious and imminent threat to the health or safety of a particular person or the general public.

13. National Security - may disclose health information to an appropriate person in order to prevent or lessen a serious and imminent threat to the nation's security.

14. Correctional Institutions and Other Law Enforcement Custodial Situations - may share health information with a law enforcement official who has lawful custody of an inmate.

15. Workers Compensation - may disclose health information to an appropriate person in the event of an on-the-job injury.

16. Appointment Reminders - may use and disclose health information to contact a customer with appointment reminders for treatment and/or services.

0320 Expanded Criminal History Checks

Records may be requested on individuals SRS is considering to care for children. Individuals shall have fingerprints taken to access Federal/National records from the Federal Bureau of Investigation (FBI).

A. Individuals who have lived in Kansas less than 5 years shall have a child abuse and neglect registry check from each state where they have lived within those past 5 years.

Additionally, at the discretion of the Regional CFS Program Administrator, an FBI check may be requested when SRS becomes aware of an incident which occurred that meets:

1. have a reported relinquishment/termination of parental rights from out of state, OR,
2. reported convictions of offenses considered prohibitive per KSA 65-516, OR, 3) all references are from out of state.

B. SRS staff shall be required to:

Submit a request to the Regional CFS Program Administrator or designee that details the reason for a nationwide background check.

If the request is approved, the Regional CFS Program Administrator or designee will provide the staff that made the request with a packet of documents which will need to be completed. The staff shall do the following:

1. Provide the individual(s) on which the nationwide background check is being requested with a copy of the letter outlining SRS' authority to obtain a nationwide background check. (See appendix 0A.)
2. Have the individual(s) complete and sign the "SRS Security Clearance Form", PM-6619. This form allows SRS to request a nationwide background check and shall be enclosed in the envelope provided for Law Enforcement agency (maintain a copy for the file).
3. Complete the "Security Clearance Request Form", Form number PM-6620, identifying the Regional CFS Program Administrator or designee as the person to whom results shall be returned. This form shall be enclosed in the envelope provided for Law Enforcement agency (maintain a copy for the file).
4. Provide the individual(s) with a fingerprint card and information detailing process to be followed.
5. Arrange for the fingerprint process and send to SRS Central Office Personnel staff who forwards to FBI via KBI.

6. SRS Central Office staff will also check child abuse and neglect registries of other states.

7. Results will be shared with the SRS staff who requested the information (this person is designated on the "Security Clearance Request Form", Form number PM-6620).

SRS will be assessed the fees, which can include the costs for the taking of the fingerprints by the Law Enforcement agency and any costs associated with the submission to the FBI by the KBI, for the background checks.

C. Examples of circumstances that warrant a nation wide record search:

1. Child(ren) is in Police Protective custody, and the family identifies a person(s), who has recently moved to Kansas, who is able to provide care for the child(ren) in the effort to prevent SRS custody.

2. A child who is in SRS custody and placement with a specific relative or non-related kin is being considered, however, the relative or non-related kin has resided in the state for less than 12 months.

3. A child who is not in SRS custody, but the Court is involved in the case, and the court is requesting more information on a potential placement resource for the child.

0410 Case Open For Services

A case shall be opened, data entered into FACTS and case file established when:

A. A report is accepted by the Department for an investigation or assessment,

B. A journal entry is received placing a child in the custody of the Secretary.

The family record shall be open in the name of the head of household.

0420 Documentation of Case Decisions

Documentation is the foundation for professional accountability and is integral to family centered services. Documentation consists of information that addresses the following:

A. What:
Document the identity of individuals contacted and the reason for the contact; the date, time and method of contact; describe any action taken or reason no action was taken. Also document each decision made and the basis for the decision.

Observations supporting the decision shall be set out in descriptive language (think five senses) using correct grammar and spelling. Documentation shall be clear a person not familiar with the case, what decisions were made, when, by whom and why they were made and what action was taken. Stick to documentation facts, avoid personal opinion, conclusions and judgments. Be concise but complete.

B. When:
Information shall be recorded as soon as possible. Timely documentation is more accurate and available when needed.

C. Where:
Worksheets, checklists and forms shall be developed to facilitate adequate documentation with minimum time and effort. Forms must be completely filled out.

D. How:
Signatures and dates of those signatures shall be in ink (blue or black).

Number pages, use "cont'd" when narrative continues to next page. Do not leave blank spaces, write on or mark through each line. Keep the file in order.

0421 Additions and Changes to Case Information

It is important that staff shall avoid any appearance of altering records. As new information is obtained or when information changes, the information on relevant forms shall be updated by adding the new or changed information, initialing and dating the change. If information requires a correction, the information shall be corrected by crossing through the incorrect information with a single line, writing the correct information next to it, initialing and dating the change. A brief explanation of the reason for the change shall be written on the form or, if explained elsewhere in the record, cross referenced. Erroneous or revised information may not be erased or covered with whiteout, felt tip-markers, etc.

0430 Contents of Case Records

A. SRS Case Records
Case records shall contain the following sections:

Section 1: Logs, family contact sheets
Section 2: Legal Documentation
Section 3: Intake and Assessment
Section 4: Assessment and Case Planning
Section 5: Contracted Services
Section 6: Interstate Compact
Section 7: Eligibility and Financial Planning
Section 8: Miscellaneous

Printed Documentation

Children within the family who are in the Secretary's custody shall have their own individual file.

Within each required section, the material shall be organized in like groups, arranged in a logical manner (e.g., All court reports together, all case plans together) depending on the case situation and the forms/documents used. Each section shall be labeled. The material within each section shall be maintained together chronologically with the most recent material on top. Duplicate material shall not be included in the case file.

The forms appearing under the section headings are a guide and not necessarily all the forms which might be appropriately filed in the section. Form numbers listed below are the forms currently in use. Forms which are equivalent or which serve the same function, shall be placed in the same sections as the current forms.

If a section is not applicable (e.g., interstate compact), a labeled placeholder shall be included to indicate the section has not been overlooked.

Forms completed shall be the order of case record sections:

Section 1: Logs, family contact sheets

All logs shall be page-numbered, contain month, date, year and name of the worker.

1. CFS 3011 Visitation/Contact Log
2. YA 1010 Social Service Case Activity Log

Section 2: Legal Documentation

1. Petition
    a. Applications, affidavits, or worksheets used in the preparation of the petition
2. Certified or file stamped copies of orders and journal entries
    a. Ex Parte Order of Protective Custody
    b. Temporary Custody Order
    c. Adjudication
    d. Dispositional Order
    e. Order or Journal Entry resulting from a permanency hearing
    f. Order of Informal Supervision
    g. Termination of Parental Rights
    h. Guardianship/permanent custodianship
    i. Adoption Decree
    j. Court order releasing child from SRS custody/jurisdiction of the court

SRS Forms:

1. CFS 4001 Authorization for Release of Confidential Information
2. CY 2822 Consent to Medical Care (Parent)
3. YA 2303 Voluntary Relinquishment to the Department of SRS
4. YA 3308A Adoption Consent (Committed)

5. YA 3308B Adoption Consent (Relinquished)
6. YA 3308C Adoption Consent (Committed and Relinquished)
7. External Releases of Information

Section 3: Intake and Assessment

Each report accepted for assessment shall be filed together as a separate packet of completed forms:

1. CFS 1000 - Face Sheet
2. CFS 1001- Report/Request for Services
3. CFS 1001A - Summary Results Preliminary Inquiry
4. CFS 1002 - Response Determination
5. CFS 1003 - Request to Interview a Child at School
6. CFS 1004 - Agency Response B Facility Reports
7. CFS 2003 - Family Based Safety Plan
8. CFS 2005 - UNCOPE
9. CFS 2011 - Case Findings
10. CFS 2012 - Notice of Department Finding
11. CFS 2015 - Infant-Toddler Referral
12. CFS 2016 - Complaint Report, Facility Subject to Regulation by KDHE
13. CFS 2030A - Agency Response
14. CFS 2030B - Safety Assessment
15. CFS 2030C - Risk Assessment (short form)
16. CFS 2030D - Risk Assessment
17. CFS 2030E - Child in Need of Care - Non Abuse or Neglect Assessment
18. CFS 2030F - Family Based Assessment Summary
19. CFS 1006 - Report of Unexcused School Absences
20. Emergency Shelter Referrals

Section 4: Assessment and Case Planning

1. CFS 3003- Court Report other reports required by District court
2. CFS 3005C - Education & Training Planning Worksheet
3. CFS 3037 - Educational Advocate Referral Form
4. CFS 3050 - Family Case Plan
5. CFS 3051 - Permanency Plan
6. CFS 3052 - Administrative Requirements
7. CFS 3053 - Parent and Child Interaction Schedule
8. CFS 3054 - Visitation Schedule
9. CFS 3055 - Permanency Plan Review
10. CFS 3056 - Permanency Plan Desk Review
11. CFS 3057 - Service and Codes
12. CFS 3059 - Transition Plan
13. YA 2300 Medical and Genetic Information for child Psychological, social, medical assessments of family members Family Assessment Tools (e.g., Genogram, Ecomap, Timelines, Sequence of Behavior)

Printed Documentation

14. Behavior Contract
15. Consultation notes
16. Contract Service Provider Reports
17. Court Service Officer Reports

Section 5: Contracted Service

Referrals and Transmittals

1. CFS 2020 - Family Preservation Referral and Transmittal Sheet
2. CFS 2022 - Foster Care/Adoption Family Information Sheet
3. CFS 3020 - Notification of Adoption Case Plan
4. CFS 3022 - Initial Referral to Adoption Contractor
5. CFS 3023 - Case Plan Adoption/Time line Documentation
6. CFS 3030 - Initial Referral to Out of Home Service Provider
7. Adoption/Foster care acknowledgments
8. Individual recruitment plan
9. Adoptive family assessments/home studies
10. Placement memos

Section 6: Interstate Compact

1. CFS 4010 - ICAMA Form 6.01, Notice of Medicaid Eligibility/Case Activation
2. CFS 4011 - ICAMA Form 6.02, Notice of Action
3. CFS4012 - ICAMA Form 6.03, Report of Change in Child/Family Status
4. CFS 4013 - Interstate Compact Placement Request
5. CFS 4018 - Interstate Compact Financial/Medical Plan If Child is Placed Out-of-State
6. YA 3305 - ICPC Report on Child's Placement Status (100B)
7. Regulation 7 - Priority Placement Request
8. Priority Home Study

Section 7 (Financial Information)

Each region will determine the color of the file folder for the financial packet for both IV-E and State only eligible cases. There will be one colored file folder for IV-E eligible packets and a different colored file folder for State only eligible. There will be a separate file folder for each foster care episode. The file folders will be located in the Section 7 of the social service file which will be kept by the eligibility specialist until the case is closed and then Section 7 will be placed with the rest of the social service file for archiving.

Foster Care IV-E Eligibility Packet

Section I

1. CFS 4032 - Eligibility Tracking Summary
2. Logs

Section II - Initial Eligibility

1. Cover Sheet/or Log supporting eligibility determination
2. CFS 4030A
3. CFS 4030B
4. FOCA
5. CLPR
6. Documentation of AFDC group
7. PRIP Screen
8. CFS 1000
9. Screen Prints to Support Income and Resources
    a. BARI
    b. BASI
    c. VEHI
    d. UNIN
    e. OTAP
    f. LIRA
    g. VIQM
    h. CHILD CARE
    i. COMN
    j. COLL
    k. LCDA
    l. Any other information which supports the initial determination
    (Items 1-9 will be fastened together)
10. Citizenship
    TPQY
    Birth Certificate

Section III - Court Documents

1. Affidavit
2. Petition/Complaint
3. Initial Court Order placing child in State's custody
4. Journal Entries showing ongoing custody

Section IV - Redetermination

1. Cover Sheet/or Log supporting eligibility determination
2. CFS 4031A
3. CFS 4031B
4. Screen Prints to Support Income and Resources
    a. BARI
    b. BASI
    c. Any other information which supports the initial determination

(Items 1- 4 will be fastened together for each redetermination)

Section V - Permanency Hearings

Section VI - Placements

1. CFS 4033 - Placement Tracking for IV-E Eligible Youth
2. FACTS Face Sheet (printed only at time of an audit or closure
3. Acknowledgements of Placement Changes/CFS 4016
   Attached to this is the CLARIS print outs to verify the placement meets IV-E criteria for Payment. The first print out after the Acknowledgement /CFS 4016

verifies when the youth first entered the placement eligibility. The next CLARIS print out verifies that during the redetermination the placement did or did not continually to met the eligibility criteria.

Foster Care State Only Eligibility

Section I

1. CFS 4032 - Eligibility Tracking Summary
2. Logs

Section II - Initial Eligibility

1. Cover Sheet
2. CFS 4030A
3. CFS 4030B
4. FOCA
5. CLPR
6. Documentation of AFDC group
7. PRIP Screen
8. CFS 1000
9. Screen Prints to Support Income and Resources
    a. BARI
    b. BASI
    c. VEHI
    d. UNIN
    e. OTAP
    f. LIRA
    g. VIQM
    h. CHILD CARE
    i. COMN
    j. COLL
    k. LCDA
    l. Any other information which supports the initial determination
    (Items 1-9 will be fastened together)
10. Citizenship
    TPQY
    Birth Certificate

Section III - Court Documents

1. Affidavit
2. Petition/Complaint
3. Initial Court Order placing child in State's custody
4. Journal Entries showing ongoing custody

Section IV - Redetermination

1. Cover Sheet

Medicaid redetermination

Section V - Permanency Hearings

Section VI - Placements

Acknowledgements of Placement Changes/CFS 4016

Social Security Eligibility Packet
All correspondence with Social Security Administration.
Independent Living Subsidy Eligibility Packet

1. CFS 8591 - Extended Foster Care Independent Living Subsidy Agreement
2. CFS 8593 - IL Program Violation Notice
3. ADM-3465 - Invoice and Timesheet: Purchase of Service

Permanent Custodianship Eligibility Packet

1. CFS 4026 - Permanent Custodian Subsidy Agreement
2. CFS 4027 - Referral for Payment: Permanent Custodianship Subsidy
3. CFS 4027A - Request for Permanent Custodianship Subsidy
4. CFS 4028 - Permanent Custodianship Annual Report

Adoption Subsidy Eligibility Packet
Place a copy of all documentation required used for the determination of adoption assistance in a separate adoption assistance folder in both the financial section of the youths' case file. and in the child's permanent case file.

The Adoption Assistance financial section of the youth's case file shall include:

1. The CFS 4019 - Eligibility for Adoption Assistance
2. A copy of the adoption petition; and the PRT Journal Entry or voluntary relinquishment
3. The CFS 4024 - Referral for Adoption Assistance
4. The Adoption Placement Agreement
5. The CFS 4022 - Adoption Assistance Agreement
6. The child's social history or case planning documentation related to the determination of the child's special needs
7. The family assessment of the adoptive family
8. Documentation of attachment to a foster parent, placement with a relative, or individual recruitment plan or case planning conference notes related to the reasonable efforts to place without adoption assistance
9. All foster care eligibility determination documentation
10. Documentation of eligibility or receipt of SSI
11. HCBS Waiver Information Packet, if applicable
12. Adoption decree
13. Disability documentation from a physician, hospital, clinic or other qualified licensed medical or professional practitioner of the youth's physical or mental disability

Miscellaneous Packet:

1. ADM 3465 - Invoice and Timesheet: Purchase of Service, not associated to Independent Living, Permanent Custodianship or Adoption Subsidy will be filed in the back of the file.
2. CFS 3035- Acknowledgement of Parental Obligation
3. Past FACTS face sheets
4. Other Miscellaneous information

The different "eligibility packets" shall be kept in a separate folders within Section 7.

Section 8: Miscellaneous

Correspondence [Other than reports or evaluations in letter format. Correspondence may optionally be kept in a separate folder within the miscellaneous section.]
Newspaper articles
Personal articles, letters, awards, letters from siblings
The following items shall be placed in an envelope and attached to the back, right side of the folder:

1. Birth Certificates
2. Copy of Social Security Card or verification of social security number
3. Copy of Insurance Cards
4. Photographs

Facts Printouts
FACTS face sheets and other printouts may be kept in a manner which best serves the continuity of the case activities and management functions. They may be kept in the section to which they pertain or in a separate folder, clearly identified, and maintained where convenient within the case record.

B. Child Welfare Case Management Provider Case Records
Child Welfare Case Management Provider Case Record contents shall be consistent with SRS required case record contents. Files will be child specific and in chronological order. Each Child Welfare Case Management Provider shall use the same format for case record organization. The format can differ from the SRS case record format. Files will be organized as pre-approved and authorized by SRS (see Appendix 0B for approved Child Welfare Case Management Provider case record format). Child Welfare Case Management Providers can agree to modify the case order as long as it is consistent for all Child Welfare Case Management Providers and has been approved by SRS.

Cases will be re-ordered by the Child Welfare Case Management provider at the SRS office for the purpose of audits, if requested by SRS. In such cases SRS will notify the Child Welfare Case Management provider within two business days of SRS receiving notice of the audit.

0431 Records of Consultations Between Social Worker and SRS Attorney

The records of consultations between the social worker and the SRS attorney are protected by attorney/client privilege. Records of consultations with the attorney are to be clearly marked as attorney/client contacts and maintained separately from the social services file or in a separate folder within the file and identified in a manner that the information shall not be shared with third parties.

0432 FACTS Printouts

FACTS face sheets and other printouts may be kept in a manner which best serves the continuity of the case activities and management functions. They may be kept in the section to which they pertain or in a separate folder, clearly identified, and maintained where convenient within the case record.

0440 Archiving and Storage of Records

The Division of Children and Family Services is responsible for records archiving and storage.

Each region shall designate a Records/Archive Liaison.

Records To Be Maintained at the Local Office:

Records still in use, including Independent Living Subsidy, Adoption Assistance, Foster Care documentation, Adoption documentation, and Custodianship Subsidy. These records are maintained in the appropriate office until no longer needed by SRS staff. When these records are no longer needed, they shall be sent to Archiving or to Storage following the directions below.

Records To Be Sent to the SRS Record Center:

1) Records for archiving/microfilming; which are included in the SRS Record Center ”Juvenile Services” numbering system:

- All adoptions finalized in Kansas, and
- Guardianship/State Ward cases; cases with children in the custody of the Secretary and both parents' parental rights have ended.

SRS Regional Archive/Records Liaison Responsibilities:

a. Assure SRS service case file information, all SRS Foster Care, Adoption, Permanent Custodianship Subsidy, SSI case file information, and all Child Welfare Case Management Provider’s case file information are merged; duplicate information purged; obtain and include any missing case file information. For exceptions, see section above.
b. Assure case file includes:

    - All social history and background information
    - SRS case file information
    - SRS IV-E Foster Care information
    - Permanent Custodianship Subsidy information
    - Independent Living Subsidy information

- SSI case file information
- Child Welfare Case Management Provider case information
- School records
- Birth and health information
- Medical, dental, and hospital records
- Psychological reports and/or evaluations
- All legal documents and reports to the court
- All reports prepared by the Child Welfare Case Management Providers
- Reports prepared by resource parents or facility staff
- Case logs
- Pictures, letter from family, keepsakes, (if not already provided to the child).
- Case planning documents
- Financial Records
- Adoption Assistance Information
- Initial Intake and Assessment Reports
- Genetic and Health Information
- All pertinent case information

c. Tape torn pages; tape small pieces of paper to a standard 8 ½ X 11 sheet of paper.
d. Copy onion-skin and carbon documents on to standard 8 ½ X 11 sheet of paper.
e. Complete one Archive Face Sheet, CFS Form 9001, for each case file. Place Archive Face Sheet in front of each case file. If there is more than one folder per child in a box, label each folder accordingly. Example: # 1 of 3, # 2 of 3.
f. Put pictures, letters, and keepsakes from family in separate envelope, immediately after Archive Face Sheet.
g. Complete a Case File Box Contents form, CFS Form 9003. Place this form <u>inside</u> each box with birth names in alphabetical order. Files inside each box shall be in alphabetical order.
h. Use the designated boxes, which are ”Storage File-Letter/Legal”. The address to order the boxes is warehouse@srs.ks.gov
i. Notify the SRS Record Center, via email when you plan to deliver boxes, and cc the CFS Records Contact. The delivery location is:
SRS Record Center, 406 Jefferson Street, Topeka, KS, 66607.
j. There is no limit to the number of boxes per delivery.
k. The contents of each box will be verified by SRS Record Center staff. A ”JS” number will be annotated on the Case File Box Contents form as confirmation of delivery. The SRS Record Center shall mail a copy of this form to sending SRS office Records/Archive Liaison and to the CFS Records Contact.
l. Files received that have not been properly prepared per these instructions will not be processed and will be returned to the sending SRS office for appropriate preparation.

m. Assure the Box Contents Form is received back from the SRS Record Center with the new ”JS” box number. This number shall be maintained in the regional office tracking system, this is the number needed to retrieve the file at a later time if needed. The SRS Records Center will also send a copy of the Box Contents Form with the SRS Record Center assigned number to the CFS Record Contact. The CFS Records Contact shall maintain a database for tracking all CFS records transferred to the SRS Record Center. Each SRS regional office shall maintain a tracking system.
n. Track locations of files, retrieve and copy when requested.

2) Case Files for Storage and Later Destruction; which are included in the SRS Record Center ”Foster Care" records ("FC") numbering system. These are further labeled for each SRS office (for example FCR-LAW1234 or FCR-CHA 1234):

- Foster care cases, which are not in the category above and have been closed, shall be maintained in the service county for at least two years. When the SRS Regions no longer need the case or no longer wish to continue storing the files, the SRS Regions shall prepare the cases for transfer to the SRS Record Center where files shall be kept until the child is at least 21 years of age and the case has been closed for at least 72 months. When the SRS Regions keep the cases until the child is at least 21 years of age and the case has been closed for at least 72 months, the Regions can then shred the file.

SRS Regional Archive/Records Liaison Responsibilities:

a. Assure SRS service case file information, all SRS IV-E Foster Care, Permanent Custodianship Subsidy, SSI case file information, and all Child Welfare Case Management Provider’s case file information are merged; duplicate information purged; obtain and include any missing case file information. For exceptions, see section above.
b. Assure case file includes:
    - All social history and background information
    - SRS case file information
    - SRS IV-E Foster Care information
    - SRS IV-E Adoption information
    - Permanent Custodianship Subsidy information
    - Independent Living Subsidy information
    - SSI case file information
    - Child Welfare Case Management Provider case information
    - School records
    - Birth and health information
    - Medical, dental, and hospital records
    - Psychological reports and/or evaluations
    - All legal documents and reports to the court
    - All reports prepared by the Child Welfare Case Management Providers

- Reports prepared by resource parents or facility staff
- Case logs
- Pictures, letter from family, keepsakes, (if not already provided to the child).
- Case planning documents
- Financial Records
- Adoption Assistance Information
- Initial Intake and Assessment Reports
- Genetic and Health Information
- All pertinent case information

c. Complete one Records Face Sheet, CFS Form 9002, for each case. The birth name shall be on the case file folder. Place Records Face Sheet in the front of each case folder.
d. Put pictures, letters, and keepsakes from family in separate envelope, immediately after Records Face Sheet.
e. Complete a Case File Box Contents form, CFS Form 9003. Place this form inside each box with birth names in alphabetical order. The files inside each box shall be in alphabetical order.
f. Use the designated boxes, which are ”Storage File-Letter/Legal”. The address to order the boxes is warehouse@srs.ks.gov
g. Notify the SRS Record Center, via email when you plan to deliver boxes, and cc the CFS Records Contact. The delivery location is:
SRS Record Center, 406 Jefferson Street, Topeka, KS, 66607.
h. There is no limit to the number of boxes per delivery.
i. The contents of each box will be verified by SRS Record Center staff. A "FC" number will be annotated on the Case File Box Contents form as confirmation of delivery. The SRS Record Center shall mail a copy of this form to sending SRS office Records/Archive Liaison and the CFS Records Contact.
j. Files received that have not been properly prepared per these instructions will not be processed and will be returned to the sending SRS office for appropriate preparation.
k. Assure the Box Contents Form is received back from the SRS Record Center with the new "FC" box number. This number shall be maintained in the regional office tracking system, this is the number needed to retrieve the file at a later time if needed. The SRS Records Center shall also send a copy of the Box Contents Form with the new assigned box number to the CFS Records Contact. The CFS Records Contact shall maintain a database for tracking all CFS records transferred to the SRS Record Center. Each SRS regional office shall maintain a tracking system.
l. Track location of files, retrieve and copy when requested.
m. After foster care records are maintained in storage at the SRS Record Center until the child is at least 21 years of age AND the case has been closed for at least 72 months, the SRS Record Center shall contact the SRS regional sending office to verify the files can then be destroyed, or should be given a later destroy date. The SRS Regional Office

Records/Archive Liaison shall notify in writing the SRS Record Center and cc the CFS Record Contact of all approved destruction of records, by box number and destroy date. If the Regions maintain the files in the regional offices until the appropriate time for destruction, then the regions can shred the files at that time.

Also, refer to Section 0441, Retention of Records.

0441 Retention of Records

Reports to SRS alleging a child in need of care that were not assigned for further investigation or assessment (previously known as "screened out") may be destroyed after 2 years from the date report is received.

Records of all cases accepted for investigation or services not included in section 0440 shall be retained for six years following case closure with the following exceptions:

When a report of abuse and/or neglect has been confirmed, validated or substantiated, the record shall not be destroyed.

No case record shall be destroyed while an audit or appeal is in process or has been filed.

If a youth previously in the custody of the Secretary becomes a parent and incurs a substantiated finding prior to their foster care file being destroyed, their foster care file shall not be destroyed and shall be kept with their intake and assessment file(s).

The regions shall keep incoming ICPC cases for six years after closure, and then the files may be destroyed. This allows relevant information to be kept available should a subsequent home study referral be received for the same family.

The regions shall keep outgoing ICPC cases maintained in the child’s case file.

Central Office will keep incoming and outgoing ICPC foster care cases (this is non State Ward cases and Adoption cases finalized in other state) for 6 months after closure, and after that time it will be shredded.

Also, refer to Section 0440, Archiving Records, for additional information.

0510 Communication within SRS of CFS Child Death, Near Death or Other significant Case Event

Child Death: A child who dies from alleged abuse or neglect or a child who received services from CFS and dies for any reason.

Near Death: A child who received services from CFS and a physician determined this was a "near death".

Significant Case Event: An incident that may draw public, legislative, or media concern, involving: a child, youth or family who currently or historically received services from SRS; or, a closure or suspension of a group or residential facility used by children or youth in the custody of the Secretary or JJA Commissioner.

SRS Critical Incident Team: Individuals and positions designated by the Secretary of SRS to receive information regarding child deaths, near death, and other significant events. "SRS _Critical_ Incidents" is a group name in the agency's email address book.

0512 Discovery of Death, Near Death, or Significant Case Event

During SRS business hours, the KPRC social worker shall determine if a report meets criteria for a death, near death, or significant case event. If a report meets this criteria it shall be sent to the CFS Director, Regional Director, KPRC Supervisors (via PRCSups mailbox), Protection Unit Program Administrator, and the Regional CFS Program Administrator.

Outside of SRS business hours, the KPRC intake worker may receive reports involving a death or near death. The report shall be documented per normal procedures. The report shall be immediately emailed to the CFS Director, Regional Director, KPRC Supervisors (via PRCSups mailbox), Protection Unit Program Administrator, and the Regional CFS Program Administrator.

If someone in the SRS Region becomes aware of a death, near death or significant case event, information shall be forwarded immediately to the Regional Director and CFS Program Administrator.

0513 Initial Incident Response

The Regional Director or CFS Director coordinates gathering of specific information regarding the case, summarizes and provides the information to the Critical Incident Team at SRS_Critical_Incident (an email group address list) as soon as possible, no later than the next business day. Information sent to the SRS Critical Incident team shall include:

A. Type of incident (death, near death, significant event, media or legislative concern)

B. Legal status of child(ren)

C. Service Provision and Case Status (open or closed)

If the case was open at the time of the critical incident/time of fatality, state the reason the case was open:

1. due to this critical incident/fatality,
2. open for investigation/assessment prior to this critical incident/fatality or,
3. open for family services, family preservation services, or foster care.

D. Previous Case History

1. Briefly describe all events regarding the family involved in the critical incident/fatality.
2. Describe any other events each adult in the home may be associated with as an alleged perpetrator.
3. Describe any other events each adult in the home may be associated with as a child either as a victim or an alleged perpetrator.

E. Current Status or condition of children and/or adults

F. Status of Law Enforcement or KDHE involvement, as applicable

G. Status of SRS Provider Agreement and number of children served, if child care provider

0514 Incident Review

A. For incidents involving a child death alleged to be the result of abuse or neglect, a review of facts and circumstances shall occur within 2 business days of event discovery. The review via teleconference or in person shall occur as promptly as possible; however, afford for time to maximize information gathering and/or coordinate with law enforcement. The call is coordinated by the Regional Director or Regional Director's Designee. The Regional Director, CFS Director or their Designee shall participate, and members of the SRS Critical Incident Team may participate.

B. If determined necessary by the agency, the case file may be reviewed by the CFS Director or designee.

0515 Ongoing Communication

Communication regarding updates concerning the death, near death or significant event will be communicated to the Secretary, ISD Deputy Secretary, Special Assistant; CFS Director, Legal and Director of Communications

0520 Notice of Child Death to Kansas State Child Death Review Board KSCDRB

The assigned social worker or supervisor will complete the Kansas State Child Death Review Board Case Information Summary CFS-0500 and send it to the Director of Children and Family Services within 5 business days of the discovery of any child death involving a child currently being served by SRS or from a family with SRS history. The Director or designee will forward the summary to the Executive Director of the KSCDRB within one business day of receipt.

0600 Coordination of Services within SRS

Legally, all SRS agencies are considered one entity. Everyone who works for the Department is considered a part of the whole. When the Secretary has entered into a contract or memorandum of agreement or understanding the terms are binding on the entire agency. All SRS staff and all contract staff are expected to work together in a coordinated fashion to carry out the agency mission. This requires communication among the various divisions, regions, contract agencies and individuals. Disputes within SRS or with SRS contractors are settled via our chain of command and grievance procedure. Use of the courts to settle internal disputes diminishes, and perhaps destroys our ability to carry out our responsibility as an equal branch of government.

0601 Addiction and Prevention Services (AAPS)

Substance abuse treatment and child welfare are overlapping areas of practice. The Family Based Assessment includes questions regarding substance abuse to assist staff in determining the need for further screening and assessment services.
Families in need of a more comprehensive assessment may be referred to the Pre-Paid Inpatient Health Plan (PIHP) associated substance abuse assessment and treatment provider.

A. To be eligible for AAPS funded services the individual must:

1. Be a State of Kansas resident
2. Have income that is less than 200% of Federal Poverty Guidelines.
3. Have no other means of paying for treatment

Families referred to the PIHP associated substance abuse assessment and treatment provider by SRS staff, and meeting the above criteria, will receive assessment services at no charge. Families with available insurance coverage should seek services first through the process established by that company.

B. Addiction and Prevention Services provides funding for an array of programs across the state including these specialized services:

1. Detoxification for customers under the influence of drugs or alcohol or experiencing acute withdrawal. (Individuals may access those services directly)

2. Residential and outpatient programs for pregnant women and women with dependent children.
3. Residential and outpatient programs for adolescents.

Those individuals qualifying for medical cards enter the treatment system by the same process as AAPS funded customers and covers assessment and treatment services with the exception of detoxification.

0602 Child Support Enforcement (CSE)

Kansas law entitles the State to collect child support payments up to its total foster care and medical expenditure. When there is an out-of-home foster care placement, child support payments are used to reimburse the State. The parents of foster care children have a legal obligation to pay for their children's cost of care. The SRS CSE program collects court ordered child support and medical support for the time period children are in SRS custody.

A. Cooperation with CSE

Social Services staff shall provide parental information, location/type of placement, sources of funding (Federal Title IV-E "AF" or State funded "GA") and any other relevant data requested by CSE staff. CSE works out details with the obligated parent(s) to establish a child support and medical support court order for repayment of the State expenditure. Any Social Security, Veterans Affairs, retirement or insurance benefits must be noted and a "Change of Payee" making SRS the payee, will be processed by SRS Social Services staff and then efforts coordinated with CSE staff for correct retention and distribution of these benefits.

The parents' current address, employment and health insurance information are of particular importance to CSE and should be shared whenever known. If paternity has not been established, CFS will work with CSE to identify putative fathers and arrange for paternity testing. Social Services will inform CSE staff if the tests need to be expedited.

SRS is not reimbursed dollar for dollar by the parent(s) in most cases because child support orders are based on the obligated parent's income and other court guidelines. CSE and the courts determine exactly how much child support SRS will collect. **If there is already a child support order in existence before the out-of-home placement, then that order will be followed and may be modified by CSE legal action.** Uncooperative parents may have to repay SRS 100 % of their child's foster care expense. Therefore, it is in the parent's best interest to cooperate because CSE can take steps to make the child support order affordable.

B. Mandatory Referrals to CSE

Because CSE is responsible for establishing and enforcing child support/medical support court orders for children in SRS custody, it is mandatory that Social Services staff refer all out-of-home placement cases to CSE via the KAECSES system at the time the out-of-home placement occurs. A separate CSE referral is required for each parent.

CSE then pursues both parents or any legal guardian for a child support and medical support court order to have the obligated parent(s) reimburse SRS for their child's foster care expense.

Exceptions: CFS staff shall request that CSE suspends work on a foster care case when all of the following are true:

- The child came into foster care from the home of adoptive parents who had adopted the child through SRS adoption services;
- Prior to adoption the child met the definition of a special needs child;
- In the opinion of the social worker the events that led to the child being placed in foster care can be attributed either directly or indirectly to the child's special needs.

Occasionally "good cause" for no CSE activity on a foster care case is applicable. This is especially true for cases with an adoption permanency goal. There may also be times when the amounts of the child support need to be adjusted because the parents do not have the funds they need to access services to meet the objectives outlined in the case plan, need to save money to prepare for a child's return to their residence, or the child is reintegrated and the parent(s) owe back child support. Social Services staff should communicate with CSE so that decisions will be in the child's best interest. See the Kansas Economic and Employment Support Manual for good cause procedures.

C. Required Form and Procedure

A CFS 3035 "Acknowledgment of Parental Obligation" form must be completed by the obligated parent(s) and Social Services staff when the child is removed from the home. This form may be mailed to the parent(s) with the SRS worker statement portion filled in.

The CFS 3035 must be obtained at the time of the **initial out-of-home placement only**. It is not needed for every subsequent placement of the child.

If one or both of the parents are not readily available, a CFS 3035 with the SRS worker statement portion filled in shall be mailed to the unavailable parents at their last known address.
This form should only be signed by males who have legal paternity established.

D Change in Placement or Status

The Eligibility Specialist shall notify CSE via the KAECSES system of the following:

- Change in placement

- Return Home
- Change in funding source
- Placement in a State Institution (Juvenile Correctional Facility or State Hospital)
- Foster Care case closed (SRS relieved of custody by the court)
- Change in Legal Status (parental rights terminated, adoption, custody granted to another party by the court)

CSE must be given this information timely and accurately in order to update the CSE case accordingly and distribute money correctly. CSE has internal policies for any of the above changes in foster care status. CSE may request written verification documenting a change in placement or status from the social worker.

E Federal Parent Locator Service (FPLS) for Child Welfare

The FPLS, which the SRS Child Support Enforcement (CSE) has access to, may be used for CFP efforts to locate absent parents. CFS staff shall be provided with FPLS information from CSE upon request.

FPLS data can assist CFS staff with locating a parent or relative for program purposes such as: reintegration, terminating parental rights, adoption etc. The Adoption and Safe Families Act of 1997 lifted the restrictions which prevented CSE from sharing FPLS data with CFP in the past.

0603 Economic and Employment Support (EES)

CFS staff need to have knowledge of SRS resources and economic assistance programs which may be available to persons having CFS involvement. CFS staff should refer families with whom they are working to EES when it is identified that a family needs income support.
EES staff have eligibility determination expertise which they can share with CFS staff regarding the following programs:

- Temporary Assistance to Families (TAF) (cash assistance for families)
- Medical Assistance (Medicaid)
- Child Care subsidy payments (necessary for employment or education)
- Food Stamps
- Work Program Services (job training, job search and related employment assistance)
- General Assistance (case assistance) for disabled individuals pending SSI/SSA approval

Other EES programs designed to assist families in need are:

- Funeral Assistance (helps with burial expenses)
- Low Income Energy Assistance Program, LIEAP (helps pay heating and cooling bills)

EES staff work closely with Child Support Enforcement (CSE) and Social Security Administration (SSA) staff, giving EES the ability to direct low income persons to even more resources. CSE collections or SSA benefits can stabilize an otherwise unstable, low income family. The income support options listed here can be vital to CFS staff

helping a family achieve reintegration or some other planned permanency goal.

EES staff are also very knowledgeable about helping agencies outside of SRS, including where free food, clothing and shelter can be obtained.

A. Cooperation with Work Related Requirements

To comply with changes resulting from welfare reform, Kansas SRS has implemented policies which provide for sanctions when persons fail to meet work related requirements for refugee, case assistance and food stamps. CFS, CSE and EES staff must share information and the EES supervisor must review the case circumstances before a penalty is applied. This is required for first time and subsequent penalties on TAF, but not food stamps.

1. Description of Penalties
Penalties are utilized only when customers have clearly chosen not to cooperate and the consequences are understood. A minimum 10 day notice is required before a penalty action can occur.

SANCTIONS:

NON-COOPERATION APPLICANTS RECIPIENTS LENGTH OF PENALTY	APPLICANTS	RECIPIENTS	LENGTH OF PENALTY
	Cash- mandatory filing unit (MFU) ineligible-unless it's a minor parent not cooperating- then the minor parent is ineligible. Food Stamps- Individual ineligible (only for potential employment provisions). NOT CONSIDERED A FIRST OR SECOND TIME PENALTY		Ineligible until a new application is filed and cooperation exists
First Time Penalty		Cash - MFU ineligible- with same exception as above. Food Stamps-	Until penalty is cured. No minimum or maximum time limit

	individual only is removed from case. Child Care- allowed for appropriate activities to cure penalty Medicaid continues if a category exists (such as foster children)	
Second & Subsequent Penalties	Same	Minimum of 2 months. May be cured by cooperation after 2 months

2. Good Cause
The EES worker must check with CFS to determine if the family has any CFS involvement that might support a "good cause" claim which created the family's non-cooperation. If "good cause" for non-cooperation with program requirements is not established, then EES can proceed with a penalty.

3. Notice of Penalty
Notices from EES will be sent to CFS, CSE, the customer and the child care provider informing them of the penalty action. If "good cause" is proven or if the customer cooperates fully after an initial penalty has occurred, the appropriate parties identified above shall be notified that benefits have resumed.

4. Child in Need of Care
The fact that a family is under a penalty resulting in stoppage of benefits is not, in and of itself, a basis for making a child protection referral to CFS. However, if CSE, EES or other agency staff have reason to suspect a child is in need of care, a report shall be made.

0604 Rehabilitation Services (VR)

Kansas Rehabilitation Services (KARS) shall facilitate the transition of students who are receiving special education services to vocational rehabilitation services under KARS responsibility. This transition must be planned before the youth leaves school.

Youth age 14 and older that are in the custody of SRS may be eligible for KARS services. Regional CFS staff will:

A. Consult the Rehabilitation Services Manual for information about eligibility and services.

B. Coordinate the inclusion of Kansas Rehabilitation Services in the case conferences of potentially eligible youth, as needed.

0606 HCBS Services by Waiver

A Waiver is an exception to the Medicaid State Plan which provides services beyond the scope of services available to Medicaid consumers. It is intended to provide services to a consumer in their own home and community, the least restrictive environment, at a cost savings to the Medicaid program. Home and Community Based Services include a variety of medical and non-medical services which meet the needs of those served by the waiver.

Children and youth who are in the custody of the Secretary, being served through one of the SRS CFS contracts are eligible to participate in the Waivers and receive services on the same basis as any other child.

A. Home and Community Based Services Technology Assisted Waiver

Eligibility Criteria

A technology assisted and medically fragile individual age 0 through 21 years who is chronically ill or medically fragile and is dependent upon a ventilator or medical device to compensate for the loss of vital body function and requires substantial and ongoing daily care by a nurse comparable to the level of care provided in a hospital setting, or other qualified caregiver under the supervision of a nurse to avert death or further disability. Furthermore, the individual is hospitalized, or at imminent risk of hospitalization, whose illness or disability, in the absence of home care services, would require admission to, or prolonged stay in a hospital.

Level of Care Determination

The level of care for TA waiver eligibility is determined using the Medical Assistive Technology Level of Care (MATLOC) instrument. The instrument assesses the medical technology and the nursing acuity for level of care eligibility determination. The waiver applicant is determined Medicaid eligible and meets the level of care criteria; waiver eligibility if:

1. Age 0-21 years with a minimum technology score of (50) points, or
    a. Age 0 through 5 years with a minimum technology score of (25) points and a nursing acuity score of (20) points, or

    Age 6 through 21 years with a minimum technology score of (25) points and an acuity score of (30) points.
2. The assessment is reviewed and approved by the physician or qualified medical provider

Financial Eligibility

Individuals must be determined Medicaid eligible.

Services

3. Case Management will assess TA waiver applicants for waiver eligibility and assist eligible individuals in gaining access to needed medical, social, educational, and other services. Case management does not provide direct services.
4. Specialized Medical Care
    a. LPN
    b. RN
5. Long-term Community Care Attendant
    a. Medical Service Technician-MST
    b. Personal Service Attendant- PSA
6. Medical Respite
7. Home Modification Services

Referral for Services

All referrals for waiver services must be sent to the regional SRS Performance Improvement Staff.

Waiver Limitations

407 opportunities and no waiting list available

B. Home and Community Based Service- Mental Retardation/Developmentally Disabled Waiver for Children and Youth

The HCBS-MR/DD Waiver provides Medicaid reimbursed services in the child's home and community as an alternative to institutional placement for those children who:

1. Have been determined by the Community Developmental Disability Organization (CDDO) to be Mentally Retarded/Developmentally Disabled (MR/DD)
2. Are eligible for an institutional level of care as determined by the Basic Assessment and Services Information System (BASIS) screening

3. Have an approved the plan of care
4. Are receiving covered services provided through the CDDO

Children who are being adopted will continue to be eligible for the in-home services listed in the Plan of Care.

C. Home and Community Based Services Mental Health Waiver for Children and Youth

The Home and Community Based Services Waiver for children with Serious Emotional Disturbance (HCBS-SED) is designed to prevent state psychiatric hospitalization through the provision of intensive in-home and community based supportive services in an effort to maintain children and youth in their homes and communities.

The State of Kansas demonstrates that the goal of prevention of psychiatric hospitalization is met through the monitoring of outcomes for Members of waiver services that are consistent with the National Outcome Measures (NOMs) for children experiencing serious emotional disturbance.

These outcomes include Permanent Home Setting, Juvenile Justice Contacts, Educational Achievement, Behavior Checklist Scores (CBCL) at the time of initial Intake and when exiting the child from the Waiver. Performance measures relating to abuse, neglect, exploitation, hospitalization and diversion rates are also collected.

Eligibility Criteria

Members eligible for the waiver are generally between the ages of 4 and 18; however, an exception may be requested for Members under the age of 4 experiencing serious emotional disturbances, who demonstrate a substantial need for the services available through the waiver.

Members over 18 may also remain or become eligible for the HCBS SED waiver through age 21, provided they have been identified as SED and have received specialized rehabilitative community based services any time for the 6 months prior to turning age 18, or would have accessed community based services during that time period but were unable due to their institutional or residential status, provided they continue to meet the functional and financial eligibility criteria.

Level of Care Determination

Both functional and financial criteria must be met to be eligible for the waiver. The functional criteria assessment is a multi-step process.

A Member must have a KHS qualifying mental health diagnosis identified in the most current DSM, be determined by a Qualified Mental Health Professional to have a serious emotional disturbance, and have qualifying scores on standardized assessment instruments.

Financial Eligibility

Local SRS offices make the determination of a Member's financial eligibility for the waiver.

Services

The Kansas SED Waiver offers a variety of services to Members and their families who are either deinstitutionalized or diverted from the psychiatric hospital level of care.

HCBS SED Waiver Services are provided by the 27 Community Mental Health Centers (CMHCs) in Kansas or organizations with whom the CMHCs subcontract.

Each CMHC and/or subcontracting agency must also be a contracted provider with Kansas Health Solutions (KHS). SRS contracts with Kansas Health Solutions through the Kansas Prepaid Ambulatory Health Plan (PAHP).

Waiver Limitations

Kansas Health Solutions reviews and provides prior authorization for the waiver services in each plan of care through the PAHP Management Information System (MIS).

D. Home and Community Based Services Autism Waiver

The HCBS/Autism Waiver will provide services to children with Autism to receive early intensive intervention treatment and allow primary caregivers to receive needed support through services.

Eligibility Criteria

Children with Autism Spectrum Disorders, including Autism, Aspergers Syndrome, and Other Pervasive Developmental Disorder-Not Otherwise Specified.

To be eligible for Autism Waiver services the child must receive a diagnosis by a licensed Medical Doctor or Ph.D. Psychologist using an approved Autism specific screening tool.

Children will be able to enter the Waiver program from the age of diagnosis through the age of five. Autism Waiver services shall be limited to three years unless medically necessary.

Level of Care Determination

After receiving a diagnosis of an Autism Spectrum Disorder, the child will be assessed for a Level of Care Determination to establish functional eligibility for Waiver services.

HCBS Autism Waiver applications are available at:
http://www.srskansas.org/hcp/css/Autism/Autism_Preliminary_Application.pdf

Autism Waiver Services:

1. Consultative Clinical and Therapeutic Services (Autism Specialist)
2. Intensive Individual Supports
3. Respite Care
4. Parent Support and Training (peer to peer)
5. Family Adjustment Counseling

E. PRTF Demonstration Waiver

The Kansas HCBS PRTF Waiver is a community based service alternative to treatment in a Psychiatric Residential Treatment Facility for children in both diversion and transition.

Eligibility Criteria

The following criteria shall be met:

Children eligible for the waiver are between the ages of 4 and 18; however, an exception may be requested for Members under age 4 experiencing serious emotional disturbances who demonstrate a substantial need for the services available through the Waiver.

Adults over 18 may remain or become eligible for the PRTF waiver through age 21 provided they have been identified as SED and received specialized rehabilitative community based services any time for the 6 months prior to turning age 18, or would have accessed community based services during the time period but were unable due to their institutional or residential status, provided they continue to meet the functional and financial eligibility criteria.

Functional Determination

A child must have a KHS qualifying mental health diagnosis identified in the most current DSM and be determined by a Qualified Mental Health Professional to have a serious emotional disturbance, have been screened for Psychiatric Residential Care, and have qualifying scores on standardized assessment instruments.

Financial Eligibility

Local SRS offices make the determination of a Member's financial eligibility for the waiver.

Services

The Wrap Around approach provides the foundation for plan of care development and service delivery. An individualized plan of care/treatment plan including goals, objectives, strengths, and preferences is developed with the child/family. Discharge from the program is based on the successful completion of individualized goals/objectives, member choice, or if the child is determined to need an alternative level of care.
The method of service delivery for all HCBS PRTF services is provider-managed, with the family having an active role in development of the provider team including free choice of available KHS providers.
The Kansas HCBS PRTF Waiver provides the following waiver services:

1. Respite Care
2. Professional Resource Family Care
3. Community Transition Supports
4. Attendant Care Services
5. Parent Support, Education, and Training
6. Employment Preparation/Support
7. Wrap Around Facilitation
8. Independent Living/Skills Building

As a part of the HCBS PRTF Waiver, parents/guardians have the opportunity to complete satisfaction evaluations and other evaluations as necessary.

For further information on any of the Waivers contact:

Community Supports and Services
Division of Disability and Behavioral Health Services
Kansas Department of Social and Rehabilitation Services
Ph: 785-296-3561

0607 Psychiatric Residential Treatment Facility Services

Psychiatric Residential Treatment Facility (PRTF) services are included in the Medicaid State Plan, and therefore, can be accessed by all children who are receiving Medicaid benefits including non-custody youth and those served by JJA, if they meet the screening criteria for accessing this service.

The following prior authorization process is specific to children served by SRS when authorizing PRTF services. See Section 5251 for the prior authorization process specific for children being served by one of the Child Welfare Case Management Providers of Family Preservation or Reintegration/Foster Care.

PRTF services must be provided by a Medicaid enrolled provider of the service. To obtain information about becoming a Medicaid enrolled provider of PRTF services, please access the following website: https://www.khpa-state-ks.us

For information regarding PRFT service extensions please refer to Section 5252

A. Community Based Services Team Process

Community Based Services Team (CBST) recommends screening for Psychiatric Residential Treatment Facility. The CBST consists of parents (if not PRT) and support persons the parents choose to have attend, SRS, Community Mental Health Center (CMHC), and may include other parties who can provide information to assist in determining the most appropriate treatment choice for the child. Parent involvement in these meetings is very important, as they have the most complete information about the child's history. Every effort shall be made to ensure parent participation. If the parent(s) has been provided adequate attempts to contact and involve in the CBST meeting and they do not appear, the CBST meeting and process shall continue. Efforts should continue to involve them in the treatment process.

The CMHC shall be the lead agency in setting up the CBST meeting, in collaboration with SRS staff. The tasks of the CBST team are to:

Review the treatment history and current needs of the child

1. Ensure all community based treatment services have been explored and/or utilized or
2. Document the services required by the child cannot be provided in a community setting
3. Determine if the child requires a screen for PRTF treatment.

B. The CBST will request a screen through the PAHP/Mental Health Consortium.

Screening results are provided by the CMHC to Kansas Health Solutions (KHS).

1. If the screening determines necessity for PRTF placement, placement in a PRTF facility is authorized.
2. Within 2 days of admission and discharge, the PRTF completes and sends to the TMHC the TMHC admission/discharge form.
Initial authorization for Psychiatric Residential Treatment Facility (PRTF) services is for a period of time up to 90 days.

SRS staff may participate in the PRTF treatment planning and discharge meetings which will happen within approximately the first 10 days and then at least every 30 days or whenever needed thereafter.

At approximately day 60 of the initial PRTF authorization period, the designated agency will receive written notification to contact KHS within 7 calendar days stating if they plan to request an extension screen for further PRTF treatment. KHS will notify the CMHC closest to the facility in which the child is placed to complete the screen. The CMHC is responsible for the CBST process and completing the screen. The CMHC is required to contact the CMHC where the child's family resides and/or the current case exists to participate in the CBST process. This screen shall be completed prior to the 90th day of the initial PRTF prior authorized period.

If the screen indicates continued treatment in a PRTF facility is medically necessary, the child will be authorized to continue to receive treatment in the PRTF facility for up to 60 days. The PRTF facility and SRS staff will receive notice of the extension by KHS.

This same process shall be followed for any further PRTF extension, with the extension screen being completed prior to the 60th day of PRTF treatment extension.

Discharge planning begins upon admission to the PRTF. At the point in time the child's treatment team determines the child no longer meets medical necessity for continued PRTF treatment or the child is screened for a PRTF extension and is determined to no longer meet criteria for PRTF treatment, the PRTF facility, and the Community Based Services Team (CBST) will be responsible for developing a plan to support the child in the community.

If medical necessity is not met, the child may continue in placement only if the family or SRS office serving the child assumes responsibility for payment of the per diem.

0610 Coordination with Health Policy Authority

KAN Be Healthy is the Kansas name for the federally mandated Medicaid Program, Early Periodic Screening Diagnosis and Treatment, (EPSDT).

0611 KAN Be Healthy Program Participation

A. KAN Be Healthy is a preventive health care program for Medicaid eligible children under the age of 21.
B. It encourages parents and other care givers to obtain periodic well-child visits to the doctor for their children. Thereby keeping immunizations up to date and treating medical conditions when they first appear.
C. It promotes good health by identifying and treating medical, dental, developmental and emotional conditions to prevent them becoming disabilities, develop into an illness, slow the child's growth rate and possibly hamper school work of performance.
D. Children in the custody of the Secretary, shall participate in the KAN Be Healthy Program.
E. To participate in the Program a child must have a health screening preformed by their primary care provider (family practice physician, pediatrician, or the Health Department).
F. The primary provider will refer to other providers for any treatments needed.
G. The Child's first screening date and the next screening due date will appear on the Medical Card.

0620 Coordination with Addiction and Prevention Services (AAPS)

Substance abuse treatment and child welfare are overlapping areas of practice. The Family Based Assessment includes questions regarding substance abuse to assist staff in determining the need for further screening and assessment services.

Families in need of a more comprehensive assessment may be referred to the Pre-Paid Inpatient Health Plan (PIHP) associated substance abuse assessment and treatment provider.

To be eligible for AAPS funded services the individual must:

1. Be a State of Kansas resident
2. Have income that is less than 200% of Federal Poverty Guidelines.
3. Have no other means of paying for treatment

Families referred to the PIHP associated substance abuse assessment and treatment provider by SRS staff, and meeting the above criteria, will receive assessment services at no charge. Families with available insurance coverage should seek services first through the process established by that company.

Addiction and Prevention Services provides funding for an array of programs across the state including these specialized services:

1. Detoxification for customers under the influence of drugs or alcohol or experiencing acute withdrawal. (Individuals may access those services directly)

2. Residential and outpatient programs for pregnant women and women with dependent children.
3. Residential and outpatient programs for adolescents.

Those individuals qualifying for medical cards enter the treatment system by the same process as AAPS funded customers and covers assessment and treatment services with the exception of detoxification.

0621 Kansas Health Policy Authority (KHPA)

KAN Be Healthy is the Kansas name for the federally mandated Medicaid Program, Early Periodic Screening Diagnosis and Treatment, (EPSDT).
Health screenings are required for children to be participants in the Kan Be Healthy Program and eligible to receive expanded services. The screenings are at specific intervals, which consist of, but not limited to a health history, developmental assessment, complete physical exam, vision screening, hearing test, urinalysis, blood test, immunizations, other tests as needed, and referrals for treatment. Kansas Health Policy Authority website for more details).

A. Medicaid Mental Health Service Delivery
Medicaid mental health/substance abuse services are provided to Medicaid eligible recipients by a Prepaid Ambulatory Health Plan (PAHP) or Prepaid Inpatient Health Plan (PIHP) associate, including a Community Mental Health Center (CMHC) or individual practitioner, who is providing services as a member of the PAHP or PIHP provider network. If a child or youth needs mental health/substance abuse services, the services must be accessed through the PAHP or PIHP.
To access the Kansas Medical Assistance Program Provider Manual access the following website: http://www.khpa.ks.gov/ and click on the Provider link, then the Manuals link. To access the Pre-paid Ambulatory Health Plan for mental health services, Kansas Health Solutions, go to: http://www.kansashealthsolutions.com/
To access the Pre-paid Inpatient Health Plan for substance abuse services, Value Options, go to: http://www.valueoptions.com/members/Members.htm

B. Orthodontia Services
Orthodontia may be a Medicaid covered expense if deemed medically necessary. Prior authorization is required through CFS and KHPA. The dentist is responsible for submitting requests for prior authorization. Orthodontia is not to be authorized as a special service payment.

C. Medical Services through Public Schools
Certain services provided by the school districts in Kansas are covered by Medicaid. For every child with an Individual Education Plan (IEP) which identifies a medical need, the school will be reimbursed for providing the service or necessary equipment. These services are not available to those children who are home schooled or attend privately funded schools.

D. Equipment
Medicaid will provide medically necessary equipment, e.g. hearing aids, glasses, wheel chairs, etc., prior authorization is required. There may be program limitation on the type and style of equipment provided. The Medicaid Liaison in each Regional SRS Office can provide guidance regarding these services.

0622 Juvenile Justice Authority (JJA)

The Kansas Legislature has made provisions for the Juvenile Justice Authority (JJA) and SRS to share information when appropriate. The Kansas Code For Care Of Children - K.S.A. 38-2210 states:

To facilitate investigation and ensure the provision of necessary services to children who may be in need of care and such children's families, the following persons and entities with responsibilities concerning a child who is alleged or adjudicated to be in need of care shall freely exchange information....and includes juvenile justice.

K.S.A. 38-2212(c)(2) provides JJA shall have access to information, records or reports received by SRS as reasonably necessary to carry out their lawful responsibilities to maintain personal safety of JJA staff and the personal safety of individuals in their care or to diagnose, treat, care for or protect a child alleged or adjudicated to be in need of care.

A. SRS Responsibilities:

1. Investigation of Abuse/Neglect:

   Conduct investigations and make findings on alleged abuse and neglect of adjudicated juvenile offenders. Upon substantiation of abuse or neglect, SRS will notify the county or district attorney and the JJA Commissioner.

2. Non Abuse/Neglect Reports:

   SRS shall make a referral to the Commissioner of JJA when a report is received that an adjudicated juvenile offender is alleged to be a child in need of care for reasons other than abuse or neglect. SRS shall take no further action. See MOA with JJA at Appendix 0001.

3. Interstate Compact Cooperation:

   SRS administers the Interstate Compact of the Placement of Children (ICPC) and shall cooperate with JJA to assist in the interstate placement of juvenile offenders who are referred to Kansas or from Kansas to another state for placement in a licensed residential treatment facility. Placement referrals will be made without regard to adjudication.

4. IV-E Eligibility Determination:

Juvenile offender services are provided under the auspices of the Kansas Juvenile Justice Authority. SRS determines eligibility for Medicaid and IV-E funding for children placed in JJA custody. Juvenile offenders in JJA custody who are removed from their homes but are not incarcerated, remain part of the overall Kansas foster care population.

B. JJA Responsibilities

1. Notice of Juvenile Offender entering the custody of the Commissioner for and out of home placement, Juvenile Offender Adjudication, Changes Affecting Title IV-E or Title XIX Medicaid Eligibility, and Discharges.

2. Providing Data to SRS

JJA shall provide SRS with data regarding juvenile offenders which is deemed necessary for SRS to maintain updated information in the SRS information system

0631 Foster Care Referrals to CSE

Kansas law entitles the State to collect child support payments up to its total foster care and medical expenditure. When there is an out-of-home foster care placement, child support payments are used to reimburse the State. The parents of foster care children have a legal obligation to pay for their children's cost of care. The SRS CSE program collects court ordered child support and medical support for the time period children are in SRS custody.

0700 Indian Child Welfare Act Jurisdiction

The Indian Child Welfare Act (ICWA) 25 U.S.C. 1901 et seq. recognizes the sovereignty of Indian Tribes and Nations including their jurisdiction over Indian children. ICWA applies to child in need of care cases. It does not apply to divorce and juvenile offender cases.

The Indian Child Welfare Act supersedes the Multi-Ethnic Placement Act/Interethnic Adoption Provisions.

If the child is of Native American and is a member of a federally recognized tribe or is eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe, the Indian Child Welfare Act controls. Determination of the child's heritage and eligibility shall be made at the earliest possible time it appears likely the child will come into custody. If the tribe has elected not to intervene in the child in need of care case, the agency is responsible to follow the placement preference as articulated in the Indian Child Welfare Act.

The order of placement preference for Native American Children is as follows:

A. a member of the child's family;
B. another family of the same tribe
C. a family of another Native American tribe;
D. a non-Native American family

The case managing staff shall provide documentation of their efforts to adhere to the placement preference.

Definitions:
An Indian is any person who is a member of an Indian tribe, or who is an Alaska Native and a member of a Regional Corporation.
An Indian child is any unmarried person under age 18, and either a member of an Indian tribe or the biological child of a member and eligible for membership. Tribes determine membership. Children adopted by non-Indians may still be members or eligible for membership.
An Indian custodian is any Indian person who has legal custody of an Indian child under tribal law, custom or state law.

0710 Multiethnic Placement Act./ Inter Ethnic Placement Act (MEPA/IEPA)

Congress enacted the Multiethnic Placement Act (MEPA) in 1996 and modified it with Interethnic Adoption Provisions (IEP) in 1997. The intent is:

A. reduce the length of time to adoption

B. facilitate the diligent recruitment and retention of foster and adoptive families, and

C. eliminate discrimination on the basis of the race, or national origin of either the prospective parent of the child.

Race or color or national origin may not be used as the basis for any denial of placement, nor may such factors be used as a reason to delay or deny any foster or adoptive placement.

Kansas is required to provide for the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed.

It is the policy of the Department not to delay the placement of any child for adoption or foster care based on race, color or national origin of the adoptive parent, foster parent, or the child. The Department will not deny any person the opportunity to become an adoptive or foster parent on the basis of race, color or national origin. This means that

the Department cannot delay the placement of a child searching for a family of the same racial or ethnic background when there are families of other racial or ethnic background available who otherwise would be appropriate for the child and would meet the child's social, emotional, and physical needs.

Non-compliance to this act constitutes a violation of the Civil Rights Act.

The Indian Child Welfare Act supersedes the Multi-Ethnic Placement Act/Interethnic Placement Act.

0711 Exchange of Information

The Kansas Legislature has made provisions for the Juvenile Justice Authority (JJA) and SRS to share information when appropriate. **The Kansas Code For Care Of Children** - K.S.A. 38-2210 states:

> To facilitate investigation and ensure the provision of necessary services to children who may be in need of care and such children's families, the following persons and entities with responsibilities concerning a child who is alleged or adjudicated to be in need of care shall freely exchange information....and includes juvenile justice.

K.S.A. 38-2212(c)(2) provides JJA shall have access to information, records or reports received by SRS as reasonably necessary to carry out their lawful responsibilities to maintain personal safety of JJA staff and the personal safety of individuals in their care or to diagnose, treat, care for or protect a child alleged or adjudicated to be in need of care.

0712 SRS Responsibilities

A. Investigation of Abuse/Neglect: Conduct investigations and make findings on alleged abuse and neglect of adjudicated juvenile offenders. Upon substantiation of abuse or neglect, SRS will notify the county or district attorney and the JJA Commissioner.

B. Non Abuse/Neglect Reports: SRS shall make a referral to the Commissioner of JJA when a report is received that an adjudicated juvenile offender is alleged to be a child in need of care for reasons other than abuse or neglect. SRS shall take no further action. See MOA with JJA at Appendix 0001.

C. Interstate Compact Cooperation: SRS administers the Interstate Compact of the Placement of Children (ICPC) and shall cooperate with JJA to assist in the interstate placement of juvenile offenders who are referred to Kansas or from Kansas to another state for placement in a licensed residential treatment facility. Placement referrals will be made without regard to adjudication.

0713 JJA Responsibilities

A. Notice of Juvenile Offender Adjudication, Changes Affecting Title IV-E or Title XIX Medicaid Eligibility, and Discharges

   Please reference Section 7000 of Eligibility and Payment Manual for details.

B. Providing Data to SRS

   JJA shall provide SRS with data regarding juvenile offenders which is deemed necessary for SRS to maintain updated information in the SRS information system.

0812 Identification of Indian Children

It is presumed that a child is an Indian child if the child or any other person informs the worker that the child is Indian. If the child's tribal affiliation is known, notice shall be made to that tribal agency. If the identity or location of the parent or Indian custodian and the tribe cannot be determined, a letter shall be sent to the Secretary of Interior requesting assistance.

The following tribes have reservations located within Kansas borders: the Iowa Tribe of Kansas and Nebraska, Sac and Fox Tribe of Missouri in Kansas, Prairie Band of Pottawatomi and Kickapoo. All Kansas tribes have agreed to assist with identifying Indian children and their tribal affiliation.

0813 Reports Involving Indian Children

If, during the investigation of a report of child abuse or neglect, information is obtained which indicates that a child is or may be a member of an Indian tribe or eligible for tribal membership, that fact and available supporting information shall be documented in the case record.

When conducting an investigation involving an Indian family, the family shall be informed that they may request an Indian interpreter. Assessment of the family must take into account the prevailing social and cultural conditions and way of life of the Indian community.

If an out-of-home placement or loss of parental custody is being considered, the requirements of the Indian Child Welfare Act apply. The court of the child's tribal affiliation must be contacted immediately to determine whether the tribal court elects to assume jurisdiction.

The Department has entered into agreements with Native American Family Services (for the Iowa), Sac and Fox Tribe of Missouri in Kansas, Prairie Band of Pottawatomi

and the Kickapoo Social Services to provide protective and/or family services to Native Americans of the tribes located in Kansas. If in doubt whether these arrangements apply, contact the CFS Program Administrator in that region.

0814 Court Custody Proceedings

The tribal court has exclusive jurisdiction over any child custody proceeding involving an Indian child who resides or is domiciled on the reservation. If the child is a ward of the tribal court, the tribe retains exclusive jurisdiction regardless of the residence or domicile of the child.

In any state court proceeding concerning the custody of an Indian child, the state court shall transfer jurisdiction to the tribal court at the request of either parent, the Indian custodian or the child's tribe unless the court finds there is "good cause to the contrary"; either parent objects; or the tribal court declines jurisdiction.

The tribal court has the right to intervene at any point in a state court custody proceeding. The state court must notify the parent, Indian custodian and the Indian child's tribe of any pending proceeding, information about the proceeding and of their right to intervene, when the court knows or has reason to know that an Indian child is involved.

The SRS worker shall provide to the district or county attorney, when known, the following information:

A. full name and birth date of the child or children involved;

B. the maiden names of all females;

C. tribal affiliation; and

D. the identity of a qualified expert witness who can testify that continued custody with the Indian custodian is likely to result in serious emotional or physical damage to the child.

If the tribal affiliation is not known and cannot be determined using available resources, notice must be given pursuant to 25 C.F.R. 23.11.

0815 Parental Rights Termination

No termination of parental rights may be ordered by a state court unless a judicial determination is made that the continued custody of the child by the parent or Indian custodian is likely to result in serious emotional or physical damage to the child. This determination must be supported by evidence beyond a reasonable doubt and must include testimony of a qualified expert witness. The existence of community or family poverty, crowded or inadequate housing, alcohol abuse, or non-conforming social behavior do not constitute grounds for the termination of parental rights.

0817 Adoptive Placement of Indian Children

In any adoptive placement of an Indian child under state law, preference shall be given to placement with: (1) a member of the child's extended family as defined by the tribe; (2) other members of the Indian child's tribe; or (3) other Indian families.

The Indian child's record shall reflect that a child is placed according to the preferences or document why this did not occur.

0818 Voluntary Consent to Adoption

Where an Indian parent or Indian custodian voluntary consent to adoption the consent must be before a judge of a court of competent jurisdiction, who certifies that the terms and consequences of the consent were fully explained and fully understood.

Any consent given prior to, or within 10 days after the birth of the Indian child is not valid.

A consent may be withdrawn at any time prior to the entry of a final decree of adoption and the child shall be returned to the parent or Indian custodian.

SRS social workers shall consult with the regional attorney before accepting a relinquishment from an Indian parent or custodian.

0900 Eligibility and Payment Procedures

To fund services for families who are clients of Children and Family Services (CFS), it is necessary to establish three categories of eligibility: a) customer eligibility, b) service eligibility, and c) provider eligibility.

CFS provides services to children and families through contracted child welfare case management provider. SRS pays providers predetermined case rates per child or per family. SRS claims federal funds, not exceeding this case rate, for eligible services to eligible children from eligible providers. Title IV-E Foster Care is a significant source of federal funds. Most federal funding sources require individual eligibility determination. Accurate eligibility determinations helps assure SRS receives federal funds when the State is entitled to them.

Services are provided to children and families whether or not they can afford to pay. Individual customer eligibility determines what source of federal funding may be claimed by SRS for services. Families are expected to participate in determining eligibility and paying for services based on their ability. However, needed services are provided regardless of family income or ability to pay.

0901 Federal Funds Are Vital to SRS

The state has the primary responsibility to pay for services needed by eligible children and families when they have insufficient resources but the federal government also shares these costs. These federal funds are a substantial share of the annual SRS budget. Maintaining the state's eligibility for these funds is vital to providing quality services.

Kansas must demonstrate eligible customers are provided eligible services from eligible providers in order to document State entitlement to federal funds.

0902 Claiming Federal Funds

In order to access federal funds, the customer served must be eligible, the service received must be an eligible service, and the provider providing the service must be an eligible provider. The federal government does not share service and administration costs for all customers.

It is imperative that the requirements for determining customer eligibility for the various funding sources are followed, as well as making payments for eligible services provided to the eligible customer. To claim our share of federal dollars for services provided, Kansas shall track the services it provides to federally defined groups of customers.

When children or families have private health insurance which pay for services, this source shall be utilized before agency governmental funds are expended. Due to the populations served by SRS, other divisions within the agency also have funding resources and manuals guiding staff. This manual does not repeat the detail eligibility and process information available in other manuals. These manuals are cross-referenced as appropriate.

0910 Child Welfare Contract Management Provider Service Delivery and Encounter Data

Encounter data reported through the Statewide Contractor Reimbursement Information and Payment Tracking System (SCRIPTS) is the method SRS uses to support federal and state expenditures for services delivered by the Child Welfare Contract Management Provider. These services provided by the contractor are paid by SRS at established rates.

0920 REST (Random Employee Sampling Technique) and RMTS (Random Moment Time Study)

REST (Random Employee Sampling Technique) is a time study completed by SRS staff. RMTS (Random Moment Time Study) is completed by Child Welfare Case Management Provider (CWCMP) staff. In these studies, agency and Child Welfare Case Management Provider (CWCMP) staff document time they spend working on case related activities. These results are included in the formula for the SRS Cost Allocation Plan which is used to calculate the federal funds received for SRS programs, including IV-E administrative and training costs.

Eligibility for federal reimbursement of administrative costs has a close relationship to the REST and RMTS surveys. When customers are eligible for federal sources of funding, federal financial participation (FFP) is available for the salaries of the staff serving those customers. In order to claim the FFP for staff (administrative and training) costs, SRS must determine the amount of time staff spend administering the different programs.

REST/RMTS are techniques developed to save staff the administrative burden of completing comprehensive time logs. The concept uses statistical techniques to sample "random moments" of time. REST /RMTS greatly reduces the paperwork required of staff. Federal reimbursement for worker's salaries is captured by a very small sample of "moments".

1000 Intake

1000 Intake

The Intake process begins upon contact with a reporter alleging a circumstance of child in need of care. The report date and time shall be the start of a reporter's call with an intake staff. For reports received via letter or fax, the report date and time shall be the time the information is transferred to the CFS 1000 series intake forms.

The intake process ends with the Initial Assessment decision of no further CFS action needed or with the decision to accept the report for investigation and/or further assessment or with the decision to place the report on Preliminary Inquiry for the purpose of gathering additional information.

1011 Interstate Compact for the Placement of Children (ICPC)

ICPC referrals accepted from other states shall be opened on the CFS 1000 series by the local office. For the purpose of intake, the reason for case assignment is documented as ICPC on the CFS 1002. See policies and procedures for ICPC are addressed in PPM section 9000.

1012 Requests for Child Protective Service (CPS) Courtesy Interviews From Other States

Requests for a courtesy interview from another state shall be forwarded to the KPRC. For the purpose of intake, these requests shall be processed by the KPRC. The intake shall have an initial assessment decision of not assigned due to courtesy interview. KPRC shall send an email to the CFS supervisor in the office responsible for any courtesy interview tasks providing the KIPS report number. The intake is available on KIPS to the assigned social worker.

1013 Requests for Courtesy Contact or Interview Between SRS Offices

An SRS office with investigation responsibilities may request a courtesy contact or interview from a different SRS office to assist with the assessment of an assigned report. The office requesting the contact shall document in the notes section of the intake the specifics of the request. The office requesting the contact shall send an email

to the CFS supervisor in the office responsible for any courtesy tasks providing the KIPS report number. The intake is available on KIPS to the assigned social worker.

See PPM section 2800 for entering these cases in FACTS.

1014 Court Order or Request from an Entity Other than SRS for a Home Study

Court ordered home studies will be completed by SRS.

Home studies not court ordered but requested by the court or other entities will be completed at the discretion of the CFS Program Administrator. The decision of the CFS Program Administrator should be based on current case load activity and availability of other resources in the community to complete the home study. The requesting entity should be provided with information of other agencies who could provide the services.

Request from an entity other than SRS or ICPC which are accepted for a home study shall be forwarded to KPRC to complete the CFS 1000 with CINC/NAN as the assignment reason. The local SRS office may assess a fee. The fee should be based on the current rate in the community for similar services.

1015 Child Protection Service (CPS) Alerts

A. CPS Alerts Received From Other States

CPS alerts are received from a child welfare or law enforcement agency in other states by Children and Family Services or the local SRS office. For the purposes of intake, these alerts are not required to be documented on the CFS 1000 series. When an alert is received, it shall be forwarded to the Kansas Protection Report Center. KPRC staff shall search FACTS and KAECSES to determine any current or past agency involvement. If the family has current or past agency involvement, the alert shall be forwarded to the local office with the most recent involvement. If no previous agency involvement is found, KPRC shall transmit the contents of the alert either electronically or by other means to all SRS child protection units and other service programs as indicated by the nature of the presenting concern. Appendix 1-C may be used to forward the information received from another state.

B. CPS Alerts to Other States

When SRS needs to send a CPS alert, critical information relating to the protection concern shall be forwarded to any state's child welfare and/or law enforcement agency by the local office as needed. The alert shall contain identifying information for the family, summarize the protection concern, and list an SRS contact person. Appendix 1-C may be used to forward the information to

the receiving state.

Name and addresses of child welfare agencies in other states can be located in *The National Directory of Children, Youth and Families Services* or on-line from the American Public Human Services Association web site. Search for the current web site location using the entire name of the association. When the current web site is located, click on links and select state contacts.

1016 Central Registry Requests

A. **Checks to be completed by Local/Regional SRS Office**

A registry request on a current open case related to assessment activities or placement of a child may be completed by the Local/Regional SRS Office.

B. **Checks to be completed by Central Registry Unit**

A registry request not related to assessment activities or placement of a child on an open case shall be processed by the Central Registry Unit of Children and Family Services. This request requires a signed release of information from the individual being checked on Central registry and a fee may be applied (examples include employment or volunteer requests).

The Kansas Protection Report Center-DSOB shall complete after hours Central Registry checks for the Child Welfare Case Management providers if the check will facilitate an immediate/emergent placement of a child with a relative or non-related kin. The Child Welfare Case Management provider shall submit the request on the CFS 1011 including a signature from the person to be checked. The request shall include a fax cover sheet on the provider letterhead which shall state the purpose of the registry request including why the request is needed after hours. Fax the request to: KSPRC (Kansas Protection Report Center) 1-866-317-4279. When possible, a phone call to the Kansas Protection Report Center-DSOB notifying the fax has been sent will assist in facilitating the registry check. Kansas Protection Report Center-DSOB shall contact the Child Welfare Case Management provider with the results of the registry check no more than two hours from the receipt of the fax. No fee shall be assessed for these checks for a child in the custody of the Secretary.

1017 Central Registry Requests received from other States

State Child Welfare Agencies may submit Child Abuse/Neglect Central Registry requests. These requests shall be made in writing and can be received via mail or fax.

In order to process a request for Central Registry, the following information is required for the person being checked:

A. name;
B. alias, other names used, and/or maiden name (if applicable);
C. date of birth;
D. social security number

Results of the Central Registry Request can be mailed or faxed to the State requesting the information. Central or Regional Office staff, with access to the Registry, can process these requests. The CFS form (CFS 1011) does not need to be completed, and a fee does not apply.

1100 Recording Intake Information on the Face Sheet CFS 1000

SRS receives reports of Child Abuse/Neglect 7 days/week, 24 hours/day. Reports are made to the Kansas Protection Report Center via the toll free number, email or fax.

All reports and allegations received by the department shall be recorded on form CFS 1000 series via the KIPS system. The FACTS and KAECSES Statewide information systems are utilized to complete identifying information and information regarding prior SRS involvement .

All household members, non custodial/residential parents, current live-in partner and alleged perpetrator, shall be listed on the CFS 1000, Face Sheet. The CFS 1000, Face Sheet, shall be updated as additional information becomes available regarding the family. Updates shall be dated, initialed, and entered into FACTS.

A FACTS search shall be completed on all reports. If there is a prior or current open case, CASE screen information for each case number from FACTS shall be added to the “Prior SRS Involvement” section of the CFS-1002. If there is prior history of assessment or finding decisions regarding the family in FACTS, the FAMS screen shall be added to the “Prior SRS Involvement” section of the CFS-1002.

If the reporter has provided partial information regarding a child or adult subject of a report who can later be identified via FACTS, information shall be added to the CFS-1000. Additional household members identified on the open CASE screen in FACTS are added to the CFS-1000 page 1.

A KAECSES search shall be completed on all reports. If the KAECSES search identifies dates of birth or social security numbers for participants, these shall be added whether the case is open or closed. If the KAECSES case is open and the address conflicts with

information provided by the reporter, the KAECSES address shall be indicated on the "Prior SRS Involvement" section of the CFS-1002 with the address source cited.

Collateral contacts, service providers, relatives, and kin shall be listed on page two of the CFS 1000, Face Sheet. Page two of the CFS 1000, Face Sheet shall be updated as additional information becomes available. Updates shall be dated and initialed. Individuals listed as Collateral Contacts shall be entered into FACTS.

1200 Reports Alleging Child in Need of Care

A. If the report alleges a child to be a Child in Need of Care, the reporter shall be asked questions to elicit the information needed to make decisions related to safety of the child(ren). Questions asked shall cover the six domains of family life.

1. Extent of situation- includes description of harm/injury; location and severity of injury; how the injuries were inflicted (e.g., open hand, closed fist or with an object); when and where this occurred and any previous occurrences.
2. Circumstances surrounding the situation- including the caregiver's explanation; the child(ren)'s condition; history and duration of the situation; co-existing factors such as substance abuse, mental health issues or domestic violence; contextual issues such as, use of instruments, acts of discipline, threats, caregiver(s) intentions; and the caregiver(s) acknowledgement and attitude about the maltreatment.
3. Child functioning- Description of the how the child functions on a daily basis including: capacity for attachment; general mood and temperament; intellectual functioning; communication and social skills, expressions of emotions/feelings; behavior; peer relations; school performance; physical and mental health; and vulnerability.
4. Discipline approaches and typical context- including disciplinary methods; concept and purpose of discipline; context in which discipline occurs; and cultural practices.
5. Parenting practices- includes satisfaction in being a caregiver; caregiver knowledge and skill in parenting and child development; caregiver expectations and empathy for a child; decision making in parenting practices; parenting style; history of parenting behavior; and protectiveness.
6. Caregiver functioning (with respect to daily life management and general adaptation including substance use and mental health functioning)- includes communication and social skills; coping and stress management; self control; problem solving; judgment and decision making; independence; home and financial management; employment; rationality; physical health and capacity and functioning within cultural norms.

B. Additional information which shall be gathered includes:

1. Age of child(ren).
2. Name of person alleged to be causing the harm/injury, and information regarding access of this person to the child.
3. Other individuals or agencies who have information about this incident and how to contact them;
4. When and where can the child be located (e.g., school, parents, home, etc.).
5. Availability of a non-abusing adult to protect child from further harm.

If the report meets criteria for acceptance for further assessment, CFS 1002, Response Determination, which guides and documents the level of response and time frame for department response, shall be completed.

1212 Reports Alleging Methamphetamine Labs in the Home

When allegations of meth labs in a home where children are present or reside are reported, the reporter should be asked additional questions, as applicable, regarding the allegation.

The following questions shall be asked, as applicable, regarding the reported information:

A. What are the indicators that a meth lab exist in the home?

B. What have you observed?

C. Where are these ingredients being stored?

D. What kind of containers are ingredients stored in?

E. Do the children have access? And to what?

F. Is the meth lab active? (Is meth currently being produced?)

G. Have law enforcement been called regarding the meth lab (today or in the past)?

H. What type of meth ingredients have been observed?

I. Where are the meth ingredients being stored?

J. Do the children have access to any explosive, flammable, and/or toxic ingredients?

K. What are the conditions of the home?

L. Is there a presence of loaded weapons or booby traps in the home?

M. Are there people going in and out of the home frequently?

N. Do you know anything about the people going in and out of the home? What do you know about the people observed?

O. Are the adults in the home exhibiting any of the following behaviors and if so, please explain the behavior in detail:

1. extreme mood fluctuations
2. violent behavior
3. depression
4. poor impulse control
5. bizarre behaviors as applicable,
6. lack of attention to hygiene
7. psychotic episodes
8. other drug use

P. What are the adults' behaviors toward the children?

Q. What is the current condition of the children?

R. Do the children have any health (including dental) issues?

S. Are the children getting fed?

T. Do the children appear to be underweight, extremely thin, or in poor physical health?

U. Do the children have any developmental disabilities?

V. Do the children have any behavioral disorders (e.g., ADHD)?

W. If the children are school age, are the children attending school?

X. How are the children performing in school?

Y. Have the children been harmed? If so, how?

Z. Are you willing to report your concerns re: the meth lab to law enforcement?

1213 Domestic Violence Related Information on Reports

A. Information for all reports

In order to elicit information regarding potential domestic violence between the child's caretakers, the reporter shall be asked the following question.

> Are you aware of any verbal and/or physical fights between the adults in the home?

B. Information for reports indicating the presence of domestic violence

If the reporter alleged domestic violence or the previous questions indicate the presence of domestic violence the following information shall be asked of the reporter:

1. How does the reporter know this information?
2. Have there been any recent injuries or accidents to anyone in the household? If yes, ask for a description of the injury or accident.
3. Have the police been involved?
4. What were the children doing during episodes of violence in the home?
5. Have there been any threats to hurt or kill family members or pets?
6. Has anyone used a weapon or other objects to threaten or harm someone in the family? If yes, describe the weapons in the house.
7. Has the abuser ever threatened to leave with the children? If yes, describe the circumstances.
8. Describe any effects of domestic violence on the children.
9. Describe any assistance the adult victim has tried to access in the past.
10. Describe any contacts the victim has with family members or community members.
11. Do you have any fears or concerns for the safety of anyone in the household if SRS makes contact with the family directly and/or if law enforcement gets involved?

1215 Intakes Involving a Pregnant Woman Using Substances

When a reporter contacts the agency with information a pregnant woman is using substances, the intake worker shall record the information on the CFS 1000 and 1001 forms. Information regarding all children in the household is included in the report. Information that should be gathered from the reporter includes, but is not limited to:

A. The week, month or trimester of the pregnancy
B. The drug(s) of choice
C. The frequency of substance use
D. The timeframe of most recent use of substances
E. Behaviors exhibited when there is drug use
F. Statements or desire for treatment
G. Details on any prior substance abuse treatment
H. Status of children currently in the home
I. Impact of the use of substances on the safety and wellbeing of the children
J. Information on other children removed into state custody for drug or alcohol related issues and jurisdictions as applicable
K. History of law enforcement contact related to her drug or alcohol use

1221 Confidentiality for Reporters

Agency policy requires protection of information which would identify a person who reports suspected child abuse or neglect. However, the protection is not absolute. SRS can make no promises beyond our responsibility to follow the law. Form CFS 1001, Report or Request for Services, contains information identifying the reporter and shall not be copied or disseminated in any manner which violates the confidentiality requirements of the Kansas Code for Care of Children (K.S.A. 38-2209 et seq.).

1222 Notice of Action to Reporters

Persons who have reported that a child may be a child in need of care may be notified of agency action regarding their report. Upon request, reporters shall be informed of agency action either by verbal contact or mailing of the CFS 1005, Notice of Action to Reporters. This notice summarizes the agency's decision to accept the report for further investigation and assessment or not following the Initial Assessment decision. Verbal notices shall be documented in the case record.

1230 Reports From Law Enforcement Agencies

Law enforcement agencies are authorized and required by statute to "receive and investigate reports of child abuse or neglect for the purpose of determining whether the report is valid and whether action is required to protect a child" [K.S.A. 38-2226(a)] and to report the investigation to SRS [K.S.A. 38-2223(c)]. SRS may and should accept conclusions of a law enforcement officer at face value unless there is evidence to do so would jeopardize the safety of a child.

When a report is received from law enforcement, the department determines if further assessment is needed even if the law enforcement agency has already acted on the report. The same criteria for deciding SRS action applies to reports from a law enforcement agency as from any other source. Staff should take steps necessary to assure that reports requested from law enforcement agencies are received and reviewed without delay.

If law enforcement requests assistance from SRS in the investigation of third party (non-family/unregulated care giver) child abuse or neglect, the department will assist.

When a report is received from law enforcement orally, SRS staff are to request a written report of the situation and any action taken by the law enforcement agency.

Delay or failure of the law enforcement agency to investigate or to provide a written report does not relieve the department from the responsibility to determine whether abuse or neglect has occurred or if further steps are necessary to protect a child. The

Initial Assessment decision and assignment of the report should not wait on a written report from law enforcement.

1240 Reports Involving Native American Children

Children enrolled or eligible to enroll as members of a Native American tribe require referral to Native American tribal authorities in some situations. Whenever it appears that a child may come into the custody of SRS or whenever a child has been placed in SRS custody by a court, it is very important that the worker ask whether the child or parent is enrolled in a Native American Tribe. It is the responsibility of the assigned SRS office to notify appropriate parties of reports involving Native American Children. See PPM section 0800.

1300 Initial Assessment of Report Alleging a Child is in Need of Care

The Initial Assessment is to determine when there are reasonable grounds to believe abuse or neglect exists and immediate steps are needed to protect the health and welfare of the abused or neglected child. An Initial Assessment is made on all abuse/neglect and non-abuse/neglect reports received by the agency.

The Initial Assessment is completed when the licensed social worker at the Protection Report Center (PRC) makes one of the following determinations:

- No further CFS action needed
- An investigation and/or further assessment is indicated

1301 Initial Assessment by the Protection Report Center

The PRC social worker shall assess all reports received by the agency. The assessment shall determine the agency's response to the reported allegations based on specific safety and risk factors including, but not limited to:

- age of the children,
- perpetrator's access to children,
- physical or mental condition of care giver,
- location of the injury,
- seriousness of incident,
- medical needs of the child,
- the child's ability to protect self,
- others ability to protect child,
- recency of an injury,
- current condition or behavior of the child,

- agency action needed to protect children from harm and
- action needed to preserve evidence,
- prior department involvement
- other

The PRC social worker shall read the written report, ask for clarification from the intake worker regarding any information not readily understood in the written report, and review abuse, neglect and non-abuse/neglect definitions to determine if there are reasonable grounds to believe abuse, neglect or non-abuse/neglect issues exist, and whether the report should be assigned for further assessment, not assigned for further assessment, or placed on preliminary inquiry.

1302 Search for History on any Family Member and Alleged Perpetrator

If the report is not immediately accepted for further investigation and/or assessment, the PRC social worker shall conduct a search for history on any family member and alleged perpetrator on the report prior to completing the Initial Assessment with no further CFS action needed.

A. The search for history shall include, but is not limited to, the following:

1. Search for previous cases regarding all family members on FACTS.
2. Search for previous cases regarding all family members on KIDS.
3. Search alleged perpetrator on the UNIS screen and the CERS screen in FACTS.
4. Search by individual name of the alleged perpetrator on the KIDS system.
5. Search for the alleged perpetrator using the offender search on the Kansas Department of Corrections web site.
6. Search for the alleged perpetrator using the Kansas Bureau of Investigations, Kansas Registered Offender web site and the National Sex Offender web site.
7. Search for the alleged perpetrator using local court databases where they are available.

If the search indicates history is available on the family members or alleged perpetrator, the PRC social worker shall use the Preliminary Inquiry to review available history regarding the family and/or alleged perpetrator. Prior to completing the Initial Assessment, the PRC social worker shall review history necessary to make an informed Initial Assessment decision.

B. The following types of reports do not require a search of history prior to completing the Initial Assessment with no further action is needed:

1. After thorough questioning of the reporter by the SRS intake worker and a determination is made by the PRC social worker that the care giver's behavior does not directly harm a child or place a child in a likelihood of harm. See PPM1310A.
2. SRS is prohibited by statute from accepting. See PPM 1310D and 1340.
3. Incident Has Been or Is Being Assessed by SRS and/or Law Enforcement. See PPM 1310E.
4. A new CINC:NAN allegation on a current open case. See PPM 1431.

1303 Search for Juvenile Justice Authority Custody Status

When a report is received alleging abuse or neglect occurred in a facility subject to regulation by KDHE, a KAECSES search shall be completed to determine if the alleged victim is in the custody of the Commissioner of JJA. If the alleged victim is in the custody of the Commissioner of JJA send the report to JJA per PPM 1381.

If the alleged perpetrator is a juvenile resident of the facility, a KAECSES search shall be completed to determine if the alleged perpetrator is in the custody of the Commissioner of JJA. If the alleged perpetrator is in the custody of the Commissioner of JJA, a copy of the report shall be sent electronically to JJA at: SRSIncident@jja.ks.gov.

1310 Criteria for determining no further CFS action needed

The Initial Assessment may be completed with no further CFS action needed for the following reasons:

A. The Statutory Definition of a CINC or PPM Directives are not met for the following reasons:

1. No indication the child has been harmed or is likely to be harmed.
2. Care giver's behavior does not directly harm a child or place a child in a likelihood of harm.

Factors to consider prior to determining no further CFS action needed: age of child, no injury or minor injury, circumstances, no indication of excessive force likely to cause injury, no report of pattern or frequent occurrences, history of reports regarding the family.

3. Reports Alleging Abuse or Neglect in the Past. See PPM 1370.

4. Report concerns child care licensing standards only. See PPM 1380

B. Report Fails to Provide the Information Necessary to Locate Child

A report may contain information such as a location near a known landmark or the name of a relative who knows the whereabouts. If the report does not contain information that allows the family to be located without unreasonable effort, the Initial Assessment of the report may be completed with no further CFS action needed. If a reasonable and prudent person would be able to locate the child/family by means of available or obtainable information, the Initial Assessment of the report shall not be completed with no further CFS action needed for this reason.

C. Report Is Known to Be Fictitious and/or Malicious

If information is received from a source with a demonstrated history of making reports that prove to be unsubstantiated and the current report contains no new or credible allegations of abuse or neglect, the Initial Assessment of the report may be completed with no further CFS action needed as fictitious and/or malicious.

The CFS Program Administrator or designee shall review the previous report assessment information to approve completing this Initial Assessment with no further CFS action needed when a report is determined to be fictitious and/or malicious.

D. SRS Does Not Have Authority to Proceed and/or a conflict of interest (See 1340)

1. Incidents occurring on a Native American reservation or military installation.
2. Alleged perpetrator is an SRS employee.
3. Alleged incident took place in an institution operated by SRS or JJA.
4. Alleged victim is age 23 or older.

E. Incident Has Been or Is Being Assessed by SRS and/or Law Enforcement

If a previous report with the same allegations, same victims and same perpetrators has been assessed or is currently being assessed the Initial Assessment of the current report can be completed with no further CFS action needed. The Basis for No Further CFS Action Needed on the CFS-1001 should reference the FACTS event number of previous report.

1311 Documenting no further CFS action needed

The specific reasons for not completing further assessment shall be documented in the "Basis for No Further CFS Action Needed" on page 2 of the CFS 1001, Report/Request for services. When an Initial Assessment is completed with no further CFS action

needed the PRC social worker responsible for the Initial Assessment decision shall sign and date, including the time, to document when the assessment decision was made.

The "Basis for No Further CFS Action Needed" shall address each of the allegations in the report, any risk factors identified in review of history and the specific reasons no further action is necessary. The "Basis for No Further CFS Action Needed" shall be written in such a manner that a person unfamiliar with the case could, by reading this narrative section and the areas noted with a check mark on the CFS 1001, determine the reason the case was being completed with no further CFS action. Considering the reported information, information from preliminary inquiry and past CFS history, the documentation needs to provide a sufficient basis for decision to determine no further CFS action is needed

1320 Preliminary Inquiry

The Kansas Code for Care of Children provides for SRS to conduct a Preliminary Inquiry as a result of the department having received information that a child appears to be in need of care [K.S.A. 38-2230]. Preliminary Inquiry is for the purpose of determining whether an allegation of abuse or neglect is known to the agency through a current completed investigation, gaining additional information regarding an allegation or non-abuse/neglect circumstance, and/or whether the interests of the child require further CFS action be taken.

The Preliminary Inquiry information shall be obtained as soon as practical and no longer than three (3) working days from the date the report is received by the agency. For the purpose of Preliminary Inquiries, three working days begin the first working day after the report is received by the agency according to the date recorded on the CFS 1000 page 1.

If it appears from a reporter's information that a child may be harmed within the preliminary inquiry time frame, the report shall be assigned for investigation and/or assessment. If actions to gather additional information requires in person contact with a child, family, or caregiver by SRS or a Child Welfare Case Management Provider the report shall be assigned for investigation and/or further assessment based on information from the reporter.

A. Preliminary Inquiry may include any of the following activity relative to the case situation.

1. Reports Alleging Abuse or Neglect

    a) Gathering additional information from the SRS or Child Welfare Case. Management Provider staff assigned to a current open case or a recently closed case regarding the family subject to the report.

    b) Gathering information to locate or identify a child.

    c) Gathering additional information from other SRS programs.

d) Coordinating a referral to law enforcement, another public agency or community service.

e) Contacting reporter to clarify information received or request additional information.

f) Contacting any person in the report identified with possessing additional information.

g) Contacting schools, health care providers or any agency identified as providing services to the family.

2. Report Indicating Requests for Services or Other Non-Abuse/Neglect Concern

a) Gathering additional information from SRS programs, other public agency, and/or community contact via either telephone or in person.

b) Connecting the family to a public agency or community service.

1321 Reports Requiring a Preliminary Inquiry

If a report is not immediately accepted for further investigation and/or assessment based on information from the reporter, a Preliminary Inquiry shall be completed for any one of the following reasons in order to complete an Initial Assessment Decision:

A. Report of a family with a current case open for investigation, family services, family preservation, reintegration foster care or adoption case management services excluding adoption subsidy, custodianship subsidy and previous reports with the same allegation, same alleged perpetrator and same alleged victim; or

B. Report involves an alleged perpetrator previously investigated for abuse/neglect and/or found on the abuse/neglect central registry; or

C. Reported information is vague and additional information may be available from other sources such as schools, health care providers, SRS Programs, Child Welfare Case Management Providers or other agencies; or

D. Reported information identifies persons with additional information necessary to make an assessment decision; or

E. Reports alleging a child has been abused or neglect by a non-family/unregulated care giver requiring coordination with law enforcement to complete the Initial Assessment; or

F. Reported cause of injury does not match the description of the injury; or

G. Reported injury is typical of a child abuse injury with no explanation given to the cause of injury; or

H. The KPRC social worker assessing the report identifies any other source of additional information to form the Initial Assessment Decision.

1322 Preliminary Inquiry to review CFS History of Family Members and/or Alleged Perpetrator

If the search of KIDS, KIPS and/or FACTS finds any family member and/or alleged perpetrator has previous CFS or Child Welfare Case Management provider involvement, the KPRC social worker shall determine what, if any, history is relevant to the Initial Assessment Decision of the current report. When the KPRC social worker has determined history is not relevant to the assignment to the current report, an explanation shall be documented in the Basis of the CFS-1002. The KPRC social worker shall review any of the following sources necessary to make an informed Initial Assessment decision:

A. Review each event associated with any family members listed on the FACE screen in FACTS.

B. Review agency response, safety assessment, risk assessment, case finding and FBA summary on KIDS from previous reports involving any family member or alleged perpetrator.

C. Review service history on any family member or alleged perpetrator found on FACTS.

The KPRC social worker shall consider the following in review of history:

A. Are the past allegations substantiated or unsubstantiated?

B. Is the current report an isolated incident of abuse or neglect or a pattern of abuse?

C. Recency of last report or case closure?

D. Does history indicate one or more risk factors such as domestic violence, care giver and/or alleged perpetrator has an untreated mental illness, substance use or abuse and/or history of abuse, neglect or physical violence

E. Any additional information which informs the current report.

Based on the KPRC social worker's judgment, a request may be made for information from the SRS or Child Welfare Case Management provider paper file if the information could be relevant to the Initial Assessment. Additional information from SRS or Child Welfare Case Management provider may include but is not limited to:

A. Were services or treatment provided to the family members and/or alleged perpetrator in the past?

B. Did the family member and/or alleged perpetrator successfully complete services provided or reasons services were not successfully completed?

C. What has changed for the family members and/or perpetrator since the prior involvement?

1324 Documenting the Preliminary Inquiry

The CFS 1001 shall document the request for a Preliminary Inquiry, specify the information requested, establish the time within which it is required, and document the decision. Information obtained shall be recorded on the CFS 1000 A, Summary of Results of Preliminary Inquiry.

1330 Timeframe for Initial Assessment

All reports, including CINC:NAN, shall have an Initial Assessment made without delay. The maximum time allowed to make an Initial Assessment decision or request a Preliminary Inquiry is the end of the next half work day from the time the report is received.

A. The PRC Social Worker makes one of the following determinations during this time frame:

1. No further CFS action needed
2. A preliminary inquiry is needed to gather additional information
3. An investigation and/or further assessment is indicated

When a Preliminary Inquiry is requested, the Initial Assessment decision shall not be delayed beyond the requested time frame. Following the completion of a Preliminary Inquiry, the PRC social worker shall make an Initial Assessment decision by the end of the next half work day from the time the report is returned following the preliminary inquiry.

B. Examples of when Initial Assessments should be completed:

1. Report received between 8:00 am and 12 noon will need an Initial Assessment decision made by 5:00 pm of the same day.
2. Report received between 12:01 pm and 5:00 pm will need an Initial Assessment by 12 noon the following work day.
3. Report received by PRC after 5:00 pm, including reports received during week-ends will need an Initial Assessment decision by 12 noon the following work day.

1340 Reports Which SRS is Prohibited by Statute from Accepting

The following are referrals and reports that SRS is not permitted by law to investigate. In such cases, the information taken by the KPRC shall be transmitted promptly to the appropriate person or agency. The reporter may also be encouraged to make such report directly to the appropriate person or agency in order to ensure all the relevant information is provided to the correct agency.

The report shall not be accepted for investigation and/or further assessment when:

A. The information alleges abuse/neglect occurred in an institution operated by the Secretary of SRS or the Commissioner of the Juvenile Justice Authority (JJA) The report shall be forwarded to the Attorney General. See PPM 1341 or 1342;

B. The information alleges abuse/neglect by an employee of SRS. The report shall be forwarded to the law enforcement agency with jurisdiction. See PPM 1343; or

C. The alleged victim is age 18 or older and not in the custody of the Secretary. A report forwarded to the law enforcement agency with jurisdiction is discretionary. See PPM 1344;

D. Incidents occurred on a Native American reservation or military installation. See PPM 1345

1341 Child Residing in SRS Operated Institutions

Reports of alleged abuse or neglect of children residing in an institution operated by the Secretary of SRS shall be made to the Office of the Attorney General, Division of Criminal Investigation, fax reports to: (785) 296-6296 or Phone (785) 296-2215 ask for Division of Criminal Investigation. Additionally, a copy of the report shall be forwarded to the Risk Manager of the facility identified in the report.

A PRC social worker shall complete an initial assessment on any allegation that a child who resides in a state institution is suspected of having been abused or neglected while on a home visit.

SRS Institutions include:

- Parsons State Hospital and Training Center (PSH/PSHTC)
- Osawatomie State Hospital (OSH)
- Larned State Hospital (LSH)
- Kansas Neurological Institute (KNI), Topeka, and
- Rainbow Mental Health Facility, Kansas City, KS.

1342 Child Residing in JJA Operated Institutions

Reports of alleged abuse or neglect of children residing in an institution operated by the Commissioner of JJA shall be made to the Office of the Attorney General, Division of Criminal Investigation, fax reports to: (785) 296-6296 or Phone (785) 296-2215 ask for Division of Criminal Investigation. Additionally, a copy of the report shall be forwarded to the Juvenile Justice Authority by sending it via email to: SRSIncident@jja.ks.gov.

JJA Institutions include:

A. Kansas Juvenile Correctional Complex
B. Juvenile Correctional Facility at Larned
C. Juvenile Correctional Facility at Beloit

SRS/JJA institutions do NOT include foster homes, day care providers, group homes, or others who contract with SRS.

1343 SRS Employee Is an Alleged Perpetrator of Abuse/Neglect (victim does not reside in an institution operated by SRS)

Reports with an SRS employee identified as the alleged perpetrator shall be referred to the local law enforcement agency [K.S.A. 38-2226 (c)]. The referral shall contain a request for a report of the completed law enforcement investigation returned to the CFS Program Administrator for the purposes of a case finding.

SRS employees include any employee of any division or branch of SRS including, but not limited to:

A. Economic Support Specialist
B. Social Workers
C. CSE staff
D. Vocational Rehabilitation staff
E. Administrators
F. Support staff
G. Program Support Workers
H. State Hospitals
I. Kansas Neurological Institute

Foster parents, day care providers, or others who are employed by agencies that contract with SRS are not considered employees of SRS.

In some cases a person may not technically be an SRS employee but has such a close working relationship that the appearance of a conflict of interest is created (such as a work/training participant, Child Welfare Case Management Provider). In those cases it is preferable to request assistance from a law enforcement agency or a worker from another SRS office/ area may be requested to assess the report.

1344 Alleged Victim is 18 or Older

The department may occasionally receive a report from a person who is now an adult, alleging they were abused or neglected as a child. The law is silent regarding reports from or concerning a person 18 years of age and older about an incident that occurred during childhood.

If the reporter provides information of a child currently being abused or neglected or if the reporter provides information that would cause the department to suspect a child may currently be abused or neglected or in imminent danger of abuse or neglect, the department shall receive and document the information as any other report of abuse or neglect. In this case, the reporter may or may not be considered an alleged victim but will likely be a collateral contact or witness in any event. If there is no current abuse or neglect or suspicion of abuse or neglect of a child, the department is neither obligated to respond with an investigation and assessment nor prohibited from doing so.

The reporter should be encouraged to make a report to a law enforcement agency, especially if it is within 5 years after the alleged abuse or neglect occurred or was discovered, whichever is later. The reporter may also wish to contact an attorney regarding whether there may be any other actions, including civil lawsuit, available to the reporter.

1345 Incidents of Abuse/Neglect occurring on Native American Reservations or Military Installation

Reports regarding a family living on a Native American Reservation or military installation shall follow procedures established in the current Memorandum of Understanding with the Native American Reservation or Memorandum of Agreement with the Military Installation.

1350 Non-family/Unregulated Care Giver Reports - Third Party Reports

A non-family/unregulated care giver report is a report alleging a child has been abused or neglected by a person other than the child's parent, relative, custodian/care giver or member of the household. Such persons may include, but are not limited to the following:

Teachers, administrators, or other employees of a school, other than a home school, in which the child who is the subject of a report of abuse or neglect is enrolled or attends [K.S.A. 21-3520 (8)]; See PPM 1323

A. Employees and administrators of recreational and/or character building organizations in which a child who is the subject of a report of abuse or neglect participates;

B. Babysitters;

C. Acquaintances of the family;
D. Strangers.

1351 Initial Assessment Decisions

If SRS receives a report alleging a child has been abused or neglected by a non-family/unregulated care giver, the department shall accept the case for investigation and assessment unless:

A. A law enforcement agency has accepted the report for investigation, or
B. The report does not otherwise meet department criteria for assigning a report.

Criteria for accepting a report of abuse or neglect by a non-family/unregulated care giver are the same as for any other report of abuse or neglect. If there is evidence or suspicion of parental involvement or failure to protect the child, an assessment should be initiated regarding the parental action or inaction.

1352 Non-family/ Unregulated Care Giver -Third Party Reports Accepted by a Law Enforcement Agency

If a report of alleged abuse or neglect by a non-family/ unregulated care giver has been accepted for investigation by a law enforcement agency, SRS may complete an Initial Assessment with no further CFS action needed for the reason that the report has been investigated by a law enforcement agency unless law enforcement has requested SRS assistance. If such report, made to SRS, is not accepted for investigation by a law enforcement agency, the case shall be accepted for investigation by SRS if it otherwise meets the definition of child abuse or neglect.

1353 Investigation Involving Reports of Abuse Neglect in Schools

A. Reports Resulting From Actions Within School Policy

Report of abuse/neglect as a result of disciplinary action within school policy is generally a matter for resolution by the administration or Board of Education under statutory authority. As such it is not a matter for an investigation by SRS. Reports of abuse/neglect resulting from school policy received by SRS should be completed the Initial Assessment with no further CFS action needed and forwarded to the appropriate school administrator and to the county/district attorney. If requested by the county/district attorney or law enforcement agency, SRS will assist in an investigation.

Examples of such reports include: excessive force used while administering corporal punishment, unreasonable detention or isolation otherwise permitted by school policy.

B. Reports Resulting From Actions Not Within School Policy

Reports of abuse/neglect which are not within or the result of school policy are, in most cases, a matter for law enforcement investigation as a Non-family/Unregulated Care Giver Report. Reports of abuse/neglect not within school policy received by SRS should be forwarded to the appropriate law enforcement agency for investigation following PPM 1322. If such report, made to SRS, is not accepted for investigation by a law enforcement agency, the case shall be accepted for investigation by SRS if it otherwise meets the definition of child abuse or neglect.

Examples of such reports include: sexual misconduct of a teacher toward a child or physical injuries to a child not occurring as a result of the school's discipline policy

1354 Documentation of Case Acceptance and Timelines for Non-family Unregulated Care Giver Reports

The Initial Assessment, CFS 1001, page 2, shall be used to determine whether the report meets the criteria for acceptance. If SRS accepts a non-family/ unregulated care giver report for investigation and assessment or assists law enforcement with an investigation, a case shall be opened. A report of a non-family/ unregulated care giver is opened in FACTS for each family in which there is a child who is alleged to have been abused or neglected. The case is opened as with any other case but the parents role type will be coded in FACTS as "FAM" (family).

The time line for a non-family/ unregulated care giver investigation is the same as for any other case. Document if the time assigned can not follow normal procedures because of the need to cooperate with a law enforcement investigation.

1355 Initial Assessment of Reports Regarding Methamphetamine Labs

If SRS receives a report alleging a methamphetamine lab in a home where children are present or resides, the department shall document the report for Preliminary Inquiry.

During the preliminary inquiry, the report shall be forwarded to the appropriate law enforcement agency. SRS shall contact the law enforcement agency to verify law enforcement agency will investigate the allegation. If law enforcement indicates an investigation will be initiated, attempts shall be made to obtain information from the law enforcement regarding the time frame law enforcement will initiate contact with the children in the home to ascertain safety. If law enforcement accepts the report for

investigation and will respond within a reasonable time frame to ascertain children's safety, the report may be completed with no further CFS action needed.

If law enforcement will not investigate the report or will not initiate contact within a reasonable time to ascertain children's safety, SRS shall consult the county or district attorney. Per KSA 38-2226 the county or district attorney shall be requested to direct or coordinate the investigation between SRS and law enforcement

1360 Reports Concerning a Youth Who Has Been Adjudicated as a Juvenile Offender

SRS is responsible for receiving and completing an Initial Assessment of reports of youth who have been adjudicated as a juvenile offender and who are alleged or suspected to be in need of care.

1361 Reports in Which Abuse or Neglect is Alleged or Suspected

Reports alleging abuse or neglect of youth adjudicated as juvenile offender are subject to the same Initial Assessment policies as other reports. Notice of the acceptance of a report and the result of SRS investigation shall be provided to the Juvenile Justice Authority by faxing the report to SRSIncident@JJA.ks.gov.

1362 Reports alleging a Child In Need of Care other than Abuse or Neglect

SRS shall refer to the Juvenile Justice Authority at SRSIncident@JJA.ks.gov when a report is received that a youth adjudicated as a juvenile offender is alleged or suspected to be a child in need of care for reasons other than abuse or neglect. SRS shall not take further action.

1370 Reports Alleging Abuse or Neglect in the Past

When the alleged victim is under the age of 18, there is no specific time period after which a report of child abuse or neglect may be completed with no further CFS action needed because the report involves an allegation occurring in the past. The issue of whether a report of prior abuse or neglect shall be investigated is within the discretion of the PRC social worker responsible for completing the Initial Assessment on the report.

Reports of past abuse or neglect may complete the Initial Assessment and the basis for the Initial Assessment documented when protection is no longer an issue. A report may

not be completed with no further CFS action needed for the sole reason it occurred in the past.

Guidelines for deciding whether to accept a report of past abuse or neglect:

A. Does it appear likely, without investigation, that the same child or other children under the same care are currently being maltreated or likely to be maltreated?

Factors to be considered in making this determination are: current allegations of abuse, other reports or incidents regarding the alleged perpetrator based on a FACTS search, any substantiated or validated findings regarding the alleged perpetrator, age or ages of any children currently under the care of the alleged perpetrator

B. Does it appear likely that an investigation at this time would be able to establish the maltreatment occurred with clear and convincing evidence?

If the answer to one or both of these questions is "Yes", the need for an investigation is presumed unless the alleged perpetrator is not known or the current whereabouts of the alleged perpetrator are unknown. If the answer to both questions is "No", the case may be completed with no further CFS action needed for the reason the report does not meet the definition of a child in need of care.

1381 Reports Regarding a Facility Subject to Regulation by the Kansas Department of Health and Environment-KDHE

The Department of Social and Rehabilitation Services has the responsibility to receive, investigate and assess allegations of abuse or neglect which are alleged to have occurred in a child care or residential care facility. Kansas Statutes (K.S.A. 38-2226(e)) require SRS to promptly report to the Kansas Department of Health and Environment of "any investigation involving a facility subject to licensing or regulation by the Secretary of Health and Environment."

When SRS receives a report of abuse or neglect of a child in a facility subject to regulation by the Kansas Department of Health and Environment the report shall have an Initial Assessment to determine if the complaint meets the statutory definition of abuse or neglect, appears to be a regulatory matter, neither, or both.

A. Allegation of Abuse

Reports alleging physical, emotional or sexual abuse in a facility with the care giver or other person within the facility as the alleged perpetrator receive an Initial Assessment decision based on the same criteria of all other reports.

B. Allegation of Neglect

If a report alleges neglect in a facility it is necessary to determine whether the reported information involves only lack of compliance with a KDHE regulatory requirement or whether the alleged infraction rises to the level of neglect which has resulted in harm or a likelihood of harm to a child. The PRC social worker shall complete an Initial Assessment and document the reasons for the decision.

Reports which indicate a regulatory requirement of KDHE appears to have been violated but no harm has occurred or is likely to occur in the immediate future are not considered neglect for the purpose of an SRS investigation. The Initial Assessment shall be completed with no further CFS action.

Reports which indicate neglect, lack of supervision or other regulatory infraction which has resulted in harm to a child or which will likely result in harm in the immediate future with the care giver or other person within the facility as the alleged perpetrator shall be accepted for investigation by SRS.

C. Initial Assessment Assigned for Investigation

When a report has been assigned, the Regional Protection Report Center shall send the notification as specified below within five working days of receiving the report. Reports shall be sent electronically. The reporter information shall be included in the notification.

The notification includes the following with some exceptions as noted below:

1. CFS 1000, Face Sheet
2. CFS 1001, Report/Request for Services
3. CFS 1001A, Summary of Results of Preliminary Inquiry
4. CFS 1002, Response Determination
5. CFS 2016, Complaint Report: Facility Subject to Regulation by KDHE, page 1.

   A report which a reasonable person would conclude is an emergency requiring prompt intervention by KDHE shall be referred within two hours of the Initial Assessment decision or when KDHE is next open for business.

D. Reports on Child Care Facilities

The Kansas Protection Report Center shall forward notification to parties who have a need to know on reports involving Registered Family Day Care Homes, Licensed Day Care Homes, Group Day Care Homes and Child Care Centers. Notification of reports regarding the care giver or other person within the facility as the alleged perpetrator at these child care facilities shall be forwarded as specified below:

1. KDHE Central Office via e-mail. See PPM 1381 I.
2. SRS Child Care Provider Manager, send only page 1 of the CFS-2016, Complaint Report: Facility Subject to Regulation by KDHE

E. Reports on Family Foster Homes

The Kansas Protection Report Center shall forward notification to parties who have a need to know on reports involving Family Foster Homes. Notification of reports regarding the care giver or other person within the home as the alleged perpetrator shall be forwarded as specified below:

1. KDHE Central Office via e-mail. See PPM 1381 I.
2. Child Placing Agency sponsoring a family foster home, send only page 1 of the CFS -2016, Complaint Report: Facility Subject to Regulation by KDHE,
3. SRS social worker assigned to the child if the child is being served by a Child Welfare Case Management provider
4. Juvenile Justice Authority when the alleged victim is in the custody of the Commissioner of JJA. See PPM 1381 J.

F. Reports on Residential Care Facilities

The Kansas Protection Report Center shall forward notification to parties who have a need to know on reports involving Group Boarding Homes and Residential Centers. Notification of reports regarding the care giver or other person within the facility as the alleged perpetrator shall be forwarded as specified below:

1. KDHE Central Office via e-mail. See PPM 1381 I.
2. SRS social worker assigned to the child if the child is being served by a Child Welfare Case Management Provider
3. Juvenile Justice Authority when the alleged victim is in the custody of the Commissioner of JJA. See PPM 1381 J.

G. Reports on Psychiatric Residential Treatment Facilities

The Kansas Protection Report Center shall forward notices involving Psychiatric Residential Treatment Facilities (PRTF) to parties identified below. Psychiatric Residential Treatment Facilities are certified by SRS. SRS certified facilities are not the same as "SRS institutions". Notification of reports regarding the care giver or other person within the facility as the alleged perpetrator shall be forwarded as specified below.

1. KDHE Central Office via e-mail. See PPM 1381 I.

2. SRS social worker assigned to the child if the child is being served by a Child Welfare Case Management Provider

3. SRS Mental Health Program Improvement field staff

4. Juvenile Justice Authority when the alleged victim is in the custody of the Commissioner of JJA. See PPM 1381 J.

H. Initial Assessment with No Further CFS Action Needed

When the Initial Assessment determines no further CFS action is needed, the Protection Report Center shall send the notification as specified below within five working days of receiving the report. Reports shall be sent electronically. The reporter information shall be included in the notification.

Notification shall include:

1. CFS 1000, Face Sheet

2. CFS 1001, Report/Request for Services with the "Basis for no further CFS action needed" completed.

3. CFS1001A, Summary of Results of Preliminary Inquiry, as applicable

4. CFS 2016, Complaint Report: Facility subject to Regulation by KDHE.

On child care facilities notification shall be sent to:

5. KDHE Central Office via e-mail. See PPM 1381 I.

On residential care facilities notification shall be sent to:

6. KDHE Central Office via e-mail. See PPM 1381 I.

7. SRS social worker assigned to the child if the child is being served by a Child Welfare Case Management Provider

On Psychiatric Residential Treatment Facilities, notification shall be sent to:

8. KDHE Central Office via e-mail. See PPM 1381 I.

9. SRS social worker assigned to the child if the child is being served by a Child Welfare Case Management Provider

10. SRS Mental Health Performance Improvement Field Staff

I. Electronic Notification of Reports to KDHE

Kansas Protection Report Centers shall send all notices of an intake to KDHE electronically with the following procedures.

The forms to be sent shall be converted to .pdf file format and sent to: cclrreports@kdheks.gov

The subject line of the e-mail shall contain specific information necessary to identify the type of report for KDHE.

1. Type of communication: Intake
2. Type of facility: Child Care (CC), Foster Care (FC), or Residential Facility (RF)
3. County where the facility is located: Two letter county code.
4. Name of Facility: The name of the facility or the last name of the licensee

J. Electronic Notification of Reports to JJA

Kansas Protection Report Centers shall send all notices of an intake to JJA electronically with the following procedures.

The forms to be sent shall be converted to .pdf file format and sent to: SRSIncident@jja.ks.gov

The subject line of the e-mail shall contain specific information necessary to identify the type of report for JJA.

1. Type of communication: Intake
2. Type of facility: Foster Care (FC), or Residential Facility (RF)
3. County where the facility is located: Two letter county code.
4. Name of Facility: The name of the facility or the last name of the licensee

K. Electronic Notification or Reports to SRS Mental Health

Kansas Protection Report Center shall send all notices of an intake to SRS Mental Health Performance Improvement Field Staff electronically with the following procedures.

The forms to be sent shall be converted to .pdf file format and sent to: MHPRCReports@SRS.Ks.gov

The subject line of the email shall contain specific information necessary to identify the type of report for SRS Mental Health.

1. Type of communication:Intake
2. Type of Facility:Residential Facility (RF), Community MH Center (CM)
3. County where the facility is located:Two letter county code
4. Name of facility: The name of the facility or the last name of the licensee

For cases where multiple agencies require notification, it is appropriate to send one email including copies to all involved agencies. This will allow for transparency between agencies and assurance for all that the appropriate notices have been sent.

1382 Reports of a Person Known to Work, Reside or Regularly Volunteer in a Licensed/Regulated Facility Suspected of Abusing or Neglecting His or Her Own Child

When a report is received alleging that a person who works, resides or regularly volunteers in a licensed/regulated facility is suspected of abusing or neglecting his or her own child or another child not connected with the facility, an Initial Assessment of such allegation is completed based on the context of allegation and relationship between that person and alleged victim. A report is not made to KDHE at the time of intake; however notice of findings may be required. See PPM 2544.

1383 Reports Regarding Approved Family Foster Homes

Although not required to be licensed, approved family foster homes are required to meet licensing standards. If it is known or suspected that such a home does not meet these standards, a report should be made to KDHE.

1384 Reports Regarding Kinship Placements

If a report is received of abuse/neglect with a care giver in a Kinship placement as the alleged perpetrators, the Protection Report Center needs to determine if the home is licensed or approved. If the home is licensed or approved by KDHE, a notice shall be made to KDHE. Kinship placements not licensed or approved by KDHE are investigated as a family report.

1385 Reports Involving Adults Under 21 Years of Age and in Custody of the Secretary of SRS

When CFS receives a report involving an Adult under 21 years of age and in custody of the Secretary of SRS, the report shall be assessed as a child report and assigned per the CFS Policy and Procedure Manual.

1386 Investigations involving SRS Licensed Facilities

For the purposes of this policy, SRS Licensed Facilities shall include Community Mental Health Centers, Affiliated Community Mental Health Service Providers and Private Psychiatric Hospitals only. SRS licensed facilities are not the same as "SRS institutions".

Child abuse/neglect reports received with the alleged perpetrator being a provider of CMHC services shall be referred to Law Enforcement as a non-family/unregulated care giver per PPM 1350 - 1352. Notification of the reports shall be forwarded as outlined in 1386.D.

Child abuse/neglect reports received with the alleged perpetrator residing in the home shall be assessed and assigned per policy based on the PPM definitions of abuse/neglect. Notification of the reports shall be forwarded as outlined in 1386.D

A. Reports with no further CFS action needed

Initial Assessment completed with no further CFS action needed on all reports regarding SRS licensed facilities shall be forwarded by the Kansas Protection Report Center to SRS Mental Health Performance Improvement Field Staff.

B. Reports involving SRS Licensed Facilities accepted for investigation by Law Enforcement

If law enforcement accepts the report of child abuse/neglect for investigation, the PRC social worker shall complete the Initial Assessment decision with no further CFS action needed. The Kansas Protection Report Center shall:

1. forward a copy of the report including the "Basis for no further CFS action needed" to SRS Mental Health Performance Improvement Field Staff.
2. forward a Notification of Investigation, CFS-1008, to the SRS Licensed Facility, attention: Director of Children Services, identified in the report as a notification of a report being investigated and identify the alleged facility staff and agency responsible for investigation

C. Reports accepted for investigation by SRS

Reports assigned for investigation as a 3rd Party Perpetrator and forwarded for assessment according to regional procedures. The Kansas Protection Report Center shall:

1. forward the Notice of Investigation, CFS-1008 and a copy of the report to the SRS Mental Health Performance Improvement Field Staff.

2. forward a Notification of Investigation, CFS-1008, to the SRS Licensed Facility, attention: Director of Children Services, identified in the report as a notification of a report being investigated and identify the alleged facility staff and agency responsible for investigation with a copy to the assigned social worker or the case file.

D. Notification to SRS Mental Health Performance Improvement Field Staff shall be made by sending a copy of the report to:
MHPRCReports@SRS.ks.gov
Notification shall include:

1. CFS 1000, face sheet
2. CFS 1001, Report/Request for Services
3. CFS 1001A, summary of Results of Preliminary Inquiry, as applicable

The subject line of the email shall contain specific information necessary to identify the type of report to SRS MH.

4. Type of Communication: Intake
5. Type of Facility:CMHC
6. County where the facility is located: Two letter county code
7. Name of Facility : The name of the facility (if it is a 3rd party report)

1387 Case Opening on Any Facility Report

If the report is accepted for investigation/assessment on any facility, a case shall be opened for each child or sibling group who is alleged to have been abused or neglected and only on those children. For the purposes of the case file and FACTS, the parent(s) or other caregiver in the home of each child or sibling group and not the facility is listed as head of household and becomes the case name. See KIDS manual for procedures for creating a file in KIDS on facility reports.

1388 Reports Requiring Notification to Disability and Behavioral Health Services (DBHS) or Community Support Services (CSS)

A. Child subject of the report with a disability or on a waiver:

Printed Documentation

When a report is received which alleges the child subject of the report is on an HCBS waiver or has a disability, related to physical or cognitive development, autism or traumatic brain injury, the report shall be sent to the CSSPRC@srs.ks.gov mailbox.

The subject line of the email shall contain specific information necessary to identify the report for DBHS.

1. Type of communication: Intake
2. Two letter county code with dashes: -Wy-
3. Case head last name: Smith
4. Intake id number: 1006983

For example; Intake-Wy-Smith 1006983

If the reporter is unsure if the child is on an HCBS waiver, the KPRC intake worker shall check waiver status on the CAP2 screen in KAECSES. If the reporter is unsure of disability status, but believes the child has a disability as specified above, the report shall be sent to the CSSPRC@srs.ks.gov mailbox.

B. Child or family member receiving mental health services:

If a report is received at which identifies anyone in the family as receiving mental health services, the report shall be sent to the MHPRC Reports@srs.ks.gov mailbox. The subject line shall read:Intake-two letter facility code-two letter county code-facility name. For example: Intake-CM-DG-Bert Nash. Facility codes for CFS are outlined in PPM 1381.

The subject line of the email shall contain specific information necessary to identify the report to CSS.

1. Type of communication: Intake
2. Two letter facility code: CM
3. Two letter county code with dashes: -Dg-
4. Facility name: Bert Nash

For example; Intake-CM-DG-Bert Nash

1390 Reports Alleging Abuse/Neglect Out of State

A report alleging abuse or neglect may be assigned in the following circumstances:

A. If the incident occurred in Kansas, regardless of where the victim is currently found or resides, or

B. If the incident occurred in Kansas, regardless of where the perpetrator is currently found or resides, or

C. If the child resides in Kansas or is found in Kansas, regardless of where the incident occurred.

1400 Assignment of Reports

When there is no current open CFS case established, procedures for opening a case are to be followed as indicated in PPM section 1410. Other listed procedures apply when the subject of the report is a child in custody of the Secretary of SRS, the family is currently receiving family services or family preservation services, or when there is an open case for investigation/assessment.

1410 Assignment of Reports Not Currently Open for Investigation/Assessment

A report alleging a child may be a child in need of care which is accepted by SRS shall be assigned to the local SRS office where the child resides or shall be available for investigation and assessment and services.

If the report of abuse/neglect at a child care facility is accepted for investigation, the local SRS office where the alleged incident occurred is responsible for the investigation of the allegations, regardless of where the child resides.

If services by another state or SRS office are required, the assigned SRS office is responsible for coordinating the requests for services.

In situations which do not appear to fit this policy, the CFS Program Administrators in the involved Regions shall determine which region shall take responsibility for the report

1415 Assignment of Reports Indicating Pregnant Woman Using Substances

A. Reports Involving Nicotine Use

If the only substance reported is nicotine, the report shall not be assigned for further assessment.

B. Reports Received With No Children Residing In The Home

Reports indicating a pregnant woman is using substances with no children residing in the home shall have a KAECSES system search completed at the time of intake to determine if the pregnant woman is receiving TAF cash benefits. If the Pregnant Woman is receiving TAF cash benefits, the report shall not be

assigned for further assessment. A copy of the report shall be provided to the assigned EES worker.

If the pregnant woman is not receiving TAF cash benefits, the report will be assigned as a Pregnant Woman Using Substances (PWS) with a 72 hour response time.

C. Reports Received With Children Residing In The Home

Reports indicating children in the home shall be assessed based on the reporters allegations or indications of need for services. If the reported allegations do not warrant assignment as abuse/neglect or CINC/NAN, the report shall be assigned as a Pregnant Woman Using Substances (PWS) with a 72 hour response time.

1420 Assignment of a Report Involving a Child in the Custody of the Secretary and the Custody Case is Opened in a Region Other Than Where the Incident Occurred

An abuse/neglect report received when a child is in placement in a region different from the region with an open case, both offices must be involved in the investigation.

The region where the case is open is designated as the "responsible office", and the county in the region in which the incident occurred is the "investigating office".

The "investigating office" is responsible to complete the Initial Assessment for such reports.

The "investigating office" shall conduct a preliminary inquiry.

During the preliminary inquiry, the office with the open case should be notified and provide input to the Initial Assessment decision.

1421 Tasks of the Responsible Office

The responsible office is the office where the case is open in FACTS. When it is necessary to have an event investigated by another office, the responsible office is responsible to:

A. Provide the investigating office with relevant information as requested.

B. Provide notices of the report to appropriate persons (e.g., parents, assigned social worker, GAL, CA/DA, Judge).

C. Accept reports, findings and forms from the investigating office.

D. Complete the Repeat Maltreatment Review if the case finding is second substantiation on the victim within six months.

See PPM section 2000.

1422 Tasks of the Investigating Office

The tasks of the investigating office are to accept the report of abuse/neglect. Assess the report per policy and make appropriate findings.

A. Make necessary FACTS entries for assessment and findings.

B. Investigate the report.

C. Take emergency protective action if necessary.

D. Keep the responsible office informed of the progress of the case.

E. Determine and give notice of findings regarding the incident and the perpetrator as required in PPM section 2000.

F. Referral to Infant-Toddler Services CFS-2015 for a substantiated finding of child under the age of 3. See PPM section 2000.

G. Forward report (CFS 1000 series), assessment (CFS 2030 series) and case finding (CFS 2011) to responsible office.

H. Forward the notices of findings to the responsible office.

The intent of this policy is for the office with the incident (for a child in SRS custody) or facility in their area to be aware of any protection issues for the child reported or other children in placement or in the facility and facilitate local involvement in any KDHE regulatory action. If there are situations where this policy is not appropriate, the CFS Program Administrator in the Region of the "responsible office", in consultation with the CFS Program Administrator of the "investigating office", shall determine how best to handle the report.

1430 Report of the Same Incident by a Different Reporter on an Open Case

When a report is received from a second, or subsequent reporter, and the allegations are the same (contain no new allegations of Abuse/Neglect) as the report currently being investigated/assessed by SRS the Initial Assessment shall be completed w no further CFS action needed.

1431 Report of a new CINC:NAN event on an open case

Reports received indicating Non Abuse/Neglect concerns shall be completed with no further CFS action needed and addressed as part of the open case, unless there is a request from the social worker supervisor to assign. When the Initial Assessment is completed with no further CFS action needed, the report shall be forwarded to the office with the open case. The assigned social worker shall address the CINC:NAN concerns with the family as indicated. A search of history is not required prior to completing the Initial Assessment with no further CFS action needed.

Some cases remaining open on FACTS will warrant assignment of a CINC-NAN event. A FACTS case open for adoption subsidy or a case remaining open while a PRT child's adoption is pending and additional services are needed for other children in the home, would need to be assigned.

1450 Additional Children in the Family identified in an ongoing investigation

During the course of an investigation/assessment of a report, there is reason to believe other children under the same care are possible victims of the same assigned allegations reported, the additional children shall be added to the current investigation and does not require a new report.

1451 Additional Perpetrator Identified after Initial Assignment

If during the course of an investigation/assessment of a report, there is reason to believe that there is another perpetrator for the same allegation and incident reported, the additional perpetrator shall be added to the current investigation and does not require a new report

1452 Additional Concerns Related to the Child(ren) in the Family identified in an ongoing investigation

During the course of an investigation/assessment if the investigating social worker becomes aware of abuse or neglect issues, other than those contained in the assigned report, a new report is required. An Initial Assessment decision shall be completed based on the content of the new report..

1453 Child(ren) from another Family identified in an ongoing investigation

During the course of an investigation/assessment, the investigating social worker becomes aware that a child from another family may also be abused or neglected, a new report is required. If necessary, the social worker shall take appropriate protective action, pending the assignment of the case from the PRC social worker.

1454 Children in Facilities Subject to Regulation by KDHE identified in an ongoing investigation

During the course of an investigation, if the investigating social worker has reason to suspect other children under the same care are abused or neglected, a new report is required. An Initial Assessment is completed and assigned based on the content of the new report.

1460 Initial Interview Indicates No Evidence to Support Allegations of Abuse/Neglect

If following the interview with identified victim(s), there is clearly no evidence to support the allegations of abuse or neglect, the worker should consult with their supervisor to determine the report does not indicate a need for further CFS action based on the information provided by the alleged victim(s). The parent or care giver of the child shall be notified the child(ren) was interviewed and the department does not intend to take further action to assess. The worker shall attempt to contact the parents the same day the child(ren) is interviewed. The parent shall also be mailed a written notice on CFS-1007 preferably the same day the child(ren) is interviewed or no later than the following work day. The interview(s) should be documented on the case log included with the Initial Assessment completed with no further CFS action needed. The supervisor of the Kansas Protection Report Center responsible for the Initial Assessment decision shall document the basis for no further CFS action needed based on the additional information. The Initial Assessment completed with no further CFS action indicated shall also include the CFS-1002 indicating the original acceptance of the report. The policy shall only be applicable within five working days of the Case Acceptance Date on the CFS-1002, page1.

1500 Response Time Assessment

The Kansas Code for Care of Children in K.S.A. 38-2230 mandates that when there are reasonable grounds to believe abuse or neglect exists, immediate steps shall be taken to protect the health and welfare of the abused or neglected child as well as that of any other child under the same care who may be in danger of abuse or neglect.

When a report alleging a child is abused or neglected is assigned for assessment the Kansas Protection Report Center social worker shall determine the appropriate response time consistent with the information reported.

Completion of form 1002, Initial Assessment documents the response time assigned.

1520 Response Time

Response time begins with the time of the assignment as designated on the CFS 1002, Initial Assessment. Response time ends when the department has determined the safety of the child or made reasonable efforts to make such determination.

1521 Criteria for Establishing Response Times

The PRC social worker will determine the response time according to the following criteria:

> **A. Same Day:** When there is reason to believe that a child has been seriously injured or is in immediate serious danger, SRS shall ascertain the safety of the child and take action necessary to protect the child or cause action to be taken by emergency personnel such as law enforcement officers the same day the report is received.

When a report alleges “serious physical abuse (injury or deterioration), or sexual abuse and action is required to protect the child,” the local office will complete the section of the CFS 1002 indicating a joint investigation is necessary according to statute. It shall be the responsibility of the assigned local office to notify the responsible law enforcement agency according to local procedures. If a joint investigation is not requested, an explanation under “basis for decision” should be made on form CFS 1002, Response Determination, page 2.

Examples of reports which shall be assigned for same day response:

1. Any alleged abuse or neglect (e.g., injury, malnourishment or dehydration) of a child under one year of age.
2. Any child with current marks or bruises.
3. Life threatening situation for a child of any age.
4. Sexual abuse of a child with the alleged perpetrator in the home.
5. Child without minimal care to prevent loss of life or serious physical injury.
6. Child expresses fear of returning home.
7. Child in protective custody of law enforcement.

B. 72 Hours: Any allegation or suspicion of abuse or neglect not assigned a same day response. SRS must ascertain the safety of the child within 72 hours excluding week-ends and state holidays of acceptance of the report.

In any case where evidence may be lost through delay, such as with bruises or body fluids, use of law enforcement or medical personnel to document the condition of the child or environment should be arranged for or the department should promptly respond.

1522 Exceptions to Response Times

A. Best Interest of the Child

When the safety and best interests of a child require an exception to the established time line and not solely for the convenience of the department or another entity, the exception to the time line may be made and documented, on the CFS-2030A Agency Response, Section 1. E.

Examples of exceptions to response times:

1. Time is needed to plan and execute a joint investigation with law enforcement so it will not place a child in greater jeopardy from a suspected perpetrator.
2. A multiple victim report is received regarding a day care center and SRS, law enforcement and KDHE require time to coordinate the investigation to prevent investigation errors or loss of evidence.

B. Child Hospitalized

An exemption to the response time can be made when information indicates a child is currently hospitalized. Hospital personnel should be contacted to verify the child will not be discharged until a face to face visit can be arranged.

1523 Basis for Decision Regarding the Assignment of Report

Briefly describe the reasons for assigning the report for assessment and response time selected. The decision must be understandable to the person to whom the case may be referred and to outside case reviewers, including the court if the record is subpoenaed. This field spells out the "why" and the "when" the assessment will be conducted.

The basis should identify the alleged victim and alleged perpetrator associated with each allegation type assigned. If there is an allegation of abuse/neglect identified which

is not being assigned for assessment, the basis shall indicate an allowable reason according to policy that the allegation will not be assessed. Refer to 1360.

1530 Joint Investigations With a Law Enforcement Agency

Joint investigations are mandated by statute (K.S.A. 38-2226(b)) when a report alleges:

> Serious physical abuse (injury or deterioration), or sexual abuse and action is required to protect a child. When such a report is received, a request is to be made to the appropriate law enforcement agency for assistance with the investigation. If conditions are known or suspected at the time the report is accepted which would require a joint investigation, the law enforcement agency should be involved from the initial contact whenever practical and consistent with child safety. In the event a law enforcement agency was not involved in an investigation or assessment conducted by SRS and information later indicates abuse or neglect which is required to be reported to a law enforcement agency, the report to the law enforcement agency shall be made without delay.

1540 Reports to a Law Enforcement Agency for Criminal Investigation

SRS may report a case to a law enforcement agency if the department determines no action is necessary to protect a child but criminal prosecution should be considered. All reports which require SRS intervention and possible criminal violations should be coordinated with law enforcement. The social worker shall cooperate with law enforcement to maintain integrity of any criminal investigation.

1600 Initial Assessment on Reports Which Allege a Child is in Need of Care Non-Abuse or Neglect (CINC/NAN)

Non-Abuse/Neglect Reports are reports which allege that a child is in need of care because of reasons other than abuse or neglect, such as:

> A. A child who is without care and control necessary for the child's physical, mental or emotional health,
>
> B. A runaway child (with or without a court order against running),
>
> C. A child under the age of 13 who is reported as not attending school as provided by law (truant),

D. A child under 10 years of age who commits an act which would be a felony or misdemeanor for an adult, or a child who is in criminal possession of a firearm

Such reports shall be accepted for assessment unless it meets criteria to complete the Initial Assessment with no further CFS action needed.

CINC:NAN reports shall have an Initial Assessment decision within the time frames outlined for reports of abuse and neglect. See PPM 1300.

1610 Criteria for Completing an Initial Assessment with no further CFS action needed on CINC:NAN Reports

Criteria for completing an Initial Assessment with no further CFS action needed listed for abuse/neglect reports in PPM 1310 are also applicable to CINC:NAN reports. In addition, the following reasons apply to CINC:NAN reports.

A. Report indicates family is receiving services on their own.
B. Report indicates the concern has been referred to or is the responsibility of another agency.

If a referral is made to another agency, the basis for no further CFS action needed shall indicate the agency where the information was sent.

1630 School Attendance

The Kansas Code for Care of Children [K.S.A. 38-2202(d)(6)] includes children who are not attending school as required by law in its definition of "child in need of care". The statutes on compulsory school attendance [K.S.A 72 -1113] place responsibility with the schools for determining the validity of excuses for absences and require the schools to designate one or more employees as responsible for notifying SRS or the county/district attorney of unexcused non-attendance.

1631 Non-attendance of Child Age 7 or More but less than 13

A report from a person designated by a school system to report the non-attendance of a child age 7 or more but less than 13 shall be accepted by SRS for assessment. The school district has the authority to schedule additional school days for a student, including summer months. [K.S.A. 72-1111] Inexcusable absences from any additional school days required for a student, including summer school are also considered a violation to the compulsory school attendance requirement. Therefore, SRS should

verify reports of non-school attendance with the school even during the summer school session.

A report of non-attendance of a child age 7 or more but less than 13 from a person other than designated school system staff is taken and placed on Preliminary Inquiry. As part of the Preliminary Inquiry, the school shall be contacted to determine if the information from the reporter regarding non-school attendance is accurate. If the information is determined by the school district as accurate, the report shall be assigned for assessment. If the information regarding non-school attendance is determined by the school district to be inaccurate, and there is no other Child in Need of Care concern or request for services, the Initial Assessment of the report may be completed with no further CFS action needed as additional information gathered during Preliminary Inquiry from a school indicates the report does not meet the statutory definition of Child in Need of Care.

1632 Non-attendance of a Child Age13 or More and Less Than18 Years Old

Reports of non-attendance of children age 13 or more but less than 18 are to be made to the county or district attorney. If a report is made to SRS for reasons of non-attendance only (there is no other allegation or suspicion that the child may be in need of care), SRS shall take the information and forward it to the county or district attorney. Such reports may be completed with no further CFS action needed for the reason that SRS does not have authority to investigate the report.

1633 Enrollment of Exceptional Children

Children receiving special education services as an exceptional child are subject to compulsory attendance at an age that may differ from the ages of children required to attend school under the provisions of K.S.A 72-1111. If a child has been determined to be an exceptional child, is receiving special education services, and a determination has been made that special education services are necessary for such child, the child shall attend school. This compulsory attendance for exceptional children does not apply to children who fall in to the gifted category of exceptional as defined in K.S.A 72-962.

1634 Home Schools

The schooling of children in their own homes by their parents is not defined in Kansas statutes. If a report is received by SRS that a child is not attending school as required by law for the reason the child is being home schooled, SRS shall determine whether the parents are registered with the Kansas Board of Education to provide private or home instruction. Verification with Kansas Board of Education can be made by calling 785/296-3137.

1635 Truancy Reporting Procedures

SRS offices should develop written procedures and coordination concerning the reporting of non-school attendance with each school district. SRS is authorized to enter into an agreement with a county/district attorney to allow all reports of non-school attendance to go directly to the county or district attorney's office. Schools who report unexcused absences to SRS are to use the CFS 1006, Reports of Unexcused Absences. The local office shall provide the schools with a supply of form CFS 1006, Reports of Unexcused Absences.

1640 Reports Alleging Sexual Behavior or Abuse Between Children Less Than 10 years of Age

Reports alleging sexual behavior or actions between children under the age of ten should consider the following factors to reach an Initial Assessment decision:

A. ages of children, especially differences in age;

B. the context and frequency of behaviors;

C. any force or coercion by any child involved;

D. whether the behavior is within normal range of childhood curiosity.

If there is indication in the report regarding actions or inactions of care givers or individuals over the age of ten that are causing or contributing to this sexual behavior, the report may be assigned as abuse/neglect with alleged victims and perpetrators identified. If there is any indication in the report that the child may be a victim of sexual abuse by a caregiver or person age ten and over, the report shall be assigned for sexual abuse with alleged victims and perpetrators identified. Concerns involving only sexual behaviors of children under the age of ten which warrant assignment, the report shall be assigned as a Non Abuse/Neglect report type.

1650 Reports Involving Substance Exposed Infant

A report of a newborn child which involves alcohol or other drug abuse by the child's mother shall be accepted for assessment when the report indicates the potential for failure or refusal of the parent to provide adequate care for the child. If the case is accepted for assessment the presenting allegation shall be "without proper care and control".

When a hospital reports a baby born or the mother or a newborn with a positive drug toxicology, the following factors shall be taken into consideration in determining whether the report will be accepted for assessment:

A. What drug was positive on the drug toxicology screening?

B. What is known about the mother's substance use? What substances has the mother been using? How long has she been using each substance? Was the mother tested for any drugs? If so, what drug was positive on the drug toxicology screening?

C. Does the father have a history of substance abuse? If so, what substances has he been using? And how long has be been using each substance?

D. Was the infant the product of a full-term, normal, spontaneous delivery with a normal birth weight?

E. Does the mother seem to be bonding appropriately with the baby?

F. If a high risk newborn or for other reasons a baby with special care needs, does the mother seem capable and interested in providing needed care?

G. Are there other interested family members willing to assist with the care?

H. Are there any other reasons the reporting staff is concerned about the baby which indicate an inability, on the part of the mother, to care for the child?

I. Are there other supports and services in the home?

J. Has hospital social service staff been involved and/or has a referral been made to the Local Health Department program for assistance or training in care of a newborn?

K. Has a referral for services for the mother in the form of a chemical dependency assessment and chemical dependency treatment, if indicated by the Hospital protocol, been made?

The assignment determination issues should focus on the situation of the child rather than solely on the substance abuse of the mother.

When a review of the above considerations indicates the family may benefit from services, the report should be accepted for assessment. It shall be accepted as a CINC:NAN report with consideration being given to the ability of the mother and other family members to care for the newborn. The report should underscore that this is a "high risk infant". SRS staff may want to do preliminary inquiry before assignment.

The report shall be assigned for a same day response to address any immediate needs of the family.

1660 SRS Employee Involved in a Non-Abuse/Neglect Report

Reports on non-abuse/neglect issues involving the family of an SRS employee shall receive the same considerations as other non-abuse/neglect reports. If report is assigned, the family should be assessed and offered available services.

The CFS Program Administrator will determine which unit in the area or request another area to complete the assessment, offer and provide services.

1670 Response Times for Reports of Non-Abuse/Neglect Accepted for Assessment

If a report is accepted for assessment, the report shall be assigned for a 20 working day response (exceptions noted below) and the department shall initiate action as soon as practical but within 20 working days of the acceptance of the report. Action has been initiated when the child, a parent, guardian or caregiver of the child has been contacted by SRS. Contact in person is preferable but telephone contact or a letter offering services may be used in situations which do not appear to pose a serious risk to the child.

Reports are assigned for a 20 working day response with the following exceptions:

- A parent expressing fear of harming their child on the day of the report shall be assigned with allegation type "without proper parental care and control" and a same day response.
- A child currently in protective custody of law enforcement shall be assigned a same day response
- Reports involving drug exposed infant shall be assigned as a same day response.
- A report the child currently is engaging in self-harming behaviors, the parents are aware and are not addressing the behavior shall be assigned a same day response.
- A child under the age of one shall be assigned a 72 hour response excluding weekends and state holidays.
- A report assigned as a CINC-NAN which contains allegations a pregnant woman is using substances shall be assigned with a 72 hour response time.

1700 Override of Accepted Reports

A. Occasionally additional information is available which would warrant the Initial Assessment being completed with no further action needed which was previously accepted for assignment. The KPRC supervisor responsible for making the Initial Assessment decision shall be responsible to determine if the report will be an override only under the following circumstances:

1. documentation that the specific incident assigned is currently being assessed in an event or was recently assessed by SRS in an assigned event;
2. documentation that law enforcement assessed the assigned incident, the safety of the child(ren) was determined and no other CINC issues were found;
3. documentation that the report is fictitious and/or malicious, see PPM 1310C

4. documentation of additional information indicating the report does not meet the statutory definition of a CINC or PPM directives

5. documentation SRS does not have authority to proceed and/or a conflict of interest (see PPM 1310D and PPM 1340)

6. documentation in a CINC:NAN case that services are no longer indicated

7. documentation that the child is subject to the Indian Child Welfare Act or subject to a Memorandum of Understanding or Agreement with tribal or military authorities;

8. documentation that reasonable attempts to determine safety as defined in PPM 2300 were made to contact a family of unknown identity, and the agency was unable to locate the family. All resources to attempt to contact shall be exhausted. For example, contacting the reporter, if known, attempting to locate through current address via mail or landlord, school records, employment, known friends or relatives. Any additional information received from these contacts to locate the family should be pursued. Documentation of all attempts shall be attached to the report

9. documentation in a PWS case that a subsequent Abuse/Neglect or CINC-NAN case has been assigned and services shall be assessed and provided in the new event.

B. The PRC social worker shall document the decision to override the assigned report and document the basis no further CFS action needed within five working days of the date of assignment. The five working day time frame may be extended in circumstances where additional days were necessary to attempt or make contacts.

C. In circumstances where the alleged victim has been interviewed and there is an indication the investigation and assessment should not continue, please refer to PPM 1460 Initial Interview Indicates No Evidence to Support Allegations of Abuse/Neglect.

1800 Intake FACTS Procedures

Complete screen navigation requirements for establishing events are located in the Event Management section of the FACTS User Manual Volume II, Section 200. Codes for intake screens in FACTS are located in the USER Manual Volume I, Section 800.

1811 Intake

Information will first be completed in KIPS then data will be transferred to FACTS and pre-fill only the BEGN, ROLE and SORT screens. The EVRL screen will still need to be completed in FACTS on both screened in and screened out events. Information on EVRL shall be entered by close of the business day following the date of the Initial Assessment decision.

1812 Initial Assessment Decision

Preliminary inquiry information will first be completed in KIPS then data will be transferred to FACTS and pre-fill the appropriate fields on the SORT screen.

1821 Search Sources

A. Agency Service Activity (SCAN)

The SCAN screen is a high level client index search of FACTS, KS Cares, KanPay, KAECSES, and Child Support Enforcement systems for existing information on any client served by these program areas. Utilizing SCAN produces a list of names from which the user can select and flow to a family's FACTS CASE screen to view previous open and closure dates and the family's case number if applicable. Information from SCAN is entered into the prior SRS involvement section of the CFS 1001.

B. Family Decision History (FAMS)

FAMS is a search screen that displays all previous investigative finding decisions associated with a family's case number. Information from FAMS is entered into the prior SRS involvement section of the CFS 1001. A FACTS Case number is required to access a FAMS screen for a family.

C. Central Registry Search (CERS) Screen

The CERS screen displays the names of confirmed or validated (prior to 7/1/2004) and substantiated (effective 7/1/2004) perpetrators of abuse/neglect after all applicable appeal time periods have been exhausted. CERS search is utilized for information on the prior SRS involvement section of the CFS 1001, and to add the EVRL screen. A individual name or social security number is required when using CERS. Names will appear in CERS when all the following circumstances have been met:

1. Perpetrator finding is Confirmed (CN) or Validated (CV) (prior to 7/1/2004)
2. Perpetrator finding is Substantiated (SB) (effective 7/1/2004)
3. 60 days have passed since the date of case finding
4. No active appeal in FACTS for this perpetrator
5. No active corrective action plan for this perpetrator (prior to 7/1/2004)

D. Unconfirmed/Not Involved (UNIS) Search Screen

UNIS is utilized for information on the prior SRS involvement section of the CFS 1001. An individual name or social security number is required when using UNIS. The UNIS screen is used to search for information about alleged perpetrators who are in any of the following categories:

1. Substantiated perpetrator of abuse/neglect (prior to 7/1/2004);
2. Validated perpetrator of abuse/neglect during the 60 day (or longer) appeal period (prior to 7/1/2004);
3. Substantiated perpetrator of abuse/neglect during the 60 day (or longer) appeal period (effective 7/1/2004);
4. Unsubstantiated (a.k.a. unconfirmed) abuse/neglect;
5. Person not involved in an incident of abuse/neglect.

E. Event List Search (EVLS)

EVLS is a search for previous reports involving a family. This search will produce event numbers for all reports, and is a tool to prevent adding duplicate events. An individual name and time frame is required when using EVLS.

1830 Adding CINC Reports on BEGN

Intake information from the reporter will first be completed in KIPS then data will be transferred to FACTS and pre-fill the appropriate fields on the BEGN screen. Information on the BEGN screen is also located on the CFS 1000 and CFS 1001.

1831 Event/ Contact ID

Intake information from the reporter will first be completed in KIPS then data will be transferred to FACTS and pre-fill the appropriate fields on the BEGN screen. KIPS will establish the Event/Contact ID and will transfer the ID to FACTS.

1832 Entering Reporter Information

Reporter information will first be completed in KIPS then data will be transferred to FACTS and pre-fill the appropriate fields on the BEGN screen. If the reporter for the event is anonymous, “anonymous” shall be entered as the last name in KIPS. The reporter’s last name is a required field for FACTS. For events alleging abuse took place outside of Kansas, the incident county code shall be entered as “NK” (Not Kansas) in KIPS. This information will then be transferred to FACTS and pre-fill the appropriate fields.

1833 Entering Maltreatment Allegation/Presenting Situation

Information on abuse neglect allegations/presenting situations will first be completed in KIPS then data will be transferred to FACTS and pre-fill the appropriate fields on the BEGN screen. FACTS will allow a total of five allegations/presenting situations to be transferred. The request only code of 'N' indicates the report is regarding an Abuse or Neglect maltreatment type.

1834 Entering Non Abuse Neglect Presenting Situations

Information on non abuse neglect presenting situations will first be completed in KIPS then data will be transferred to FACTS and pre-fill the appropriate fields on the BEGN screen. FACTS will allow a total of five allegations/presenting situations to be transferred. The request only code of 'Y' indicates the report is regarding a non abuse neglect report type (CINC-NAN).

1835 Recording Other Intake Actions

A. Interstate Compact for the Placement of Children (ICPC)

ICPC requests from other states are recorded first in KIPS then the data will be transferred to FACTS on the appropriate fields on BEGN, ROLE, and SORT screens with the presenting situation code and report source code of ICP. The county code is the SRS office completing the home study.

B. Requests for CPS Courtesy Interview from Other States

Requests for courtesy interviews from other states shall be entered into KIPS first then the data will be transferred to FACTS.

C. Requests for Courtesy Interviews from Another SRS Office

Courtesy Interviews are not recorded as a new event. Activity of courtesy interviews are recorded as an assessment tool (CIN) on the case assessment screen for the open case in the area requesting the interview. The area conducting the courtesy interview will need to supply the area with the open case the worker ID of the staff person conducting the interview to facilitate that activity being entered into FACTS.

D. Reports Investigated by Law Enforcement, Native American Tribal Authorities, or Military Authority (Entering Non-Agency Decisions)

Reports investigated by other agencies, and determined in accordance with PPM 2528 to be substantiated by SRS shall be entered into FACTS. Events are created using the appropriate report source of Law Enforcement, Attorney General, etc. Roles for this intake are entered for the victim (VIC) and perpetrator (PRP).

E. Pregnant Woman Using Substances

If the presenting situation is Pregnant Woman Using Substances, enter the presenting situation of PWS. The request only indicator on this presenting situation code is P, and it cannot be used with Y or N.

1836 Incident County Code

The county code in which the alleged incident occurred will first be entered into KIPS and then the data will be transferred to FACTS to the incident county field. If the incident reportedly took place out of state the Not in Kansas (NK) code will be entered in KIPS and then the data will be transferred to FACTS.

1837 Occurrence Date/Occurrence Time

The occurrence date and occurrence time fields document the most recent estimated date when the maltreatment occurred.

Occurrence date and time will be entered into KIPS then the information will be transferred to FACTS and pre-fill the appropriate fields on the BEGN screen. If the reporter is uncertain about the occurrence date, the closest year, the first day of the closest month, and/or the first month of the closest year (January) when the most recent incident occurred will be entered into KIPS. If the reporter is uncertain about the occurrence date, the closest year, the first day of the closest month, and/or the first month of the closest year (January) when the most recent incident occurred will be entered into KIPS.

1841 Adding an Event

Intake information will first be entered into KIPS then the information will be transferred to FACTS and pre-fill the appropriate fields on the BEGN, ROLE and SORT screens. If the report received by the agency is regarding a facility, a separate event must be established for each case involved in the report in KIPS. If the parents of the child or sibling group are not implicated in the maltreatment, the parent’s or other caregiver’s "role" is indicated as "FAM".

1842 Facility and Caseload Indicator

Information regarding if event involves a facility will first be entered into KIPS then the information will be transferred to FACTS and pre-fill the appropriate field on the SORT screen.

Information regarding the caseload indicator will not be manually entered into KIPS or FACTS. The caseload indicator in FACTS will default to 'N'.

1843 Case Opening

If a report involving a facility regulated by KDHE is accepted for investigation/assessment, a case shall be opened for each child or sibling group who is alleged or suspected of having been abused or neglected and only those children. The

parent(s) or other care giver in the home of each child or sibling group (not the facility) is listed as head of household and becomes the case name.

1850 Entering Contact Role (ROLE) and Event Role (EVRL) Screens

Intake information will first be entered into KIPS, then the information will be transferred to FACTS and pre-fill the appropriate fields on the ROLE screen. The EVRL screen shall be completed in FACTS on both screened in and screened out events and establish any links to previous applicable ID numbers for that client.

1851 Contact Role Name

Intake information will first be entered into KIPS, then the information will be transferred to FACTS and pre-fill the appropriate fields on the ROLE screen.

A. **Unknown Names**
   If the individual's first or last name is unknown, the word "unknown" will be entered into KIPS on the appropriate field. If only a partial first or last name is known, this information will be also be entered into KIPS. If information on parents of an abandoned infant cannot be obtained, the parent(s) name as "Unknown, Abandoned" a birth month and day of 01/01, with a year of birth which is 20 years older than the estimated year of the child's birth will be entered into KIPS.

B. **Reports of Incidents Alleging Maltreatment**
   Reports that allege abuse/neglect must identify role codes for at least one alleged perpetrator (ALP) and one alleged victim (ALV). Family members (including but not limited to household members and noncustodial parents) not to be alleged victims or alleged perpetrators are coded as family members (FAM).

C. **Reports of Non Abuse Neglect Circumstances**
   Reports involving NAN situations must identify all family members (including but not limited to household members and noncustodial parents) with a role of family (FAM).

1852 Adding an Event Role (EVRL)

The EVRL screen shall be completed on all events. Names entered on the ROLE screen will appear on the EVRL screen. Any additional information gained through system searches or other communication with persons involved in the intake regarding demographics are updated onto EVRL. Searches for Client ID, alleged Victim ID number, and alleged Perpetrator ID numbers are conducted prior to adding this screen information into the system. If an alleged perpetrator is unknown, enter 9999999999 as

the perpetrator ID number. If an event is assigned and has unknown names other than the alleged perpetrator on ROLE that populates EVRL, then complete EVRL after the first and last names of the individuals have been obtained by the agency. If an event is not assigned and the agency was unable to ascertain first and last names, then EVRL may have unknown added as a person's name. Completing EVRL is a NCANDS requirement.

Demographic Information

1. **Date of Birth:** Date of birth is required on EVRL. If unknown at the time EVRL is entered, then enter an approximate date of birth using the 15th as the day of birth.

2. **Race:** Information regarding race shall match the information found on the paper file form CFS-1000. A person's race is determined by how they define themselves. In case of young children, parents determine the race of a child. Enter into EVRL the race reported by the family. Enter unable to determine (UK) only if the child is very young or is severely disabled and no person is available to identify the child's race; or, if the parent, relative or guardian is unwilling to identify the child's race. Enter Declined (DC) only if the individual has declined to provide their race.

3. **Ethnicity:** A person's ethnicity is determined by how they define themselves. In case of young children, parents determine the ethnicity of a child. Enter unable to determine (UK) only if the child is very young or is severely disabled and no person is available to identify the child's ethnicity; or, if the parent, relative or guardian is unwilling to identify the child's ethnicity. Enter Declined (DC) only if the individual has declined to provide their ethnicity. Enter No (NO) only if the individual is not of Spanish descent (Hispanic/Latino origin). Federal reporting requirements indicate that states shall report the ethnicity of an individual for anyone who claims they are of Spanish descent regardless of the race that is reported. The system allows the addition of ethnicity information for individuals claiming Spanish heritage.

When applicable, information regarding a PRC social worker decision to conduct a preliminary inquiry shall first be completed in KIPS, then the data will be transferred to FACTS and pre-fill the appropriate fields on the SORT screen.

1861 Preliminary Inquiry

When applicable, information regarding a PRC social worker decision to conduct preliminary inquiry is entered onto SORT. Information regarding preliminary inquiries is located on the CFS 1000 and 1001A.

Post KIPS Implementation:

Preliminary inquiry information will first be completed in KIPS, then data will be transferred to FACTS and pre-fill the appropriate fields on the SORT screen.

1862 Initial Assessment Decisions

A. Assigned Reports
The allegation for presenting situation, reason for case assignment, and response time located on the CFS 1002 shall be entered into KIPS, then the data will be transferred to FACTS and pre-fill the appropriate fields on the SORT screen.

B. Reports Not Assigned
Information on reports that are not assigned and the reason for completing the Initial Assessment with no further CFS action needed shall be entered into KIPS and then the data will be transferred to FACTS and pre-fill the appropriate fields on the SORT screen. Initial Assessment decision which require an override per PPM 1700 or 1460 are updated in KIPS by a PRC supervisor, then the data will be transferred to FACTS. For overrides the Screen Out Reason code will be CLA (Closed After Assignment). The EVRL screen still needs to be completed on screened out events. For Out of State Courtesy Interviews, the Screen Out Reason code will be CCI (Close Out of State Courtesy Interview). If an event is entered in error, the Screen Out Reason code shall be IEE.

1863 Case Number

If the family involved in the report has an existing case number, enter that case number in KIPS for all Initial Assessment decisions. Information will be transferred to FACTS.

1871 Unique Case Number

Each family receiving services from CFS has a unique case ID number. Individuals on that case will also have a specific client ID number. This FACTS client ID is cross referenced on the High Level Client Index, and is the same client ID assigned to the other four SRS statewide information systems (KAECSES, KS Cares, KanPay, and Child Support Enforcement).

1872 Establishing An Open Case

Complete screen navigation requirements for establishing a case is located in the Case Management section of the FACTS User Manual Volume II, Section 300. Codes for screens involving case management in FACTS are located in the USER Manual Volume I, Section 800. If the case opening involves a referral to a Child Welfare Community Based Services provider, then information on CASE, MACL must be complete and added the same day of referral to the provider. Otherwise, CASE and

MACL information shall be entered within 5 business days from the date of occurrence, action, or agency decision regarding a child or family. Case information that is required in FACTS and which is received from outside agencies shall be entered within 5 business days of receipt of the information.

A. Persons on CASE
All individuals listed on the EVRL screen will automatically roll over to the CASE screen. Only individuals from that event/ report who are family members and whose names are known are processed for a case household. In circumstances from a reporter in which names are unknown, wait until information is known about last and first names, then complete (EVRL) and CASE promptly when adequate information is gathered regarding names so an adequate client search can be achieved. If there are members of the household who were not listed in the initial report to the agency and/or on EVRL, those individuals shall be added to persons listed on the case.
If the event is not attached to an existing case, the FACTS system assigns a case number once the CASE screen is successfully processed. The FACTS system assigns a case name once the CASE screen is successfully processed. Whomever is listed on the CASE screen as the case head will be the case name. If there is a female parent or primary caregiver in the household, list the female as the head of household if appropriate.

B. Case Open Date
The date of case opening is the date that the case is accepted for investigation or assessment . This date is located on the CFS 1002. The CASE screen is also used to close, reopen, or transfer a case to a different worker.

C. Multiple CASE History
If there is a circumstance with two parental households with two previous case numbers, the parent case with the longest case history shall be the case number to use when reopening a case.

1880 Maintain Client Information (MACL)

The MACL screen is used to document individual client information such as demographics, termination of parental rights, eligibility, school district child attends, income, etc. Information for this screen is located on the CFS 1000, placement documents, and eligibility documents.

1881 Marital Status

Information entered on this screen shall differentiate between adults who are Single, Divorced, Separated, Legally Separated and Involuntarily Separated. Separated is a status whereby the parties mutually agree to live apart. Legally separated is where the parties receive court sanction to live apart. Involuntary separation is a status whereby

the parties have no choice but to live apart as in incarceration, military duty when dependents are not allowed to go, etc.

1882 Reason Left/Reason Left Date

If an individual leaves a case that date is entered onto MACL. The date the person left the case cannot be earlier than the case open date.

Usage of Reason Left Codes:

Use the code for "emancipation" (EMN) when a youth in custody under the age of 21 is given "adult" status by a court.

Use the code for Guardianship (GAR) when a child is placed with an adult(s) other than their parents and a court issues an order giving the adult legal authority to act in behalf of that child in the capacity of guardian.

Use the code for Adoption (ADP) when a child has been placed in an adoptive home and that adoption has been finalized by court hearing.

Use the code for Living with Other Relatives (LOR) when the individual has moved from the residence where the head of household resides and that head of household no longer has a principle role in the case plan.

Use the code for Reunification (REU) when the child has left the case to be reunified with a parent on another case.

Use the code Runaway (RAW) when a child who is not in SRS custody has:

1. been absent from a parent’s home without permission; and,
2. has been gone a minimum of 24 hours; and,
3. has been reported as a runaway by the parents to law enforcement.

Use the code for Death (DTH) for a case member who dies. When using this code, a Date of Death entry is required.

Use the code for Divorce (DVR) when a member of the case leaves due to the member’s legal (court order) divorce from another member of the case.

Use the code for Separation (SEP) when a parent or other member of the case leaves due to that person’s legal (court order), voluntary or involuntary marital separation from another member of the case.

Use the code for Marriage (MRG) when a member of the case leaves due to that person’s marriage to another person in another family leading to both a change of

address from the address of the case head and that person's no longer playing a significant role in the case plan(s).

Use the code for Living with Another Family (LAF) when a case member leaves the address of the case head and is no longer playing a significant role in the case plan(s).

Use the code for Expelled (EXP) when a case member is forced to leave the family either by court order or by the demand of another family member(s).

Use the code for Receiving Services in Another Case (RAC) when a case member leaves the case to join another case where they may receive services.

Use the code for Entered in Error (ERR) to remove a person who has been entered in error and should not be part of the case.

1883 Disability/Severity

Disability codes on MACL shall be entered for every child on a case. If a child has no disability, enter None (NO). If a clinical assessment is need and has not yet been completed, enter Not Yet Determined (ND). To document a disability, the condition must have been diagnosed by a qualified professional. A qualified professional is a medical or mental health professional as defined by state law or regulation. If a child has been clinically assessed as having a disability, enter disability type from the user manual. Also, review medical or emotional conditions that may qualify as a disability type on Appendix 1J. Enter Other Disability (OD) only if the child's diagnosed conditions meets one of the listed items that corresponds to the OD on Appendix 1J. (See PPM section 3850 for additional information). If a child has no disability, enter None (NO). If a clinical assessment has not yet been conducted, enter Not Yet Determined (ND).

Disability codes on MACL shall be entered for specific special needs identified on ADOP. The special needs codes on ADOP that require MACL disability codes are: Emotional Disability (EMD), Medical Condition (MEC), Mental Disability (MED), or Physical Disability (PHD). This is an AFCARS requirement.

1890 Entering Client Relationships (RELS)

The RELS screen is used to document the family relationships between case members. Information for this screen can be located on the CFS-1000 and additional assessment forms. Parental relationships to children is either that of a primary (CP) or secondary care giver (CS). If one of the caretakers is female, she is coded as the primary caretaker if appropriate.

1900 Eligibility and Payment Procedures

Section intentionally left blank.

2000 Investigation and Assessment

2000 Investigation and Assessment of Reports

All reports accepted and assigned require an investigation to determine the validity of the report and to determine the need for further action.

Investigations and assessments are mutually dependent parts of child protection. The investigation comprises the fact-finding activities on which the assessment (drawing conclusions from the facts) is based. An assessment cannot be accurately made without data from an investigation. An investigation is pointless (and possibly destructive) if there is no assessment.

2010 Investigation

Investigatory activities may vary from case to case based on the specifics of the case. Investigative activities may be done by an SRS Social Worker, SRS Child Protection Special Investigator, or Law Enforcement, and will commonly involve several of the following activities (not necessarily in the order given):

A. Interviewing the reporter and witnesses (if any) to the alleged maltreatment.

B. Interviewing the child victim (preferably before the alleged or suspected perpetrator is interviewed and not in the presence of the suspected perpetrator except for good reason).

C. Interviewing the child's parent(s) and other person(s) responsible for the care of the child.

D. Interviewing the alleged or suspected perpetrator.

E. Interrogating the suspected perpetrator if there are indications the allegation may be true. This may be done by law enforcement or SRS.

F. Visiting the scene of the alleged maltreatment; documenting relevant environmental information; requesting a law enforcement officer to seize physical evidence. Photographs or videotapes may be requested of a law enforcement officer, medical staff, or other persons trained and competent in taking photographic or electronic evidence. If such a qualified professional is not available, SRS staff should photograph to record the evidence.

G. Obtaining relevant records from SRS, law enforcement, medical practitioners or other relevant entities. Consents for release of information not statutorily available will be necessary. A subpoena for documents or interviews to provide essential information may be requested by SRS or a court appointed multi disciplinary team.

H. Making and documenting behavioral observations such as the appearance and affect of witnesses and suspects when presented with questions or information

about the alleged maltreatment; the child's behavior in the presence of care givers or the alleged perpetrator; the type and quality of interaction of family members; statements; or behaviors of any person which might be indicative of truthfulness; lying; any mental, emotional or physical impairment of any other child or adult; behaviors indicating alcohol or other drug use, etc.

2020 Assessment

Assessment is the process of drawing hypotheses or conclusions from the information available from the investigation. As with elements of the investigation, the activities of an assessment may vary from case to case. Assessments are completed by an SRS Social Worker and will commonly involve several of the following activities (not necessarily in the order given):

A. Evaluating the quality and sufficiency of the evidence.

B. Evaluating the plausibility of explanations for the harm.

C. Considering alternative explanations for the injury.

D. Evaluating contributing factors according to the Safety and Risk Assessment.

E. Reaching a tentative conclusion whether the alleged maltreatment occurred.

F. Assessing whether there is immediate danger to the child.

G. Considering alternative protection actions if necessary and selecting one.

H. Assessing long term risk of reoccurrence.

I. Considering available services and making an initial plan for selected services.

J. All assessment information mentioned in this section shall be documented on each report using the Kansas Initiative for Decision Support (KIDS) computer application.

2030 CPS Special Investigators

Child Protective Service Special Investigators provide evidentiary information to support social worker decisions regarding safety, risk and service action. They may assist in an individual capacity with initial agency response to interview subjects involved in a abuse/neglect report or assist as a member of a joint investigative interview team with the social worker.

2031 Tasks Completed by a CPS Special Investigator

The following tasks yield evidentiary information and may be conducted in accordance with policy by a CPS Special Investigator:

A. Interview the child alleged to be the victim.

B. Interview the child's parent(s) or other persons responsible for the care of the child.

C. Interview the alleged or suspected perpetrator.

D. Interview the reporter and any collateral witnesses to the alleged maltreatment.

E. Interrogate the suspected perpetrator if there are indications the allegations may be true.

F. Visit the scene of the alleged maltreatment to gather forensic evidence: document relevant environmental information; take photograph or videotapes.

G. Document physical and behavioral observations of the alleged victim, witnesses and perpetrators; the child's behavior in the presence of care givers or the alleged perpetrator; statements or behaviors of any person which might be indicative of truthfulness.

H. Provide evidentiary information regarding immediate safety of the children involved in the CINC allegation to the social worker and supervisor who will make the safety determination. The special investigator shall not determine the safety of a child without the input from the social worker.

I. Assist the social worker or supervisor with any course of necessary protective action.

J. Obtain relevant records from law enforcement, medical practitioners or other relevant entities.

K. Prepare an investigative report.

L. Prepare any narrative reports for affidavits.

M. Coordinate with the social worker, supervisor and other SRS program staff during the investigation to insure seamless agency service delivery for the family.

2032 Agency Documentation Completed by a CPS Special Investigator

In consultation with social worker and/or supervisor the special investigator may complete the following forms:

A. Agency Response (CFS-2030A) the portion where child's safety is determined should be documented in consultation with a social worker and/or supervisor.

B. Family Based Safety Plan (CFS-2003) with review by the social worker and/or supervisor.

C. Case Findings (CFS-2011) draft of the basis for finding section for review and approval by the social worker and supervisor.

D. Notice of Finding (CFS- 2012) with approval by the social worker and supervisor.

2100 Initiation of Investigative Interviews of Child Abuse/Neglect

The Department has the duty to receive and investigate reports of child abuse and neglect for the purpose of determining whether the report is valid and whether action is required to protect the child. K.S.A. 38-2226(a).

"Investigation" is the initial phase of the Family Based Assessment for reports alleging child abuse or neglect. In an investigation facts are obtained and evidence is gathered and secured in order to reach a conclusion on the validity of the report and what actions, if any, are needed to protect the child. The purpose of the intervention is to assist families (where needed) to live together safely and within the requirements of law.

At the initial contact with the family and/or alleged perpetrator, the SRS employee conducting the investigative interview shall inform the family and/or the alleged perpetrator that the Kansas Code for Care of Children requires SRS to make inquiry when a child is alleged to be in need of care. The family and/or alleged perpetrator shall be informed of the specific actions or inactions that have been reported as suspected abuse or neglect, without disclosing the identity of the reporter.

The family or individual subject of the report shall be informed that they are not required to cooperate with the agency and the possible consequences of such refusal. The pamphlet entitled “What You Need to Know About Investigations of Child Abuse or Neglect” CFS-2010 shall be given to the family or individual subject of the report.

2110 Requirement to Interview Relevant Persons

In order to reach a case finding, interviews must be conducted with all persons known or believed to possess relevant information. The investigative interview may be conducted by a social worker, Children & Family Services special investigator or law enforcement officers.

A. The following persons shall be interviewed unless allowable reasons not to interview the person exist and are documented:

1. The alleged victim. An attempt shall be made to interview any alleged victim who is two years of age or older,
2. Primary care giver of alleged victim (a residential parent, or other adult with whom the child resides and has authority to make significant decisions concerning the child's care.
3. Siblings residing in the home of the victim if the victim is pre-verbal or otherwise unable to be interviewed.
4. The alleged or suspected perpetrator.

B. Allowable reasons for not interviewing include, but are not limited to:

1. Refused to talk with worker
2. County or District Attorney or law enforcement officer requested that SRS not interview
3. Unable to locate or otherwise unavailable
4. Mental or physical condition prevents interview
5. A child is pre-verbal or non-verbal (child should be observed)
6. Alleged perpetrator not identified
7. Deceased

C. Other persons may be determined by the social worker to have relevant information and if so determined the person(s) shall be interviewed unless allowable reasons not to interview the person exist and are documented. A "relevant person" is one who has been identified during the course of the investigation as having information that is key to the investigation or is essential to protecting the child or making a finding. Relevant persons might include:

1. Non-residential parent
2. Siblings;
3. Any adult who provides care or supervision of the victim or who lives in the home, whether related or not;
4. Other witnesses, regardless of their relationship to the victim or living arrangement;
5. Relatives and friends; or
6. Neighbors.

A person need not be determined to have relevant information and be interviewed if there is reason to believe additional interviews would not add to the information already available and sufficient information is otherwise available to protect the child and to establish a finding. If a person who would otherwise be a relevant person is excluded for these reasons, the reason for the decision shall be documented on form CFS 2030A, "Agency Response".

2111 Minor Alleged Perpetrators (minor)

If the alleged perpetrator is a minor, the social worker is not required to inform the minor parents prior to attempting to interview the minor.

The decision to interview the minor without parental notification should be made on a case by case basis, including considering the best interest of the victim. The social

worker should review the known facts of the current situation and whether services for the minor may be needed. Having the cooperation of the minor's parents may assist in obtaining the cooperation of the minor. At the point that the minor's parents are consulted and they decline contact with the minor, all attempts to contact him/her shall cease. If the investigation is being conducted jointly with law enforcement, law enforcement may be limited in its ability to interview the minor.

If the minor is in the guardianship of the Secretary, the assigned SRS social worker, in consultation with the social work supervisor (or designee, see PPM 0140), and CFS Program Administrator, shall consider retaining legal counsel to represent the minor as an alleged perpetrator.

2120 Documenting Agency Response

The form CFS 2030A, Agency Response, documents who was interviewed and, when applicable, reasons interview did not occur.

When some but not all members of the family are unable to be located once the assessment has begun, document "unable to locate" on the individuals who were not located. Agency Response information shall be completed on individuals who were located.

For reports involving a non-family/unregulated care giver as the perpetrator or incident of abuse or neglect occurring in a facility regulated by KDHE, agency response is documented on the CFS 1004. Agency response documents may be completed by either an SRS social worker or SRS child protection special investigator. A printed form is the official copy and shall be in the case record.

2125 Gathering Relative Information During the Investigation/Assessment

The CFS social worker shall gather relative/non-related kin information during the investigation/assessment. Questions shall be asked of all relevant parties, including children, about potential relative/non-related kin resources. Information requested shall include, but is not limited to: names, addresses, phone numbers, relationship to child, and information about current involvement with the child(ren) subject of the report.

2130 Parental Permission to Interview a Child

Parental permission is not required to interview a child who is the subject of a report that the child may be in need of care. However, as parental cooperation may be essential to an adequate investigation of a complaint, parental permission to interview a child shall be sought whenever practicable. Circumstances in which a child may be interviewed without parental consent include:

A. The parent is alleged or suspected to be involved in the maltreatment.

B. The safety of the subject child or any other child in the same care might be jeopardized by delay or notice.

C. There is reason to believe that essential evidence would not be available if there is delay or notice.

Whenever it is necessary to interview a child without parental consent, a parent should be notified as soon thereafter as practicable and an explanation provided for the interview. SRS staff shall not enter a residence to interview a child regarding alleged abuse or neglect unless a parent or other adult resident at that address has given permission for that SRS person to enter the domicile.

2140 Interviewing Children

The importance of conducting interviews of children out of the presence of a suspected perpetrator makes interviewing children in a neutral setting a preferred practice.

2141 Interviewing Children at School

The Kansas Code for Care of Children provides for cooperation between SRS, law enforcement agencies and elementary and secondary schools in the investigation of abuse or neglect [K.S.A. 38-2226(g)]. The statute also provides that schools shall provide access to the child on school premises for this purpose.

Whenever a child is to be interviewed at school the following guidelines should be followed:

A. Whenever practicable, advance notice should be given the school administrator of the need for an at-school interview. A mutual understanding should be reached between SRS and the school administration that a parent should NOT be notified of the interview unless such notice is approved by SRS or a law enforcement officer on a case by case basis. SRS is responsible to notify the parent of the interview at a time when it will not interfere with the investigation.

B. When SRS staff is on school premises, the school administrator should be immediately notified and identification provided. The worker should also notify the school when leaving the premises.

C. Form CFS 1003, "Request to Interview a Child at School" should be presented to the school administrator.

D. To the degree practicable, the child should be excused from classroom activities and escorted to the interview in a manner that does not identify the purpose of the interview. The interview should be conducted in a place which provides confidentiality and, if possible, comfort to the child.

E. If it will provide support for the child, a school employee may be present in the interview but may not participate unless invited to do so by SRS or a law enforcement officer. The school may not require a school employee to be present during the interview [K.S.A. 38-1523(g)].

F. If a child needs to be taken off-premises, a law enforcement officer should be requested to place the child in protective custody and transport the child. The child may not be taken off premises by an SRS employee unless there is a court order giving SRS temporary custody or if accompanied by a parent or with written parental consent.

G. If non-involved children are interviewed as witnesses, parents of such children should be notified in advance if time permits, and if not, as soon as practicable following the interview.

2142 Interviewing Children in a Child Care Setting

There are no statues or regulations providing for interviewing children as alleged victims of abuse/neglect in a child care setting. However, under Kansas law all persons with information and /or evidence concerning abuse or neglect of a child are encouraged to cooperate with investigations conducted by law enforcement and/or SRS. Individuals in child care are mandated to report suspected acts of abuse or neglect and/or required to cooperate with investigations of suspected child abuse/neglect. KSA 38-2223 and KAR 28-4-118.

2151 Relevant Parties

Department guidelines for determining who are relevant parties for the purpose of conducting interviews apply to investigations in facilities. See PPM section 2110.

2152 Documenting Agency Response

Investigative interviews with children who are the subject of reports of abuse or neglect in licensed facilities are documented on the CFS 1004. Agency response documents may be completed by either an SRS social worker or SRS child protection special investigator.

2153 Permission for KDHE to Interview a Child in SRS Custody

The Department of Health and Environment has a statutory duty and authority to conduct an investigation of alleged or suspected violations of license laws or regulations. In order to carry out these responsibilities KDHE is not required to obtain consent from SRS or from a child’s parent to interview any child in the custody of the Secretary of SRS.

2154 Notice to Facility When On Premises

Investigations of complaints in facilities may be conducted with or without advance notice. In general, advance notice shall be given except when there are reasonable concerns for the safety of one or more children or the element of surprise is necessary to secure evidence. Whether or not advance notice is given, the on-site person in charge shall be notified whenever the department is on the premises and the purpose of the visit explained.

2160 Interviewing Children Who Are the Subject of a Report of Abuse or Neglect by a Non-Family/Unregulated Care Giver ("Third Party")

An investigation with a non-family/unregulated care giver as the alleged perpetrator are essentially different than intra-familial maltreatment.

2161 Relevant Parties

If SRS is involved in a investigation with a non-family/unregulated care giver as the alleged perpetrator, it is required only that the alleged victim be interviewed and that the alleged perpetrator be given an opportunity to be interviewed (by SRS or law enforcement) or document an allowable reason for not interviewing. Informing the parents of a child believed to have been maltreated by a non-family/unregulated care giver is not a requirement of the investigation but it respects the parent's right to know, allows the parent to take protective action if needed and may assist in gaining the cooperation of the child.

2162 Documentation of Agency Response

Documentation of agency response and investigative interviews with relevant parties involved in a report with a non-family/unregulated care giver as the perpetrator shall be documented on the CFS 1004. Agency response documents may be completed by either an SRS social worker or SRS Children & Family Services special investigator.

2170 Physical Observation of a Child Who is the Subject of a Report of Physical Abuse or Neglect

When physical abuse or neglect is alleged, the child’s body shall be observed or examined for evidence of alleged physical trauma (e.g. bruises or burns) or physical condition (e.g. bug bites, body dirt). The child’s body shall be observed in the least intrusive manner and conducted in a manner that is sensitive to that child’s age and gender. Whenever practical, a parent should be requested to undress the child and

assist in determining the child's physical condition. Depending on the circumstances, the social worker or special investigator may have another adult present or have a medical professional conduct the exam.

2210 Joint Procedures with SRS and Law Enforcement Agencies

Reports in which SRS has determined sexual abuse or serious physical injury or serious deterioration may have occurred and action may be required to protect the child, are required by statute to be joint investigations with SRS and a law enforcement agency [K.S.A. 38-2226(b)].

SRS meets its statutory responsibility when a request is made and documented for law enforcement assistance. SRS determination whether abuse/neglect has occurred and necessary action to prevent (further) abuse must not be delayed if law enforcement does not respond.

If a law enforcement officer requests assistance from SRS in the investigation of a report of child abuse or neglect, the department will assist. Nothing shall prevent the department from providing assistance prior to a report being made to and assessed by the Kansas Protection Report Center.

2220 Investigations involving a report of abuse or neglect in a facility licensed by KDHE.

KDHE shall be notified whenever there is a concern about health or safety in a facility which is subject to regulation. Local health departments may be notified.

Investigations of complaints in child care facilities can often be complex due to the possibility of multiple victims or perpetrators and multi-agency responsibilities. Planning for an investigation may require striking a balance between promptness of contact with the alleged victims and the need to coordinate with other agencies to avoid making errors in the investigation which could also affect the safety of children.

Investigations in facilities shall be conducted according to department policy for determining response times. Any deviation from these guidelines shall be taken only in the best interests of a child and the basis for the action shall be documented. In completing an investigation of an incident occurring in a facility regulated by KDHE, the local office shall:

A. Conduct a prompt and thorough investigation of the allegations to determine whether the report is valid and whether services are necessary to protect a child who is the subject of the report or any other child under the same care.

B. Provide KDHE with facts and information gathered during the SRS investigation/assessment to assist KDHE in determining if a revocation of the child care license is warranted.

2221 Notice to Parent or Guardian of a Child in Out of Home Placement

Unless it is determined a notice is not in the child's best interest, the investigating social worker shall give notice of the investigation to the parent or guardian of child who has been alleged to be abused or neglected while in out of home care. This policy does not include parents whose parental rights have been terminated. The notice may be verbal or in writing. Contact with parents shall be included on the CFS 1004, Agency Response Facility and Third Party Reports. Such notice should not be unreasonably delayed but need not take precedence over the other investigative activities. Contact with the parent or guardian shall be coordinated with the Child Welfare Case Management Provider.

2222 Investigative Documentation

Documentation of the investigation of facility reports shall include:

A. CFS 1004, Agency Response Facility and Third Party Reports

B. CFS 2011, Case Finding

C. CFS 2012, Notice of Department Finding

D. CFS 2016 for notification to KDHE and other distribution.

2223 Assessment Documentation of Facility Reports

Family based assessments are based on dynamics unique to families. A day care center is not a family and is not the proper subject for a family based assessment. Family foster homes and residential child care programs often share some attributes of families but are not families for the purpose of determining how they shall be assessed.

Whenever a facility report is accepted, the safety of the child and the need for immediate medical examination or treatment related to the reason for the report shall be completed; however a family based assessment (Safety Assessment, Risk Assessment and Family Based Assessment Summary) is not required.

2224 Joint Investigations with KDHE and/or Local Health Departments

Joint investigations with KDHE and/or local health departments are encouraged, especially in cases of serious abuse. The unavailability of a representative from these agencies shall not delay an SRS response.

The investigation of complaints concerning child care facilities must be conducted in a manner that ensures an independent and objective investigation and assessment. However, if there is a conflict between child safety and providing for a strictly "objective" investigation, the safety of children takes precedence.

2225 Joint Investigations With SRS Child Care Provider Manager

SRS Child Care Provider Manager or contracting/monitoring staff may be asked to assist in the investigation whenever appropriate.

2230 Investigation of Reports of Abuse or Neglect by Person Other than a Parent, Relative, Custodian/Care Giver or Household Member ("Third Party")

The Kansas Code for Care of Children provides that SRS and law enforcement officers have the duty to receive and investigate reports of child abuse or neglect for the purpose of determining whether the report is valid and whether action is required to protect the child from further abuse or neglect. The law is silent regarding the relationship between the child and the alleged or suspected perpetrator.

Where practicable, written joint procedures shall be developed by SRS and local law enforcement agencies regarding receiving and investigating non-family/unregulated care giver reports. It is the policy of the Department of Social and Rehabilitation Services to receive and investigate reports which meet the definition of child abuse or neglect unless a law enforcement officer has accepted or will accept the report for investigation. The department will assist a law enforcement officer in the investigation and assessment of reports of child abuse or neglect upon request of the officer. Persons to whom this section applies includes, but is not limited to, alleged abuse or neglect by:

A. Teachers, administrators, or other employees of a school, other than a home school, in which a child who is the subject of a report of abuse or neglect is enrolled or attends.

B. Employees and administrators of recreational and/or character building organizations in which a child who is the subject of a report of abuse or neglect participates.

C. Baby sitters.

D. Acquaintances of the child/family.
E. Strangers.

2231 Case Opening in Non-Family/Unregulated Care Giver Cases

If SRS accepts a non-family/unregulated care giver report for investigation and assessment or assists law enforcement with an investigation, a case shall be opened. A non-family/unregulated care giver case is opened in FACTS for each family in which there is a child who is alleged to have been abused or neglected. If there is evidence or suspicion of parental involvement or failure to protect the child, a separate report should be initiated regarding the parental action or inaction.

2232 Investigative Documentation of Non-Family/Unregulated Care Giver Reports

Documentation of the assessment of non-family/unregulated care giver reports shall include:

A. Form CFS 1004, "Agency Response - Facility and Third Party Reports"
B. CFS 2011, Case Finding
C. CFS 2012, Notice of Department Finding

2233 Assessment Documentation of Non-Family/Unregulated Care Giver Reports

Whenever a non-family/unregulated care giver report is accepted, the safety of the child and the need for immediate medical examination or treatment related to the reason for the report shall be completed; however, a family based assessment (Safety Assessment, Risk Assessment and Family Based Assessment Summary) is not required.

2240 Requests for a County or District Attorney to Direct an Investigation

It should be rare for SRS and a law enforcement agency not to reach agreement on joint procedures for accepting reports of child abuse or neglect or in individual situations involving such reports. If agreement cannot be reached; however, and if the safety of a child cannot be assured, the county or district attorney may be requested to resolve the issue. A request to the county or district attorney in such situations shall only be

pursued upon approval by the Area Director or CFS Program Administrator after consultation with the SRS Area Attorney.

2250 Investigations of Reports of Abuse or Neglect regarding Native American Children

If, during the investigation of a report of child abuse or neglect, information is obtained which indicates that a child is or may be a member of an Native American tribe or eligible for tribal membership, that fact and available supporting information shall be documented in the case record.

When conducting an investigation involving a Native American family, the family shall be informed that they may request a Native American interpreter. Assessment of the family must take into account the prevailing social and cultural conditions and way of life of the Native American community.

2260 Reports Involving the Medical Neglect of Disabled Infants with Life Threatening Conditions ("Baby Doe")

Kansas Administrative Regulations 30-45-10 et seq. requires specific procedures for the investigation of medical neglect of disabled infants with life-threatening conditions.

Disabled Infant means a child less than one year of age who has been continuously hospitalized since birth, whose birth was extremely premature, or who has a long-term disability.

Medical Neglect includes but is not limited to, the withholding of medically indicated treatment from a disabled infant with a life-threatening condition.

Withholding medically indicated treatment means failure to provide treatment which, in the treating physician’s reasonable medical judgment, is most likely to ameliorate or correct all life threatening conditions, except when the treatment would be futile in terms of survival of the infant and the treatment itself under such circumstances would be inhumane. Withholding medically indicated treatment always includes failure to provide appropriate nutrition, hydration or medication.

2262 Response to "Baby Doe" Reports

Upon receipt of a report of a disabled infant with a life threatening condition, the worker shall treat the case as an emergency and shall:

A. Conduct a Preliminary Inquiry. Contact the facility where the child is located or being treated and ascertain the current medical condition of the infant, the name of attending physician, the name of the contact person for the hospital's medical ethics committee (if any, and any other available pertinent information.

B. Notify the parent, care giver or legal guardian of the allegations of the report if such person is not the reporter.

C. Contact the hospital medical ethics review committee at the facility housing the infant to obtain the committee's findings. If no hospital medical ethics review committee exists, contact the nearest Level III Perinatal Care Center. (When an independent medical examination is needed for an infant already in a Level III Center, the request should be directed to another Level III facility.) Requests should be made to:

University of Kansas Medical Center
Pediatric Department, Division of Neonatology
3900 Rainbow Blvd.
Kansas City, Kansas 66103
Telephone: 913/588-6337 (day)
913/588-6350 (night)
OR
Wesley Medical Center
Division of Perinatal Medicine
550 North Hillside
Wichita, Kansas 67214
Telephone: 316/688-2300

D. If the report otherwise meets department policies regarding case acceptance, accept the report as alleged or suspected medical neglect. The report should be assigned a "same day" response time. If there is credible evidence medically indicated treatment will not be withheld within 72 hours, a 72 hour response time may be assigned.

2310 Safety Determination at Initial Contact

When a report alleging abuse or neglect has been assigned for investigation/assessment, the safety of the child who is the subject of the report must be determined within the response time established on the form CFS 1002, Response Determination.

The SRS social worker shall determine safety of the child(ren) who is the subject of the assigned report. Determining the safety of the child requires a face to face contact with the child by an SRS social worker or authorized collateral, i.e., child protective service special investigator, law enforcement officer or licensed child welfare case management provider assigned case responsibility, who shall provide information to the SRS social worker who shall consider the information to determine the safety of the child.

2311 Documenting Safety Determination

The basis for the determination of safety shall be documented on the CFS 2030 A, Agency Response for reports that involve intra familial allegations, or the CFS 1004 for reports involving allegations of non-family/unregulated care giver as perpetrators or incidents in a facility.

2312 Reasonable Efforts to Determine Safety

SRS shall make a reasonable effort to determine the safety of a child.

Face to face contact with the child must be made in order to determine the child's safety. Telephone or letter contact is not sufficient. If information from an authorized collateral is used to ascertain safety, face to face contact must be made by the collateral. Reasonable effort is made if the worker attempted to contact the child in a location where it is reasonable to expect the child to be found. If the child is located, face to face contact must be made within the response time set. Two attempts must be made to satisfy the reasonable effort requirement. Either (1) two attempts within the response time set, OR (2) at least one attempt within the response time set and a second attempt by the close of business the next working day for a "same day" response time, or within 72 hours, excluding week-ends and state holidays, of the initial attempt on a 72 hour response time. If it is determined the child is not available due to allowable reasons, only one attempt is required.

Allowable reasons for not determining the safety of a child within the response time include:

A. Cannot locate the child despite reasonable efforts

B. Family left the state

C. SRS has been directed not to proceed by county/district attorney or law enforcement

D. Family refuses to cooperate

E. Appointments were scheduled but the person(s) failed to keep the appointment

F. Act of God (weather, road conditions)

G. Parents refused access to the child

H. Child(ren) out of state - i.e. visiting relatives

I. Child is currently hospitalized and hospital personnel verified the child will not be dismissed prior to face to face visit being arranged.

J. When the safety and best interest of a child requires an exception from the CFS program administrator to a response time and not solely for the convenience of the agency or another entity.

Allowable reasons apply only to whether a Time line requirement can be met. If the person to be interviewed can be located or made available, the investigation and/or protective action should be carried out. (Example: The parents missed a scheduled appointment causing the face to face contact to be delayed but the investigation will continue.)

SRS should honor a request from a law enforcement agency not to take an action which would interfere with a criminal investigation. Such request, however, does not relieve SRS or the law enforcement agency of the responsibility to determine the safety of a child reported as possibly abused or neglected. If the timing of the investigations cannot be resolved, the county or district attorney shall be contacted.

If unable to determine the safety of the child within the response time set, include the reason the contact was not made and the attempts to locate the child (date and results). Attempts to contact the child and determine safety are documented on form CFS 2030 A, Section I: (E), Agency Response. Exceptions to timelines or allowable reasons shall also be documented on the CFS 2030A, Section I (E).

2313 Ongoing Safety Assessment of Children Under Six Years of Age

When a report alleges abuse/neglect of a child under the age of six years old, a second contact with the child within 10 working days of the initial safety determination is required. The subsequent contact is for the purpose of ongoing safety assessment and shall require face to face interaction with the alleged victim who is under six years old. Whenever possible this contact shall occur in the child's home.

The contact shall be documented on the Agency Response,2030A, Section I. Sub-sections F. and G. are not required for the second visit with the child in the home. Any safety concerns shall be noted on the safety assessment and addressed in the safety plan.

2320 Other Children Under the Same Care

When there are reasonable grounds to believe abuse or neglect exists, immediate steps shall be taken to protect the health and welfare of the child as well as that of any other child under the same care. K.S.A. 38-2230.

When, during the course of an investigation/assessment of a report, there is reason to believe that other children under the same care are victims of the assigned allegations in that report, this is to be added to the current investigation and does not require a new report.

2400 Safety Assessment

A safety assessment is a structured method of evaluating potential danger to a child. The assessment tool is designed to determine whether imminent danger exists for a child. It is used when considering whether a child should return home from protective custody as well as to determine whether the child may safely remain in the home. The Safety Assessment documents consideration of safety factors, immediate medical concerns, protective action, and the safety decision. The Safety Assessment is completed by an SRS social worker and may be used at any major decision point in a case.

2410 When a Safety Assessment is Required

A Safety Assessment shall be completed for all cases assigned for investigation/assessment of abuse/neglect which require a Family Based Assessment. A safety assessment may be completed at any major decision point in a case.

The Safety Assessment is a required part of the family based assessment for all abuse/neglect cases.

2420 Time Lines For Completion of a Safety Assessment

Whenever possible the Safety Assessment shall be completed within the response time for determining the safety of a child. A Safety Assessment must be completed before:

A. a referral to a Family Preservation or Foster Care Contractor

B. a family service case is opened

C. a request for an ex parte order or police protective custody

D. a referral to the county/district attorney requesting the filing of a child in need of care petition

E. a case finding is made.

2430 Documenting the Safety Assessment

Safety assessments shall be documented on form CFS 2030B. If unable to complete the safety assessment for allowable reasons, document the attempts and the reason the attempts were unsuccessful. Allowable reasons for not completing the safety assessment include:

A. Family refused to cooperate and police assistance or court order could not be obtained timely

B. SRS was directed not to proceed by a county or district attorney or law enforcement

When some but not all members of the family are unable to be located or the family cannot be located once the assessment has begun, the safety assessment and safety decision should be completed based on the information available.

The documentation of the Safety Assessment shall be done on the CFS 2030B. A printed form is the official copy and shall be in the case record.

Prior to completing the Safety Assessment, CFS 2030B, the CFS social worker shall review KIDS and FACTS for agency history on all caregivers and the alleged perpetrator. In addition to agency history, the caregivers and alleged perpetrator shall be searched on Central Registry, the Kansas Department of Corrections website , the Kansas Sex Offender website, the National Sex Offender website http://www.accesskansas.org/kbi/ro.shtml and local court databases, where available.

When all history is reviewed, the history shall be documented along with information gathered from interviews and observations on the CFS 2030B. Historical information on caregivers and alleged perpetrators shall be documented in Section 1, number 10. Documentation shall clearly state the name of the person searched, the date the search was conducted, the database or website searched and what the search yielded, including if no history is found.

Information from the Safety Assessment shall be reviewed with the supervisor within 10 working days of the initial contact with the alleged victim. If there are multiple alleged victims in an event, the timeline for the 10 working days begins the day after the first alleged victim is contacted.

2431 Imminent Danger Type and Other Safety Factors to Consider

Imminent Danger types correspond with the abuse and neglect allegation types. Each danger type or Other Safety Factor identified with a "yes" shall be documented to justify the immediate danger and safety factor presenting a danger. The documented description shall include but not limited to: the type of danger, circumstances or surroundings presenting danger to the child; and the frequency of the incident. Danger types related to the allegation type assigned on the intake which are met with a "no" shall be qualified to indicate why the allegations assigned do not present a danger to the child.

2432 Protective Action Responses

For each Imminent Danger Type and Other Safety Factor identified, the social worker will assess the family and child to assess protective factors to mitigate the risk of the identified Imminent Danger Types or Safety Factors. The social worker shall consider the following actions and resources available to the family as protective factors:

A. family resources

B. the natural supports of the family, friends, extended family, neighbors or other individuals in the community

C. community agencies or services available or being utilized by the family

D. parent's willingness to seek or receive supports from individuals or agencies

E. assistive technology and other supports available to parents with disabilities

F. alleged perpetrator leaves the home voluntarily

G. non-maltreating care giver and child move to a safer environment

A careful assessment of the protective factors available within and to the family provides the basis of the safety plan if conditionally safe is the Safety Decision. The assessment of potential protective factors is also critical to answering the questions required to achieve an Unsafe Decision.

2440 Safety Decision

The social worker shall assess whether imminent danger is present, and, if so, the family's ability to address the danger and shall conclude one of the following safety levels on form CFS 2030 B, Section IV:

Safe: There is no indication of a child at risk of harm. The family has no need for any level of department intervention to secure the child's safety.

Conditionally Safe: Controlling safety interventions have been taken since the intake received, and those interventions have resolved the unsafe situation for the present time.

The family or another agency has taken steps to alleviate the immediate danger prior to the Departments involvement. The action taken shall be documented on the safety Assessment. If the department is recommending steps to the family to alleviate the immediate danger, a Family Based Safety Plan CFS 2003 must be completed. See PPM 2462 for Safety Planning.

Unsafe: One or more children are in danger of immediate harm. The child's safety cannot be ensured without protective intervention.

Completion of the questions necessary to request an ex-parte court order/police protective custody order is REQUIRED in order to determine if the child is unsafe or prior to the child being currently in protective custody.

2542 Recommend Services on Notices of Department Finding for Family Reports

Based on the assessments completed with the family the Notice of Department Finding may also include the recommend services regardless if the case finding is unsubstantiated or substantiated. If the social worker is recommending services to the family, a full risk assessment shall be completed.
If the social worker's assessment indicates risks to child's safety could be addressed with services, the notice shall include:

A. specific services recommend or the identified need to be addressed by services

B. any information or resources for family to obtain the services, including information regarding services available from SRS or other community agencies.

2450 Medical Examination or Treatment Related to Abuse/Neglect

When it is determined medical services related to abuse/neglect are needed by a child who is the subject of an abuse/neglect report, reasonable actions shall be taken to obtain medical treatment. A determination of the need for medical services must be made and documented on the CFS 2030 B, Safety Assessment.

If a social worker determines a child is in need of a medical examination or treatment and the child's parents fail or refuse to obtain a medical examination the social worker should take the actions a reasonable person would take in similar circumstances. The policy requiring the department to seek medical care applies to medical needs resulting from suspected child abuse or neglect only. The department is not responsible to try to meet other medical needs of the child (such as immunizations or eyeglasses) unless failure to meet such needs constitute neglect.

Non Emergencies: A worker may wish to seek advice from a medical practitioner before taking next steps. The cooperation of a parent should be sought. If they cannot or will not cooperate, an explanation of the responsibility of the department to obtain the information and the alternatives available should be made.

Emergencies: If immediate action is required to save a life, to treat serious or painful injury or if action is needed to preserve evidence that would otherwise be lost or unobtainable, the social worker should initiate prompt action. Prompt action includes:

A. The social worker requests the parent take the child immediately for examination or treatment, explains the consequences of failure to do so, and the parent complies.

B. The assistance of a law enforcement officer is requested to take the child into protective custody and transport the child to medical care.

C. The assistance of the County or District Attorney is sought in obtaining a court order directing medical care be provided.

If a parent is unwilling or unable to pay for a medical examination or treatment for a child alleged to be abused or neglected, check with Economic and Employment Support to determine if the child has, or is eligible for, a medical card.

Authorize payment if the family is not eligible for Medical Assistance. Refer to section 2910 for payment procedures.

2460 Safety Action

Action must be taken to protect the safety of a child. Various controlling safety interventions and protective actions taken by the family or SRS, may occur to ensure immediate safety of a child. Controlling safety interventions and protective interventions are to be documented on the CFS 2030 B, Safety Assessment. The SRS social worker's or supervisor's input and approval is required if the safety plan is being initiated by a child protection special investigator.

2461 Controlling Safety Interventions

Courses of action to assist the family in alleviating immediate danger include, but are not limited to:

A. Development of a Family Safety Plan;

B. Alleged perpetrator voluntarily leaves the home /premises;

C. Alleged perpetrator is removed by a Protection from Abuse action;

D. Alleged perpetrator is arrested/incarcerated;

E. SRS family services;

F. SRS referral to community service or Family Preservation contractor.

2462 Family Safety Planning

The family safety plan is a temporary, short-term plan to keep the child and other members of the family safe while more permanent safety provisions can be put in place. The safety plan may be used pending referral to family preservation or other services or to provide short-term care to avoid unnecessary removal of a child from the child's home.

The family safety plan should be used whenever such a plan will enhance family safety and only when it is reasonable to believe safety can be achieved through the plan. The safety plan may have useful application in an assessment assigned for any allegation or

presenting situation. For families whose presenting concern to the agency was for a reason other than abuse or neglect, the plan should only be used to address safety issues affecting the family, such as behavior of a child or youth that can be harmful to self or others.

In order to be effective, all individuals who are necessary to the safety plan, must be able and willing to cooperate in carrying out the plan and should be involved in the planning. A Family Safety Plan empowers the family to remain responsible for their lives, avoids resistance by the family to externally imposed conditions, and can be used as an assessment tool to help the social worker and the family decide together whether change is possible.

A. Documenting the Family Safety Plan

The Family Safety Plan is documented on the CFS 2003.

B. Safety Factors to be Considered

In considering if a safety plan is appropriate, the factors listed below must be considered and documented on the CFS 2003. The factors are listed to assure each is considered in deciding whether and when to develop a safety plan. Not all factors may be present in every situation. Other factors, not listed, may also be considered:

1. Harm to child caused by removal from home: This factor is placed first in the list to encourage workers to first consider possible unintended consequences of the removal of a child from his or her family, friends, familiar surroundings, possessions, and predictable circumstances. There are times when removal is the best course of action among several undesirable alternatives. Remember, however, no removal is without an emotional price for the child.

2. Severity of danger: Not all situations are equally dangerous. Assess the potential seriousness of the situation. Reference to form CFS 2030 B, Safety Assessment, may be a useful guide.

3. Child's or others' ability to protect child: Children are never responsible for their own protection. Older children, however, may have a greater ability to avoid harmful situations or carry out plans to get help. The ability and likelihood that the adults will protect the child is a factor in developing a safety plan or requesting alternate courses of action.

4. Perpetrator's access to child and the non abusing parent's ability to protect the child.

5. Child's behavior: Care and protection of children is an adult responsibility. Children are never responsible for having been abused. The behavior of children can, however, be a factor in the family history or dynamics or chain of events which is important to the cycle of violence. A careful and sympathetic understanding of problems faced by abusing or neglectful parents is essential in making short or long term plans to protect the child.

6. Family isolation: Families may be isolated geographically (e.g., a distance from neighbors or someone from whom to seek help) or socially (e.g., few friends or extended family or community ties). In some cases a family member may dominate and control contacts outside the family. All of these issues, especially the latter, need to be carefully assessed when considering whether a family safety plan is feasible.

7. Family's ability to participate in plan: The family should be assessed for strengths (e.g., strong bonds, pride, history of accomplishment) which would indicate an ability to participate in a plan. Negative indicators might include: severe and chronic impairment of functioning due to mental illness, alcohol or other drug abuse, a long history of family violence, or rigid belief systems (e.g., cult-like religious beliefs, extreme anti-government feelings).

8. Medical needs of child: For a safety plan to work there must be agreement on obtaining care for any acute medical condition.

However, medical needs which can wait until longer term assessment and planning occurs need not prevent the development of the safety plan.

C. Development of the Safety Plan

Safety plans must be developed in conjunction with the child's family and any other persons required to carry out the plan. Decisions regarding the identification of those persons to include in the safety plan will depend on the type of allegation and steps required to ensure safety.

Safety Plans are interim plans. A maximum time is 45 working days. As a rule, plans will range from a few hours to a few days, depending on the family's assessed ability to carry out the plan and availability of resources. The end-date is determined by the beginning date of the next action to be taken. If next steps are not known, a Safety Plan may not be appropriate.

Tasks and Services: Tasks and services statements should:

1. Address the imminent danger to the child
2. Have agreement from all parties necessary to achieve compliance.
3. Contain statements that are in clear and understandable language. (Professional terms and "buzz words" should be avoided).
4. Address measurable or observable behaviors and criteria for determining when the tasks are achieved
5. Describe the possible outcomes that can result from achievement or failure to achieve the conditions of the plan.

Action Needed to Meet Tasks: The actions statement must address who, what and when and should include:

6. Each member of the family willing to participate.
7. Actions appropriate to the behavioral/developmental level of the participants.
8. A backup plan in the event the primary plan is not sufficient.

Signatures: All participating individuals must sign and signatures must be voluntary. If not, a safety plan is not appropriate. The family is to be given a copy of the plan.

Example:

TASKS:
Kevin (6 month old infant) will be cared for and supervised by a responsible adult at all times.

Cheryl (18 year old unmarried mother) will be sober and not on drugs when caring for Kevin.

ACTION NEEDED:
Cheryl agrees to leave Kevin in the care of Gina (Cheryl's mother), Kyle (father-not in home) or Mrs. Gustafson (neighbor). Kevin will not be left with anyone else unless Cheryl has OK from Gina.

Cheryl agrees not to have any non prescription drugs in her house at any time.

Cheryl agrees to apply for admission to the Mountain Top rehab program before next Monday (date). Kyle will provide transportation.

Gina will call Cheryl twice a day or drop-in to see if plan is being carried out.

Cheryl may call worker at 555-1212 if she needs help.

Gina or Kyle are to call worker if plan is not working. If worker is not available, call 555-1213 and ask for Beth.

2463 Removal of Perpetrator

When the safety of a child cannot be reasonably assured, removal of the perpetrator from contact with the child should be considered before removing the child. Removal of the perpetrator can be voluntary or obtained through provisions of the Kansas Protection From Abuse Act, or Code for Care of Children.

Voluntary Removal of the Perpetrator

Voluntary removal of the perpetrator can be considered when it is a part of a family safety plan and:

A. There is reason to believe the alleged perpetrator will honor the agreement for removal;

B. There is a care giver willing and able to keep the terms of the agreement and protect the child if the agreement is not kept; and

C. The safety plan includes actions which will be taken if the agreement is not kept.

Kansas Protection From Abuse Act

A member of a household 18 years of age or older may apply to a court for the removal of a household member who is abusing or attempting to abuse or threatening harm to another member of the household [K.S.A. 60-3101 and following].

2464 Service Actions

To alleviate immediate safety risk, SRS may provide direct service, assist the family in receiving services in the community, or make a referral to the Family Preservation Contractor.

2470 Protective Intervention

When controlling intervention to ensure the safety of child can not be met and the child is unsafe, courses of protective action include:

A. Child taken into Police Protective Custody

B. Ex Parte Court Order of protective custody is obtained and child removed from home.

2471 Requests for Police Protective Custody

When the safety of a child cannot be reasonably assured without removal of the child or the alleged perpetrator and removal of the perpetrator from contact with the child is not feasible, a law enforcement officer should be contacted to determine whether, in the officer's opinion, the child should be removed from the home and placed in police protective custody.

The law enforcement officer should deliver the child to a safe environment according to local arrangements. An SRS employee is not authorized to take physical custody of or transport a child without a written order of a court placing the child in the custody of the Secretary of SRS. A child not in the custody of the Secretary may be transported by SRS if a parent voluntarily accompanies the child or the parent provides written parental permission.

Only a law enforcement officer, court services officer, or the court has the authority to place a child in protective custody. When a law enforcement officer determines that protective custody is appropriate, the officer, not SRS, should place the child as provided by statute (K.S.A. 38-2231). It is important to remember that SRS staff do not have authority to transport a child placed in protective custody by a law enforcement officer. If SRS staff were to transport a child in the protective custody of law enforcement a potential legal liability exists for the department and the individual. A law enforcement officer or the designated care provider with whom the police placed the child may transport the child.

2472 Requests to County or District Attorney for Order of Protective Custody

The department shall not seek custody of a child unless it is determined that the child cannot remain safely at home. CFS social workers shall obtain approval from their supervisor or designee prior to requesting an ex parte or temporary custody order from the County or District Attorney.

The criteria for requesting law enforcement protective custody or an ex parte order to SRS is documented on the CFS 2030 B, Safety Assessment, Section IV. All three of the following questions must be answered yes or the child has been abandoned before protective custody is sought.

Is the child in imminent danger?
Imminent danger means a danger which is about to happen. Imminent implies more than speculation but less than certainty. An event is imminent if a reasonable person using common sense, training or experience concludes an event will occur without delay unless there is prompt intervention. Usually, this means "until actions can be taken which can reasonably ensure the child's safety". The danger refers to any physical injury or other act which will so traumatize the child as not to be reversible. Fear alone is not reason to request protective custody unless it is extreme the child's fear of not being placed in protective custody is likely to result in long-term serious harm.

Abandonment means "to forsake, desert or cease providing care for the child without making appropriate provisions for substitute care." For purposes of determining whether a child has been abandoned, the following guidelines are provided:

> A child has been forsaken or deserted if the whereabouts of both parents is unknown after reasonable efforts to locate them or there is credible evidence of a parent's stated or apparent intent not to resume the relationship with the child. If either parent is willing to accept care of the child, the child is not abandoned.

A parent has not made adequate provisions for substitute care if the parent:

A. Has failed or refused to care for the child for a period of time which is inconsistent with the child's condition or developmental status;

B. has failed or refused to provide adequate care for the child by an alternative care giver; or

C. the child was placed by a parent in the care of a person who is unwilling or unable to continue the care of the child, and the parent has failed or refused to resume care of the child for a period of time which is inconsistent with the child's age, condition or developmental status.

Non-abusing parent is unable to protect child:
Inability may be due to drug/alcohol dependency, physical and/or mental impairment, inability to protect self from abuse, or unwillingness.

Alleged perpetrator has access to child:
Access can include residing in the same home and unwilling to leave, refusal of family members to seek court order excluding alleged perpetrator, parent or other care giver not believing the child, custodial orders, and similar reasons.

2473 72 hour Protective Custody Hearing

When SRS receives an intake indicating a child has been placed in protective custody by law enforcement or an ex parte order, the assigned social worker shall use the time available prior to the Protective Custody Hearing to exhaust all options to keep the child safely in their own home. The options considered for preventing out of home placement shall include but are not limited to: removal of the perpetrator, a safety plan to address the identified safety factors, identifying relatives or kinship resources, referral to family services or family preservation services.

If the child is not part of a current open case, the assigned social worker shall complete a safety and risk assessment for abuse/neglect allegations or a CINC:NAN assessment for CINC:NAN allegations. The assessment shall include information from the parents including identity of potential relatives or kinship resources and what the family needs to keep the child safe in their home, Additional sources of information for the assessment shall include other care givers, child, relatives or other kinship resources, juvenile intake and assessment, schools, other service providers and current protective custody care giver or emergency shelters, as applicable.

If the child is currently part of an open case, information may be obtained from the sources listed above, as well as the family's history with SRS.

The assessment and/or recommendations shall be provided to the court at the time of Protective Custody Hearing. The recommendations made to the court and the outcome of the court hearing shall be documented in the SRS case file.

2474 Removal of Child From a Family Foster Home or Residential Facility

It is the policy of the department that a decision whether to remove a child who is in the custody of the Secretary of SRS from a foster home or residential facility (temporarily or permanently) should be based on the best interests of the child.

SRS does not have the authority to move a child who is placed with a relative or has been in a placement 6 months or more without court approval except for move to a prospective adoptive home. (K.S.A. 38-2258, 2259). If emergency removal is necessary, notify the court of jurisdiction within 24 hours and document the reasons in the case record. This provision doesn't apply when the child is to return home. When the child is being moved to live with a parent, the court must be notified pursuant to K.S.A. 38-2255(c)(2) at least 14 calendar days in advance of the planned placement with a parent. The notice shall state the basis for belief that placement with a parent is no longer contrary to the welfare or best interests of the child. If the court sets a hearing, the child shall not be returned home without the written consent of the court.

2475 Removal of Child From a Day Care Home or Center

Unless a child is in the custody of the Secretary of SRS, removal of a child from an unsafe day care home or center is the responsibility of the child's parents. If a parent chooses not to remove a child from a facility which is deemed unsafe by the department, any concerned person may report the matter for determination whether the child may be a child in need of care.

2500 Case Finding Resulting from an Investigation of Alleged Abuse or Neglect

The purpose of the case finding is to determine if the identified perpetrator should be permitted to reside, work, or regularly volunteer in a child care facility.

A case "finding" must be completed for each assigned allegation associated with a child alleged or suspected to have been abused or neglected. The social worker, in consultation with the social work supervisor or designee, See PPM 0140), shall make the finding decision based on information gathered by the social worker or special investigator during investigatory activities. The decision is based on a combination of factual information, professional judgment and applying the definition of abuse/neglect. A case finding is not required on a child in need of care non abuse/neglect report. An assessment of the family is completed to determine if the family is in need of services.

2502 Allowable Case Findings

A. Unsubstantiated
The facts or circumstances do not provide clear and convincing evidence to meet the KSA and KAR definition of abuse or neglect.

B. Substantiated
The facts and circumstances provide clear and convincing evidence to conclude the alleged perpetrator's actions or inactions meet the KSA and KAR definition of abuse or neglect and, therefore, alleged perpetrator should not be permitted to reside, work, or regularly volunteer in a child care facility regulated by KDHE.

The following circumstances may indicate the perpetrator should not be permitted to reside, work, or regularly volunteer in a KDHE regulated child care facility and result in a substantiated case finding:

1. Results in death or physical injury. Physical injury could include, but is not limited to; fractures, bruises on child's face, head, abdomen, bruises of different shades indicating a pattern of abuse, bruises with distinct shapes indicating use of objects (belt, cords, whips, sticks), injury requiring medical care, burns, injury resulting in severe or prolonged pain, injury which interferes with normal activity, multiple significant injuries.

2. Requires hospitalization (admission for treatment or observation, whether received or not).

3. Requires surgery or medical treatment (whether received or not) of injuries which are disfiguring or which inflicts severe pain or prolonged or repetitive pain.

4. Results in serious or permanent impairment of the child's emotional, intellectual or social development or functioning.

5. Results in any contact or interaction with a child in which the child is being used for the sexual stimulation of the perpetrator, the child or another person, including allowing, permitting or encouraging a child to engage in prostitution or to be photographed, filmed or depicted in obscene or pornographic material.

6. Results in the child being abandoned by forsaking, deserting or ceasing to provide care for the child without making appropriate provisions for substitute care under circumstances which exposed the child to a risk of death or serious permanent injury.

7. Would likely have resulted in any of the outcomes in the first six bullets above except discovery or intervention or accidental circumstances intervened.

8. Exhibits a pattern of continuing, repeated, or progressively more severe behavior. For purposes of determining whether a pattern exists, verified information from Kansas or any other state, federal enclave or Native American tribe or association using the standards of that state or entity. This may include Substantiated or Unsubstantiated findings from Kansas, the prior state, federal enclave, or Native American tribe or association. Verified evidence of a prior conviction of a crime against a child may also be considered when determining if a pattern of abuse or neglect exists.

9. Results in harm, imminent safety risks or health risks according to the definition of physical neglect, medical neglect and lack of supervision. Harm and imminent safety or health risk, may include, but are not limited to; hospitalization for failure to thrive, structural hazards in the home accessible to the child (exposed wiring, holes in floors or walls), or manufacturing methamphetamine in the child's environment.

10. Results in having substantially same effect as above.

2510 Family Cases

In family case the perpetrator is the parent of the child or other adult residing in the home.

2511 Case Finding Decision Points for Family Reports

A. A case finding decision is made weighing the facts and circumstances learned during the investigation and assessment. The facts and circumstances shall provide clear and convincing evidence of abuse and neglect as identified in the definitions in order to consider a substantiated case finding.

B. The same case finding will be made on the incident (or child) and the perpetrator. If the information gathered during an investigation provides clear and convincing evidence to substantiate abuse/neglect toward a child occurred and clear and convincing evidence the person who caused the abuse/neglect, a substantiated finding results on the incident (or child) and the perpetrator. If there is no substantiated finding regarding a child, no substantiated finding can be made regarding a perpetrator.

C. In the rare event where there is clear and convincing evidence for abuse/neglect but evidence to identify the perpetrator is not clear and convincing, a substantiated finding is made on a child victim and the perpetrator as unknown.

D. A finding of unsubstantiated or substantiated is made only on the alleged victims who have been interviewed face to face. As long as one contact was made with the alleged victim, a finding of unsubstantiated or substantiated is made based on information

available. For the alleged victims which were not located, "unable to locate" should be selected as the status in the Finding Type field on the KIDS application.

E. A case finding shall be made within 25 working days from the date the report was accepted for assessment unless a delay is requested by law enforcement, a county or district attorney, the court, health care professionals, mental health professionals or for similar exceptional circumstances documented in the case file. Failure to receive medical or mental health information which has been requested from professionals or other relevant person may be considered an exceptional circumstance justifying a delay in finding. If requested information is not received, the social work supervisor will review the information every 60 days to determine if additional time should be allowed and document such decision in the case file. A licensed social worker may be designated for the social work supervisor's absence.

F. A substantiated finding on the perpetrator cannot be made unless the alleged perpetrator has been afforded the opportunity to be interviewed by SRS, a law enforcement officer or a duly appointed member of a multi-disciplinary child protection team. If the whereabouts of an alleged perpetrator is not known, the opportunity to be interviewed may be documented by sending a letter offering an interview to the alleged perpetrator's last known address.

G. A finding of abuse or neglect may be made on the perpetrator and victim in the following situations:
if the incident occurred in Kansas, regardless of where the victim is currently found or resides, or

1. if the incident occurred in Kansas, regardless of where the perpetrator is currently found or resides, or
2. if the child resides in Kansas or is found in Kansas, regardless of where the incident occurred.

H. A minor shall be substantiated only if the criteria for substantiation has been met and the child perpetrator is at least 10 years old.

I. Upon investigation, if the facts and circumstances indicate a substantiated finding on different allegation type from the allegation type identified on the CFS-1002 Response Determination, a substantiated finding shall be made on the allegation type that best describes the facts and circumstances. On the CFS-2011 Case Finding, an unsubstantiated finding shall be made on the assigned allegations type. An additional allegation type shall be added for a substantiated finding based on the results of the investigation. The allegation type resulting in the substantiated finding shall be added, dated and initialed by the social worker to the CFS-1002 Response Determination. See PPM 2842 for FACTS instructions..

2520 Facility Reports

In facility reports the alleged perpetrator is a foster parent, child care provider, employee in a facility or another care giver other than the child's parents.

2521 Case Finding Decision Points for Facility Reports

A. For the purposes of case findings, a KDHE approved foster home meeting licensing standards is subject to the same policy and procedures as a licensed foster home.
B. If a person voluntarily surrenders a license or registration to provide child care or voluntarily agrees to cease providing exempt care under approval status, the investigation shall continue. The investigation shall determine the safety of any children involved and include a case finding decision. Information gathered during the course of the SRS investigation shall be forwarded to KDHE with the CFS 2016.
C. When during the course of an investigation SRS determines a child may have experienced serious physical harm, serious deterioration, or sexual abuse, SRS shall request KDHE's consideration to suspend the license, certificate of registration or temporary permit of the child care facility or family day care home. This request shall be made utilizing the CFS 2016.

2522 Case Findings When the Perpetrator Works, Resides or Volunteers in a Home or Facility Subject to Licensure by the Kansas Department of Health and Environment

A finding pertaining to a perpetrator is made regarding a person, not the facility. If abuse or neglect occurs in a facility and there are management or procedural actions or inactions which allowed it to occur, a referral must be made to KDHE for an investigation regarding any violations to the license or registration and to SRS child care for investigation regarding the provider agreement.

This section does not apply to a person, under the age of 18 and in state custody, residing in the home.

If the abuse or neglect took place in a facility subject to regulation by the Kansas Department of Health and Environment, the following policies and procedures apply:

- The CFS-2016, page 2, Complaint Report Facility Subject to Regulation by KDHE, is completed and sent to KDHE upon the completion of an investigation. Section IV shall contain any specific recommendations to be addressed in a Corrective Action Plan completed by KDHE.

2530 Documenting the Case Finding

The social worker, in consultation with the social work supervisor (or designee, see PPM 0140), shall make the finding decision. The case findings shall be documented on the CFS 2011, Case Findings. Case findings are reported in the FACTS database which provides management and statistical information for the department, state and federal government legislative and oversight groups and for the general public. The case finding is also recorded on the CFS 2030F, Family Based Assessment, for cases requiring an FBA.

2531 Basis for Finding

The basis for decision should document for someone unfamiliar with the investigation why the evidence supports the finding decision. The basis shall include rationale on which the case finding decision is based, the "why" of the finding decision, as related to the specific facts considered from the investigation and assessment. This includes addressing ALL allegations from the CFS-1002, Response Determination and the facts resulting from the investigation.

Examples of specific facts to be considered and documented within the basis, as it applies to the circumstances, include, but not limited to:

> the child's age, child's condition, date of incident, detailed description and location of bruises/marks/injuries, how bruises/marks/injuries were determined to be caused, how it was determined the alleged perpetrator caused the injury, what was found or not found to be harmful to the child, child's reaction to the alleged incident(s), how the child's environment posed or did not pose a danger to the child, child and perpetrator disclosures related to the alleged incident(s), description of impairment to child, detailed description of any physical evidence found, any additional information to establish clear and convincing evidence.

Refer to Appendix 2B for suggested documentation per allegation type.

A. Unable to locate
If a finding hasn't been made due to not being able to located the child or perpetrator, the basis for finding should summarize attempts made to locate the involved parties.

B. Delay In Case Finding
If the case finding is delayed and the decision exceeds 25 working days from the date of acceptance, an explanation shall be given in the basis for decision on the CFS-2011. See PPM 2511 E for allowable reasons to delay a case finding.

2540 Notice of Department Finding

A. The Notice of Department Finding for reports is CFS 2012.

The Notice of Department Finding informs pertinent persons who have a need to know of the outcome of an investigation of child abuse/neglect. The Notice of Department Finding also provides persons information regarding the appeal process. The following persons shall receive a notice:

1. the parents of the child who was alleged to have been maltreated
Parents include the non-residential/custodial parent. The non-residential/custodial parent is to receive notice because they have equal rights and responsibilities for their child unless there is a court order abridging those rights through a divorce, parentage or CINC action.
2. If it is believed there are safety threats which may be realized if the non-residential/custodial parent receives a notice, the social worker in consultation with a social work supervisor (or designee, see PPM 0140) may determine that due to safety concerns a notice will not be sent.
3. child, as applicable if the child lives separate from the family
4. Child Welfare Case Management Provider if the family is receiving services from a CFS Child Welfare Case Management Provider
5. the director of the facility or the child placing agency of a foster home if abuse occurred in a facility or foster home.
6. KDHE if abuse occurred in a facility or a foster home
7. Director of SRS Licensed Facility, if abuse occurred in an SRS Licensed Facility
8. Director of Psychiatric Residential Treatment Facilities, if abuse/neglect occurred in an SRS Certified Facility
9. Regional SRS Mental Health Program Improvement field staff, if abuse/neglect occurred in an SRS Licensed or Certified Facility
The Notice of Department Finding shall be mailed on the same day, or the next working day, as the case finding decision, the date on the Case Finding CFS-2011.

B. Notice of Department Finding on all Case Findings
In order for the Notice of Department Finding ,CFS 2012 to be considered adequate notice, all Notices of Department Finding (unsubstantiated and substantiated) should contain information regarding the following:

1. Alleged Victim(s)
2. Alleged Perpetrator(s)
3. Allegation(s) that was assessed

C. Notice of Department Finding on Unsubstantiated Case Findings
If the case finding is unsubstantiated, the “Basis of Decision” section shall include only the following statement; “Facts and circumstances do not support a substantiated finding by clear and convincing evidence.”

D. Notice of Department Finding on Substantiated case findings
If the case finding decision is substantiated, the notice should also include:

1. Date of report
2. Use of language indicating the standard of evidence being clear and convincing
3. A specific reason for the Department's finding decision

2541 Circumstances requiring Separate Notices

The following circumstances may indicate a need to send separate notices:

A. Finding involves children in the home with different fathers (or mothers). Send a separate CFS-2012 to the parents not residing in the home which includes the finding related only to their children. The recommended services should only be included on the Notice of Department Finding as relevant to the perpetrator's children.
B. Finding involves a non-parent, non-care giver perpetrator or a perpetrator not residing in the home of the child. Send separate notices to the perpetrator if services are recommended. The notice to the perpetrator shall not include the services recommended to the family.
C. Finding involves multiple perpetrators who do not reside in the home. Send a separate CFS-2012 to the perpetrator that includes the finding related only to that perpetrator. The notice to the perpetrator shall not include the services recommended to the family
D. Finding involves multiple perpetrators in a facility. Send a separate CFS-2012 to the perpetrator that includes the finding related only to that perpetrator.
E. Finding involves a non-parent, non-care giver perpetrator or a perpetrator not residing the home of the child and the perpetrator does not know the identity of the victim. Send separate notices to the perpetrator omitting the name of the child victim.

2543 Substantiated Case Findings on Children Under the Age of Three

If a case finding is substantiated and the victim is a child under the age of three, the social worker shall make a referral to Kansas Infant-Toddler Services, the early intervention services funded under part C of the Individuals with Disabilities Education Act.

Procedures for making referral to Infant-Toddler Services

The social worker will send a referral to the local Infant-Toddler program via the Referral to Infant-Toddler Services CFS 2015 the same day or within one working day of the case finding decision.

The social worker to shall inform the parent of a referral made to the Infant-Toddler program by sending:

A. CFS 2012 Notice of Department Finding
B. CFS 2015 Referral to Infant-Toddler Services; and
C. Appendix 2D Information regarding Infant-Toddler Services

Contract information for the local Infant-Toddler program shall be added as indicated at the end of Appendix 2D. A brochure from the local Infant-Toddler program may be substituted for Appendix 2D.

Children in out of home placement

The referral for children in out of home placement shall be made by the SRS social worker sent to the county where the child is currently placed.

The Referral to Infant-Toddler Services CFS-2015 shall include the location of the child to the Infant-Toddler program. If the parents are unaware of the child's location, this information shall be removed from the parent's copy.

The Referral to Infant-Toddler Services CFS-2015 shall also be sent to the contracting agency providing the out of home services.

Previous referrals to Infant-Toddler Services

A referral shall be made to the Infant-Toddler Services each time a child under the age of three is substantiated. If the child is currently receiving Infant-Toddler services or if the child has been previously referred as a result of a substantiated finding, the referral shall be sent.

Location of parent and/or child is unknown

A referral shall be made to the Infant-Toddler Services when the whereabouts of the parent and/or child are unknown. The referral shall indicate the information to contact the parent and/or child is unknown.

Location of Infant-Toddler Services statewide

Programs available for each community can be located on the Kansas Department of Health and Environment website at http://www.kdhe.state.ks.us/its/index.html , click on Downloads and select Network Contact Information.

Additional information to Infant-Toddler Services

If the Infant-Toddler Services requests additional information regarding the family following the referral, a release of information signed by the family is required.

2544 Notification on Facility Reports

A. Electronic Notification of Reports to KDHE

Social Worker shall send all notices of the case finding decision to KDHE electronically according to the following procedures. The notice shall contain:

1. The Notice of Department Finding is CFS 2012.
2. Complaint Report: Facility Subject to Regulation by KDHE, page 1 & 2.

The forms to be sent shall be converted to .pdf file format and sent to: cclrreports@kdheks.gov

The subject line of the e-mail shall contain specific information necessary to identify the type of report for KDHE.

3. Type of communication: Finding
4. Type of facility: Child Care (CC), Foster Care (FC), or Residential Facility (RF)
5. County where the facility is located: Two letter county code.
6. Name of Facility: The name of the facility or the last name of the licensee

B. Electronic Notification of Reports to JJA

Social Worker shall send all notices of the case finding decision to JJA electronically according to the following procedures. The notice shall contain:

1. The Notice of Department Finding is CFS 2012.
2. Complaint Report: Facility Subject to Regulation by KDHE page 1 & 2.

The forms to be sent shall be converted to .pdf file format and sent to: SRSIncident@jja.ks.gov

The subject line of the e-mail shall contain specific information necessary to identify the type of report for JJA.

3. Type of communication: Finding
4. Type of facility: Foster Care (FC), or Residential Facility (RF)
5. County where the facility is located: Two letter county code.
6. Name of Facility: The name of the facility or the last name of the licensee

C. Recommendations on Notices of Department Finding for Facility Reports

An assessment regarding a perpetrator in a facility may indicate a need for corrective action if the alleged perpetrator needs to take action to reduce risks to child's safety.

If the social worker's assessment identifies issues needing to be addressed in a KDHE or JJA facility or a facility licensed or certified by SRS, those issues shall be identified on the notice.

D. Violations of Regulations Discovered During Abuse or Neglect Investigation

All substantiated findings of abuse or neglect in a facility subject to regulation by KDHE are also violations of licensing, or registration requirements and must be reported to KDHE. An investigation which does not substantiate abuse or neglect may, however, uncover information which should be reported to KDHE for evaluation whether a regulatory violation may have occurred. Information regarding possible regulatory violations is to be recorded on form CFS 2016, Complaint Report: Facility Subject to Regulation by KDHE. The information should be specific enough that KDHE can use the information to determine if an investigation of regulatory violations is necessary.

E. Notice to KDHE Regarding Findings of Maltreatment Outside a Facility by a Person Who Works, Resides or Regularly Volunteers in a Facility and Incidents Involving a Child of Such Person

If such person is substantiated for child abuse or neglect, notice must be sent to KDHE within five (5) days of the finding. Form CFS-2016 may be used for this purpose.

F. Notification to SRS Child Care

If the investigation involved a child day care home or center, SRS Child Care Provider Manager shall receive a copy of the notices sent to KDHE**.**

2546 Notification to Kansas Attorney General on Substantiated Findings

All substantiated findings forwarded to Kansas Attorney General
A copy of the Case Finding CFS-2011, the Notice of Department Findings CFS-2012 and the Face Sheet, CFS-1000 page 1 on all substantiated findings shall be forwarded to the investigative unit of the Attorney General's office. The FAX Transmittal cover page, CFS-2017 shall be used to forward the requested forms within 10 working days of the case finding date. All the information requested on the FAX Transmittal cover page shall be completed.

Additional Information Forwarded Upon Request of the Kansas Attorney General
Upon request of the Kansas Attorney General's office, a copy of the complete investigation case record shall be provided. SRS Legal Division will be responsible for coordinating all requests for case records from the Attorney General's office. SRS

Legal Division will make the request through the Regional Director. The copy of the case file shall be returned to SRS Legal Division via certified mail within 10 working days of the request.

The Attorney General's office may call a social worker to request additional information regarding the case without requesting the case record. After identifying the additional information being requested, the social worker shall request the caller's name, number and the opportunity to confer with the social work supervisor responsible for the case finding decision or regional legal staff. SRS has a free exchange of information with the Attorney General's office, the same as any other law enforcement agency.

SRS Denied the Ability to Complete an Investigation
In the event SRS has been denied the ability to complete a full investigation of abuse and neglect but have reasons to believe abuse and neglect did occur, the Attorney General's shall be notified within 10 working days. Prior to notifying the Attorney General, the CFS supervisor shall promptly contact CFS Protection Unit staff to determine if an investigation applies to this requirement.

Cases that may apply to this requirement include, but are not limited to, persons refusing access to interview an alleged victim, a school refusing access to interview an alleged victim or others refusing to release records despite authorization to do so. Nothing in the policy shall interfere with SRS requesting assistance from local law enforcement or county/district attorney to ensure child's immediate safety.

2547 Notification to County or District Attorney of SRS Finding of Abuse or Neglect

Substantiated Perpetrator
When the case finding is substantiated, notice shall be promptly provided to the county or district attorney for consideration of a child in need of care petition and/or criminal charges. If the victim resides in a different county than where the incident occurred, notice shall be provided to the county or district attorney in both the incident and residence county. The notice shall include a copy of the Case Finding CFS-2011, the Notice of Department Findings CFS-2012, the Face Sheet, CFS-1000 page 1 and the FAX Transmittal cover page, CFS-2017 used to forward the requested information to the Attorney General's office. Additional information may be required based on requests from the local County or District Attorney.

SRS Request for Custody of a Child
If a report is made to the county or district attorney due to a substantiated case finding, a request that a child be placed in the custody of the Secretary of SRS shall meet all three of the following conditions:

A. the child is in imminent danger;

B. the known or suspected perpetrator has access to the child, and

C. the non-abusing parent is unable to protect the child.

Cooperation with County or District Attorney
The department shall cooperate with the county or district attorney by providing requested information which is in the possession of the department and by being available for testimony if required.

2548 Notice Regarding Substantiated case finding of a Youth Who Has Been Adjudicated a Juvenile Offender

Upon a case finding of substantiation abuse/neglect of or by a youth who has been adjudicated a Juvenile Offender, SRS shall notify the county or district attorney and the community corrections case manager for the child or Commissioner of JJA according to local procedures. Notice may be verbal (and documented in the case file) or in writing if requested. No particular forms are specified for this notice.

2549 Notice Requirements for Case Findings on a deceased perpetrator

In order to provide the family and/or executor of an estate information to appeal on the perpetrator's behalf, notices of agency findings will be sent to the perpetrator's last known address or the perpetrator's estate when the perpetrator is deceased.

2550 Findings on Reports Investigated by a Law Enforcement Agency, Native American Tribal Agency, or Military Authority

Substantiated findings made on reports received from law enforcement, Native American Tribal Agency or Military Authority shall be documented on the case finding form (CFS- 2011) and notices shall be sent as indicated in PPM 2540. There is no entry required in the KIDS computer application.

Law Enforcement Agency

If SRS receives a report of abuse or neglect which has been investigated by a law enforcement agency a finding shall be made if the report contains sufficient information to reach a conclusion using the department clear and convincing standard of evidence.

When a case finding is made based on the information received from law enforcement, the case is not required to be assigned for investigation. If the report does not contain sufficient information to make a finding, and the case otherwise meets the criteria for

accepting the report, the report shall be investigated/assessed and a finding made using established SRS policies and procedures.

If the agency becomes aware of a child's death associated with allegations of abuse and neglect through the media, word of mouth or any source, SRS shall request the law enforcement reports regarding the child's death, even if SRS has not been involved in the investigation. SRS shall review report for the purposes of making a case finding.

A case finding is only made when law enforcement reports meet the criteria for substantiation. The perpetrator is entered into the Central Registry based on the law enforcement finding.
If the report from law enforcement is regarding an SRS employee as the alleged perpetrator, the finding will be made on the law enforcement report alone without additional investigation. The case finding will be entered into FACTS as described above.

Policies regarding Notice of Department Findings apply to reports investigated by Law enforcement, including an SRS employee as the alleged perpetrator.

Native American Tribal Agency Tribes with Whom SRS Executed a Memorandum of Understanding:

SRS may have a memorandum of understanding with Native American Family Services (NAFS), Prairie Band Potawatomi Social Services (PBPSS), the Kickapoo Social Services (KSS) and Sac and Fox Social Services (SFSS) for these agencies to provide protective services to members of the following tribes:

- Iowa Tribe of Kansas and Nebraska-NAFS
- Kickapoo Tribe of Kansas
- Prairie Band of the Potawatomi Nation
- Sac and Fox Nation of Missouri in Kansas.

Substantiated findings by NAFS, PBPSS, KSS, and SFSS will be accepted and the perpetrator entered in the Central Registry via the KIPS system. When a case finding is made based on the information provided, the case is not assigned for investigation/assessment. Native American Tribal Agencies will send any notice of substantiation.

If a report of an investigation by other tribes is received by SRS concerning a report of abuse or neglect over which the tribe has jurisdiction, a finding shall be made if the report contains sufficient information to reach a conclusion using the department clear and convincing standard of evidence. When a case finding is made based on the information provided, the case is not assigned for investigation/assessment. If the report does not contain sufficient information to make a finding, and the case otherwise meets

the criteria for accepting the report, the report shall be investigated and a finding made using established SRS policies and procedures.

Only reports from other tribes which meet the criteria for substantiation will be entered into the Central Registry via the KIPS system. Policies regarding Notice of Department Findings apply to reports investigated by other tribes. See PPM section 2540.

Military Authority

SRS shall enter a finding on any investigation conducted by the military or jointly by SRS and military authorities or agencies. If the investigation was conducted by military authorities within the boundaries of the military enclave, and sufficient information was provided to SRS to make a finding, the case is not assigned for investigation/ assessment.

Only reports from military authority which meet the criteria for substantiation will be entered into the Central Registry via the KIPS system. Policies regarding Notice of Department Findings apply to reports investigated by military authorities. See PPM section 2540.

Entering Findings into the Central Registry

The report shall be sent to the Intake and Assessment Program Manager at Central Office. When substantiation criteria is met, the finding shall be entered into the Central Registry via the KIPS system. The Program Manager shall notify the region when the finding has been entered. The region is responsible for sending the appropriate notices. The region shall maintain the hard copy file of the report for potential appeals and expungement requests.

2560 Repeat Maltreatment Reviews

For the purposes of this policy, repeat maltreatment is defined as a second substantiated victim finding with in a six month time period.

Cases with a second substantiated finding will be reviewed by the CFS Program Administrator, an uninvolved social work supervisor (or a designated licensed social worker in the social work supervisor's absence) or Children & Family Services. The reviewer shall read the entire event of the current substantiation and the previous substantiation within the past six months with specific consideration to the following areas:

Completion of the Investigation/Assessment Activities Concurrence with Findings Service Provision Recommendations.

The review shall be documented on the CFS-2018. The CFS- 2018 shall be maintained in the case file.

2570 Appeal of Finding Decision By a Perpetrator

Persons who have been substantiated as a perpetrator of abuse or neglect may appeal the SRS finding decision. Requests for fair hearing pursuant to K.A.R. 30-7-68 et seq. are to be made in writing within 30 days of the date of finding notice. An additional 3 days are allowed if the notice is mailed. Fair hearing requests received by SRS are to be forwarded to the Office of Administrative Hearings. Fair Hearing request forms may be obtained from any local SRS office. Individuals identified as perpetrators may have legal counsel or others to represent them at the hearing. If a person identified as a perpetrator is dissatisfied with the hearing decision, they may request a review of the decision by the State Appeals Committee. The decision of the State Appeals Committee may be appealed to the district court.

If the finding on a facility licensed KDHE by is appealed, KDHE shall be notified within 5 working days of the notice of appeal and any final action resulting from the appeal.

2571 Finding Decisions Reversed by the Administrative Hearing Office

When a finding is reversed by the Administrative Hearings Officer, documentation and notices shall be updated. The Case Finding CFS- 2011 needs to reflect the change in finding and the reason for the change in finding. A new Notice of Department CFS-2012 shall be sent all the same parties receiving the original Notice of Department Finding. The notice shall indicate the case finding as directed by the decision of the appeal officers.

The decisions made regarding the family based on the original case finding shall be reviewed. Decisions regarding the out of home placement of a child related to the original substantiated finding shall be reviewed by the social worker, social work supervisor (or a designated licensed social worker in the social work supervisor's absence) and Social Service Program Administrator (or designee). The review shall be made to determine if the out of placement is still recommended despite the reversed finding on the abuse/neglect report. The review shall be documented including the rationale for any decisions made as a result of the finding being reversed.

2580 Requests For Expungement

A person who has been identified as a confirmed (before 7/1/97) or validated (on and after 7/1/97) or substantiated (on of after 7/1/2004) perpetrator of abuse or neglect may apply in writing to the Secretary to have his/her name expunged from the Child Abuse/Neglect Central Registry when:

A. Three years has elapsed since the perpetrator's name was entered on the central registry

B. A change of circumstances or identification of new information and;

C. Twelve months have passed since the last request for expungement has been submitted.

If a person requests their name to be expunged from the registry, the person should be directed to make the request in writing to the Secretary of SRS stating the basis for their request. The letter need not follow any particular form and should be addressed to the attention of SRS Office of the Chief Counsel, 6th Floor, Docking State Office Building, Topeka, KS 66612-1570.

2600 Risk Assessment

Risk assessment is a research based tool designed to indicate the likelihood of future maltreatment of a child, based on identified risk factors that have been statistically correlated to future maltreatment. Elements of the risk assessment include:

A. current incident

B. history of past abuse/neglect

C. child behaviors

D. assessment of parenting skills

E. social relationships/support of the family

F. current or history of substance abuse of the parent(s)

G. emotional well being of the parent(s)

H. victim or perpetrator of spouse abuse

I. victim of child abuse

J. criminal history of parents

K. significant stress factor in the home such as unemployment, divorce, financial difficulty

L. parental attitude toward the current event

2610 Advantages of a Structured Risk Assessment

The assessment of risk is an integral part of any investigation/assessment. The advantages of using the structured Risk Assessment tool include:

A. it is research based

B. ensures that all significant risk factors are considered in each assessment

C. quantifies the level of risk

D. assists families in identifying the factors that contribute to risk to their children

E. assists the worker in making service action decisions

2620 When a Risk Assessment is Required

A risk assessment is a part of the family based assessment completed for each assigned report in which abuse or neglect is alleged or suspected and becomes part of a family based assessment unless:

A. the alleged or suspected person responsible for the maltreatment is non-family/unregulated care giver

B. the child is alleged or suspected to have been maltreated while receiving care in a facility subject to regulation by the Kansas Department of Health and Environment

2630 Time Lines for Completion of a Risk Assessment

A risk assessment is part of a family based assessment and is subject to the same time lines. The Risk Assessment, CFS 2030 D, shall be completed at the time of family preservation referral; completed within two working days of foster care referral; completed at the time the Notice of Department Finding is completed if services are being recommended to the family; or completed within 45 working days of intake assignment, whichever comes first.

2631 Required Family Contact on an Open Investigation/Assessment

When a case is open for investigation/assessment, the assigned CFS social worker shall make in person contact with the family at least one time every 30 calendar days from the date the case is assigned. The purpose of the contact is to review safety and risk factors identified from earlier family contacts and to determine if those safety and risk factors continue to exist in the family or if they have been mitigated.

If the family is unable to be contacted in person, the social worker and supervisor shall determine whether it is necessary and appropriate for the case to remain open.

In person contact with the family is considered to have occurred on an open case if contact is made with the primary caregiver and the alleged victims or involved child(ren) on a CINC/NAN. It is not necessary for the contact with all family members to occur at the same time.

2640 Documenting the Risk Assessment

Except as otherwise provided in this section, risk assessments are completed for each assigned report of child maltreatment and documented on form CFS 2030 C or D.

Prior to completing the Risk Assessment, CFS 2030D, the CFS social worker shall review KIDS and FACTS for agency history on all caregivers and the alleged perpetrator. In addition to agency history, the caregivers and alleged perpetrator shall be searched on Central Registry, the Kansas Department of Corrections website, the Kansas Sex Offender website, the National Sex Offender website http://www.accesskansas.org/kbi/ro.shtml and local court databases, where available.

The history shall be documented on the Risk Assessment, CFS 2030D, section 1. If additional space is needed for narrative, section 3f, “other” may be selected. Information relative to criminal activities shall be documented on the Risk Assessment, CFS 2030D, in the section most appropriate. Documentation shall clearly state the name of the person searched, the date the search was conducted, the database or website searched and what the search yielded, including if no history is found.

2641 Presenting Report Type and History

The worker shall indicate the report type as provided on form CFS 1002, Response Determination, and briefly describe any known previous history of abuse or neglect regarding the child or the child’s current care givers.

2642 Risk Factors

For each child and care giver in the report, the worker shall indicate the presence of listed risk factors and describe its effect on the child's safety.

2643 Family Strengths and Resources

For each risk factor identified, describe the family's ability to use its strengths and resources to manage the risk factors. Identifying family strength and resources shall include collecting information regarding kinship resources. A kinship resource may include relatives or other adults whom the family has a close positive emotional attachment. The information collected shall include the name of the kinship resource, the relationship to the child or family and contact information. This information shall be included on the CFS - 2030 D Risk Assessment and entered in FACTS.

2650 Risk Assessment Conclusions

Upon considering all the information available, the worker shall document a conclusion related to risk on Section V of the form, CFS 2030 D, Risk Assessment. The conclusion shall be one of the following:

A. No significant risk factors: In the course of the assessment, no significant risk factors were identified.

B. Risk is controlled by family or community resources: Some significant risk factors were identified, but family resources and strengths are sufficient to provide for the safety of the child(ren).

C. Risk is present: Significant risk factors were identified and there are not sufficient resources and strengths within the family to provide for the safety of the child(ren) without agency intervention.

When some but not all members of the family are unable to be located or the family can not be located once the assessment has begun, the risk assessment and risk conclusion should be completed based on the information available.

The Risk Assessment shall be documented on the KIDS application. A printed form is the official copy and is placed in the case file.

2660 Risk Assessment Short Form

The short form of the risk assessment (CFS 2030 C) may be utilized rather than the full form (CFS 2030 D) under the following circumstances:

- The safety assessment decision indicates the child is "safe," AND
- Services are not being recommended, AND
- The abuse/neglect finding is or will be "unsubstantiated", OR
- The abuse/neglect finding is "substantiated" AND access by the perpetrator is highly improbable [e.g., incarcerated for an extended period; perpetrator lives in a distant state and the care giver will not permit contact, AND
- All children in the home are 6 years of age or over.

A full Risk Assessment is required if services are being recommended to the family.

2661 Time lines for Completing the Risk Assessment Short Form

The short form risk assessment is part of a family based assessment and shall be completed within 45 working days of case assignment.

2662 Documenting the Risk Assessment Short Form

A Risk Assessment (short form) is documented on form CFS 2030 C. Documentation includes identification of any risk factors and the family's ability to respond to these factors.

Note: If the short form risk assessment indicates that uncontrolled risk is present for the child, the worker shall complete the full risk assessment.

If services are going to be offered, a full risk assessment is required.

2700 Assessment of Reports of Child in Need of Care -- Non Abuse/Neglect

Children are referred to the department due to conflicts with home, school or community; runaway; school non-attendance or other reasons defined as child in need of care by K.S.A. 38-2202. The purpose of assessment is to determine whether the child may be a child in need of care and whether services to the child and family are indicated.

If the report is not a request from the family, the worker shall inform the family that the Kansas Code for Care of Children requires SRS to make an inquiry. The worker shall advise the family that they are not required to cooperate with the department and the possible consequences of such refusal.

If the assessment indicates the child and family are eligible for family preservation services a referral shall be made with the agreement of the family. See PPM section 4000.

2701 Reasonable efforts to complete CINC:NAN assessment

A minimum of two attempts shall be made to contact a family subject of a CINC:NAN report. Contact in person is preferable but telephone contact or a letter offering services may be used in situations which do not appear to pose a serious risk to the child. The two attempts shall be within the 20 working day response. Any face to face attempt shall be made where it is reasonable to expect one or both of the parents to be found.

2710 Documenting the Child in Need of Care – Non Abuse/Neglect Assessment

Assessments of reports which indicate a child is in need of care due to actions or behaviors of the child and in which there is no allegation or suspicion of parental or other adult abuse or neglect of the child are assessed and documented using form CFS 2030-E, Child in Need of Care-Non Abuse/Neglect, and the CFS 2030-F, Family Based Assessment Summary.

In cases where there is a child in the home under 6 years of age, the CFS social worker shall review KIDS and FACTS for agency history on all caregivers. In addition to agency history, the caregivers shall be searched on the Central Registry, the Kansas Department of Corrections website, the Kansas Sex Offender website, the National Sex Offender website http://www.accesskansas.org/kbi/ro.shtml and local court databases, where available.

All history shall be documented on the Child in Need of Care-Non Abuse or Neglect, CFS 2030E,section III and IV. Documentation shall clearly state the name of the person searched, the date the search was conducted, the database or website searched and what the search yielded, including if no history is found.

2711 Presenting Problem

The worker shall identify the family's presenting problem using the reason for case assignment found on form CFS 1002, Response Determination.

2712 Contributing Factors and Family Strengths and Resources

The worker shall identify any other contributing factors as appropriate to the child and family circumstances.

For each contributing factor identified, describe the family's ability to use its strengths and resources to manage the factor. Identifying family strength and resources shall include collecting information regarding kinship resources. A kinship resource may include relatives or other adults whom the family has a close positive emotional attachment. The information collected shall include the name of the kinship resource, the relationship to the child or family and contact information. This information shall be included on the CFS - 2030 E Child in Need of Care - Non Abuse or Neglect Assessment and entered in FACTS.

2713 Assessment Conclusion

Upon considering all available information, the worker shall document a conclusion regarding the circumstances of the child. The options are as follows:

A. No Problem Behaviors: The child is not a danger to self or others and there is no service need by the child or family.

B. Problem Behaviors Controlled: Problem behaviors have been identified and/or contributing factors have been identified, however, the family is able to address the concerns without further agency intervention.

C. Problem Behavior Present (child is a danger to self or others): Behaviors are significantly problematic, and family strengths and resources are not adequate to control the identified problem(s).

2714 Assessment Summary

A Family Based Assessment Summary, CFS 2030 F, shall be completed for each assigned CINC/NAN report. Sections II through V shall be completed as appropriate to document the case action and initial case goal. A printed form is the official copy and shall be in the case record.

If the assessment indicates the family is eligible for family preservation services, a referral shall be made with the agreement of the family. See PPM section 4000.

2720 Time line For Completing a CINC/NAN Assessment

A CINC/NAN assessment is part of the family based assessment and subject to the same time lines. The CINC/NAN assessment shall be completed at the time of family preservation referral; completed within two working days of foster care referral; or completed within 45 working days of intake assignment, whichever comes first.

2721 Reasonable Efforts to Initiate Contact in a Pregnant Woman Using Substances Case

Face to face contact shall be made with the pregnant woman within 72 hours, excluding weekends and state holidays, of case assignment in a location where it is reasonable to expect the woman to be found. If she is not located on the first attempt, a second attempt shall be made within 72 hours of the original attempt, excluding weekends and state holidays.

2722 Assessment the Pregnant Woman Who is Using Substances

Service need assessments of pregnant women using substances shall address circumstances and resources of all household members and others identified during the assessment process of the pregnant woman. Information on the CFS 2005, 2030E and 2030F shall be gathered to determine if a referral for Family Preservation Services may be made. Any decision regarding service needs shall be made in consultation with the social work supervisor.

If the pregnant woman using substances is receiving TAF cash assistance, the social worker shall contact the EES worker to determine if she is Solutions Recovery Care Coordination (SRCC) eligible. If the pregnant woman is SRCC eligible, the CFS and EES case managers shall staff the case and determine which program will best meet her needs. Other professionals who may provide relevant information regarding appropriate service provisions shall be invited to the staffing as time permits.

If the decision made by the case managers is for the pregnant woman to be served by SRCC, the CFS social worker shall close the CFS case.

2723 Family Preservation Referral Criteria for a Pregnant Woman Using Substances

The pregnant woman shall be actively using or at imminent risk of relapse and shall meet at least one of the criteria below to be appropriate for Family Preservation Services.

A. Crisis situation which increases the need for the frequency of contact and the intensity of service need or;

B. Other children in the home with needs related to mom's drug/alcohol use or; Three or more areas of need which are or are perceived as barriers to treatment;

1. Mental Health issues
2. Unemployment or vocational problems
3. Housing
4. Childcare
5. Domestic Violence
6. Criminal/Legal or other court involvement
(i.e. CINC proceedings)
7. Health concerns-infectious diseases etc.
8. Previous treatment episodes
9. Parenting
10. Transportation

To document the pregnant woman meets or does not meet these criteria, the social worker completes the UNCOPE screening tool (CFS 2005) with each woman. Each "Yes" response recorded on the UNCOPE with information received either from the pregnant woman or from a collateral contact is documented on the 2030E Child in Need of Care-Non Abuse or Neglect Assessment in KIDS. The UNCOPE form will be attached to the 2030E in the paper file. Description of the current crisis being experienced by the pregnant woman shall be documented on the 2030E in the narrative section of the appropriate category.

The barriers to drug and /or alcohol treatment described by the pregnant woman and the results of the UNCOPE screen shall be documented on the 2030E.

2731 Non-attendance of Child Age 7 or More But Less Than 13

The responsibilities of SRS are to:

A. Contact and assess the family to determine if there is reason to suspect the child is in need of care for reasons other than school non-attendance. If so, take appropriate action.

B. Determine if services are necessary and feasible to enable the family to comply with the attendance laws. Provide or refer for services, if needed.

C. Determine if a petition should be requested of the county or district attorney: request petition if "yes."

2732 Home Schools

The schooling of children in their own homes by their parents is not defined in Kansas statutes. If a report is received by SRS that a child is not attending school as required by law for the reason the child is being home schooled, SRS shall determine whether the parents are registered with the Kansas Board of Education to provide private or home instruction. If the family is not currently providing home instruction or there is reason to believe the child may otherwise be in need of care, the report will be assigned for assessment. The outcome of the assessment regarding the home school shall be reported to the District or County Attorney.

2740 Family Based Assessment

It is the policy of the department that a Family Based Assessment (FBA) is the method used for the purpose of identifying those services necessary to keep families intact, determine the necessity for a placement and/or to reunite them. Except as otherwise provided by this manual, a Family Based Assessment is required for all cases accepted for services by the department.

Family Based Assessment is a dynamic, ongoing, mutual process between the worker and the family which evaluates both objectively and subjectively the family situation and the people that comprise the family on the basis of facts, feelings, persons, and circumstances. The primary purpose of the assessment is to identify the family strengths and needs and to develop an action plan to address those circumstances which led to the family coming to the attention of the department. The social worker completes the Family Based Assessment with the active involvement of the family. The FBA lays the foundation for a comprehensive and effective case plan.

EXCEPTIONS: A Family Based Assessment is not required when:

A. The alleged or suspected person responsible for the maltreatment is non-family/unregulated care giver,

B. The child was alleged to have been maltreated while receiving care in a facility subject to regulation by the Kansas Department of Health and Environment.

2745 Purchase of Services or Resources during the Family Based Assessment

Specific services or resources that will assist in reducing the risk of child(ren) being removed from the home may be purchased by SRS. If the level of risk for placement outside of the home requires a higher level of intensity and/or will go beyond 45 working days, Family Services or Family Preservation shall be considered. The decision to open a Family Service case shall be made in consultation with the supervisor and shall be clearly documented in the file. If a Family service case is initiated, the Family Service Plan shall be developed with the family within 20 calendar days of initiation of ongoing services. See Section 4000 for Family Services or Section 5000 for Family Preservation.

During the Family Based Assessment, if identification of specific services occurs that may alleviate the risk of removal for the child(ren), the worker shall identify in Section IV(A) of the FBA summary what those specific need(s) are and how provision of the service(s) reduces the risk of removal.

The allowable services or resources available for purchase and the method of purchase are found in the Handbook of Services. Cash will not be given directly to consumers. Payment shall be executed according to established payment procedures as presented in the CFS Eligibility and Payment Manual. See Section 2200 in Eligibility and Payment Manual.

2747 Documenting the Family Based Assessment

The following documents comprise the minimum requirements for an initial Family Based Assessment (FBA):

A. Child Abuse or Neglect

1. Face Sheet, CFS 1000
2. Report/Request for Services, CFS 1001
3. Response Determination, CFS 1002
4. Agency Response, CFS 2030 A
5. Safety Assessment, CFS 2030 B
6. Risk Assessment (short or full form), CFS 2030 C or CFS 2030 D
7. Case Finding, CFS-2011
8. Family Based Assessment Summary, CFS 2030 F

B. Child in Need of Care (Non Abuse/Neglect)

1. Face Sheet, CFS 1000
2. Report/Request for Services, CFS 1001
3. Response Determination, CFS 1002
4. Child In Need of Care &endash; Non Abuse or Neglect, CFS 2030 E
5. Family Based Assessment Summary, CFS 2030 F

During the investigation and assessment, if information is gathered regarding resources available for Kinship Care it should be documented on the CFS-1000 page 2 to be available in the event of any future placement for a child.

2749 Time lines for Completing FBA

The FBA summary CFS 2030 F shall be completed at the time of family preservation referral; completed within two working days of foster care referral; within 30 days of SRS custody if the child remains at home and will be served with an SRS family service case; or completed within 45 working days of intake assignment, whichever comes first. If the FBA cannot be completed within the time frame, document the reason on the CFS 2030 F, Section V.

Allowable reasons for not completing the FBA within the time frame include:

A. Cannot locate family

B. Family has left the state

C. SRS has been directed not to proceed by county/district attorney or law enforcement

D. Family refuses to cooperate

E. Appointments scheduled but persons failed to keep the appointments

F. Parents refused access to the child

G. Child out of state-i.e., staying with relatives

2750 Descriptions

Immediate Medical Concern (screen) on the 2030B, safety decision, risk conclusion, or assessment conclusion located on the 2030F are entered in the "Assess Desc" field. (Ex: no med exam needed, conditionally safe, risk controlled.)

2752 New Reports Assigned as CINC-NAN

A new report assigned as a CINC-NAN requires a new Child in Need of Care, Non Abuse/Neglect, CFS 2030 E and a new FBA Summary, 2030 F.

2754 Family Based Assessment Summary

The assessment summary should pull together all the information obtained throughout the investigation/assessment process including the conclusions drawn from the Safety and Risk assessments, the Family Preservation and Custody screens, collateral contacts, and any other assessment tools used such as genograms, ecopmaps, and Time lines. Decisions made as a result of a Family Based Assessment should be consistent with and the logical result of the FBA findings and conclusions. Another person reviewing the case record should be expected to reach the same or similar decisions or at least understand decision.

The Family Based Assessment Summary, CFS 2030F, completes the FBA. Social worker and supervisor sign and date a printed copy of the form as the official copy for the case record. The supervisor’s signature is not required to initiate a referral to contractor.

The summary must include, but shall not be limited to:

A. The safety decision from the Safety Assessment,

B. The risk level related to abuse or neglect from the Risk Assessment,

C. The Case Finding from Abuse/Neglect investigations

D. The assessment conclusion from a CINC/NAN assessment

E. Documentation of strengths and needs of a family that impact the safety of the child(ren),

F. Case Action and service planning decision.

If there are multiple finding decisions associated with a report, the highest level of finding should be indicated as the case finding in the FBA summary.

2756 Case Action/Initial Service Plan

Case action and services planning decisions are recorded in Section IV of the FBA Summary, CFS 2030 F. For all case actions in which contact is made with a family, a minimum of one strength and one need for that family shall be described. Based on a Family Based Assessment, families who are in need of and willing to accept services shall be offered services or referred to community services which address their strengths and needs.

Except when a child is determined to be unsafe, a referral for Family Preservation Services should be considered. To determine if the family meets the criteria for a referral the Family Preservation screen on the CFS 2030 F is to be completed. When the family meets the criteria and express willingness to accept services a referral is to be made within 24 hours of the determination of the appropriateness of the services.

A referral to services, including family preservation services, may be made before an investigation and finding is completed related to an allegation of abuse or neglect. The case action decision and initial service plan is documented in Section IV of the FBA Summary, CFS 2030 F. Case action decisions may be:

A. provide Family Services
B. refer to Family Preservation contractor
C. refer to Foster Care contractor
D. refer to Adoption contractor
E. close case

2758 Services To Be Provided

When services are to be provided, a summary of the reason for SRS involvement and a discussion of at least one family strength and need shall be recorded in Section IV of the FBA Summary.

A. Permanency Goals may be any one of the following:

1. Maintenance at Home
2. Reintegration
3. Adoption
4. Guardianship
5. Independent Living

B. Child Protection Objectives are concise statements of the reason for agency involvement and specify the changes that need to occur for state involvement to be

terminated in language that is clear to all. The purpose of establishing child protective objectives is to focus on the issues which brought the family to the attention of the agency and which need to be remedied so that the child can remain or return to home, and to prevent the establishment of expectations for the child and family that are unrelated to the child protection objective.

C. The Child Protection Objectives will transfer to the case plan for ongoing service planning and the development of tasks toward achievement of the child protection objective and ultimately the permanency goal. A child protection objective can be revised or additions can be made in coordination with SRS and the family on or before the first case plan.

2760 Case Closure, No Services Required

No evidence to support allegations/reasons for referral

There is no evidence to support the report. The report is false and no additional services related to the safety of the child are needed.

If there is some evidence to support the report or if other, unreported, evidence of abuse or neglect exists, an FBA is required even if it initially appears the report will be unsubstantiated.

Family refuses services and department has no legal basis to compel intervention

The department may close the case if the family refuses services IF there are no unaddressed child safety needs AND the department does not have the legal authority to proceed.

The family cannot be located or have moved out of state

Once initial contact has been with the family and then the family cannot be located or has moved out of state, the case may be closed.

Another agency is currently providing necessary services

The family is experiencing problems but another agency is assessing the family's needs and/or providing services. If an assessment by the department will duplicate an ongoing assessment and/or treatment by a qualified person or agency and/or an assessment by SRS would be disruptive to the treatment of the family, the case may be closed if there are no unaddressed child safety issues.

Assessment completed and SRS service plan continues

If the assigned report is associated with a case already open to the agency and the current service plan will continue, this option shall be indicated.

2800 FACTS Investigative and Assessment Procedures

Complete screen navigation requirements for adding investigative and assessment information are located in the Service Management section of the FACTS User Manual Volume II, Section 500. Codes for applicable screens in FACTS are located in the USER Manual Volume I, Section 800. Information on investigative case activity shall be entered into FACTS within 5 working days from the date of occurrence, action, or agency decision regarding a child or family.

2811 Kinship Resources and Relevant Persons

Kinship resources shall be reported on COLL screen. Information is obtained from the CFS-2030D and the CFS-2030E.

Relevant persons interviewed for each event may be, but are not required to be, reported on COLL. To determine whether or not a particular individual is listed in FACTS as a collateral, utilize COLS (Collateral Search).

2812 Assessment Tools

All assessment tools are recorded on MAAS (Maintain Assessment). A MAAS screen is completed for each assigned event associated with a case number. Each assessment has its own unique number. To search for all previous assessment tools for a particular case number, utilize CALS (Case Assessment List Search). To record a subsequent assessment to a case, a new MAAS screen is created specific to that event.

2813 Case Findings

Maltreatment findings for each allegation associated with a child are recorded on FIND (Finding). Specific information regarding a particular victim is located on VICT; a particular perpetrator, on UNNI until all appeal time has been exhausted, then information is available on PERP; a particular unsubstantiated individual on UNNI. PERP and UNNI include information regarding whether or not the finding involved an allegation regarding an individual who resides, is employed by or volunteered in a facility regulated by KDHE.

2814 Appeals

Appeals regarding agency maltreatment findings is located on APEL. To search for a person involved in an appeal, utilize the person's name on APLS (Appeal Search).

2821 Entering Contact with Victim/Family

The time and date the worker first attempted contact with the first alleged victim in the assigned report shall be entered into the work start date and time on the top half of MAAS. Information for this data field is located on the 2030A for abuse neglect reports, CFS 1004 for reports involving facilities and third parties, and the 2030E for reports involving Non Abuse Neglect. The work start time can not be earlier than the date the report was assigned. If contact was made by SRS or law enforcement prior to report assignment time, enter the date and time assigned as the work start time on MAAS.

2822 Entering Safety Determinations

A tool code for safety determination (SAD) shall be recorded in the tool section of MAAS for reports alleging abuse or neglect. Work start date and times for the SAD is the date and time the assigned social worker determined safety.

A tool code of special investigator (SPI) is recorded in the tool section of MAAS if such a position is utilized during the investigation.

A tool code of courtesy interview shall be recorded in the tool section of MAAS for courtesy interviews between SRS areas. The area requesting the courtesy interview is responsible for entering the worker number of the other area who conducted the interview and times of contact for the interview.

2823 Recording Ongoing Safety Assessment

To record the second face to face contact of the ongoing safety assessment, enter the tool code of 'SFI' on the MAAS screen. The start date is the date of the face to face contact with the alleged victim who is under six years old. The contact information is on the Agency Response, 2030A, Section I. If the second contact with the alleged victim never occurred regardless of reason, enter the tool code of 'TIM' and the date of the finding decision. Finding decision date is located on the CFS 2011.

For additional information on the ongoing safety assessment, see PPM section 2313.

2831 New Reports Assigned as Alleged Abuse/Neglect

A new report requires the completion of a new Agency Response, CFS 2030 A, a Safety Assessment, CFS 2030 B and a Case Finding, CFS 2011, with appropriate notices. See 2600.

The Risk Assessment , CFS 2030 C or D, may be updated by noting changes to the existing Risk Assessment. When entering updates on the KIDS computer application, the addition shall be noted as an update and the entry dated. The updates on the printed file copy shall be initialed and dated.

A new FBA Summary, CFS 2030 F, must be completed.

2832 Safety Action

Safety Plans initiated with the family shall be entered as a responsibility service action on RESP for the head of household. Episodes of Police Protective Custody are recorded as LE (law enforcement) plans on a child's plan in FACTS as needed. Placements in emergency shelter prior to agency custody is considered a protective action service (PR08N), not a placement (FO...) code. Information for these safety actions is located on the CFS 2003, 2030B; or located in case logs/ protective orders.

2841 Case Conference Date

The date that the investigative finding regarding maltreatment is staffed with a supervisor shall be entered into the "Case Conf Date" field on FIND. This date is located on the CFS 2011. The finding date can not be earlier than the date the report was assigned.

2842 Finding Decision Fields

Only decisions of unsubstantiated (US) and substantiated (SB) from the CFS 2011 are entered on the victim and/or perpetrator rows on the FIND screen. Status of unable to locate on the CFS 2011 is not entered on the victim and/or perpetrator row on the FIND screen. If the finding involves some able to locate and some not able to locate victims and/or perpetrators, enter a SB or US finding on the victim and/or perpetrator that were located. A finding is not entered on the victim and/or perpetrator that were not located. If both the child and adults of the family were never located, the Initial Assessment decision on event should be changed to no further CFS action needed. See PPM 1700.

Requirements

A finding decision number is required for each allegation of maltreatment associated with a child. The decision number is system generated when the screen is added.

1. A summary of the basis for finding located on the 2011 is entered on the "Basis for Decision" field on FIND. If the incident occurred out of state, indicate that in this field description.

2. To document maltreatment finding for an alleged victim select the row with the victim's information, record finding codes from the CFS 2011, and enter the alleged perpetrator's ID number in the field to the left of Notice Date. By entering the perpetrator ID number in the victims' row, the system will automatically link the alleged victim and decision to the alleged perpetrator. Enter the perpetrator finding in the perpetrator row. If the severity is unknown, enter the severity code of NO (No Injury).

3. If the alleged perpetrator is unknown, enter all 9's in the victim ID number field. In this instance, do not enter a finding in the perpetrator row.

4. Information regarding alleged victim and perpetrator finding, finding type, injuries, and degree of injury entered in FIND shall match CFS 2011. The notice date shall match information from the CFS 2012. The notice date is the date that the applicable notice was sent to the alleged or substantiated perpetrator.

Finding Changes or Updates

If a change in finding is made as a result of appeal, or other activity, the conference date on the top half of the FIND screen is updated to reflect the new finding date and the finding disposition types are updated as needed on the bottom rows for perpetrators and victims.

2843 Individual Information

Victim

1. After a finding decision is successfully processed, select each victim, flow to VICT to record specific information on that victim. Data fields such as date of birth and SSN previously entered on EVRL carry over onto VICT. Information on date of birth, race, ethnicity, relationship to perpetrator, and facility information are all required fields except for military family.

2. In order to successfully process VICT, the victim must be linked to their client ID number. This task is accomplished via a system required linking procedure. This process facilitates submission of federal reporting requirements. From VICT, flow to LINC, select the victim's name and flow to CLNT. On CLNT select the desired client, and return to LINC. Back on LINC, verify the person you selected is accurate and link via PF6. Return to VICT to finish entering demographic information to add the screen.

3. Indicate that the report involves a facility when all of the following factors are indicated:
   a. The alleged perpetrator is an employee or volunteer in a facility regulated by KDHE; and
   b. The alleged victim resides in or receives services from that facility.

Perpetrator

1. After a finding decision is successfully processed, select each perpetrator, flow to UNNI to record specific information on that alleged perpetrator. Data fields such as date of birth and SSN previously entered on EVRL carry over onto UNNI. Information on date of birth, race, ethnicity, relationship to alleged victim, facility involvement and facility types are all required fields except for military family.

2. Indicate that the report involves a facility when both of the following factors are indicated:
   a. The alleged perpetrator is an employee or volunteer in a facility regulated by KDHE; and
   b. The alleged victim resides in or receives services from that facility.

3. With regard to perpetrator relationship to victim, enter foster parent (FP) only if the perpetrator was the foster parent provider for the victim at the time of the substantiated incident. Victim must also be in SRS custody to use the FP code. Enter employee at a placement (EP) only if the perpetrator was an employee at the victim's OOH placement at the time of the substantiated incident. If a victim's perpetrator is a relative who is also a licensed foster parent for the victim, enter the relationship code of foster parent in the perpetrator relationship field.

2850 Appeal Information

Information regarding appeal information is recorded on APEL. An agency decision is not final until all appeal time has expired for that action. Decisions from an Administrative Hearing Officer and / or State Appeals Committee decision are not updated in FACTS until appeal time for that decision has been exhausted. As long as there is an active appeal, a perpetrator shall not appear on the child abuse central registry (CERS) for that finding decision under appeal. A perpetrator with an active appeal can be viewed on UNIS until finding decisions regarding substantiation are final.

2860 Recording Non Abuse Neglect Decisions

The top half of the FIND screen captures information on a service decision regarding Non Abuse Neglect decisions.

2870 Recording Risk Assessment Information

Immediate Medical Concern (screen) on the 2030B, safety decision, risk conclusion, or assessment conclusion located on the 2030F are entered as applicable in the "Assess Desc" field. (Ex: no med exam needed, conditionally safe, risk controlled)

2880 Recording Family Based Assessment Information

A tool code for strengths/ needs determination (SND) shall be recorded in the tool section of MAAS for all CINC reports. This screen reflects completion of the Family Based Assessment. Work start times are when the agency made contact with the family. The initial end date on MAAS is the date of FBA completion indicated by the supervisor's signature on the 2030F.

2900 Eligibility and Payment Procedures During the Investigation and Assessment of Reports

To fund services for families who are clients of Children and Family Services (CFS), it is necessary to establish three categories of eligibility: a) customer eligibility, b) service eligibility, and c) provider eligibility.

2901 Customer Eligibility

Services are provided to children and families whether or not they can afford to pay. Individual customer eligibility determines what source of federal funding may be claimed by SRS for services. Families are expected to participate in determining eligibility and paying for services based on their ability. However, needed services are provided regardless of family income or ability to pay.

2902 Assessing Family Resources in Determination of Services

The intake and assessment process must be initiated before a plan for services can be developed and funding eligibility is established.

A. Assessment of Financial Resources

An assessment of the family's financial resources is completed prior to SRS paying for services. The assessment will determine the eligibility or potential eligibility for a specific funding source, regardless of whether or not there is an immediate plan to use them to pay for specific services

B. Application for Potential Benefits

Families requesting assistance from SRS will be asked to apply for all benefits for which they may qualify. Exceptions are made for special circumstances. SRS staff shall provide direction in the application process.

2903 Providing and/or Purchasing Services

When the intake and assessment process determines that a family or child requires services, the service case continues, and a case plan is completed, where applicable.

Specific services or resources that will assist in reducing the risk of child(ren) being removed from the home may be purchased by SRS. If the level of risk for placement outside of the home requires a higher level of intensity and/or will go beyond 45 working days, Family Services or Family Preservation shall be considered. The decision to open a Family Service case shall be made in consultation with the supervisor and shall be clearly documented in the file. If a Family service case is initiated, the Family Service Plan shall be developed with the family within 20 calendar days of initiation of ongoing services. See Section 4000 for Family Services or Section 5000 for Family Preservation.

During the Family Based Assessment, if identification of specific services occurs that may alleviate the risk of removal for the child(ren), the worker shall identify in Section IV(A) of the FBA summary what those specific need(s) are and how provision of the service(s) reduces the risk of removal.

The allowable services or resources available for purchase and the method of purchase are found in the Handbook of Services. Cash will not be given directly to consumers. Payment shall be executed according to established payment procedures.
The Social Service case shall remain open for the entire period services are purchased or provided through CFS.

2904 Application for a Social Security Number

In order to comply with federal requirements, families, receiving federal funding for services are required to have a social security number (SSN) for all family members. If a family member does not have a SSN, the family shall be referred to the Social Security Administration to complete an SS-5 "Application for Social Security Card".

2905 Funding Codes

As part of the payment process, a speedchart code shall be assigned to indicate the funding source for each payment. To determine the appropriate speedchart and sub-obj funding codes, refer to PPM section 4902.B.2.

2909 Payments for Miscellaneous Investigative Costs

Investigative costs such as photographs, drug testing or interpreter services shall be paid with Family Services speedchart numbers ISD27321 or ISD27322. See PPM section 4902.B for details on how to make a payment.

2910 Eligibility for Medical Exam Related to an Abuse or Neglect Investigation

During an abuse or neglect investigation the SRS social worker determines and documents need for a child's CPS medical exam.

Check KAECSES to determine if the child has a medical card, if a parent is unwilling or unable to pay for the child's medical exam or subsequent treatment during an investigation of alleged abuse or neglect. Authorize payment according to section 2450 if the family is not eligible for medical assistance.

A. Payment Procedures for CPS Medical Exams

Payments for medical exams arising out of a CPS investigation are made with an open KAECSES or KANPAY case number. If the case is open on KAECSES or KANPAY, use that case number and customer ID number. If no open case is available, open a KANPAY case. Use the Family Services speedchart number ISD27321.

B. Required Forms and Documentation

A ADM-3465 shall be completed by CFS staff to document the medical exam expense. The provider must present a bill for the specific medical service in order to generate a payment. Payment should not exceed the established Medicaid rate. Consult with your Regional Medicaid Liaison for Medicaid rates.

2911 Law Enforcement Emergency Placements

KSA 38-2231 and 38-2232 provides law enforcement agencies the ability to take children into police protective custody on an emergency basis without a court order, for the protection of children. Refer to section 2471 for additional information.

A. Purchase Limitations/Guidelines
Emergency placement providers shall receive documentation from law enforcement when a child is placed with them stating that law enforcement has given the facility custody, and the provider has consent for medical treatment and for transportation of children placed in their facility or home. Law enforcement

agencies have forms called law enforcement applications for this purpose. CFS must receive a copy of the "law enforcement application" before payment is made to the provider. The following applies:

1. CFS is responsible for payment through the SRS Region in which the law enforcement emergency placement occurred. Each SRS Regional office has a list of licensed emergency placement providers. CFS staff shall not pay for law enforcement emergency placements if the provider is unlicensed or is not designated as an emergency placement, unless approved by the CFS Program Administrator.

2. Emergency placements made by law enforcement are limited to 72 hours following admission (excluding weekends and holidays or days on which the office of the clerk of the court is not accessible), unless a court has continued the custody hearing.

3. Payment for the care of children in licensed and designated emergency placements is made by SRS even though these children are not in SRS custody. RE/FC/AD Child Welfare Case Management Providers are responsible for payments when the child has been referred to them prior to their law enforcement placement and the referral is still open. Payment shall not exceed the established SRS rates found in the Child Welfare Handbook of Services. (See http://www.srs.ks.gov/agency/cfs/Documents/CW%20Handbook%20of%20Services/handbookservices.pdf)

4. If the emergency placement overlaps a weekend or holiday or day on which the office of the clerk of the court is not accessible, payment should also be made for the weekend or holiday or day on which the office of the clerk of the court is not accessible and these days do not count toward the 72 hour limit. Any portion of a calendar day shall be considered as one day.

5. In situations where the child remains in a law enforcement emergency placement over a Court or SRS week-end and holiday, the placement may last up to 8 calendar days. When the placement exceeds 5 calendar days, the last day of care is not paid.

6. In rare situations the child does not leave the emergency placement within 72 hours; i.e. temporary custody hearing not yet held or parent did not pick up the child as scheduled. When this occurs, staff will need to evaluate circumstances for exceeding the 72 hour time period to determine if SRS is responsible for any further payment as an emergency police admission payment or as a family service payment. If paid as a family service payment (see section 4900), a Client Service Agreement would be required.

B. Payment Procedures for Law Enforcement Emergency Placements

1. Payments for law enforcement emergency placements are made with an open KAECSES or KANPAY case number. If the case is open during the emergency placement on KAECSES or KANPAY, use that case number and customer ID number. If no open case is available, open a KANPAY case.

2. An ADM-3465 shall be completed by CFS staff or received from the provider documenting the emergency placement expense. Use the law enforcement protective custody speedchart funding code.

3. SRS pays for detention only…

a. when the court places a child in SRS custody, orders a juvenile detention placement and a referral to a RE/FC/AD CWCMP has not been made. A detention payment covers only a 24 hour period, excluding weekends, legal holidays, or days on which the office of the clerk of the court is not accessible per K.S.A. 38-2260. A copy of a journal entry ordering a juvenile detention placement is required.

b. when law enforcement places a child who is in the custody of the Secretary in detention and a referral to a RE/FC/AD CWCMP has not been made or the year of after care is complete. The law enforcement officer must first deliver the child to a shelter facility. If the person in charge of the shelter facility and the law enforcement officer agree the child will not remain, the law enforcement officer may place the child in detention. K.S.A. 38-2232.

4. Payment shall be made at the established SRS rate in the Child Welfare Handbook of Services.
Use the CINC in Detention PCA codes.

5. When a child is placed into a designated emergency placement by law enforcement, payment for a child's emergency medical expenses are charged to the Family Services speedchart funding codes. Payment should not exceed the Kansas Medicaid rate. CFS should not pay for medical expenses covered by the parents' health insurance carrier, by Medicaid, or by Healthwave 21. Payments for emergency medical expenses are made with an open KAECSES or KANPAY case number. If the case is open during the medical emergency dates of service on KAECSES or KANPAY, use that case number and customer ID number (either case number can be used). If no open case is available, open a KANPAY case. ADM-3465 shall be completed by CFS staff with an attached, itemized bill from the medical provider which documents the emergency medical expense. Use the Family Services speedchart funding code.

3000 Case Management

3000 Case Management

Case management delivery shall be culturally competent and family centered. Basic principles of family centered practice are:

A. The family as a whole, including both the mother and father, is our focus.

B. We must build on strengths and capacity of families to function effectively.

C. We engage families emphasizing their participation in all aspects of policy development, service delivery, and program evaluation.

D. Families are a part of a larger community rich with resources and we must utilize communities to help families.

E. Children, youth, and their families receive services in the least restrictive and most family-like setting.

F. Immediate and extended family members are crucial partners in case planning and are expected to be actively involved in the case planning process unless their involvement is significantly detrimental to the child or youth.

G. Families shall be treated with respect.

H. Families have the right to privacy.

3010 Protection of the Child

The protection and safety of the child shall be assessed and evaluated throughout the time period the child is receiving services. Ongoing assessments of risk and safety shall be completed per PPM 4101.

Case planning decisions shall weigh the "risk of harm" to the child. Whether a child needs protection from abuse and/or neglect or is in conflict with the family or community, services provided to the family are the most effective form of intervention.

3020 Full Disclosure

A respectful, candid discussion with parents regarding the impact of services and out of home placement on family is necessary early on. The discussion shall also include the

rights and responsibilities of birth parents, the services to be provided, other permanency options, and the consequences of not following through with the case plan goals, tasks, objectives and other offered services. This discussion shall be documented in the case logs. Open discussions shall be held with all parties, child, birth families, relatives/non related kin, resource families, attorneys, and other service providers regarding the case planning process. All participants shall be informed that the information being shared is confidential.

3030 Worker/Child Relationship

A. The worker shall have a relationship with the child, to assure the child's:

1. continued safety, permanency and well-being
2. developmental needs are being met
3. important connections are maintained

B. The worker shall:

1. Inform the child, family and placement resource, if applicable, of when visits and interactions are to take place.
2. Be prompt and dependable in keeping appointments.
3. Give the child, on a developmental and age appropriate level, information as it affects the child's life.
4. For each required child/worker visit to children in out of home placement, provide blank copies of the Monthly Individual Contact CFS 3061 to every child over the age of 10 for their use during each visit; insure the child understands the purpose of the CFS 3061; assists the child in completing the form if needed; and routes completed copies of the form as indicated by the child.
5. Provide the child, at every visit, a means of contacting the worker.
6. Listen to the child's perspective of how well visits and interactions are going.
7. Listen to the child's assessment of how the goals of the case plan are being met.
8. Observe the child's reactions to information presented.
9. Assess for evidence of maltreatment or failure of the child to achieve developmental progress.
10. Determine when modifications to the case plan are warranted.
11. Document the quality of the visit using the Child Welfare Case Management Provider approved Child/Worker visit guide or protocol.

3040 Children in the Custody of JJA and SRS Simultaneously

A. When a child in the custody of the Secretary is later adjudicated as a juvenile offender and placed into the custody of the JJA Commissioner, SRS legal staff shall work with the child welfare case management provider to obtain an order relieving the Secretary of custody of the child.

B. If the court is unwilling to relieve the Secretary of custody, JJA is responsible for the care and treatment of the child until requirements of the juvenile offender case are met.

1. The Child Welfare Case Management Provider is no longer involved and closes their case unless an exception is made by the CFS Program Administrator in order to meet the permanency needs of a parental rights terminated child.

2. SRS and the Child Welfare Case Management Provider will be responsible for carrying out the custodial duties under the Child In Need of Care code once the JJA Commissioner is relieved of custody.

3. Communication between SRS and JJA staff is necessary to avoid any lapse in services.

C. When a child in need of care is subsequently adjudicated as a juvenile offender but is not placed in the custody of the Commissioner of JJA, SRS and therefore the Child Welfare Case Management Provider shall be responsible for collaborating with juvenile justice to facilitate continued progress toward achieving the case plan goal.

1. The Secretary continues to have custody, placement authority and primary case planning responsibility.

2. When the youth is adjudicated as a juvenile offender for the first time and for a misdemeanor and the placement agrees, the court may require the child to remain in the same placement pursuant to K.S.A. 38-2304(g).

3. The Secretary is never responsible for the cost of sanctions for the juvenile offense.

D. When the youth is placed in the custody of the Commissioner of JJA, the Commissioner has placement authority and primary case planning responsibility.

1. This includes payment responsibility for the placement.

2. JJA's responsibility for placement continues as long as the child is in the custody of the Commissioner.

3. If the youth has not been released from the custody of the Secretary by the time of release from JJA Commissioner's custody, SRS shall make a new referral and the Child Welfare Case Management Provider shall again assume full responsibility for the youth's case planning including placement.

4. If the child's parental rights are terminated at the time of JJA custody, JJA may request the Child Welfare Case Management Provider continue efforts to locate an adoptive resource. If no such request is made, recruitment of an adoptive family will cease until the JJA case is closed.

E. On some occasions, the court may find reintegration is not a viable alternative for a youth who has been adjudicated a juvenile offender and a child in need of care petition will be filed pursuant to K.S.A. 38-2365(h). If the youth is then placed in the custody of the Secretary, SRS shall make a new referral and the Child Welfare Case Management

Provider shall assume responsibility to work with juvenile justice toward achieving an alternative permanency for the youth.

3100 Assessments

Culturally respectful assessments of the family and child that address individual and family strengths, needs, and core concerns are essential. Assessments are a mutual process between the Child Welfare Case Management Provider and family. It is essential that individual family members are involved in the assessment process.

An accurate assessment of the child's safety (risk of harm), the family's capacity and motivation to change, and family's strengths and resources must be completed prior to developing and evaluating case plans.

3110 Types of Assessments

Assessment tools can be used as an ongoing measurement of family progress during the life of a case. They help determine the strengths and needs of the family and identify services that may be needed to assist the family in reaching their goals. Information obtained in these assessments is used to determine the direction of case planning.

3111 Family Based Assessment

This assessment shall be completed during an initial investigation and assessment of the safety of a child. It shall be completed before an initial case planning conference and is updated as new information is obtained. It includes the safety assessment as well as the risk assessment. A complete description is available in Section 2000.

Non-residential/custodial, mothers, fathers, paternal and maternal relatives, and non-related kin shall be considered first when seeking resources. The Child Welfare Case Management Provider shall obtain information from the family regarding relatives and persons they consider to be non related kin. The family shall be encouraged to provide names and contact information of designated relative/non-related kin who can be a support to the family, not limiting this support to a placement resource for a child. See Appendix 3O for Family Finding Search Websites.

3112 Genogram

A genogram is a diagram similar to a family tree and depicts the family across generations. Genograms list additions and losses in a family, communication and relationship patterns, and other important events. The genogram assesses the family at a certain point in time and is used to monitor or evaluate change over weeks or months. Examples are available in Appendix 3B-1, 3B-2, and 3B-3.

3113 Eco-map

An eco-map is a visual representation of the family and the larger world in which the family resides. Symbols are used to depict the nature of relationships between the family and other community systems. These community systems include but are certainly not limited to school, the physical and mental health systems, law enforcement, work, spiritual and other community supports, including relative/non-related kin and friends.

Eco-maps also show the flow of energy, either positive or negative, between community systems and the family. The information learned from the process of constructing an eco-map can help the family identify resources in persons and systems. An example is provided in Appendix 3C.

3114 Social History

A social history is written in chronological order and includes a narrative summary of the family's history. It includes identifying information, a summary of the presenting problem, background information, and medical history. The Child Welfare Case Management Provider, prior to the second case planning conference, when a child is in an out-of-home placement, shall complete a social history. The social history shall be updated as new information becomes available, with new entries initialed and dated. An outline for a complete social history is provided in Appendix 3A.

3115 Time line

A time line is a chronological representation or exhibit of key events within a particular historical period. These events often have connections to developmental stages in a child's life. They also impact family functioning and can highlight periods of stress or well being. A time line can be used to help assess family strengths and needs in order to develop and evaluate case plans. Appendix 3E provides an example.

3116 Medical Checklist

A Medical Checklist is a tool used to ensure a child's medical needs are being taken care of on an ongoing basis. Medical issues covered by the Kan-Be-Healthy screening are documented on the Medical Checklist. Additional areas that may be considered when documenting the health needs of a child at the case planning conference include but are not limited to eye and dental examinations. An example is provided in Appendix 3D.

3117 Genetic Background History Form (YA 2300)

When children are placed in the custody of the Secretary for out of home placement, birth and background information shall be collected and documented on the YA 2300 by the first case planning conference. The form shall be signed by the mother and father, but information may be collected from other family members, if needed. The YA 2300 is a tool used as a tool throughout the life of a case to obtain information about the family and the child that assists in case planning. The information on this form may be helpful for medical professionals and other providers who provide treatment of the child in out of home placement, and it provides information concerning the family's support systems, including relative and non-related kin.

The YA-2300 is part of the information required if a child's case progresses to termination of parental rights. Completion of this form helps the child progress to adoption and shall include information from both the birth mother's and birth father's families of origin. If this information is not available, reasons shall be documented in the case file. The information, if requested, is shared with the adoptee once they become an adult.

3120 Assessment with Out of Home Placement

Each child referred for out of home placement services shall receive a comprehensive assessment of physical, emotional, developmental and educational needs. This assessment shall also include the needs of the child's mother, father, and family, especially, regarding barriers to reintegration of the child. Services to meet identified needs shall be documented at the case planning conference. Using Family Centered Principles, the family shall be actively engaged in determining the services they shall be receiving, selection of the service provider, and evaluation of the services.

3121 Needs Assessment

SRS is responsible for providing information related to the child's and family's needs to the provider and for reviewing the work of the provider to ensure the identified needs are being assessed.

The Child Welfare Case Management Provider is responsible for completing the assessment with the family and child and for sending the completed assessment to the SRS social worker.

3122 Assessing Parental Capacity for Reintegration

Assessment of parental progress towards completing the tasks of the case plan shall an ongoing process, not one reviewed during the case planning conference alone. The assessment process shall include the Child Welfare Case Management Provider and supervisor as well as the SRS social worker and supervisor. Information can be obtained from a number of sources, including, but not limited, to the child's CASA, therapists involved with the family, resource families, family support workers, the child,

birth parents, relative/non related kin, and providers of other services such as specialized day care, and the child's school.

3123 Life Skills Assessment

A. SRS requires that all children/youth shall have age appropriate care, treatment, and training that will develop their life skills. All children/youth in the custody of the Secretary of SRS and in out of home placement regardless of their permanency goal, or older youth who are receiving Independent Living Services from SRS, shall be assessed for life skills as follows:

1. Children age 4-7: see PPM 3120
2. Children/Youth age 8 years and older or children who will turn age 8 within 190 days of referral who are in SRS Custody and out of home placement shall have an Ansell-Casey Life Skills Assessment (ACLSA) completed by the child/youth and caregiver using the age appropriate assessment. Birth parent(s) may also complete the assessment;
3. Youth who are receiving Independent Living Services from SRS shall complete the ACLSA.

B. All children/youth age 8 and older shall have an ACLSA completed by the child/youth and caregiver at a minimum of once every 12 months. The current ACLSA shall be attached to the case plan and copies of each assessment maintained in the case file. The ACLSA is a free on-line assessment accessed through www.caseylifeskills.org

C. When completing the ACLSA the following organizational ID shall be used for all assessments completed. This unique ID will allow agencies to compare assessments for individual youth and also agency wide. The organizational ID shall consist of KS for Kansas, the Region number or SRS Region name and/or Child Welfare Case Management Provider. The Youth ID shall consist of child/youth's full birth date, and last 4 digits of child/youth's SSN. The birth date shall be entered with 2 digit month, 2 digit date, and 4 digit year of birth. An example of the child/youth's unique ID with date of birth of July 1, 1990 and last 4 digits of their SSN is 4830 would be entered as 070119904830. The organizational ID's shall be used as following:

1. Child Welfare Case Management Providers:
    a. TFI Region 1: KS1Farm
    b. DCCCA Region 1: KS1DCCCA
    c. KVC Region 2: KS02KVC
    d. DCCCA Region2: KS2DCCCA
    e. TFI Region 3: KS3Farm
    f. SFCS Family Preservation Region 34: KS34SFAFP
    g. SFCS Reintegration Region 4: KS4SFARE
    h. SFCS Family Preservation Region 4: KS4SFAFP
    i. Youthville Region 5: KS05UMY
    j. DCCCA Region 5: KS5DCCCA
2. SRS Regions:
    a. South East SRS Region: KSSESRS
    b. South Central SRS Region: KSSCSRS

c. North East SRS Region: KSNESRS

d. Wichita SRS Region: KSWISRS

e. West SRS Region: KSWESRS

f. Kansas City Metro SRS Region: KSKCSRS

3200 Development of the Case Plan

The Case Plan is a mutual, cooperative agreement between the family, the agency, and others, as identified or agreed upon by the family, and/or required by the type of case plan. This plan formalizes the family's agreement to participate towards the achievement of the case plan goal.

A. The initial plan is developed within twenty (20) calendar days of the date the services are initiated. The date services are initiated is defined as either the date the family agrees to work with SRS (beyond 45 days) or the date of referral to a Child Welfare Case Management Provider. Participants in the case planning process are referred to as the Child and Family Team.

B. Case planning is a continuous and ongoing process integral to decision making in partnership with the family and/or child. Case planning is based on family centered practice principles which include:

1. Engaging families in service design
2. Treating families with respect
3. Respecting families' privacy
4. Involving immediate, extended, and kin family members as active partners in case planning
5. Providing services in the most family-like setting possible
6. Linking families to community-based, diverse, and comprehensive supports and services
7. Strengthening the capacity of families to function independently
8. Providing culturally sensitive services

C. Case planning involves the child, mother, father, the family's supports and natural community supports. Case planning services shall be directed toward maintaining the integrity of the family, consistent with child safety, permanency and improved family functioning.

D. Case plans shall utilize information provided by the mother, father, child, relative/non related kin and other support persons identified or agreed upon by the family. Additional information may be provided by social workers, resource families, school personnel, guardians, CASA and others who have knowledge of the family and child. Case plans

shall also utilize information contained in the Family Based Assessment, psychological and other assessments, medical reports, and therapist reports. Specific tasks are developed using the above mentioned resources.
The Child Welfare Case Management Provider shall document the participation of the family in the case planning conferences.

E. A Child/Family case planning conference shall be completed with the family when:

1. There is an open family services case and the child is not in the custody of the Secretary.
2. There is an open family preservation case and no child in the family is in SRS custody.
3. A youth, no longer in SRS custody, requests Self-Sufficiency/Independent Living services from SRS. (Self-Sufficiency Plan completed with Youth)
4. A child is in SRS custody, regardless of placement setting. Each child requires their own specific case plan.

F. A Case Plan is required for all cases open for services. The plan contains specific services to be provided to meet the needs of the family. It identifies specific steps to be taken by the family, the SRS Social Worker, Child Welfare Case Management Provider and any other service providers involved. The plan documents this participation for purposes of meeting the child's protection objective of the plan, the goals for the family, and/or young adult working towards Self-Sufficiency, time frames to meet goals, criteria for success, and permanency goals.

Case Plans shall:

1. Be relevant to the critical issues in the family situation;
2. Be realistic in terms of the emotional, physical, and intellectual capabilities of the family members;
3. Be written in language that is clear and understandable to the family and youth;
4. Address the issues identified in the Family Based Assessment Summary (CFS2030F);
5. Specify the steps to be taken to address the identified issues
6. Describe how success shall be determined;
7. Specify the time lines and review dates;
8. Describe possible outcomes as the case plan is implemented;
9. Have the signature of all case plan participants;
10. Utilize and document the participation of the family in (family meetings);
11. Include any relevant orders from the court;
12. Include actions likely to be taken by SRS if conditions of the agreement are not carried out.

3202 Issues to be considered in Case Plan Development

A. The mother and father shall be assessed in order to develop appropriate and effective case plans. The assessment tools in PPM section 3100 provide expectations related to assessments to be completed. Elements to be assessed include but are not limited to:

1. Support network
2. Housing
3. Economic Conditions
4. Physical and emotional care of the child
5. Discipline methods
6. Coping methods and problem solving abilities
7. Physical and mental health needs

B. The child's functioning shall be assessed in order to develop appropriate and effective case plans. Elements to be assessed include but are not limited to:

1. Academic adjustment and progress;
2. Social, emotional, physical, and intellectual development;
3. Relationship with the parent(s);
4. Physical and mental health

3203 Preparing for Case Planning Conference

The services provided to the child, the child's family, and the child's care giver (i.e., resource family home, residential, relative/non related kin, etc.) are directly related to a permanency goal for the child.

A. For healthy emotional development, children need permanency in "child time". While the period of one year may seem a relatively short period of time for an adult, in the life of a four year old it comprises one fourth of their existence. Therefore, it is critical that careful planning and consideration be given to the child, the most vulnerable member of the child welfare team.

B. In addition, children need permanency in relationships, continuity in environment, and predictability in their daily lives. It is the enduring quality of happy and unhappy shared experiences through time that give meaning, depth, and durability in relationships. These experiences must be provided during the child's formative years in order to prepare him or her to become a self-sufficient adult.

C. Permanency planning assumes children deserve a family of their own who can commit to a lifetime relationship. To achieve permanent homes for children in out of home placements, permanency planning requires:

1. Active participation by family and their support system in development of the plan, as they are the experts on the family's situation

2. Structured, time limited rehabilitation programs for parents, to help reunite families;
3. Early intervention, from the time the child first comes into contact with the agency;
4. Planned, regular interaction between parent and child;
5. Decisiveness about the best future placement for the child;
6. Knowledge about how to work with the courts to terminate parental rights when return home is not a viable option;
7. Full disclosure

3204 Accommodations for Participants

If any of the participants are non-English speaking or hearing impaired, the Child Welfare Case Management Provider is responsible for making arrangements to have an interpreter present at the case planning conference.

Consideration shall be given to ensure parents/children with disabilities to have adaptive/supportive services and/or adaptive equipment to maximize their participation in the case planning process.

3205 Time Frames

The following time frames apply:

A. The initial Child/Family Case Plan must be completed and signed by all parties 20 calendar days following the date of referral or in Family Services cases, within 20 days of the family agreeing to the service.

B. A formal case planning review is conducted at least every 170 days and in those cases in which a Child Welfare Case Management Provider is involved, the documentation shall be sent to SRS within 3 business days of the conference . Any member of the case planning team may request a formal review of the case plan at any time. The purpose is to re-evaluate the case plan and modify it as needed to better meet family and child needs.

C. In those cases in which a Child Welfare Case Management Provider is involved, a case planning conference shall be held within 30 calendar days of a permanency goal change.

3206 Establishing a Time and Place

The Child Welfare Case Management Provider or SRS if provider is not involved in case, shall in coordination with the family, establish the time and place for the case planning conference. When utilizing the family meeting process, the location shall be a place convenient for the parents and the child, providing a safe and conducive setting

for family members and their support systems to meet to develop their plan. The time of the conference shall be adjusted to take into consideration the parents' work schedule and the child's school attendance.

It is expected the Child Welfare Case Management Provider staff provide transportation for the parents and/or child in the event other transportation is not available.

Parents who are incarcerated or otherwise unavailable can also participate via conference call, or provide input by email, or other written correspondence.

3207 Case Plan Participants

Participants in the case planning conference are selected based upon their involvement in the life of the child and the type of case plan being developed. Participants in case planning conferences shall be willing to address the concerns that brought the family to the attention of the agency. All participants shall have equal opportunities to actively participate.

A. Diligent efforts to locate both parents shall be made and documented in the case file.

1. Incarceration or living out-of-state does not automatically preclude a parent from such notification.
2. If there is a no contact order, the parent still maintains the right to have full information regarding his/her child. Notification of the case planning conference shall be sent with additional information informing the parent that his/her input is requested, but due to the no contact order, he/she will not be able to attend the meeting in person.
3. Alternative methods to participate shall be offered to the parent. If there is not a child in SRS custody, the same efforts to involve the non-custodial parent are required when appropriate.

B. The third party participant is a person who may have involvement with the family but is not directly responsible for providing services to the child and family. This may include: an advocate for the family's cultural needs; an advocate for special mental health needs of the family/child who is not delivering services; a worker, supervisor, or program support worker not directly involved in providing services to the child & family or a representative from another agency.

C. Persons required to be invited to participate in all case planning conferences:

1. Parents or legal guardians, if whereabouts are known;
2. The child, if age 7 or over, providing the child has the cognitive ability to understand the process and to participate;
3. The Child Welfare Case Management Provider or SRS Social Worker;

In addition, If child(ren) are in the custody of the Secretary, the following persons shall be invited:

1. The SRS staff assigned
2. A third party participant not directly involved in providing services to the child & family;
3. The guardian ad litem;
4. The resource family, including relative and non-related kin providers, for child in out of home placement;
5. The Court Appointed Special Advocate (CASA), if applicable;
6. Tribal representative for children when ICWA applies. The tribe shall also receive a copy of the signed case plan.

D. Persons who should be invited to attend, as applicable:

1. The SRS Regional Independent Living Coordinator or designee for all youth in out of home placement beginning at age 16, to begin discussion and preparation for self-sufficiency services in the event permanency is not achieved
2. Residential or institutional setting treatment staff if the youth is in a residential placement
3. The prospective custodian, if permanent custodianship is the permanency plan;
4. The prospective adoption parent(s);
5. Teachers;
6. The education advocate assigned to the child,
7. The youth's positive adult connection;
8. Any other individuals important to the family or the child who can contribute to the case planning process;
9. The child's HCBS waiver case manager
10. The Case Manager of a parent with a disability, either physically or cognitively, who is involved with a Center for Independent Living (CIL) or a Community Developmental Disability Organizations (CDDO),
11. The Corrections Counselor for an incarcerated parent or parole officer for a paroled parent,

E. Notification of Conference Participants

1. If the child is in the custody of the Secretary and placed at home or in out of home placement, notification shall be given to required participants in writing at least 10 days prior to the date of the case planning conference.
2. If SRS is providing Family Services, SRS shall provide the notification; if services are provided by a Child Welfare Case Management Provider, the Child Welfare Case Management Provider shall provide the notification.
3. Parents and legal guardians shall be the only case plan participants who may request the case plan be held without the opportunity for providing the 10 day notice to required participants. The request and decision shall be documented in the file.

4. The 10 day notice shall be provided by email, fax or letter.
5. Documentation of notification shall be retained and if services are provided by a Child Welfare Case Management Provider, a copy shall be sent to SRS.

F. Participant Training

All participants shall be trained on the purpose of the case planning conference. For the initial case planning conference, the Case Management Provider or SRS Social Worker for cases not referred to provider, shall meet with the family in person to describe its purpose. This training shall be documented in the case logs.

This training shall be accomplished by making available to the participants the handout "An Introduction and Parents Guide to Case Planning Conferences", CFS 3049. The parents shall also be referred to the Family Handbook, CFS 4002, for the initial case planning conference.

These handouts shall be available at the agency conducting the case planning conference. Once a person has had an opportunity to read the handout they do not have to read it during subsequent conferences. These handouts are also available in Spanish.

3208 Case Plan Documentation

A. Case Plans shall be documented on the CFS-3050 series and/or CFS 7000 Self-Sufficiency Case Plan, determined by type of case and service. At a minimum, a signed copy of the plan shall be placed in the case record and a copy given to the family. Staff shall allow the family to audio and video record the case planning meeting.

B. Objectives, tasks, and success criteria shall be documented on the CFS 3050, 3051 or CFS 7000.

1. Objectives shall coincide with the reasons the child is at risk for removal, was placed in out of home care or is in need of a self-sufficiency goal.
2. Tasks are measurable, quantitative steps for achieving the objective, and
3. success criteria are qualitative, behavioral statements about what will change.

An ongoing review of parental efforts toward reintegration shall occur frequently, and parents shall be provided feedback regarding their efforts. Parents shall be informed their efforts and progress are reported to the court. The efforts of all parties toward reintegration shall be documented in the case logs.

C. All case plans shall contain the following:

1. Each child in the custody of the Secretary and in out of home placement shall have a permanency goal, and a concurrent goal if appropriate.

2. Tasks related to Self-Sufficiency goal(s) of young adult (for Self-Sufficiency Cases only);

3. At least one child protection objective identified for each youth

4. Clear action steps identified to accomplish the objectives of the plan;

5. At least one action step to be taken by the youth to meet the plan objectives;

6. Steps to be taken by the parents to meet the case plan objective.

7. At least one service or action to be taken by the social worker/case manager related to case planning;

8. At least one service concerning proper care for the youth;

9. The identified strengths of the youth and his/her family;

10. Identified needs of the youth and his/ her family;

11. At least one service directed toward reintegration if the child is placed out of the home and the goal is reintegration;

12. Services documented on the CFS 3057. This includes basic life skills/independent living for those youth age 15 and older.

D. Initial Case Plan for child in custody only:

1. A task to complete ACLSA by the child/youth and a caregiver prior to the completion of the 2nd case plan,

2. A task to develop Learning Plan from completed ACLSA with Youth by 2nd case plan,

3. Placement provider will begin working with the youth on daily living activities and provide documentation to appropriate service provider as requested, and

E. Subsequent Case Plans for child in custody only shall include three (3) specific daily living activities chosen by the child/youth.

3210 Roles Related to Case Planning

Case Planning is required for all types of services provided by SRS and/or Child Welfare Case Management Provider. Case plans may or may not involve a service provider, depending on the type of case plan and permanency goal.

A. Case Plan Services Without Custody

1. Case plan services without custody may include Family Services, Family Preservation and Self-Sufficiency. If a child welfare case management provider is involved SRS staff shall:

a. Provide information related to the child's and family's needs to the Child Welfare Case Management Provider;

b. Participate in the initial case planning conference;

2. The following activities are related to all case planning for cases without custody. The case manager is responsible for completing these services with the family.

a. Meet with mother, father and other appropriate maternal and paternal kin;

b. Develop tasks and objectives to meet Child Protection Objective(s) from the Family Based Assessment summary for Family Services and Family Preservation cases only;

c. Develop tasks related to Self-Sufficiency Goal(s) of young adult for Self-Sufficiency cases only;

d. Follow through with tasks assigned to SRS and/or service provider;

e. Monitor progress of achieving tasks with family and/or young adult:

f. Determine with family when child protection objective(s) have been met and no further services are needed and case can be closed;

g. Determine with young adult when self-sufficiency goal(s) have been met and no further services are needed and case can be closed;

h. Complete Forms CFS 3050, 3055, and 3057 for Family Services and Family Preservations cases only;

i. Complete Forms CFS 7000, 7000A, 7001, 8591, 8592, 8593, 8594, 8595, 8596, 8597, 8598, 9599 as applicable for Self-Sufficiency cases only.

B. Case Plan Services With Custody

1. SRS is ultimately responsible for all children in the custody of the Secretary and accountable to the court of jurisdiction. If a child in custody is not referred to a Child Welfare Case Management Provider for services, the SRS social worker is responsible for all case planning tasks and services. This includes cases where the aftercare period of the Child Welfare Case Management Provider ends and the child remains in the custody of the Secretary.

2. If a child, or children, in the family have been placed in the custody of the Secretary of SRS but allowed to remain in the home, a separate set of case plan documents shall be completed specifically for each child. If a child welfare case management provider is involved SRS staff shall:

a. Provide information related to the child's and family's needs to the Child Welfare Case Management Provider;

b. Participate in the initial case planning conference;

3. The following activities are related to all case planning for cases with custody:

a. Meet with mother, father and other appropriate maternal and paternal kin

b. Develop tasks and objectives to meet Child Protection Objective(s)

c. Follow through with tasks assigned to SRS and/or service provider;

d. Monitor progress of achieving tasks with family;

e. Determine with family when child protection objective(s) have been met and a recommendation can be made to the court that custody be released;

f. Complete Forms 3051, 3052, 3053 (if child is in out of home placement), 3054, 3055, 3056 (if child is in out of home placement), 3057 and 3059;

g. Submit court reports as required by Judicial District;

h. Provide a copy of completed case plan documents for each child in SRS custody to the court at least every 180 days during the time the child remains in SRS custody;

4. SRS Regional Independent Living Coordinator or designee shall attend case planning conference for all youth in out of home placement beginning at age 16, to begin discussion and preparation of the Transition Plan for independent living services in the event permanency is not achieved.

a. A Transition Plan shall be prepared by the Child Welfare Case Management Provider with the youth if the youth will be in the custody of the Secretary at age 18. The Plan shall be prepared beginning when the youth is age 16. The SRS Regional Independent Living Coordinator or designee shall participate in helping the youth develop their Transition Plan.

b. The youth shall be assisted in considering and identifying specific options for housing; health care and insurance; education; opportunities for being mentored; continuing support services; employment supports and services; and other services needed to maintain self sufficiency for the youth and if applicable, for any minor child of the adult.

c. The Plan shall include where the youth will live and how they will support themselves. Information on available services, supports, and

resources shall be provided to the youth, including if applicable, supports and services for which an adult with a disability is eligible including but not limited to funding for home and community based services waivers.

d. For youth receiving services through an HCBS waiver, the Child Welfare Case Management Provider shall invite the SRS Regional Quality Management Specialist, the responsible HCBS waiver agency and the HCBS waiver case manager for the youth to the case planning conferences. If the youth intends to move to a different area to receive HCBS waiver services, this may involve inclusion of more than one service provider.

e. If the youth is age 18 and has not completed high school or obtained a GED, the Transition Plan shall include activities to achieve this goal by June 1 of the year in which they turn 18.

f. The Plan may include the purchase of services including Foster Family Transition Services for the youth to be supported in achieving self sufficiency.

3211 SRS Responsibilities for Monitoring Cases Referred to Service Provider

SRS staff shall:

A. Review and approve all custody case plans, CFS 3051.

1. An SRS social worker shall complete the Custody Case Plan Checklist, CFS 3058, to document the review and approval of the case plan documents.

2. The Child Welfare Case Management Provider shall provide the completed case plan documents to SRS within 3 business days of the case planning conference.

3. The assigned SRS social worker shall review the case plan using the CFS 3058 and, if all review items are scored "yes", return the approved case plan to the Child Welfare Case Management Provider within 3 business days of receipt of the case plan.

4. Chart the child's progress and monitor "diligent efforts";

5. Track the progress and ensure the Child Welfare Case Management Provider is meeting the goals and objectives established during case planning conferences for the child and family through a system of both formal and informal monitoring.

B. If the SRS social worker is unable to approve the case plan due to required information not being included in the case planning documents, the case plan

shall be returned to the Child Welfare Case Management Provider along with the CFS 3058 which shall reflect the information that is missing. Case Management staff are responsible to take the steps needed to make the needed corrections and provide the corrected case plan to SRS for review within 3 business days. SRS staff shall review the revised case plan and return the approved case plan to the Child Welfare Case Management Provider within 3 business days of receipt of the revised case plan.

Refer to PPM 3239 for instructions on determining Candidacy for Care

3212 The Child Welfare Case Management Provider's Responsibility

Child Welfare Case Management Providers are responsible for working with the entire family of referred children. This includes both the mother and father, when possible. In addition to the responsibilities listed in PPM 3210 A & B, the Child Welfare Case Management Provider shall:

A. Facilitate, maintain, and enhance family relationships to the fullest extent possible;

B. Complete on-going assessments with the family and child

C. Complete case planning for each sibling who is in the Secretary's custody and remains in the home. This includes siblings in the Secretary's custody who are living with the other parent or some other relative (have not been ordered into out of home placement) when the court has ordered a reintegration plan for these siblings with the same parent as the child who is in out of home placement.

D. Ensure the case plan meets all state and federal mandates and SRS policy and procedures.

E. Document all case activities for each child in the custody of the Secretary in the child's file;

F. Conduct all case planning conferences;

G. Ensure all case planning conferences are held at least once every 170 days;

H. Provide written notification on custody cases to SRS, child, parents or legal guardian, guardian ad litem, placement providers, the CASA, a third party participant, and any other appropriate individuals at least 10 days before the date of the case planning conference;

I. Document receipt of requests from participants to reschedule case planning conferences and subsequent action in response to those requests;

J. Document the reason why the child or any other invited individuals did not participate in the case planning conference;

K. Provide or purchase a full array of services for the family and/or child as per the case plan;

L. Coordinate with family on responsibility for issues such as transportation to visits, payments for alcohol/drug testing for parents, etc. Decisions are to be made jointly with the best interests of the child at the forefront of the discussion;

M. If requested, provide additional information to assist SRS social worker to be able to approve case plans when SRS staff did not participate in person or by phone;

N. Ensure all interaction plans with mothers and fathers, siblings, and the assigned Child Welfare Case Management Provider staff are carried out according to the plan;

O. As appropriate or indicated complete, gather, and compile social history, medical and psychological reports, placement history, school reports, and family assessment information on the child and family;

P. Complete placement histories;

Q. Monitor the case plan to ensure the goals are being met as planned and assessing whether new or revised goals should be established;

R. Develop an individualized adoptive family recruitment plan for children who have a case plan goal or concurrent goal of adoption and no identified adoptive resource;

S. Complete initial/annual/updated family assessments with adoptive families;

T. Following an adoptive placement, monitor the case plan to assure the goals are being met as planned and assessing whether new or revised goals should be established;

U. Recruit guardians for youth with profound disabilities who are aging out of the custody of the Secretary and do not have the capacity to manage their own affairs;

V. Formally review the case plan with family and/or child at least once during the time frame of the current case plan and complete the CFS 3055 (Family/Permanency Plan review);

W. Complete all paperwork associated with case planning, including all required forms (3050 series) and ensure copies are provided to all case planning conference participants;

X. Submit the original case plan to the local SRS staff within 3 business days of a case planning conference for review and approval;

Y. Make required revisions to case plan noted on the Custody Case Plan Checklist-CFS 3058 and re-submit to SRS for approval within 3 business days, if original case plan cannot be approved by SRS;

Z. Invite the SRS Regional Independent Living Coordinator or Designee to all case plans for youth in out of home placement beginning at 16 years of age to begin discussion and preparation for self-sufficiency services in the event permanency is not achieved.

AA. Discuss with the youth, the youth's future plans and savings plan as well as provide information regarding work programs, community resources, Post

Secondary Education and Training opportunities and Independent Living Services provided by SRS the youth may be eligible for after discharge from custody;

BB. Help identify youth served by the Child Welfare Case Management Provider and through the aftercare period, who are eligible for Post Secondary Education and Training Opportunities;

CC. Assist the youth with preparing the CFS 8595 Application for Medical Card Extension Program and submit to the SRS IL Coordinator.

DD. Conduct an exit interview prior to discharge with all youth when they have reached 18 years of age or have been emancipated, on the Exit Interview and IL Referral Form (CFS 8550 Section 1-Youth Exit Interview) and submit to SRS IL Coordinator;

EE. Invite the SRS Regional Independent Living Coordinator/Designee to participate in the exit interview prior to discharge for all youth in out of home placement who are exiting the system because they have reached 18 years of age or have been emancipated.

FF. Complete an Independent Living Referral, prior to discharge when requested by the youth, when they have reached 18 years of age or have been emancipated, on the Exit Interview and IL Referral Form (CFS 8550 Section 2-Independent Living Referral) and submit it and the Transition Plan to SRS IL Coordinator.

3214 Planning with Youth Prior to Release of Custody

A. Youth Request Release of Custody

A youth 18 years of age or older may seek emancipation by requesting release of custody to the court in writing. See K.S.A. 38-2203 (c).

B. Transition Plan

1. Youth exiting the system because of release of custody at age 18 or emancipation shall have a Transition Plan CFS 3059. The Transition Plan shall be prepared with the youth by the Child Welfare Case Management Provider beginning when the youth is age 16. The Transition Plan shall be part of the final case plan. The region SRS IL Coordinator shall participate in the development of the Plan.

a. In developing the Transition Plan, Child Welfare Case Management IL Coordinators shall assist youth to identify strengths and needs for services that support self-sufficiency. Youth shall be assisted in considering and identifying specific options for housing; health care and insurance; education; opportunities to be mentored; continuing support services; employment supports and services; and other services needed to maintain self sufficiency.

b. The Plan shall provide for where the youth will live and how they will support themselves. Information on available specific services, supports, and resources shall be provided to the youth.

c. If applicable, the Plan shall provide for home and community based services waivers. For youth receiving services through an HCBS waiver, the SRS Regional Quality Management Specialist, the HCBS waiver agency and the HCBS waiver case manager shall be invited to participate when considering and identifying specific options for HCBS waiver services.

d. Transition planning shall include assisting the youth with preparation of the CFS 8595 Application for Medical Card Extension Program and submitting it to the SRS IL Coordinator.

2. If the youth is age 18 and has not completed high school or obtained a GED, the Transition Plan shall include activities to achieve this goal by June 1 of the year in which they turn 18.

3. The Plan may include the purchase of services including Foster Care Transition Services for the youth to be supported in achieving self sufficiency.

4. The Transition Plan shall include an exit interview using CFS 8550 that verifies the following information and items have been provided to the youth before discharge:

a. Information about the process to request services from SRS after their release and up to their 21st birthday

b. Verification the youth's dental, eye care, immunizations, and medical services are up-to-date

c. Copies of health and medical records and list of medical providers who have provided treatment to the youth while in custody; information involving the youth's health care and records shall be completed in the Health Guide for Kansas Teens booklet. This booklet shall be maintained with current records and information with the youth and shall transition with the youth upon release of custody.

d. Instruction on use of prescribed medications, how to obtain them, and a month’s supply of maintenance medications when appropriate

e. Information and application for the Medical Card Extension Program (CFS 8595)

f. Information about the importance of designating a person to make health care treatment decisions on behalf of the youth if the youth becomes unable to participate in such decisions and there is no relative who would be authorized to make such decisions

g. Information which provides the youth with the opportunity to execute a health care power of attorney, health care proxy, or other similar document recognized by Kansas law.

h. Certified copy of their birth certificate and information about how to obtain a certified copy

i. Social Security card and information about how to obtain original card. See 5205, SRS Responsibilities at the Time of Referral to Case Management Provider and Appendix 6D, Requesting New or Replacement SS Card

j. Photo ID or Driver's license (if youth already has one) and information about how to obtain a license

k. Proof of citizenship and information about how to obtain it

l. A copy of their transcript or GED certificate and information about how to obtain such

m. Any other education records such as IEP the youth may need to be self sufficient

n. Information on the Foster Care Tuition Waiver Program and Education & Training Voucher Program (ETV)

o. Information and application for Kansas Kids @ GEAR UP for youth grades K-12 found at http://webs.wichita.edu/?u=KKGU&p=/downloads/

p. Post secondary scholarship information and application for Kansas Kids @GEAR UP found at: http://webs.wichita.edu/?u=KKGU&p=/downloads/

q. Contact for SRS for Independent Living Services after discharge from custody

5. Youth who leave the Secretary's custody shall have at least one positive relationship with an adult who models responsible behaviors and shall support the goal of self-sufficiency. If such an adult cannot be identified, the Child Welfare Case Management Provider shall work with community agencies, extended family members, resource grandparents, teachers or ministers, or volunteer bureau staff to find an adult who is willing to develop a long term mentoring relationship. Document the positive adult connection's name on the CFS 3052.

3220 Updating the Case Plan between Conference Dates

Minor revisions in the case plan which do not add new tasks for the family to accomplish, can be done by adding notations to the CFS 3051, Permanency Objectives. The notation shall be initialed and dated by those affected.

Progress towards completion of case plan tasks shall be reviewed with the family and child at least once in between conference dates and documented by completion of the CFS 3055. A copy of this form shall be provided to all preceding case plan participants.

3230 Elements of Case Plan

A case plan shall:

A. Contain time lines for reintegration or other permanency goal, child protection objectives and measurable tasks needed to be accomplished

B. Include the visitation/interaction plan

C. Document the persons listed in 3207 A were invited to the case planning conference.

D. Document service delivery

E. Document reasonable efforts made to make it possible for a child to safely return home

F. Document the court has found such efforts not to be a viable alternative.

G. Document steps taken to finalize the permanent custodianship.

H. Ensure that properly credentialed staff sign case plans

I. Include Permanency Plan Review

3231 Development of Permanency Goals

There are five possible permanency goals: maintenance of the child at home, reintegration, permanent custodianship, adoption, and other planned permanency living arrangement (OPPLA).

Each case plan shall contain a permanency goal for the child. Each child in the Secretary's custody and in out of home placement shall have a concurrent permanency goal established, if appropriate, pursuant to Appendix 3F. The permanency goal shall be established at the first case planning conference. The case plan shall be monitored until the permanency goal is achieved. The permanency goal may be changed when it is apparent the original goal cannot be met within a reasonable time frame.

Permanency goals and progress toward meeting the goals are documented on the CFS 3050 Family Service/Preservation Plan or CFS 3051 Permanency Plan.

A. Maintenance of the Child at Home

Maintenance of the child at home is the preferred goal. The child's safety must be assured. Family services or family preservation services shall be considered as options to prevent out-of-home placement of the child.

The SRS social worker has the primary responsibility for the initial assessment of the family and for determining the safety of the child. Once the case is referred to a provider, the SRS social worker and the Child Welfare Case Management Provider case manager are responsible for continuing to assess the safety of the child.

The tasks required to meet the goal of maintaining the child safely at home are recorded on the CFS 3050, Section 4, Maintenance Objectives.

B. Reintegration of a Child in Out-of-Home Placement

For children who cannot remain with their family and must be placed in out-of-home care for their safety and well being, the preferred permanency goal is reintegration. Case planning is directed toward addressing those concerns, which led to the child being removed from his or her home. The Child Welfare Case Management Provider shall provide a full array of services to ensure the parents can resume responsibility for the child in the home in the shortest time possible, with consideration of child's safety and well being.

The initial permanency goal for children in out-of-home placement shall be reintegration and efforts shall be made by the Child Welfare Case Management Provider to achieve that goal.

Tasks needed to accomplish the permanency goal of reintegration are recorded on the CFS 3051, Section 4, Permanency Objectives.

Agency efforts and family progress toward meeting the goals in the case plan are documented in the case logs. This information is reported to the court at every hearing.

C. Adoption

When reintegration is not viable, adoption by relatives/non related kin, resource parents or another unrelated and approved family is the preferred permanency goal in most cases.

If a child has been placed out of home for 12 continuous months at the time of the most recent case planning conference, the permanency goal of adoption shall be considered.

Factors to consider when determining if adoption should be the permanency goal include:

1. The parent's lack of progress in completing the goals and objectives of the case plan successfully.
2. A youth's interest in adoption if age 14 or over;
3. The probability an adoptive family can be developed for the youth;
4. The youth is already placed with relatives/non-related kin on a permanent basis;
5. Age, disability, acute or chronic illness, behavioral issues, or any other single decision element shall not be the deciding factor when considering whether or not to pursue termination of parental rights and to select adoption as the permanency goal for a specific child. The best

interests and well-being of the child are the goal for any plan for a child's permanency.

If adoption was considered but not established as the goal, the reasons must be documented in the summary section of the CFS 3051, Section 7.

If adoption is established as the goal, the possibility of obtaining a relinquishment of parental rights from the parent(s) must be considered during the case planning conference and by the 12th month of out-of-home placement.

If relinquishment is deemed appropriate, it shall be discussed with the parents and documented in the summary section of the CFS 3051, Section 7.

Tasks needed in order to achieve the permanency goal of adoption are recorded on the CFS 3051, Section 4 Permanency Objectives.

Progress toward meeting the objectives associated with the permanency goal of adoption is recorded on the CFS 3051, Section 7.

If it is determined the goal needs to change from adoption to another permanency goal, approval shall be given by the Regional CFS Program Administrator before the case planning conference where the goal is changed.

D. Permanent Custodianship

For those youth for whom the court has determined that reintegration and adoption are not viable permanency options, permanent custodianship provides the child with the next preferable goal. Permanent custodianship enables the caretaker to exercise all the rights and responsibilities of a parent without the on-going oversight of SRS. Custodianship may be an option for youth with or without the termination of parental rights.

The tasks required to meet the goal of permanent custodianship are recorded on the CFS 3051, Section 4, Permanency Objectives.

E. Other Planned Permanency Living Arrangement (OPPLA)

The permanency goal of OPPLA is appropriate only when documentation has been provided to the court compelling reasons exist which make all other permanency options unacceptable. The compelling reasons may include:

1. An older teen requests emancipation;

2. A parent with a disability, who even with supports, cannot care for a child, but a significant bond exists between them, and the placement resource is willing to sign a commitment agreement for the child to remain in their home, but is not willing to adopt or be a permanent custodian for the child;

3. A tribe has identified a planned permanency living arrangement for an Indian child.

Choosing this option is appropriate only when there is a specific, long-term placement for the child. Long-term out of home placement is not an acceptable permanency option and shall not be chosen as a planned permanency living arrangement.

A planned permanency living arrangement is subject to ongoing review at later permanency hearings. More permanent options for the child shall continue to be explored throughout the time the child is placed out of the home. At no time shall the permanency option of OPPLA rule out other more permanent options.

3232 Concurrent Case Planning

Concurrent case planning emphasizes frequent interactions with birth families to achieve the preferred permanency goal of reintegration while simultaneously developing another goal as an alternative permanency plan for the child, if reintegration cannot be achieved. Concurrent case planning minimizes the negative impact of separation and loss on the child, and maintains the continuity in the child's family and sibling relationship.

A. The Child Welfare Case Management Provider shall use a concurrent case planning model reflecting frequent parent/child interactions while the child remains placed in a relative/kin/foster/adopt home, intensive, time-limited work with birth families targeting the reason the child is in out of home placement, and develop a network of permanency planning resource parents who can work toward reintegration and also serve as the permanent resource for the child.

1. The Child Welfare Case Management Provider case manager and supervisor shall use the Concurrent Case Planning Guide (Appendix 3F) or a research based instrument to staff cases where concurrent planning might be in the best interest of the child.

2. Early reunification prognosis indicators and poor prognosis indicators shall be noted.

3. If the staffing concludes a concurrent case plan should be done, a case plan shall be scheduled within 30 days.

When it has been determined by the court that reintegration is no longer a viable option, the alternative permanency goal shall become the primary goal.

B. Relative/Kin/Foster/Adopt Family Role in Concurrent Case Planning

While efforts are being made to reintegrate the child with his/her family, diligent efforts shall be made to locate an absent parent, relatives, and/or non-related kin. These persons shall be explored as a possible resource for the child if reintegration cannot be achieved. Relative homes may be approved using Provider agency standards instead of being approved as meeting KDHE licensing standards. If the concurrent goal is adoption, the assessment shall include the KBI, SRS Central Registry, and fingerprint checks. If there are prohibitive crimes, the Child Welfare Case Management Provider shall send the completed assessment and background checks to the CFS Program Administrator, or designee, for review.

If relatives and/or non-related kin are not an option, efforts shall be made to find a foster/ adopt family. A foster/adopt family provides out of home placement care for the child and works toward reintegration with the family if the plan is feasible. They also agree to be the permanent/adoptive resource for the child if parental rights are terminated. The Reintegration/Foster Care/Adoption Provider shall recruit and prepare families for this unique role, as well as provide support to these families.

Relative/Kin/Foster/Adopt families who have children in their care with a concurrent case plan should understand their dual role. The Reintegration/Foster Care/Adoption Provider shall select the family by considering the family's ability to not only meet the current needs of the child but the future needs as well. The placement of a child with a relative/kin/foster/adopt family shall be made only after a team of professionals have carefully considered all factors relevant to the family and the well-being of the child.

3233 Development of Objectives and Tasks

When developing objectives for the family and child, consideration shall be given to the strengths and needs of each family member. The objectives shall relate to the strengths and needs and designed to help the family overcome barriers to the child remaining at home or returning home. The objectives, tasks and criteria for success are to be listed on the CFS 3050 or 3051, Section 4.

A. Objectives

1. Objectives shall relate to presenting problems, not prior or anticipated problems.

2. There shall be at least one but no more than three objectives listed with the associated tasks and responsibilities. The objectives shall be taken from the CFS 2030F. (See Section 2820 for FBA timelines.)

3. The case plan shall contain at least one objective that addresses the safety of the child and the reason why the child came into custody.

4. Objectives shall be measurable and shall state an end result (i.e., what changes will be made).

B. Tasks

1. Specific tasks to be accomplished by the parents, child and/or other members of the household shall be identified;

2. Tasks shall be written at the parent's level of understanding;

3. Tasks shall be listed in the order of priority

4. Tasks shall identify specifically what shall be done, by whom, how, and in what time frames;

5. There may be multiple tasks and multiple persons assigned responsibility for completion of the tasks;

6. Tasks shall address needs identified through the ACLSA.

7. Tasks to develop or enhance a support network shall be a part of the case plan.

Prior to discharge, case plans on all youth shall have tasks identified to meet these goals:

1. A stable and safe place to live, documented in a signed agreement between the youth and the placement resource, as applicable.

2. Life skills training

3. Attained specific academic or educational goals appropriate for the youth (at a minimum GED/high school diploma).

4. Information and/or training on postponing parenthood.

5. Information regarding available medical and mental health services and have in their possession copies of their health records.

6. A social support person/positive adult connection (at least one adult in the community other than the Child Welfare Case Management Provider whom they can go to for support).

7. A checking/savings account.

All youth must be involved in all planning conferences related to their future and shall help design their plan for self-sufficiency.

C. Criteria for Success

1. Criteria for success statements shall indicate what qualitative, behavioral changes will occur as a result of the services provided.
2. Each objective listed in the case plan shall have criteria for success identified.
3. Parents' input shall be considered
4. The criteria for success statements shall be individualized for the specific family
5. The language used shall be easily understandable.

3234 Participation/Signatures

All individuals who participate in the case planning conference shall sign the Participants' Signature section of the form. If a person participates by phone, a copy of the CFS 3050 or 3051 shall be sent for them to sign and return to be included in the case planning documentation. Social workers/Case Managers shall not sign for participants. The case plan shall be dated with the date the person participated in the case planning conference.

A. The Child Welfare Case Management Provider Case Manager is required to participate in the case planning conference and sign the case planning document. If the assigned Child Welfare Case Manager is unable to attend the case planning conference, the supervisor or case manager covering the case in the absence of the assigned case manager may participate in and sign the case plan form.

B. For child in custody cases, the third party participant is required to participate in the case planning conference and sign the case planning document.

C. Participation of both parents in case planning conferences is crucial to the development of the permanency goal for the child. The parents shall be provided proper notice of the case planning conference and have an opportunity to request a change in the date, time, or location of the conference. The importance of their involvement and their rights and responsibilities shall be explained.

D. If the parents do not attend the case planning conference, the case planning conference may proceed. Tasks can be assigned to the parents in their absence. Following the case planning conference, the Child Welfare Case Management Provider shall attempt contact with the parent(s) who did not attend the conference to review the case planning document. If a parent is in agreement with the case plan, they sign on the signature page of the original document and date their signature the day the case planning document is signed.

E. If a parent is not in agreement with the case planning document, they must indicate such on the signature page and sign the form with the date the signature was made. The parents shall then receive another case planning conference within 14 days of the date of the request.

F. Parents who are unable to attend due to incarceration, living out of state, hospitalization in a mental health facility or drug and alcohol treatment shall be offered an opportunity to participate in the case planning conference by telephone.

3236 Education

The Child Welfare Case Management Provider shall assure that the child's education needs are assessed and met, and shall coordinate with the local school district and request copies of school records.

A. Special services shall be pursued when a need is identified or suspected. These may include but are not limited to the following special services:

1. An education advocate
2. IEP or 504 Plan
3. Vocational rehabilitation services
4. GED or Alternative Diploma
5. SSI

B. The youth shall work toward completing a high school education, GED or other alternate education plan. A GED can only be explored if a youth:

1. has dropped out of school and can not be persuaded to return to school.
2. is 18 years old.
3. is two or more years behind his or her grade level.

3237 Interactions/Visitations

A. Parent/Child Interaction

1. Parents retain the right of reasonable contact with their children, regardless of the case plan goal, unless parental rights have been legally terminated or the court orders no contact.

a. If the case plan goal is reintegration, face-to-face parent/child interaction shall occur at least once a week, with unlimited telephone contact and mail if

deemed appropriate and in the best interests of the child. Parent/child interaction shall increase in duration, as appropriate.

b. If the case plan goal is other than reintegration, the frequency of face-to-face parent/child interaction shall be a family driven decision reflected in the case plan for the child.

c. Parent/child interactions shall occur in naturally occurring settings, and foster parents shall have input and opportunity for involvement in these interactions.

2. The location of the parent/child interactions shall be determined based on the best interests of the child, and the activity in which the parent and child shall be engaged. When possible, parent/child interactions shall occur unsupervised.

3. Parent/child interactions may occur in the foster home. Prior to a first interaction in the foster home, roles and expectations shall be reviewed with the birth parents, child, and foster family.

4. Plans for required interactions between the parent and child shall be documented on form CFS 3051, Section 5, and the schedule for interactions shall be tracked on the CFS 3053, Parent/Child Interaction Schedule. The CFS 3053 is a stand-alone document that shall be updated and sent to all affected parties whenever the Interaction Schedule changes. Illness, inclement weather or other situations may arise which may affect a planned interaction, however, documented interactions should demonstrate a pattern of consistent and frequent visitation.

Parent/child interactions shall be documented in the case file. An encounter data code has been created for these interactions, and these interactions shall be included in the monthly submission of encounter data to CFS.

B. Supervised Interactions

Supervised interactions shall take place only as required by a court order or for reasonable cause documented on the CFS 3051, Section 5.

C. Exceptions to Face-to-Face Parent/Child Interactions

1. Parent-child interaction may be limited or prohibited for therapeutic reasons documented in the case record or if required by court order.

2. Punishment of either the parent or the child shall not be deemed a legitimate reason to limit visitation.

3. Restrictions on interaction or contact for therapeutic reasons shall be based upon the written recommendation of a physician or mental health practitioner. Restrictions on interaction or contact for safety reason shall be based upon concerns documented in the ongoing assessment and the Child Welfare Case

Manager shall staff the case with their supervisor or designee prior to making the decision to limit interactions or contact. The court shall be informed of the decision in writing with a copy of the person whose interaction or contact is being restricted.

D. Sibling Visitation

Siblings are defined as children who have one or more parents in common either biologically, through adoption, or through the marriage of their parents, and with whom the child lived before his or her foster care placement, or with whom the child would be expected to live if the child were not in foster care.

1. The responsibility for arranging visitation with siblings who reside with the parent(s) rests with the parent(s) and shall occur with the same frequency provided for parent/child interactions unless joint visitation does not further the permanency goal.
2. Visitation between siblings in the custody of the Secretary and in out of the home placement shall occur at least twice monthly. Exceptions to sibling visitations include:
    a. valid therapeutic reasons for increasing or decreasing the frequency of visitation and documented in the child's case record; or
    b. a court order limits visitation.

Plans for sibling visitation shall be made at the case planning conference and documented on CFS 3051, Section 5 and the CFS 3054 Visitation Schedule. The CFS 3054 is a stand-alone document that shall be updated and sent to all affected parties when the Visitation Schedule changes. All sibling visits shall be documented in the case file.

E. Worker/Child Contacts

Face to face worker/child contact shall occur a minimum of once a month. Contact may be with the Child Welfare Case Management Provider case manager or a paraprofessional, who is part of the child's case planning team. A primary contact, Child Welfare Case Management Provider case manager or paraprofessional shall be designated on the visitation form. Plans for Worker/Child contact shall be made at the case planning conference and documented on CFS 3051, Section 5 and the CFS 3054 Visitation Schedule. The quality of all worker/child contacts shall be documented in the case file, using the Child Welfare Case Management Provider approved Child/Worker visit guide or protocols. The offer of the Monthly Individual Contact CFS 3061 form shall also be documented.

If either the child or the parent with whom reintegration is the plan is located outside of Kansas but not located in the Kansas City Metropolitan Area, a request shall be made to the state in which the child or parent is located to carry out the required frequency of contact. The Child Welfare Case Management Provider shall make this request via the ICPC agreement.

F. Worker/Parent Contacts

Face to face worker contact with mothers and fathers shall be at least monthly, when reintegration is the goal. For children with a case plan goal other than reintegration, the frequency of worker/parent contact shall be a family driven decision reflected in the case plan for the child. Contact may be accomplished by the child's Child Welfare Case Management Provider worker or with a paraprofessional who is part of the child's case planning conference and assigned this task. Plans for required contact between the worker and parent shall be made at the case planning conference and be documented on form CFS 3051, Section 5 and the CFS 3054 Visitation Schedule. All worker/parent contacts shall be documented in the case file.

The required frequency of worker/parent contact may be modified for valid therapeutic reasons documented in the service plan.

3238 Life skills

A. Child Welfare Case Management Providers are responsible for teaching or coordinating the delivery of life skills services. Life Skills services shall be provided to all children 4 years of age and older who are in SRS custody and in out of home placement. All youth who are receiving Independent Living Services from SRS shall also have life skills services provided to them as appropriate and needs are identified. Life skill/independent living services shall be documented on the CFS 3057 in the independent living code section.

All youth 8 years of age and older in out of home placement shall complete the Ansell-Casey Life Skills Assessment (ACLSA). See PPM Section 3100 for information regarding the ACLSA. The ACLSA identifies youth abilities based on the age appropriate assessment level. The Child Welfare Case Management Provider shall provide specific services to address the youth's needs as identified by the ACLSA.

Foster families are expected to support and integrate these services into daily living activities with the youth. Birth and foster families, shall have knowledge and training to reinforce or teach methods to address these needs. Youth shall be given opportunities through daily living to practice and learn these life skills. The Case Management Provider shall provide resources and training in the appropriate competencies identified in the following age appropriate life skills domains:

1. Communication

2. Daily Living
3. Home Life
4. Self Care
5. Work and Study Skills
6. Social Relationships
7. Housing and Money Management
8. Career Planning
9. Work Life

Free resources are available through www.caseylifeskills.org related to the nine (9) life skill domains listed above. Additional resources may be used as deemed appropriate to meet the youth's needs.

B. Life Skills Training

Life Skills training and activities shall be provided according to the child/youth's strengths and needs as determined by the ACLSA. The CFS 3055 documents the dates of completion of the ACLSA, summary of life skills progress and positive adult connection information.

The ACLSA generated Learning Plan is used as a resource tool only and specific tasks identified on the Learning Plan may or may not be included as tasks on the case plan, depending on identified youth goals. A copy of the Learning Plan shall be included in the file. A new Learning Plan shall be generated at a minimum of every twelve (12) months with the up-dated ACLSA.

When a youth is already a parent or expecting a child, classes in parenting skills and child care shall be made available and documented. Casey Life Skills has supplemental assessments for Parenting Infants and Parenting Young Children, which may be used as resources in working with young parents.

Vocational Rehabilitation shall be informed of the youth's location and situation and asked to evaluate a youth's need for services when appropriate. Youth with an IEP qualify for vocational rehabilitation evaluations at age 16.

Some children/youth shall have identified special needs that will limit their ability to achieve age appropriate life skills and self sufficiency as adults. These youth may have debilitating conditions that may require a life long or long term care plan. They may need guardians as adults. Youth shall be referred for vocational rehabilitation services by age 16 if needs are identified. Youth shall also be referred to other community resources, such as community mental health, SSI, adult services, and resource centers as necessary. These specialized programs can help provide the intensive services needed for the youth's transition to adulthood.

Child Welfare Case Management Providers are encouraged to develop specialized programs for youth. The contractors may have a separate complex in their facility and/or provide a subsidy for youth under the age of majority and learning to live independently and renting an apartment. Independent living subsidy is not available to youth under the age of 18, as set forth by Chafee regulations. Other funding sources must be utilized to support this population.

C. Information Provided to Youth

Youth shall be provided information regarding all aspects of health care. This shall include information regarding avoidance of unsafe health practices such as:

1. use of tobacco, products, drugs and alcohol
2. sexually transmitted diseases or unplanned pregnancies
3. factual information on how and when to seek medical care
4. basic first aid training
5. discussions on health insurance and health wave
6. specific information for any youth who has special medical needs. Information shall be provided that provides opportunities for the youth to learn to meet those needs (e.g. appointments, etc.)

3239 Determination/Redetermination - Candidate for Care Status

In order for the state to receive IV-E administrative funds for activities provided to children receiving in-home services, SRS must determine if the child meets criteria as a candidate for care. The standard to determine a child is a candidate for care is; the child is at imminent risk of removal and the services provided in the current case plan are intended to eliminate the risk of removal from the home.

A. At the initial case plan conference and no less than every 180 days thereafter during the in home service case, SRS social work staff must determine eligibility for candidates for care. An individual child determination must be made for all family service, family preservation, and Reintegration/Foster Care/Adoption cases without regard to custody status. The worker shall review the case plan and determine if the child is a candidate as indicated on the CFS 3050 and 3052.

B. Review statement on CFS 3050 or 3052 which reads "Absent effective preventive services to assure the child's safety, the child will be determined to be at imminent risk of removal from the home". If this statement applies to the child who is the subject of the case plan, check the "Yes" box next to their name. If this statement does not apply to the child, check the "No" box. SRS social worker making this determination shall provide their signature..

3240 Youth with Developmental Disabilities/Referral for Guardian/Conservator if Needed

Older children/youth with developmental disabilities in out of home placement and unable to support themselves may need to be appointed a guardian/conservator. See KSA 39-1803 for definition of developmental disability.

A. A guardian is defined as a person or an approved non-profit corporation appointed under law to act and make decisions of physical health and safety on behalf of a legally disabled adult.

B. A conservator is defined as a person or corporation appointed under law to act and make decisions regarding the financial resources or estate of a legally disabled adult. See KSA 59-3050 et seq. for more information. The Kansas Guardianship Program seeks Guardians/conservators from the area where the youth will live as an adult so they can be available to make decisions as necessary.

C. The youth's case plans, beginning with the case plan following the youth's 16th birthday, shall include tasks related to assessing the need for a guardian/conservator and identifying the responsible parties to secure a guardian/conservator if the need is determined. The Child Welfare Case Management Provider shall use the "Decision Making and Function Assessment: Criteria for Legal Impairment-A Multidisciplinary Tool" SRS form # ES-1012-in KEESM manual at: http://www.srskansas.org/KEESM/KEESM.htm to assess the need for a guardian/conservator.

D. If a guardian/conservator is needed, the goal is to have a guardian/conservator appointed as soon as possible after the child reaches age 18. See Section 3214 for information on transition planning for youth turning 18. Youth who have disabilities will have needs that shall be addressed to plan for their transition to adult services. These include referrals for adult SSI, planning for living accommodations, and coordination with the CDDO and/or CMHC. If the youth receives SSI as a child, referrals to the Social Security Administration, through our current contractor, for adult SSI shall be made 90 days prior to the youth's 18th birthday.

E. The Child Welfare Case Management Provider shall attempt to identify a guardian/conservator for the youth, if needed, by checking with the adult role model for the youth, kin, foster parents, teachers, etc. If the Child Welfare Case Management Provider has not been able to identify a resource, the Child Welfare Case Management Provider shall consult with SRS Adult Protective Service (APS) staff in the Region where the child was referred to the Child Welfare Case Management Provider, to determine the appropriateness of SRS making a referral to the Kansas Guardianship Program for the appointment of a guardian/conservator. Although SRS/APS staff will not officially accept the case until the youth is 17 ½ , preparation for referral to SRS/APS can begin prior to that date.

F. If the Child Welfare Case Management Provider has not been able to identify a guardian/conservator, the Child Welfare Case Management Provider shall follow the procedure outlined in the KEESM Policy Manual, located in Section 12630.

3310 Legal Base

Public Law 105-89, The Adoption and Safe Families Act (ASFA) of 1997 (42 U.S.C. 620 et seq. and 670 et seq.) was signed into law on November 19, 1997 and designed to improve the safety of children, to promote adoption and other permanent homes for children who need them, and to support families. The law requires CPS agencies to provide more timely and focused assessment and intervention services to the children and families are served within the CPS system.

ASFA and subsequent amendments to the Kansas Code for the Care of Children state child safety is paramount, and when efforts to maintain or reintegrate a child with the family are not appropriate, other permanency efforts shall be made.
The Revised Kansas Code for the Care of Children (K.S.A. 38-2201 et seq) was amended to comply with federal ASFA laws, which require the court of jurisdiction hold a permanency hearing within 12 months the date the court authorized the child's removal from the home and not less frequently than every 12 months thereafter.

The Kansas Code for Children at K.S.A. 38-2269 provides for the termination of parental rights and K.S.A. 38-2270 the commitment to SRS for the purpose of adoption. KSA 59-2124 gives SRS the authority to accept relinquishments of children by their parents for the purpose of adoption and establishes procedures for the filing of petitions to adopt.

The policies and procedures are applicable for all children in the custody of the Secretary through the provision of the Kansas Code for the Care of Children (K.S.A. 38-2201 through 38-2283) or relinquishment (K.S.A. 59-2124) The provisions of the codes and policies of SRS are incumbent upon private Child Welfare Contract Management Providers as well. Children in the custody of the Secretary and in out of home placement are served by Child Welfare Contract Management Providers.

Children are placed by the Court in the custody of the Secretary of SRS in the following ways:

A. The Court may award custody to the Secretary through the provisions of the Kansas Code for the Care of Children. A child in SRS custody is referred to as a "Child in Need of Care" or "CINC" for short. The Court can choose to allow the child to remain in the custody of the Secretary as a CINC until his/her 21st birthday.

B. A divorce court may award temporary custody of the child to another person or agency if the court finds the award of custody to the other person or agency is in

the best interests of the child. Temporary custody orders shall remain in effect until there is a final determination under the Kansas Code for the Care of Children. When the divorce court enters orders awarding temporary custody of the child to an agency other than the parent, the court shall refer a transcript of the proceedings to the county or district attorney. K.S.A. 60-1610(a)(5)(C) The county or district attorney shall file a petition as provided in K.S.A. 38-2233 and may request termination of parental rights pursuant to K.S.A. 38-2266.

3320 Working with the Court System

SRS and the Child Welfare Case Management Provider shall have thorough knowledge of the court system. The Kansas Code for Care of Children (K.S.A. 38-2201) imposes certain duties on SRS for notifying the district court of commitment of initial placement, subsequent moves after placement, and the child's progress. Notices shall be provided to the judge, guardian ad litem, and all involved attorneys regarding information relevant to the child and family's progress toward meeting goals for permanence.

SRS shall be responsible to provide these notices and progress reports for the family service cases which include a child, or children, in the home who are in the custody of the Secretary. The Family Preservation Provider shall be responsible to provide these notices and progress reports for the cases referred to them involving a child who is in the custody of the Secretary and remains in the home. The Reintegration/Foster Care/Adoption Providers shall be responsible to provide these notices and progress reports for the children who are in out of home placement.

Throughout the remainder of this section, if SRS is providing services to a child who is a Child in Need of Care in a family services case, the responsibilities listed for the Child Welfare Case Management Provider will be applicable to SRS, with the exception of responsibilities related to out of home placements.

This information is provided to the court through several avenues, including:

A. Periodic reports

B. Testifying in court

C. Notifying the court of certain issues

The court is responsible for notifying all parties of upcoming hearings. However, the Child Welfare Case Management Provider shall insure the child, the parent(s), and the child's placement are notified of any court hearings. The Child Welfare Case Management Provider shall document these notifications in the case file.

SRS and Child Welfare Case Management Providers are responsible to the court for all children in the custody of the Secretary of SRS. The Child Welfare Case Management Provider is responsible for providing reports to the court and SRS for all children under court jurisdiction as a child in need of care..

3321 SRS and Child Welfare Case Management Provider Responsibility to the Court

SRS and Child Welfare Case Management Providers are responsible to the court for each child in the custody of the Secretary and are held accountable for any orders of the court. All reports to the court shall be comprehensive in nature, detailing the gains and losses of the family and/or child. Each report to the court shall contain detailed case information to explain the child's current situation, the unique needs of the child, and the plan of action the agency intends to implement to meet these needs. The report shall have a clear permanency goal, or concurrent goal, if appropriate, the steps taken, and the progress made to meet that goal.

The Child Welfare Case Management Provider shall:

A. Attend all court hearings;

B. Provide any reports requested by the court;

C. Assure the content of court report is complete, accurate, up to date, and addresses specific concerns of the court;

D. Provide the Court with the child's CFS 3003-Court Report Summary-unless otherwise specified by the court-at least 10 days prior to the date of the hearing or per court requirements (if different than 10 days)

E. Abide by all court orders

F. Provide written notice to the court of planned and emergency moves, per PPM sections 3361-3364.

G. Beginning when the youth is age 16, prepare a transition plan with the youth to present to the court for the court’s approval;

H. Notify the court of jurisdiction when the adoption of a child is finalized; and

I. Follow verbal orders from the court and document those orders in the case file.

3330 Court Orders

Staff shall comply with every order made by the court. When a court order is received, which appears to go beyond the limits of the statute, requires something which can not be accomplished or appears to be contrary to the welfare of a child, consult legal counsel for guidance and any necessary action.

3340 Documentation of Custody

A written order from the court of commitment signed by the judge with jurisdiction of the case places a child in the custody of the Secretary of SRS. All court orders authorizing an initial out of home placement and custody to the Secretary are required to be on forms provided by the Office of Judicial Administration (OJA).

3350 Returning the Child Home (Reintegration)

For a child in the custody of the Secretary who has been adjudicated a Child in Need of Care, the Kansas Code for Care of Children prohibits the Child Welfare Case Management Provider from returning a child to the home from which the child was removed without providing written notice to the court at least 14 calendar days prior to the planned date of return. After reviewing the information provided to justify the child's return to a parent, if the court sets a hearing on the matter, the child may not be returned to the parent's home without written consent of the court.

3361 Informing the Court of Placement Moves

The Child Welfare Case Management Provider shall inform the Court as well as other parties required to be notified, including SRS, of the child's placement/living arrangements at the time of the initial placement and for all changes in placement. This may be accomplished by sending a copy of the Acknowledgment of Referral/Notification of Move/Placement form (CFS 3031). If the court does not approve of the child's placement, a hearing shall be set to discuss placement plans for the child.

3362 Thirty Day Notice of Planned Move

KSA 38-2258 of the Children in Need of Care code (K.S.A. 38-2201) provides for the written notification 30 days in advance of the planned move for all children in court custody who have been in the same foster home or facility for six continuous months or longer or in the home of a parent or relative for any period of time.

The notification shall be provided to: 1) the court having jurisdiction over the child; 2) the petitioner; 3) the attorney for the parents, if any; 4) each parent whose address is available; 5) the foster parent or custodian from whose home or shelter facility it is proposed to remove the child; 6) the child if age 12 or older; 7) the child's guardian ad litem; 8) any other party or interested party; and 9) the child’s court appointed special advocate. The notification to the court of jurisdiction and other interested parties allows time for any of these parties to request a court hearing to determine whether or not the change of placement is in the best interest of the child. The move may take place prior to the expiration of the 30 days if all parties notified agree in writing to the move.

3363 Hearings Regarding Placement Moves

Within 14 calendar days, anyone receiving 30 day notice of planned move may request either orally or by written motion that the court conduct a hearing to determine whether or not the proposed change in placement is in the best interests of the child. When requested, K.S.A. 38-2258 requires the court to schedule a hearing and immediately notify SRS of the time and date of such hearing and shall notify persons as identified by the court records. The child shall not be moved until action is approved by the court.

3364 Exceptions to Thirty Day Notice of Planned Move

There are two exceptions to the requirement of thirty day advance notice of planned move:

A. The move is to the home of the pre-adoptive family selected by the best interest staffing team. For these moves, a copy of the Acknowledgement of Referral/Notification of Move/Placement Form shall be sent to the court at the same time it sent to SRS.

B. The child is being returned to the parent's home. For these moves, written notice shall be made to the court at least 14 days prior to the planned date of return. After reviewing the information provided to justify the child's return to a parent, if the court sets a hearing on the matter, the child may not be returned to the parent's home without written consent of the court.

3365 Emergency Placements

SRS or the Child Welfare Case Management Provider may change placement of a child without providing prior notice if:

A. An emergency exists requiring immediate action to ensure the safety and protection of the child; or

B. SRS or the Child Welfare Case Management Provider is notified the child has become unwelcome in the resource home or residential facility.

In either situation, SRS or the Child Welfare Case Management Provider may transfer the child to another resource home or other residential facility without prior notice or court approval.

Written notice of the emergency move and the reasons shall be sent to the court, SRS, the parent(s), and the guardian ad litem by the first day following the move through submission of the Acknowledgement of Referral/Notification of Move/Placement Form (CFS 3031).

3370 Compliance with State and Federal Requirements

The Adoption Assistance and Child Welfare Act of 1980 (Public Law 96-272), and the Kansas Code for Care of Children K.S.A. 38-2201 thru 38-2283 set practice standards for child welfare services. Among these standards are "reasonable efforts", which have been reinforced on the federal level by the Adoption and Safe Families Act (ASFA).

Providing and/or purchasing services for the family are methods of complying with these mandates.

3371 Reasonable Efforts

The primary goal of SRS and the Adoption and Safe Families Act (AFSA) is the safety of the child.

A. Reasonable efforts shall be made to prevent the removal of the child from the home. The legal documents (journal entries), prepared by the court, must articulate reasonable efforts the agency made to keep the child at home or demonstrate that an emergency existed and the child's safety was in jeopardy, requiring out of home placement.

While it is the court's responsibility to document these efforts, it is the responsibility of the Child Welfare Case Management Provider to provide the court with documentation of all efforts made to keep the child at home.

Reasonable efforts need to be taken into consideration when determining case plan objectives. It is important to be aware of services that have already been implemented as well as services that may yet be needed.

Services to the family which are used to document reasonable efforts include but are not limited to:

1. Referral to SRS Family Services;
2. Referral to other community resource agencies (i.e. clothing/food banks, day care centers, churches, and counseling centers, etc);
3. Referral to services provided by the school system;
4. Referral to the Family Preservation Case Management Provider.

The court shall document this finding at a permanency hearing and a copy of the documentation placed in the case record. Reasonable efforts to return the child to his/her home continue until at the court permanency hearing find reasonable efforts are not needed. The court shall document this finding in writing and a copy of the written documentation must be in the case record.

B. Efforts to Return Child Home

In those situations where a child has been removed from his/her home, the Child Welfare Case Management Provider is responsible for the provision of services to facilitate reintegration. The decision to recommend reintegration is a decision made by and communicated to the court. The primary factors in this decision are the safety and well-being of the child. Demonstrating reasonable efforts to return a child home when there is a concurrent plan is especially important.

During the time the child is in out of home placement, the Child Welfare Case Management Provider shall ensure the family receives services to address the concerns, which resulted in out of home placement. Identification of these services shall take place during all case planning conferences. The Case Management Provider shall continually monitor the effectiveness of these services.

In the case of divorced or unmarried parents, the child is considered "reunified" when he/she is placed with either parent, regardless of the home of removal.

The family shall receive adequate follow-up services from the Child Welfare Case Management Provider during the 12 months aftercare period following the child's return home.

Services to the family and/or child, which facilitate reintegration, include but are not limited to:

1. Assistance in building a family support network;
2. Family counseling/therapy;
3. Assistance in accessing school resources;
4. Parenting Classes;
5. Referral to Drug/Alcohol Treatment;
6. Individual Therapy;
7. In Home Services;
8. Budgeting instruction;
9. Employment services;
10. Housing assistance;
11. Assistance in accessing all applicable community resources;
12. Assistance with transportation and in developing the family's transportation resources;
13. Development of a safety plan at reintegration;
14. Development of a crisis intervention plan.

All of these efforts shall be documented in detail in the case record and reported to the court. The court shall determine if the child may be safely reintegrated and document all such efforts in journal entries.

Reasonable efforts to ensure the child's safety at the time of reintegration and during the Child Welfare Case Management Provider aftercare period shall be documented in the case file and the CFS 3051, Permanency Objectives. The case plan shall be attached to the CFS 3003, Report to the Court. Other documentation includes any special reports prepared by the Child Welfare Case Management Provider, case logs, and schools reports/records, resource parent logs/reports, therapist reports, etc.

If a determination is made that the reintegration efforts have not been successful, the Child Welfare Contract Management Provider shall submit a report to the court recommending termination of parental rights. The court shall document these reasonable efforts in the journal entries.

C. Conditions When Reasonable Efforts are not Required

Both ASFA and the Kansas Code for the Care of Children clarify that child safety is paramount and efforts to maintain a child at home or reintegrate the child are not required when:

1. A parent has been convicted of murder of any child;
2. A parent has aided, abetted, attempted, conspired or solicited the murder of any child;
3. A parent has been convicted of a felony battery that resulted in bodily injury to any child;
4. A parent has subjected any child to abandonment, torture, chronic abuse, sexual abuse, or chronic life threatening neglect;
5. Parental rights to any child have been involuntarily terminated; or
6. The child has been in out-of-home placement for 15 of the last 22 months.

When the child is in SRS custody and placed out of the home for 12 continuous months, or 15 of the last 22 months, consideration shall be given to the termination of parental rights. Unless there are compelling reasons to the contrary, it is expected the Child Welfare Case Management Provider shall pursue termination of parental rights.

3372 Permanency Hearings

During a permanency hearing the court shall review evidence and make a written finding whether reasonable efforts have been made to accomplish the permanency goal and continued out of home placement is necessary for the child's safety. The Child Welfare Case Management Provider shall track when permanency hearings are due for all children assigned in their region.

A. The initial permanency hearing takes place within 12 months of the date the court authorized the child's removal from the home and every 12 months thereafter.

B. The court is responsible for sending a notice of the permanency hearing to all interested parties. The court may elect to notify other individuals as appropriate. Interested parties include but are not limited to:

1. Parents;
2. Maternal/Paternal grandparents

3. Resource Parents;
4. Adoptive Parents;
5. Court Appointed Special Advocates;
6. SRS and Child Welfare Case Management Provider involved with the child.

C. If the permanency goal is reintegration and the court finds reintegration continues to be a viable option, the court shall determine when the child shall be returned to the parent. The court may order a new reintegration plan be prepared and submitted.

D. A permanency hearing is required when there is agreement by the case plan participants that a change in permanency goal is required. The Case Management Provider shall notify the court of the change in permanency goal and the court shall schedule a permanency hearing.

E. If the court determined reintegration is not a viable option the county or district attorney shall file a motion to terminate parental rights or a motion to establish a permanent guardianship with 30 days and the court shall set a hearing on the motion within 90 days of the filing of the motion.

3373 Administrative Desk Reviews

When a child has been in out-of-home placement for 15 of the most recent 22 months since referral, an administrative desk review shall be held and documented on the CFS 3056, Permanency Plan Desk Review form.

A. The Provider case manager and supervisor, at a minimum, shall participate in the administrative desk review.

B. The Child Welfare Case Management Provider staff shall be in full agreement as to whether reintegration remains a viable option. If reintegration remains a viable option, the CFS 3060 shall explain why the child is not reintegrated and an anticipated date when reintegration will occur.

C. If reintegration is not viable, and adoption is the case plan goal, a motion to terminate parental rights must be on file on or before the last day of the 15th month in out of home placement. If reintegration is not viable and adoption is not the case plan goal, documentation shall provide a compelling reason why adoption is not in the child's best interest.

D. If permanent custodianship is the case plan goal, there shall be documentation why reintegration is not viable and adoption is not in the best interest of the child.

E. If Other Planned Permanent Living Arrangement is the case plan goal, documentation shall state that no other case plan goal is in the best interest of the child.

Detailed instructions are available in Appendix 6 E.

3380 Reports to the Court

The Child Welfare Case Management Provider shall comply with providing the court any information needed for hearings. The information shall be provided in a timely manner to ensure the court receives the information before a hearing is held. For a child in SRS custody a report must be submitted to the court of jurisdiction within 30 calendar days of the date the child entered custody and at least 180 days thereafter. The court does request a report prior to the permanency hearing, and may request interim reports at any time. The Child Welfare Case Management Provider shall comply with all such requests.

Reports shall effectively document all case activities, service needs and plans for the child and family, progress being made to achieved the goal, and shall include recommendations for further work with the child/family. The Child Welfare Case Management Provider shall use the Court Report, CFS 3003, if required by the court, and other attachments as necessary, including reports from other professional providing services to the child/family. A copy of the Court Report, CFS 3003, if required by the court, and any attachments shall be sent to SRS at the same time it is sent to the court.

3381 Time Frames for Required Court Reports

For those children under court jurisdiction, a report is made every 180 days and more frequently if requested by the court. The Child Welfare Case Management Provider shall provide the report to the court, with a copy to SRS, at least 10 days in advance of the court hearing or per court requirements (if different than 10 days).

3382 Permanency Hearing Court Reports

Case planning conferences shall be held prior to the date of the permanency hearing in order to allow enough time the Child Welfare Case Management Provider responsible for the case to provide comprehensive reports to the court documenting the permanency recommendations. The Child Welfare Case Management Provider shall make a recommendation to the court based on the most current information available regarding the child and his/her family. This recommendation shall include whether reintegration is a viable option and provide a review of the family progress toward the goals, tasks and objectives. The Child Welfare Case Management Provider shall ensure all documenting evidence is available and presented to the court in clear concise language.

3383 Parent and Foster Parent Confidential Report to the Court

K.S.A. 38-2261 provides the right of foster parents and parents to submit a report to the court at the time of each court hearing. The report made by foster parents shall in a specified format. Appendix 6-B provides a sample cover letter and a sample of the report. The report submitted by the parent and/or foster parent shall be available to all parties.

The Child Welfare Case Management Provider shall inform the child's parents and resource parent(s) of the right to submit a report directly to the court. The Child Welfare Case Management Provider shall provide the parents and resource parents with information as to the name and address of the Judge to whom the report may to be sent, as well as the dates of the court hearings. Documentation of this task shall be placed in the child's case file.

3384 Change of Venue for Out of Home Service Cases

A. Procedures

Cases in which jurisdiction is transferred from one court to another are called "change of venue" cases. In many instances, the change from one court of responsibility to another will also require a change in SRS region of responsibility and a change in the Child Welfare Case Management Provider providing out of home services.

1. For Contract purposes, a change of venue case is not considered as fully transferred to the receiving Provider region until the case is accepted by both the receiving court and the CFS Program Administrator in the receiving Provider region (if the receiving Provider region is not within the original SRS region). The case must also be formally assigned to SRS staff within the receiving Provider region for the case to be accepted within SRS as a "change of venue" case.
2. In some situations a family may have children residing in out of home placement while another child or children are being served in the aftercare period. When a change of venue occurs in this situation, the Reintegration/Foster Care Provider in the receiving region will receive a new referral for any children in out of home placement, but will then be expected to assume responsibility for serving the child or children who remain at home. The requirement of contact with the child within 4 hours of the referral, contact with parents, and the initial team meeting may be waived by Regional SRS staff. The new Child Welfare Case Management Provider is required to notify the family within 5 working days of the new referral that a new case manager has been assigned, and to provide their contact information.
3. The overriding principle guiding this situation is the family is only served by one Case Management Provider.

B. Change of Venue to Another Provider Region

Child Welfare Case Management Provider responsibility ends for children who reside in out-of-home placement when there is a change of venue to another Provider region. A referral will be made to the Reintegration/Foster Care Provider in the new region. This referral policy applies to all children in out of home placement, regardless of whether the case is a transfer from the Family Preservation or Reintegration/Foster Care Provider in the sending Provider region. The referral to the receiving Child Welfare Case Management Provider shall be sent by SRS Regional staff within 5 working days of the receipt of information from the receiving court documenting the acceptance of the change of venue.

When the change of venue is to another Provider region but it is not a change to a new SRS region, the sending Provider shall promptly notify SRS staff of the change in venue to a new Provider region and send SRS the Acknowledgement form indicating case closure due to change of venue . The receiving Provider shall also promptly acknowledge the referral by sending SRS the Acknowledgement form (CFS 3031).

C. Change of Venue within a Provider Region

Child Welfare Case Management Provider responsibility does not end when there is a change of venue for a child in out-of-home placement when the venue change is within in the Provider's region.

When the change of venue is within the Provider's region but is to a new SRS region, the Provider shall promptly notify the original SRS office of the venue change. The original SRS office shall transfer all files and service responsibility to the receiving SRS region.

D. Change of Venue in Aftercare

Child Welfare Case Management Provider responsibility does not end when there is a change of venue for a child in the 12 month aftercare period, whether the child is in SRS custody or not and whether the venue change is within the same Provider region or to another Provider region.

The original Case Management is responsible for providing case planning information and other requested information to the court for children in SRS custody and to the appropriate SRS staff. If the change of venue during aftercare involves a change in SRS region, the information shall be sent to the SRS service center in the receiving region. If the change of venue does not involve a change in the SRS region, the information shall be provided to the original SRS service center. This is in addition to the provide needed services to the child and family to maintain the child's living arrangement during the 12 month follow up period.

If the child must return to an out of home placement during the aftercare period, the original Child Welfare Case Management Provider is responsible for providing the services and assuming the costs related to this out of home placement. There shall not

be a new referral made to the Reintegration/Foster Care Provider in the region where the child lives.

3400 Relinquishment/PRT

When adoption is the plan, services shall be provided which result in the termination of the child's parental rights:

A. Voluntary relinquishment of children to SRS by parent(s) or legal guardian; or

B. Termination of parental rights by the court with the child remaining in the custody of the Secretary.

Careful case documentation is essential in order to remove legal barriers to adoption. Child Welfare Case Management Providers and others providing services to the family face a high probability of having to testify in court as witnesses to the family's successes and failures in completing the tasks and objectives of the case plan.

3410 Documentation for Parental Rights Termination (PRT)

Documentation of parental responsibilities to achieve reintegration shall be related to the parent's failure to comply, not SRS/Child Welfare Case Management Provider's failure, to provide services.

Careful case documentation is essential in order to remove legal barriers to adoption. Child Welfare Case Management Providers and others providing services to the family face a high probability of having to testify in court as witnesses to the family's successes and failures in completing the tasks of the case plan.

The case file shall document all services provided to assist the family in meeting the tasks and objectives of the plan, including:

A. the family's ability to cooperate with all persons involved in providing services

B. the family's ability to make and keep appointments with providers

C. parent/child interactions, including dates, missed interactions, and reasons why

D. observations of parent/child relationship

E. transportation to and from appointments

3420 Steps to Relinquishment

When Child Welfare Case Management Provider staff becomes aware of a parents desire to relinquish his/her child to SRS and adoption is the case plan or concurrent case plan goal the staff shall discuss relinquishment with the birth parent(s), SRS staff and their supervisor to determine if relinquishment is appropriate.

The Case Manager shall provide to and discuss with the parent(s) the letter "Notice to Parent Considering Relinquishment", which is available in Appendix 6-F. The parent(s) shall be encouraged to discuss the contents and implications of this letter with their attorney.

If the decision is made that it is in the best interest of the child for relinquishment to occur, the Case Manager shall complete the Appendix 6J Relinquishment of Child to Agency.

3430 Voluntary Release/Relinquishment

The Secretary of SRS will accept a relinquishment only if there is a current CINC case with custody awarded to the Secretary. The Secretary or Secretary's designee has the right to refuse or accept any relinquishment if termination of parental rights is not in the child’s best interest.

If the relinquishment is not accepted, a new case plan shall be written within the next 30 calendar days. Adoption may be considered at any case planning conference but must be discussed at the case planning conference which is held following the one-year anniversary of the initial out-of-home placement of the child. Relinquishment can be considered only if adoption is the case plan goal or the concurrent case plan goal for the child and it is documented that the plan is in the child's best interest. There must be a reasonable expectation that adoption of the child can be achieved.

Parents shall relinquish their legal rights to their children in writing, before the court of jurisdiction or before a notary. Arrangements shall be made for the child's Child Welfare Case Management Provider to receive the relinquishment papers once they are signed by the judge or notary and forward them to SRS for acceptance.

3431 Relinquishment of Indian Children

Special circumstances exist when a child and or parent(s) of Indian heritage are involved in a relinquishment. The SRS social worker must work closely with the region attorney to ensure court documents and processes for relinquishment meet the requirements of the Indian Child Welfare Act.

A. The following must be addressed:

1. The parent(s) or Indian custodian is of sound mind and body and not under undue restraint, duress, or influence of illicit drugs or other substances.

2. The tribal heritage of the parent(s) or Indian custodian and the child is documented. This may include tribal identification numbers.

3. The legal rights to the child are being relinquished to the Secretary of SRS.

4. The primary language of the parent(s) or Indian custodian must be documented.

5. If English is not the primary language, it must be demonstrated that the terms and consequences of the relinquishment were interpreted into a language the parent or Indian custodian understood.

6. The relinquishment must not be given prior to or within 10 days after the birth of the Indian child.

7. The relinquishment must be signed in front of a judge.

8. The parent or Indian custodian must understand that the relinquishment can be withdrawn prior to the filing of the final order of adoption.

9. The parent or Indian custodian does not reside upon an Indian reservation.

10. The parent(s) or Indian custodian may execute a consent to adopt in lieu of a relinquishment. The same safeguards apply.

11. The adoptive parents of an Indian child are named in a consent to adopt but are not in the case or a relinquishment.

12. If a consent to adopt is executed, the case is then considered a private adoption and the agency is relieved of custody of the Indian child. No adoption subsidy is available to the adoptive parents when a consent to adopt is executed.

B. Inquire as to whether the child/family has any Indian tribal affiliation (per the Indian Child Welfare Act). If so, it is important to have the names of the ancestors to determine tribal enrollment and to obtain permission of the tribe to proceed with placement. Review the documentation of ICWA compliance and update the form YA2300.

C. Indian tribal affiliation shall be determined at the time the child comes into the custody of the Secretary, not at the time of relinquishment. However, relinquishment procedures with Indian children differ from that of non-Indians, and the worker shall make certain there is no Indian tribal affiliation before the relinquishment process proceeds.

3440 Termination of Parental Rights

While it is the court's decision to terminate parental rights, it is the responsibility of SRS (with Child Welfare Case Management Provider input) to make recommendations to the court and to provide comprehensive written documentation to support those recommendations.

The legal termination of parental rights, or a parent's desire to relinquish parental rights, both viable options for the eventual achievement of permanency, may not always be the

best alternative for children for whom reintegration is not possible. It is not a means of punishing the parent; it is a means of serving the child. The SRS attorney is available to aid in making decisions and in answering questions. If the decision is made to seek termination of parental rights and the option of relinquishment is appropriate, the parents shall be offered the opportunity to relinquish. To address PRT/Relinquishment issues, the Child Welfare Case Management Provider shall assist the family in obtaining services and support to help them deal with emotional issues surrounding these events.

3441 Criteria for Considering Termination of Parental Rights

Factors to consider in making the determination are to include but not be limited to the following:

A. An alternative case plan goal is appropriate and in the child's best interest.

B. Why the child came into care - abuse, neglect, or abandonment.

C. The age of the child - the younger the child is, the more serious the need to consider termination.

D. The ability of the parent to meet the child's needs and meet the requirements of the case plan.

The Permanency Staffing Guide in Appendix 7A is available for additional criteria to consider.

3442 Compelling Reasons Not to Pursue Termination of Parental Rights

The Adoption and Safe Families Act (AFSA) defines certain circumstances under which the court may find that termination of parental rights is not a viable alternative for the child.

A. Those reasons include:

1. A reason(s) (as documented in the case file) exists to support the decision that neither the permanency goals of adoption or permanent custodianship are in the best interests of the child;

2. The child is in a stable placement with a relatives/non-related kin;

3. Adequate services to the parents were not provided by the agency to address the concern(s), which resulted in the child entering out of home placement.

B. SRS and the Child Welfare Case Management Provider shall make diligent efforts towards the child achieving permanency while in a relative/non-related kin placement.

Therefore, SRS shall pursue either adoption or permanent custodianship as the permanency goal for a child in a stable relative/non-related kin placement when reunification is not a viable permanency goal.

C. If both SRS and the Child Welfare Case Management Provider agree the family is making adequate progress towards reintegration of the child and reintegration will take place within the next 180 days, a recommendation may be made to the court to delay termination of parental rights efforts for up to 180 days. The parent's progress toward reintegration shall be carefully monitored and documented and a date set as to when the child shall be reintegrated.

3443 Information Required by the County/District Attorney

A. The following information shall be provided to the county/district attorney to justify the petition to terminate parental rights:

1. A list of the names and address of persons to whom a notice of hearing must be sent. This list includes but is not limited to both birth parents, maternal/paternal grandparents, their respective attorneys, resource parents, the guardian ad litem, CASA, SRS and Child Welfare Case Management Provider, therapists, medical experts, and the child's current and former placement providers;
2. A current court report with supporting attachments. The report must list the reasons SRS is recommending that termination of parental rights is in the best interest of the child;
3. A description of the reintegration services provided to the family and the results of the provision of these services;
4. A copy of the child's birth certificate;
5. If the child is Indian, documentation of the information gathered from the tribe
6. A list of potential witnesses, their addresses and telephone numbers;
7. Copies of all previous case plans;
8. The social history(ies) on the child and his/her family;
9. Psychological, drug and alcohol evaluations pertinent to the case;
10. Reports from other service providers, the child's school, other courts or state child welfare systems, or other entities if appropriate.
11. The progress the family made or did not make toward meeting the permanency goal;
12. The child's development and behavior while in out of home placement; and
13. After addressing how termination of parental rights may impact the child.

B. This information shall be sent to the County/District Attorney's Office within 45 days of the case planning conference at which the permanency goal is changed to adoption. The time may be extended to 60 days if the required information is not under SRS control, this shall be documented in the child's case file.

C. If termination of parental rights is denied by the court, a new permanency goal shall be determined at a case planning conference. This shall be held within 30 working days of the receipt of the written journal entry or other documented form of notice.

3444 Preparing the Child for Termination of Parental Rights

The following tasks shall be completed prior to the termination hearing:

A. Arrange for a visit to the courtroom, if the child is to appear in court.

B. Arrange a meeting with the guardian ad litem.

C. Notify the therapist of the recommendation of termination so the therapist/counselor can help the child be prepared.

D. Actively involve the foster parents in helping the child be prepared.

E. Supervise interaction with birth parents(s).

F. Arrange a final interaction with the birth family. Taking pictures during the final visits is appropriate, not only for the child's life book but also for the birth parents/family.

G. Work with the child regarding the termination, the final visit, separation and loss issues, and planning for permanency.

3500 Case Closure

When a child is in the custody of the Secretary, the case shall be closed only when the Department has been released of Custody by order of the court or the youth has reached the age of 21.

3800 FACTS Case Planning Services Procedures

Complete screen navigation requirements for entering case planning conference information into FACTS are located in the Service Management section of the FACTS User Manual, Volume II, Section 300. Codes for applicable screens in FACTS are located in the USER Manual, Volume I, Section 800. If the case plan involves a referral to a Child Welfare Case Management Provider, then information regarding that referral service action on INIT, PLAN, and RESP (as applicable to plan type) must be complete and added on the same day of referral to the provider. Otherwise, information shall be

entered on INIT, PLAN and RESP (as applicable to plan type) within 5 business days from the date of occurrence, action, or agency decision regarding a child or family.

3810 Establishing an Initial Case Planning Conference (INIT)

A case planning conference can not be established for any family in FACTS until the CASE is open and successfully processed. Case planning types, goals, and effective dates entered into FACTS shall match information on case plans. An individual's first plan and/or service is entered on INIT. The INIT screen is only completed once for an individual's plan. Users will see information from INIT on the PLAN and RESP screens once successfully added. The PLAN screen reflects information from INIT and is where a user updates case planning goals and case planning conference information. The RESP screen reflects information from INIT and is where a user adds and updates services for a client. Information regarding case planning types and service actions is located on the Family Based Assessment Summary and court orders if applicable. When a plan is added, a plan ID number is generated.

3811 Entering Plan Type

A. Family Case Plan

Family Case Plan (FP) type is entered on each non-custody member of the family who is the subject of a service or specific task.

B. Law Enforcement (LE) Plan

A law enforcement plan (LE) type is entered to document a child or youth's episode of police protective custody. The begin date is the date the child was placed in police protective custody. If this date precedes the case open date, use the case open date as the start date. For law enforcement protective custody, the end date of the LE plan is the date child returns home from law enforcement protective custody or enters SRS custody.

C. Child Custody Plan

A child custody plan type (CC) shall be entered for each child in the custody of the Secretary of SRS who has been removed into an out of home placement. The begin date of a CC plan is the date the child was removed into out of home placement and in agency custody. This information is located on an order of SRS protective, temporary, or adjudicated custody, whichever comes first. If the custody date precedes the case open date, enter the case open date. If the child's first out of home placement is either a locked facility or hospital for acute care please refer to PPM section 3811E (SC plan). The end date of a CC plan type is either the date the child is released from custody or the date the child had been placed back home for a period of 6 months, the date a

youth age 18 is no longer IV-E eligible, or the date an individual turns age 19, whichever comes first. When a CC plan type ends, discharge information is required per PPM 3835. The reason for discharge for youth age 18 who are no longer IV-E eligible or individuals who turn age 19, whichever comes first, is emancipation (EM). This plan type affects AFCARS federal requirements.

D. Reintegration Custody Plan

A reintegration custody plan type (RC) shall be entered for each child in SRS custody who has been returned home for a period of 6 months. Initiate (IN) the service action code FU01N with service source code FGC, and service request code of CM. The begin date of a RC plan is the day following the end of the six month period that the child was placed home. The end date of a RC plan is the date that custody is released, or the date that the child reenters out of home placement, whichever comes first. Do not enter a placement service action code. On a RC plan type there is no CORT requirement. Enter on SESS the case plan conferences after the RC plan type starts and enter the tasks and services on RESP when the new case plan is received. If a child has been placed at home for 6 months, and re enters out of home placement, this out of home placement is considered a new removal episode for the purposes of AFCARS, thus a new CC plan and removal information would need to be added. Initiate a new PR09N for each new CC plan.

E. SRS Custody Only Plan

A SRS custody only plan type (SC) shall be entered for each child in the custody of the Secretary of SRS who does not have a removal ordered. Initiate (IN) the service action code FU01N with service source code PSW and service request code of CM. The begin date of a SC plan is the date the agency received custody of the child. This information is located on an order of SRS protective, temporary, or adjudicated custody, whichever comes first. If the custody date precedes the case open date, enter the case open date. The end date of a SC plan is either the date the child is released from custody or the date the child is removed into out of home placement for reintegration/foster care services, whichever comes first. Do not enter a placement service action code. On a SC plan type there is a CORT requirement. Enter on SESS the case plan conferences after the SC plan type starts and enter the tasks and services on RESP when the new case plan is received. If a child enters the custody of the Secretary of SRS and the child's first out of home placement is either a locked facility or hospital for acute care, then a SC plan shall be opened. Once the child has moved to a foster care like setting (i.e. foster home, relative, residential, shelter, etc.), the SC plan will closed and a CC plan shall be opened. The removal date for the CC plan shall be the date the child was placed in the foster care like setting.

F. Emancipation Custody Plan

An emancipation custody plan type (EC) shall be entered for each child in SRS custody who is age 18 and is not IV-E eligible, or reaches age 19. The begin date of a EC plan

is either the day following the date the 18 year old is no longer IV-E eligible, or the day following the date the individual turns age 19. The end date of an EC plan is the date that custody is released. Initiate (IN) a placement service action code. Do not enter a PR09N responsibility. On an EC plan type there is a CORT requirement. Enter on CORT the court dates after the EC plan type start date. Enter on SESS the case plan conferences after the EC plan type starts and enter the tasks and services on RESP when the new case plan is received.

G. Private Adoption Plans

A private adoption plan type (PA) is used only to enter private adoptions that do not involve children in SRS custody. This plan type documents a non recurring payment is made to assist a family who has adopted a child who was not in SRS custody. This plan type affects AFCARS requirements.

H. Self Sufficiency Plan

A self sufficiency plan (SS) is only used for youth who are not in SRS custody and are receiving independent living services as per form CFS 7000. Use the goal type of maintain with family (MFM) on a SS plan type. Do not enter a placement service action code. A SS plan is not opened on youth who are still under a CW/CBS provider. Initiate (IN) the service action code FU01N with service source code PSW. (Refer to PPM section 7810 for additional information on entering independent living youth not in SRS custody).

3812 Entering Review Dates

Enter a review date when a case planning conference has occurred. The case planning conference date shall match the first date indicated in the time period covered on the CFS 3050 or 3051. This field is an AFCARS requirement. If no case planning conference has been held and the plan is closing, enter the date of initial team meeting with the family or date of court hearing, whichever was most recent, in the review date field.

3813 Entering Plan End Information

Information on plan end dates is entered when a plan closes. In order to add this date, a review date must be entered. If no case planning conference occurred prior to ending the plan, enter the date of initial team meeting with the family or date of court hearing, whichever was most recent in the review date field. When a plan ends, the results code field is required. The results field code reflects how the agency views the plan completion-successful or unsuccessful. In order to gain this information about plan end results, consult with the assigned worker. To close a plan, all court information and responsibilities must be closed.

3814 Entering Goals

The case planning goal type and start dates for initial and subsequent case planning activity entered into FACTS shall match information on the FBA summary, case plan, and/or referral documents to the Child Welfare Case Management Providers. If the permanency goal for protective custody has not yet been established enter "NYE" in FACTS. If the goal is reunification, enter "RUC". If the child is in custody and placed at home, the goal type is "MFM". If the goal for a youth in custody is Other Planned Permanent Living Arrangement (OPPLA), enter "EMA". If the goal for a youth in custody is Adoption enter (ADP). If the goal for a youth in custody is Guardianship enter (GUS). End dates for case planning goals reflect the day the final goal was achieved or the date the plan closed.

3815 Entering Removal Information

Removal codes, dates and reasons are entered only for those children in SRS custody who have been removed by a type of court order ("C") from their home, or been voluntarily relinquished ("V") to the agency by their care giver. The date of removal is the date when the child was removed from the home and should match the CFS 3030 or date of Relinquishment on the YA 2303. The removal date may be different than the date of SRS custody; however, the removal date entered into FACTS cannot be a date prior to the start date of the child custody plan. A removal date is only entered once for each custody episode. FACTS can record up to15 (fifteen) removal reasons. To the greatest extent possible, FACTS reasons for removal shall match reason on the CFS 3030 referral form. Enter the primary reason for removal from CFS 3030 in the first reason for removal on the PLAN screen. Enter the secondary reason for removal from the CFS 3030 in the second reason for removal on the PLAN screen. If a child is removed from the home for reasons of maltreatment (e.g. physical abuse or neglect) and reasons of non-abuse neglect (e.g. child behavior problem or caregiver inability to cope), then select and enter the reason (s) of maltreatment prior to entering the reasons of non-abuse neglect unless the non-abuse neglect reason is the primary reason for removal. The removal date is a field subject to timeliness error for AFCARS if not entered timely.

3821 Entering Services Requested

Select code appropriate to service type being provided to the family. For children in SRS custody, the service requested in involuntary placement "IP" except for runaways, which is voluntary placement "VP". The achievement date is the date that the SRS worker anticipates that the service, task, or placement will end or be achieved.

3822 Entering Information Regarding Services, Tasks, and or Placements

A. Service Action

Enter the first service or task that is planned, recommended, or currently initiated with a client in the Service Action field on INIT. If there is more than one service action or tasks for an individual, these additional services are entered onto the RESP screen. With exception to subsidy service actions, all codes entered end with the letter "N", indicating nonpayment activities. Information to complete this data field is located on the Family Based Assessment Summary Child Protection Objectives, Acknowledgment/Change in Placement Form, case plans and other documents regarding health and well being of family members. Enter waiver information on all children who are eligible for or receiving any HCBS waiver and who are part of an open case. This action affects youth served by the Child Welfare Case Management Providers (up to the point an adoption is finalized), and family services. To enter waiver information, enter the service action code of "FU08N" and service request code of "WA". If the service action is planned (child is eligible, but not yet receiving) use responsibility status code of "PL". Use responsibility status code of "IN" if waiver service has started. Use service source code 'PHD' for Physically Disabled waiver, 'MRD' for MR/DD waiver, 'TEA' for Technologically Assisted waiver, 'HDI' for Head Injury waiver, 'SED' for Severely Emotionally Disturbed waiver, 'AUT' for Autism waiver, and 'PTF' for Psychiatric Residential Treatment Facility Waiver.

B. Service Source

Enter the service source of the particular service action. Information in this field shall match pertinent documents such as case plans, placement change documents, etc. The description field reflects a provider name or short description of case planning task. For non facility placement providers, the name of the provider is entered as follows: Last Name, Female Head first name/Male first name. Descriptions for facilities shall match provider list on the residential rate sheet.

3823 Entering Worker Number

Worker number is only entered when an SRS worker other than the assigned social worker is completing a service action, for example a program support worker helping with budgeting or transportation. The worker start date is the date that the additional SRS worker began the service delivery with that family. Only SRS staff with an assigned FACTS worker ID can be entered in this field.

3824 Entering Start Dates and Status

The Responsibility Status field displays the current status of the responsibility on the screen. A history of changes in status is maintained by the system, however this specific history is not seen by users. Responsibility status is a required field. To start a responsibility or indicate a planned responsibility, enter codes applicable to the service, task, or placement. For planned or recommended responsibilities, enter PL; for clients referred to providers, enter IN and the referral date. To show that a service has been

initiated, enter IN for agency initiated activity.. If a short-term service was planned, initiated, and completed on an initial plan (INIT) within a 30-day period, the code of PI is used. Dates shall match partner document in the case file for referrals to providers and placement moves.

Effective dates for responsibilities reflect the current status begin date. This field is updated with the status field as needed for various service actions to reflect referral dates, initiated dates, and end dates. Although this field is typed over as needed for updates, the initiated date is always kept in view for the user in the "RespInDt" field.

3825 Entering Family Structure Code

A family structure code is entered only for children who are placed in SRS custody the custody of the Secretary and removed from the home. A family structure code is entered for both the removal family and the foster care family. The family structure code for the removal family can be obtained from the referring social worker, and is entered on the PR09N RESP. When entering a family structure code on the removal family, the primary and secondary caretakers shall be identified on RELS. If the family structure on the removal family is unknown such as in the case of abandonment, enter UTD (Unable to determine) as the family structure code. The family structure code for the foster family is entered on PROM.

3831 Entering Plan Type on PLAN Screen

Data previously entered on INIT displays on PLAN, and the PLAN screen is where information is updated or closed. If there is a need to change the plan type, close the existing plan and open the new plan. For example, a child who was in law enforcement custody (LE), then placed into SRS custody and out of home placement requiring a child custody (CC) plan, the LE plan must be closed before starting the CC plan. The end date for a FP plan is the date the provider closes their active case, or the date SRS ends their direct delivery in family services. To enter a new plan, a previous plan must be ended.

3832 Updating Plan for Dually Adjudicated Individual

A. Adding Dually Adjudicated Status to a CC Plan

To reflect a JJA (Juvenile Justice Authority) dual custody, enter the service action code of FU01N and the service source code of JJA. The responsibility start date of the JJA case management service action is the date the youth was dually adjudicated. The current custody plan should remain open and the case shall be maintained in FACTS. Update review dates as needed. Work with local community case management agencies to obtain this information. Close all other tasks and placements responsibilities, except for the PR09N service action code. When closing the placement

service action code use status closure code "AD". Assess IV-E eligibility and put in the appropriate EP segment into the JJA CASIMS system.

If there are CINC custody children on the case as well as a JO, the case shall remain open.

B. Removing Dually Adjudicated Status from a CC Plan

Access RESP screen and end the JJA case management service action responsibility.

C. Closing Dually Adjudicated Cases

If CINC custody ends, and the youth transfers to JJA custody, enter Transfer to Another Agency as the reason code and enter the date that SRS custody was discharged in the "EndDt" field on the PLAN screen. Entry of a review date in the Review Dt field on the PLAN screen is required by the system. If CINC custody ends regardless if youth transfers to JJA custody or not, enter CM in the RESPStatus field on the last placement service action code, enter a discharge reason, and the date child was released from custody.

3833 Entering Permanency Goal on PLAN Screen

Data previously regarding case plan goals entered on INIT displays on PLAN, and the PLAN screen is where information is updated. The permanency goal entered in FACTS shall match information on case plans. The goal type is updated only when the permanency goal changes. Start dates for goal types are updated in accordance with permanency goal changes indicated on case plans.

3834 Entering Service Actions on RESP Screen

A. Status

Data previously entered regarding service actions entered on INIT display on RESP, and the RESP screen is where service action information is updated. When a service has ended, closure codes for that responsibility are entered. Enter "CM" as a status closure code for a placement only if that placement is the child's last placement prior to discharge from SRS custody. Entering CM on a placement will require the user to enter a reason for discharge of custody. Enter completed (CM) for services that end. For complete list of possible closure codes, see section 800 of User Manual. For more information on placements, see PPM 5831.

B. Effective Dates

Each time a status is updated, a new effective date reflecting the date of status change is entered. For open cases which transfer as a result of a new contract award, no change is made to effective dates for that service action. Only the specific description is changed to reflect the name of the new contractor.

3835 Entering Reason For Discharge on RESP Screen

When a child is either discharged (released from custody) or has been at home 6 months, is age 18 and no longer IV-E eligible, or is age 19, enter "CM" status closure code on the last placement code and enter a reason for discharge. This CM status marks the end of a custody removal episode for a child. The placement responsibility that the discharge reason code is entered on, SHALL be the last responsibility on the RESP screen that has data entry. Applicable codes are: Reintegration (RU), Adoption (AP); Emancipation (EM); Guardianship (GD); Runaway (RN); Child Death (DD); Living with other relative (LR); or transfer to another agency (TA). Use the hearing date for the date of discharge (released from custody), unless the journal entry indicates an alternative date. Discharges for adoption are the exception since the file stamp date on the adoption decree is used for the date of discharge.

3840 Entering Case Planning Conference Information

All case planning conferences shall be entered on SESS. When reviews for more than one child are combined, only one session is required. Communication type is the method in which those invited to the case planning conference were given notice of the conference.

3850 Entering Disability information

As per PPM section 1883, disability codes on MACL shall be entered for every child on a case. Refer to CFS 3050 or CFS 3051 for diagnosed disabilities and enter on MACL. Each time a case plan conference is held, review the disabilities listed on the CFS3050 or CFS 3051 and update the MACL screen as needed.

3860 Entering Candidacy for Care Determination

To determine if a child is a candidate for care, refer to form CFS 3050 or CFS 3052. If a child is a candidate for care, enter the service action code of CC01N and the service source code of PSW on the RESP screen. The responsibility start date of the candidacy for care determination is the date when the case planning conference occurred. The responsibility end date is the date when the child is no longer a candidate for care as per CFS 3050 or CFS 3052, the date of when the next case plan is held, or the date the plan closes, whichever comes first. Candidacy for care information on the CFS 3050 or CFS 3052 shall be reviewed each time a case plan conference is held. If the child does

not have an open plan, which may be the case for family services, a plan shall be opened with the appropriate plan type for that child.

3870 Entering Incarcerated Parent Information

If mother was incarcerated at time of referral or at time of case plan, enter the service action code of JA01N with the service source code of JAL on the RESP screen in FACTS. If father was incarcerated at the time of referral or at the time of case plan, enter the service action code of JA02N with the service source code of JAL on the RESP screen in FACTS. The start date of the service action code (JA01N or JA02N) is the date when the case planning conference occurred and is located on the CFS 3030 or CFS 3052 form. The end date is when the parent is no longer incarcerated or the date the plan closes, whichever comes first. Incarcerated parent service action codes are only entered on plan where child is in custody (SC, CC, RC, and EC plan types). If parental rights have been terminated, do not enter the incarcerated parent service action code(s) into FACTS. If parental rights have been terminated, do not enter the incarcerated parent service action code(s) into FACTS.

3880 Entering Highest Grade Level Completed

Enter the highest grade level completed on the MACL screen from the CFS 3030, CFS 3052, or CFS 7000. For example, if the child is currently in 9th grade then the highest grade of completion would be 8th grade ('08'). Refer to FACTS online user manual for entire list of codes. This field is a NYTD requirement.

3900 Eligibility and Payment Procedures

(Section intentionally left blank.)

4000 Family Services

4000 Family Services

Family services recognize the inherent integrity and value of the family. Provision of family services is considered when there is a need for SRS assistance beyond the initial 45 working days of intake assignment. Additionally, the services identified as needed do not require the high level of intensity of Family Preservation services, which are services for families who require more frequent contact, including the availability of staff twenty-four hours a day, seven days a week.

The difference between Family Services and Family Preservation is the degree of the crisis, specifically related to safety, family functioning, and the potential removal of a child. Family Services is directed at alleviating specific situations which if services are not offered, may develop into a crisis situation. Services are delivered to the family as a unit rather than to individual family members. However, individual family members may also receive specific services. Services may be court ordered, recommended by SRS, or requested by the family.

Family Services include the following characteristics:

A. Services strengthen the family and promote the safety and well being of the children;

B. Services are delivered primarily in the family home or community;

C. Services are committed to reinforcing the strengths of the family members, empowering the family to solve problems, and become self-sufficient;

D. Services enhance parenting skills, family and personal self-sufficiency, functioning of the family, and reduce stress on families; and,

E. Services, which require monitoring, help families locate and use additional assistance including, but not limited to, the development and maintenance of community support systems, counseling and treatment services, housing, child care, education, job training, emergency cash grants, state and federally funded public assistance, and other basic support services.

4010 Range of Services

The scope of the services provided or accessed for the family will be based on the assessment of the family's need, the family's eligibility, and available resources.

Services may be offered by SRS staff or through referrals to other community agencies or entities, including utilizing SRS community services programs and/or Family Services

funds. Services are provided without regard to income and may be voluntary. Families may be court ordered to apply for services. See Section 4900 for additional information.

4015 Completed Aftercare Cases Returned to SRS for Family Service

When a child in the custody of the Secretary has achieved permanency and the Child Welfare Case Management Provider has completed their 365 days of aftercare, the case returns to SRS for case management responsibility. These custody cases have the same requirements as any other family service case.

4020 Forms for Case Opening

The forms required to open/maintain a Family Services case are:

A. CFS 1000 Face Sheet

B. CFS 1001 Report/Request for Services

C. CFS 1002 Response Determination

D. CFS 2030A Agency Response FBA Assessment Only (NA for non-abuse/neglect cases)

E. CFS 2030B Safety Assessment (NA for non-abuse/neglect cases)

F. CFS 2030D Risk Assessment (NA for non-abuse/neglect cases)

G. CFS 2030E Child in Need of Care Non Abuse or Neglect Assessment (NA for abuse/neglect cases)

H. CFS 2030F FBA Summary

I. For Required Caseplan forms, see section 3200.

4030 Purchase of Services or Resources

Services or resources that will assist in strengthening the family and promoting the protection and well being of the child(ren) may be purchased for families. Allowable services or resources to be purchased and method of purchase are found in the Handbook of Services. Cash will not be given to the family. Payment shall be executed according to established payment procedures in Section 4900.

If the service or resource being considered for purchase requires the development and completion of a family service plan by the provider of that service or resource, the SRS Social Worker and Supervisor may accept it in place of the CFS 3050 series. However, acceptance of the provider's family service plan can only occur if the child(ren) is not in custody and it must be completed within twenty working days of the start date of the Client Service Agreement. The SRS Social Worker will be required to complete the following and attach it to the service provider's plan:

A. CFS 3050 Family Case plan Section V and VI only.

B. CFS 3054 Visitation Schedule

C. CFS 3055 Permanency Plan Review if the case will remain open for at least 170 days.

D. CFS 3057 Services and Codes

4040 Family Services Case Progress

Assessing the success of the plan is continual and is both a formal and informal process. At least once in between conference dates, the progress of the family shall be measured by the achievement of goals set forth in the Family Services Achievement Plan, CFS 3050, specifically by utilizing the CFS 3055, Permanency Plan Review. If purchasing services on behalf of the family, progress shall also be measured through the review and monitoring of the purchase of services process. A formal review of the objectives, the continued appropriateness of the tasks and time frames, and any modifications should occur every 170 days until case closure. The formal review shall include all relevant persons.

During the review of the family service plan, any of the following actions may be found to be appropriate:

A. Status Quo: When the case plan is succeeding, but has not yet reached the goal, the decision may be to continue services.

B. Referral to Family Preservation Services: If the situation escalates to a crisis situation that places the child(ren) at risk of being placed out of home, and the family meets the criteria, a referral to the Child Welfare Case Management Provider of Family Preservation Services may occur.

C. Referral to Court: When the plan is not sufficiently successful and the child(ren) is at risk, it may be necessary to ask for court intervention.

D. Terminate Services: When the plan is successful, goals achieved, and the family is providing a sustained minimum level of care, the decision may be to terminate service. The closure is recorded in the written case plan and the case is closed in the FACTS system.

E. Refusal of Services: At any time, the family may decide that they no longer wish to receive services. Upon such notification the agency has two options:

1. Accept the family decision after reviewing the child's safety from a professional viewpoint and close the service case.

2. Review the case situation from a professional viewpoint and considering the child's safety and if applicable, referring the case to the county/district attorney for court action.

4050 Duration of Family Services

Family Services can be provided for up to 12 months. Services may continue beyond 12 months if there is a court order requiring the family continue services or if the family, the social worker and the supervisor determine the family services are having the desired positive effect on the family. The need for continued family services shall be documented on the CFS 3055.

4100 SRS Social Worker Responsibilities

The SRS Social Worker is responsible to assure the following:

A. Assessing the family,

B. Determining service needs with the family

C. Determining eligibility for services,

D. Developing an initial family service plan with the family

E. Completing a formal review of the family service plan every 170 days until case closure

F. Providing direct services, if applicable

G. Preparing necessary reporting documents and reports to the court, if applicable

H. Recording case activity on Social Service Case Activity Log, YA 1010, or equivalent,

I. Facilitating communication among relevant resources, including, but not limited to school, court, mental health centers, Native American tribes as applicable, and Community Developmentally Disability Organizations.

J. Coordinating various services provided to the family,

K. Meeting a minimum of once a month with the family. This includes conducting worker/child visits with each child in the family at least monthly. The visit shall address the safety, permanency, well-being and promote achievement of case plan goals. Monthly contact may be made by a support worker assigned to the family if designated in the family case plan.

L. Coordinating staffing with the family and service providers, if applicable.

M. Referring to other community resources, when indicated and appropriate;

N. Obtaining status and progress information, and

O. Monitoring of all purchased services

4101 Risk and Safety Assessments

Risk and Safety Assessments shall be completed during an initial investigation and assessment.

A. Ongoing risk and safety assessments shall be completed at the following points of time:

1. a change in family condition causing concern for the child's safety;
2. a significant change in visitation structure;
3. upon reunification; or,
4. case closure

B. Risk assessment shall include the following factors:

1. Parent or caregiver factors;
2. Family factors;
3. Child factors;
4. Environmental factors.

C. Safety assessments shall include the following factors:

1. Plausible threat/likelihood of serious physical harm;
2. Sexual abuse is suspected or substantiated and the (alleged) perpetrator continues to have access to the child;
3. Caregiver actions or omissions have caused or are likely to cause serious impairment of a child's social, emotional, or intellectual functioning;
4. Caregiver is unwilling, or unable, to meet child's needs for food, clothing, or shelter including where living conditions are hazardous and imminently threatening;
5. Caregiver is unable or refuses to seek treatment for a child's medical condition, or to administer prescribed treatment for a diagnosed medical condition that poses a serious threat to the child's physical health;
6. Caregiver has not, cannot or will not provide supervision necessary to protect child from potentially serious harm;
7. Caregiver has given up or deserted a child with stated or apparent intention to not resume the relationship.

4110 Transfer of Case Records

Transfer of case records is essential to continuity of services to a family. When a family moves from one service region to another, requiring a change of social worker, the case information shall be forwarded to the CFS Program Administrator or designee of the receiving region.

The sending worker shall record the family's continuing need for services on the Social Service Case Activity Log, YA101, or its equivalent.

The receiving worker shall re-assess the family situation including but not limited to needs, strengths, goals, and appropriateness of current plan. The service plan shall be updated with the family based on their current circumstances.

4200 FACTS Family Services Procedures

Complete screen navigation requirements for adding family services information are located in the Plan Management section of the FACTS User Manual Volume II, Section 400. Codes for applicable screens in FACTS are located in the USER Manual Volume I, Section 800. Information on case planning activity shall be entered into FACTS within 5 working days from the date of occurrence, action, or agency decision regarding a child or family.

4210 Establishing Family Services as a Case Action Type

A case action service type in FACTS reflects the service action decision located in Section IV of the 2030F, or other documentation of service action decisions subsequent to the initial plan for the family. A case action type is opened and remains open as long as the family or individual is being served under that case action decision or contract. A case is coded in FACTS as a family service case if SRS is providing direct services in accordance with PPM section 4000, and there is no active service being provided by a Child Welfare Case Management Provider.

4220 Entering A Family Service Case into FACTS

A. All Family Services Cases

To reflect a family services case action decision in FACTS, the following combination of codes is entered. On PLAN, enter an FP plan type for the Head of Household with goal type of maintaining the child in the family (MFM). On RESP, enter a service requested code from any protection, prevention or intervention code as applicable, PR10N service action code and service source as the Primary Social Worker (PSW). Enter the Service Status as IN to mark the case as open and indicate the effective date when service delivery began with that family. When Family Services as a case action is finished, select one of the Service Status closed status types found in the FACTS User Manual Volume I to reflect the end of case activity for family services.

B. Family Services Cases Involving Child Custody

If SRS is providing family services for a child in custody who was either not referred to a Child Welfare Case Management Provider or for whom custody to the agency extends past the after care responsibility period for the provider, the existing SRS custody only plan (SC) is maintained for the child. This child custody plan is maintained in addition to the above steps of recording the service action for the head of household.

4800 FACTS Family Services Procedures

Complete screen navigation requirements for adding family services information are located in the Plan Management section of the FACTS User Manual Volume II, Section 400. Codes for applicable screens in FACTS are located in the USER Manual Volume I, Section 800. Information on case planning activity shall be entered into FACTS within 5 working days from the date of occurrence, action, or agency decision regarding a child or family.

4810 Establishing Family Services as a Case Action Type

A case action service type in FACTS reflects the service action decision located in Section IV of the 2030F, or other documentation of service action decisions subsequent to the initial plan for the family. A case action type is opened and remains open as long as the family or individual is being served under that case action decision or contract. A case is coded in FACTS as a family service case if SRS is providing direct services in accordance with PPM section 4000 or has contracted for services according to the Handbook of Services, and there is no active service being provided by a Child Welfare Case Management Provider .

4820 Entering A Family Service Case into FACTS

A. All Family Services Cases

To reflect a family services case action decision in FACTS, the following combination of codes is entered. On PLAN, enter an FP plan type for the Head of Household with goal type of maintaining the child in the family (MFM). On RESP, enter a service requested code from any protection, prevention or intervention code as applicable, PR10N service action code and service source as the Primary Social Worker (PSW). Enter the Service Status as IN to mark the case as open and indicate the effective date when service delivery began with that family. When Family Services as a case action is finished, select one of the Service Status closed status types found in the FACTS User Manual Volume I to reflect the end of case activity for family services.

B. Family Services Cases Involving Child Custody

If SRS is providing family services for a child in custody who was either not referred to a Child Welfare Case Management Provider or for whom custody to the agency extends past the after care responsibility period for the provider , the existing SRS custody only plan (SC) is maintained for the child. This child custody plan is maintained in addition to the above steps of recording the service action for the head of household.

4830 Entering Other Services and Tasks

Additional services that may be purchased or engaged with the family during the delivery of family services are entered as responsibilities on the head of household or child plan as indicated in case planning documents. Enter all possible service actions located on the CFS 3050 and CFS 3051 and tasks from case planning documents that are planned, recommended, or initiated. Update these services as needed through the life of the case plan.

4900 Eligibility and Payment Procedures for Family Services

Family Service funds are used to maintain children in their homes and ensure safety. CFS may provide services directly or arrange for purchase of services, regardless of custody status. Family resources shall be used for payment of service prior to using Family Service funding (see PPM 4905). Inability to pay or ineligibility for other SRS program funding shall not exclude a family from receiving access to services using Family Service funding. CFS seeks to make the definition of "family" as flexible as possible (see PPM 0160).

Family service funds may be used for:

A. Law Enforcement emergency placements;

B. Parental out-of-home placements (e.g. respite care) if the family and placement are not Medicaid eligible; and

C. Family Services case purchases for the purpose of relieving a situation that places a child or children at risk of removal from the home. Excluded are families, and services, who are the responsibility of a Child Welfare Case Management Provider.

The social service case shall remain open and the case plan shall be current the entire time services and goods are purchased.

CFS may provide services directly or arrange for purchase of services, regardless of custody status. Some services eligible for payment through Family Service Funds are listed in the Child Welfare Handbook of Services (see PPM Appendix EP-E); The Handbook of Services is discussed further in Sections 4901 and 4902.

4901 Eligible Goods, Services, and Providers

This section reviews possible goods and services the agency can purchase for a family services case. A Client Service Agreement is the form used to request the purchase of a good or service. Refer to section 4902 for actual payment procedures.

A. Eligible Goods

The term "goods" is used to describe tangible items that can be seen and touched. Goods that may be purchased to alleviate a crisis include, but are not limited to:

1. Adaptation of Current Residence, such as specialty locks on doors or providing a ramp for accessibility to alleviate emergency circumstances.
2. Emergency Housing, including rent to obtain housing or prevent eviction up to a maximum of $600 to insure the safety of a child at risk.
3. Emergency House Repairs, up to $1,000, to a customer-owned home in which the applicant resides.
4. Household Furniture, Appliances and Supplies, up to $1,000, which may include repair and/or purchase of used or new furniture, appliances and other household supplies.
5. Emergency Clothing, up to $250 per person.
6. Any Other Identified Good to alleviate the emergent situation.

B. Eligible Services

Services that may be purchased to alleviate a crisis include, but are not limited to:

1. Emergency Shelter or Respite Care. (For parental or voluntary placements only.)
2. Emergency Utilities, including payment of past due utilities, which may include an amount to turn on the utility if necessary.
3. Handbook* services marked as an "SRS Purchased Service".
4. Any Other Identified Service to alleviate the emergent situation.

*The Child Welfare Handbook of Services (Handbook) includes an inventory of services that can be purchased for families and children. The Handbook can be found in the PPM, Appendix EP-E.

C. Eligible Providers

The following guidelines shall be followed with regard to the provider of purchased goods and services.

1. Eligible Providers of a Good

Check with an eligibility worker for vendors in the area that accept payment from SRS. Refer to PPM Section 4901.A and .B for limitations.

2. Eligible Providers of a Service

Determine that the service and the provider are eligible.

a. Eligible Service –

i. A service is eligible if it is listed in the Child Welfare Handbook of Services (Handbook). The Handbook is located in the PPM, Appendix EP-E.

ii. A service can still be eligible to purchase if it is not listed in the Handbook as long as it is identified in the case plan and the provider of this non-listed service is someone who normally performs this service in the community. Non-listed services are limited to $1,000 per service, per client, per 365-day period. If a region finds they need this service regularly it can be added to the Handbook. Consult the Handbook for more information.

b. Eligible Provider – Services listed in the Handbook are marked as to whether a Provider Agreement is needed or not. A Provider Agreement assures that the provider meets the criteria necessary to provide the service and is an agreement between the provider and SRS for specific services at an agreed upon rate.

i. Yes, Provider Agreement Needed – Ensure the provider has a current provider agreement by asking the provider for a copy of their provider agreement or check with your region's designated staff. [Each regional office has staff dedicated to obtaining and maintaining provider agreements. A list of that staff can be found at:

http://srsnet.srs.ks.gov/commissions/admin/AAO/Procurement/Providers/Index.html (and click on "Regional Office Contacts")]. A Provider Agreement, when required, shall be in place before an individual Client Service Agreement (CSA) can be initiated.

ii. No, Provider Agreement Not Needed – For services not needing a provider agreement the provider shall meet the "Minimum Qualifications" as indicated in the Handbook. If the service is not listed in the Handbook, the provider shall be someone who normally performs this service in the community.

4902 Payment Procedures for Family Services

The payment process begins with the Client Service Agreement, YA-2833. The actual payment is made using the ADM-3465 (Invoice and Timesheet: Purchase of Service) form.

A. Client Service Agreements

The Client Service Agreement (CSA) is a three-way contract between the client, the provider, and SRS. The CSA also serves as a promise with the provider that SRS will purchase a specific service for a set frequency, rate and length of time. A CSA is needed for every purchase made with Family Service funds. The CSA, form YA-2833 and instructions, are located in the PPM under "Forms and Appendices."

Before filling out the CSA, make sure the vendor or service provider is approved to do business with SRS.

1. SMART – SMART is the State's financial management system. Before payment can be issued to any vendor or service provider they must have an active vendor number in SMART. (See 4902.B.3.)

2. Handbook of Services – For certain services, a provider agreement is necessary prior to doing business. Refer to the Child Welfare Handbook of Services (referred to as the 'Handbook' which can be found in the PPM Appendix EP-E) for a listing of services commonly provided to families and clients. Each service listed in the Handbook also states if a Provider Agreement is necessary in order to purchase the service. Each regional office has staff dedicated to obtaining and maintaining provider agreements. A list of that staff can be found at: http://srsnet.srs.ks.gov/commissions/admin/AAO/Procurement/Providers/Index.html (and click on "Regional Office Contacts").

3. Services not in the Handbook – If the service needed is not listed in the Handbook, it can still be purchased if it is provided by someone who normally performs this service in the community. Non-listed services are limited to $1,000 per service, per client, per 365-day period. If a region finds they need this service regularly it can be added to the Handbook. Consult the Handbook for more information.

4. Purchasing Goods - Refer to PPM Section 4901 for limitations.

5. Signatures - The CSA shall be completed and signed by the SRS worker and the provider prior to or at the same time the approved services begin. Signature of the provider is not required when:

   a. Purchasing a good; or

   b. Purchasing a service not in the Handbook; or

   c. Any time it is in the best interest of the client, for confidentiality reasons, that the provider not see the CSA.

6. Monitoring Responsibilities - Client Service Agreements shall be monitored by the SRS Social Worker who made the agreement with the customer and the service provider. The SRS social worker assures that services are provided and reports are received as agreed.

B. Invoice and Timesheet: Purchase of Service – ADM-3465

The payment process begins when the Client Service Agreement (CSA) and/or any billing statements are received. Payments are made with an open KAECSES or KANPAY case number using the ADM-3465 (Invoice and Timesheet: Purchase of Service) form. The ADM-3465 will require a case number and client identification (ID) number as well as funding codes as they pertain to the item or service being purchased. The remainder of this section will explain how to determine the information needed for the ADM-3465.

1. Case Numbers
In order to generate payment for services provided to a specific customer, the customer must have an active Case Number and ID Number in KAECSES or KANPAY covering the dates of service.

a. Check KAECSES First

Inquire in KAECSES to determine whether the customer already has an open Case Number and Client Identification (ID) Number. Family Service payments can be made with an open KAECSES case number regardless of program type.

b. KANPAY Registration

If the case is not open in KAECSES, open a KANPAY case. If the customer already has an ID number on any system (KAECSES, KANPAY, FACTS, etc.) use that customer ID number when opening the KANPAY case. Family Service customers must be entered into the KANPAY system with the following information:

i) Status will be coded "IN"

ii) Type of Service = SS

iii) Start Date is found on the CSA.

iv) The End Date should be no longer than a year from the start date.

2. Funding Codes
The utilization of funding codes assists in the tracking of services provided.

a. Speedchart

As part of the payment process, a speedchart funding code shall be assigned to indicate the funding source for each payment. Currently, for family services, use either ISD27321 or ISD27322. To determine the appropriate speedchart funding code, refer to the following site:

http://srsnet.srs.ks.gov/divisions/finance/finance_asp/SRSFundingTable.pdf .

b. Sub-Object Codes

To further distinguish the type of item or service being purchased a sub-object code is needed. To find the appropriate sub-object code refer to the following site, then click on Sub-Obj Codes :

http://srsnet/commissions/admin/VenPay_03/venpay_information.htm

Refer to the Children and Family Services section.

3. Vendor ID Number
Inquire in SMART (Statewide Management, Accounting and Reporting Tool) for the vendor's Vendor ID number. For vendors not in SMART, obtain a W-9 from the vendor and follow local procedures for entry of new vendors into SMART.

4. Supporting Documentation

a. Case Plan

When the intake and assessment process determines that a family/child requires services, a Social Service case is opened and a case plan completed. Services and goods that the family and child are to receive are listed on the case plan.

b. Supporting Papers

Attach supporting papers (invoice, billing statement, etc) to the ADM-3465 to document the family service payment.

5. Processing the ADM-3465
Upon completion of the ADM-3465, follow local procedures for entry into the Statewide Management, Accounting and Reporting Tool (SMART)..

4903 (not currently assigned)

Information formerly in this section has been moved; see Section 4901 and the Handbook of Services.

4904 (not currently assigned)

Information formerly in this section has been moved; see Section 4902 and the Handbook of Services.

4905 Rank Order of Funding Sources

Potential funding sources are presented in the order in which they must be considered.

A. Customer Pay

Customer payment for services is preferred. There are several forms of direct customer payment. They include but are not limited to:

1. Using Existing Income
Staff shall evaluate the family's ability to pay for needed goods or services. To the extent of their financial ability, families are expected to pay for all or part of the cost of the services they require.

2. Subsidizing Family Income Through Development of Private Benefits and Entitlements
Before accessing public funding, staff are asked to assure the family has taken advantage of private income sources. These include:

a. Benefits from the Death of a Family Member. Children who have parents or other family members, recently deceased, may be beneficiary to a life insurance policy or other form of annuity. The individual or organization handling the estate of the deceased should be able to provide additional information. If the deceased family member had a work history, the children may also be eligible for survivor benefits from the Social Security Administration.

b. Benefits from the Retirement of a Family Member. Children who have retired parents or other family members may be eligible for income from a retirement plan or annuity. The children may also be eligible for retirement benefits from the Social Security Administration, based on the work history of the retired parent.

c. Benefits from the Unemployment of a Wage Earner. Employers in Kansas are required to carry unemployment insurance. If a wage earner is unemployed, staff shall assess whether the family is eligible to receive unemployment benefits. Kansas Department of Human Resources will provide additional information.

d. Child Support Payments from an Absent Parent. If both parents are not contributing to the care of a child referred to SRS for services, CFS shall obtain financial assistance from the parent withholding support. For children in SRS custody and placed out of home, a referral, through KAECSES, to CSE is required.

e. Benefits from a Disability of a Primary Wage Earner. Some employers may carry disability insurance. If a primary wage earner is disabled, CFS staff shall refer the family for further eligibility determination. These could include payments from the Social Security Administration, based on the work history of the wage earner.

3. Private Health Insurance
If the child is eligible for private health insurance through the employment of a family member, it can be a useful funding source for a variety of health and mental health services. Explore if a family has private health insurance. Assure they

have not exhausted their benefits prior to coming to SRS. This private funding source should always be examined before public (governmental) sources are used. Following the private health insurance claiming process to obtain payment is very important. Private insurance is always primary payor when Medicaid is available.

4. HealthWave 21
HealthWave21 is a federally subsidized health insurance program for uninsured children up to age 19, who are members of income eligible families. Parents pay a monthly premium based on family income. The benefit level of HealthWave21 is the same as Medicaid in Kansas.

5. Government Income Subsidies
Government Income Subsidies may provide a portion of assistance to an eligible family. This may include, but is not limited to, agricultural or food distribution subsidies.

6. Food Stamps
Food Stamps are a federal income subsidy to help families with low income buy food.

7. Temporary Assistance to Families (TAF)
TAF is a federal income subsidy for families with children. TAF provides a minimal income subsidy to parents or other caretakers of needy children. Families who are eligible for TAF are also eligible for Medicaid. Children Living with Kin. In most circumstances children living with kin are eligible to receive TAF without regard to income. The child is a family group of one. Eligibility determinations for TAF are completed by SRS Economic & Employment Support Specialists.

8. Social Security Act Benefits (SSA) and Supplemental Security Income (SSI)
There are two categories of benefits available to children through the Social Security Administration. The first is Retirement, Survivors, & Disability Insurance benefits (RSDI) and is generally referred to as Social Security Act (SSA) benefits and the second category is Supplemental Security Income (SSI).

a. Social Security Act Benefits (SSA):

Benefits may be awarded to children whose parents have made Social Security contributions through their employment and whose parents are disabled, deceased or retired. Eligibility determinations for and the amount of SSA benefits must be completed by the Social Security Administration.

A disabled child can receive both an SSA benefit generated from their parent's SSA, and SSI for the child's own disability. The amount of the child's SSI may decrease when other income increases. Benefits children

receive as a result of their parent's disability or retirement may be used for parental support obligation on file with Child Support Enforcement.

The child remains eligible for the benefit as long as one of the following criteria is met and the child remains unmarried:

i. Under age 18.

ii. Under age 19 and attending full-time school or vocational training.

iii. Age 18 or older and severely disabled (the disability must have started before age 22)

Additional Information Regarding SSA Benefits:

When a child reaches age 19, benefits can continue for a short period. If the child attends a school with enrollment once a year (most common), benefits can continue for 2 months after the month the child becomes19. If a school requires enrollment each quarter or each semester, the benefit would continue until the end of that quarter or semester.

If a child, who is receiving benefits based on a disabled, deceased or retired parent, is disabled prior to age 22, the child can continue to receive benefits as long as the child remains unmarried and continues to be disabled. These types of benefits are called Disabled Adult or Childhood Disability Beneficiary.

For benefits based on a parent's disability the child would lose their eligibility if the parent's benefits ended, due to the parent being determined no longer disabled.

When a child is placed for adoption, even after finalization, the child could remain eligible for SSA benefits. Consult with a Social Security Administration representative for more information.

If a natural parent dies after parental rights have been terminated or relinquished, the child may still be eligible for survivors benefits based on the deceased parent.

In some situations a stepchild may be eligible for benefits. Check with the Social Security Administration for more information on eligibility criteria.

When a child is receiving benefits based on a retired parent and that parent dies the benefits are automatically switched to survivor's benefits.

b. Supplemental Security Income (SSI)

SSI is a federal income support program for low-income aged, blind or disabled individuals. It is considered unearned income. This program is administered by the Social Security Administration and is uniform in every state. These benefits may be received by adults or children. Eligibility is based on an individual's disability and not based on contributions from employment. A child is not eligible to receive SSI based on a parent's eligibility for SSI. Financial eligibility for SSI is based on a family or individual's income and resources. SSI for a child is based on that child's disability and cannot be used to meet a child support obligation owed by the child's parents.

To determine a child's eligibility for SSI the child must be financially needy and blind or disabled. This includes behavioral or emotional disabilities. When a child is living with their parent(s), financial need is based on the family's income and resources. When a child is placed in the custody of SRS and removed from the home, only the child's income and resources are counted by the Social Security Administration. Therefore, it is likely that a disabled foster child will be eligible for the full monthly SSI amount. The amount of SSI a child can receive each month is also based on the type of out of home placement.

When an SSI eligible child is adopted and the adoption is finalized, the income and resources of the adoptive family are considered in determining the disabled child's benefit amount.

All Kansas foster children with potential eligibility for SSI are referred for Social Security through Kansas Legal Services.

c. Payee for Benefits When Child Turns 18

SSA Benefits: When benefits are based on a disabled, deceased or retired parent, generally the child becomes their own payee at 18 years of age.

SSI Benefits: Social Security Administration will review the child's situation prior to their 18th birthday. SSA will determine whether the child is able to handle his or her own funds.

If the Social Security Administration determines that the child shall be their own payee and the child is being served by a CFS Child Welfare Contract Management Provider, the payee change shall be reviewed by the SRS Regional CFS Contract Specialist. The Child Welfare Contract Management

Provider remains responsible for the child's foster care maintenance. SSI is used for food, clothing, shelter, education and daily supervision. SRS shall assure the youth does not lose their SSI eligibility due to excess accumulation of income. Maintenance payments by the Child Welfare Contract Management Provider will be considered an expense to the child.

9. Medicaid (Title XIX)
Medicaid (Title XIX) is a governmental health care assistance program for families who financially qualify. It is a useful funding source for a variety of health, mental health, and behavior management services. Check with an Economic and Employment Support staff person for more information and limitations, such as a spend down.

Additionally, children who are removed from their homes and placed in the custody of SRS are considered to be a family of one and are eligible for Medicaid, unless their individual income and resources exceed established limits.

10. Family Service Funds
Family Service funds consist entirely of state funds—no federal assistance is provided. Therefore, staff should ensure that all other potential funding sources have been eliminated before using Family Service funds.

4906 (not currently assigned)

Information formerly in the section has been moved; see section 4902 and the Handbook of Services.

4907 Medicaid Mental Health Service Delivery

Medicaid mental health/substance abuse services are provided to Medicaid eligible recipients by a Prepaid Ambulatory Health Plan (PAHP) or Prepaid Inpatient Health Plan (PIHP) associate, including a Community Mental Health Center (CMHC) or individual practitioner, who is providing services as a member of the PAHP or PIHP provider network. If a child or youth needs mental health/substance abuse services, the services must be accessed through the PAHP or PIHP.

To access the Kansas Medical Assistance Program Provider Manual access the following website: http://www.khpa.ks.gov/ and click on the Provider link, then the Manuals link. To access the Pre-paid Ambulatory Health Plan for mental health services, Kansas Health Solutions, go to: http://www.kansashealthsolutions.com/ To access the Pre-paid Inpatient Health Plan for substance abuse services, Value Options, go to: http://www.valueoptions.com/members/Members.htm

These services are monitored by the Medicaid Fiscal Agent's System Utilization Review Section (SURS).

5000 Child Welfare Community Based Services

5000 Child Welfare Contracts

SRS contracts with licensed Child Placing Agencies for the provision of Family Preservation, Reintegration, Foster Care, Adoption and Adoption Recruitment Services.

In partnership with SRS, Child Welfare Case Management Providers are responsible to deliver appropriate services and supports to assist parents in maintaining children in their home. When maintaining the child in the home does not meet their safety needs, and out of home placement is required, the child shall be safely reintegrated as quickly as possible. When reintegration is not a viable option, another permanency option (i.e. adoption, guardianship/permanent custodianship, O.P.P.L.A.) shall be pursued in a timely manner.

The Child Welfare Case Management Providers shall provide services to all family members, not just the referred child(ren). The family shall be actively involved in the development of the plan for the child, selection of service providers, and the ongoing assessment and review of the case plan. The family is viewed as the experts in knowing the resources and strengths of the family, as well as knowing those areas in which supports are needed.

The Contracts prescribe a set of standards and expectations of the Child Welfare Case Management Providers in carrying out the mission of SRS. Each Provider is legally bound to act on behalf of SRS in delivering services to Kansas children and families. Providers must adhere to the federal and state laws, statutes, and policies in their delivery of services.

5010 Requesting Clarification/Exceptions Regarding Contractual Issues

A. All questions and requests for clarification regarding the Child Welfare Case Management Provider Contracts shall come to CFS via the local SRS Office. The CFS Program Administrator or the designee shall contact the CFS Program Manager with contractual issues that have not been resolved by local SRS and Provider staff.

B. Exceptions to the Child Welfare Case Management Provider Contracts may only be made in rare circumstances by the CFS Program Administrators, or designee, in consultation with the appropriate CFS Program Administrator/Manager. In general, the contract requirements must stand as written; however, there are situations in the lives of

children and families which may not fit into strict contract interpretation. Situations requiring modification to contract requirements may be made on a case by case basis only. The three criteria to be used in making a decision regarding the exception are as follows:

1. The best interest of the child;
2. Only one Provider agency working with the family is maintained;
3. SRS and Provider staff are in agreement regarding the exception.

5020 Reporting Critical Incidents

Critical incidents shall be reported to SRS by the case manager until the end of the aftercare period.

A. Examples of critical incidents include but are not limited to:

1. death or near death of a child (follow directions in Section 0520)
2. death of a parent (provide date of death)
3. runaway or child missing from placement-must be reported immediately, and no longer than 2 hours, after learning that the child is missing
4. arrest for a juvenile offense
5. serious accidental injury
6. alleged abuse or neglect
7. criminal assault of any kind
8. suicide or attempted suicide
9. serious physical illness
10. emergency change in placement
11. unanticipated medical attention that requires treatment beyond first aid
12. work related serious injury or death of Child Welfare Case Management Provider staff or incidents in which staff safety was seriously compromised
13. any incident which might involve SRS or the Child Welfare Case Management Provider in litigation or media attention
14. assaulting behaviors where safety is seriously compromised
15. use of illegal drugs

B. If there is a question as to whether or not a situation should be defined as a critical incident, the Child Welfare Case Management Provider should report the incident to SRS. Incidents reported per the instructions in Sections 0510 and 0520 need not be

reported more than once. If the report is regarding the death of a parent, the Provider shall also send the critical incident to the Regional Contract Specialist to assure FACTS data entry staff receive the information.

C. The Child Welfare Case Management Provider shall notify SRS staff verbally or by email of any critical incident within 12 hours of the Provider's knowledge of the incident, followed by a written report within 24 hours. The exceptions are as follows:

1. A child who has been reported to the Child Welfare Case Management Provider as missing from placement for any reason shall be reported to SRS and law enforcement within 2 hours of the Child Welfare Case Management Provider being informed of the child's missing status, with written report submitted to SRS within 24 hours;
2. A critical incident report of suspected child abuse/neglect shall be verbally reported to SRS through the Protection Report Center and then followed with written report within 24 hours.

5030 Child Welfare Case Management Provider Screenings and Assessments

The Child Welfare Case Management Provider shall assess the child and the family within 20 days of the referral.

The Child Welfare Case Management Provider is responsible to assess the needs of the referred child and other members of the family, ensure the appropriate services are provided to meet the identified needs, and ensure the family gains access to appropriate services in their community. Whenever possible, services shall be provided in the home and focus on the needs of the family rather than just being focused on the child

5031 Physical Health Services

The Child Welfare Case Management Provider shall obtain information on each child's last assessment for dental, vision, hearing, and physical health needs, including current prescribed medications. This includes collecting the names and addresses of all medical providers

5034 Substance Abuse Services

The Substance Abuse assessment is a part of the family assessment process. Adults in the home and children age 8 and over shall be assessed. If the provider determines that further assessment is warranted, a referral shall be made to the statewide substance abuse Pre-paid Inpatient Health Plan (PIHP) contractor. Additional

information is available at
http://www.srs.ks.gov/agency/as/Pages/SubstanceUseTreatmentServices.aspx

5040 Professional Judgment Resolution Process

Professional disagreements between Child Welfare Case Management Provider and SRS staff shall be resolved at the lowest level possible. The Regional Contract Specialist is available to provide contract clarification and assist with problem solving.

The resolution process is a management tool and shall be used frequently to work out issues quickly and appropriately. Only when the informal process cannot resolve an issue should the formal process be initiated.

A. Informal Process
The informal process stresses immediate and ongoing communication. If SRS or Provider staff are unable to resolve their concerns, supervisory staff shall become involved. If the SRS supervisor and Child Welfare Case Management Provider supervisor cannot agree, they shall discuss the issues with the Regional CFS Program Administrator and the Child Welfare Case Management Provider Program Director. If consensus cannot be reached, the issue shall be pursued through the formal process.

B. Formal Process
The formal process may involve three levels of resolution and requires written reports of the specific issues needing resolution.

1. If not resolved through the informal process, both SRS and Provider supervisors present the following written documentation to the Regional CFS Program Administrator and the Child Welfare Case Management Provider Program Director:.

    a. Pertinent case specific facts;

    b. Specific areas on which there is disagreement and the rationale from each on the reason for disagreement;

    c. Expected results.

2. If the dispute is not resolved at the first level, the written documentation cited above will be sent to the Regional Director (or designee) and the Child Welfare Case Management Provider's CEO (or designee) for review and resolution.

3. If not resolved at the second level, the written documentation cited above will be sent to the Director of Children and Family Services (CFS) for review and resolution.

At each level, there is a maximum limit of five working days for written response. If the situation necessitates a shorter period of time in which to make a decision, the time period shall be adjusted accordingly.

5042 Mental Health Services

A. The mental health assessment process includes:

1. The Child Welfare Case Management Provider shall use a research supported instrument to assess the mental health needs of the child. The Social/Emotional Screening Tool for each child age newborn through age 5 (Appendix 3L), or the Child Welfare Mental Health Referral Guide (Appendix 3J) for each child age 6 and older may be used. The Child Welfare Case Management Provider makes a referral, using the Request for Initial Mental Health Assessment/Transfer of Services form, to the CMHC or Infant/Toddler/tiny-k Services for those children age newborn through age 5 whose screening tool results indicate the need for mental health assessment (See Appendix 3K for Request for Initial Mental Health Assessment/Transfer of Services form).

2. The Child Welfare Case Management Provider makes a referral, using the Request for Initial Mental Health Assessment/Transfer of Services form, to the CMHC for those children age 4 and older whose referral guide results indicate the potential existence of a serious emotional disturbance and the need for specialized mental health services (See Appendix 3K for Request for Initial Mental Health Assessment/Transfer of Services form)

3. For children age 4 and older, the CMHC shall complete an evaluation to determine if the child has a serious emotional disturbance and needs specialized, community based mental health services (SED/CBS)

4. The determination of SED/CBS shall continue throughout the entire episode of service provision.

B. The Child Welfare Case Management Provider shall:

1. submit notice of status changes to the CMHC or Infant/Toddler/tiny-k Services, for children served by them within 5 business days of the status change

2. submit to the CMHC or Infant/Toddler/tiny-k Services prior history and any psychosocial assessment available for children served by them within five business days prior to the child's appointment

3. provide the case plan to the CMHC, or Infant/Toddler/tiny-k Services if one has been completed prior to the referral for specialized services

4. invite appropriate CMHC or Infant/Toddler/tiny-k Services staff to all subsequent case planning conferences

5. provide a completed case plan to the CMHC or Infant/Toddler/tiny-k Services within ten business days of the completion of the subsequent case plans

6. participate in regular and ad hoc reviews of the system in order to determine if the needs of children and families are being met
7. encourage parents to be actively engaged in the assessment and treatment process
8. make a referral to Kansas Legal Services to assess if an application for SSI needs to be submitted

For information about Medicaid waivers, see Section 0606.

5043 Developmental Disability Services

The Developmental Disability assessment process includes:

A. The Child Welfare Case Management Provider assesses the child's level of functioning through the use of a research supported instrument. The Child Welfare Mental Retardation / Developmental Disability Screening Tool (Appendix 3I) may be used for this screening.

B. The Child Welfare Case Management Provider makes a referral to the local Community Developmental Disability Organization (CDDO) or Infant/Toddler/tiny-k Services, for children whose tool results indicate the potential existence of a developmental disability and the need for specialized services.

C. The CDDO or Infant/Toddler/tiny-k Services shall complete an evaluation to determine if the child meets the criteria for developmental disability services.

D. If a disability is diagnosed, the Child Welfare Case Management Provider shall make a referral to Kansas Legal Services to assess if an application for SSI needs to be submitted.

5050 Professional Judgment Resolution Process

Professional disagreements which arise between Child Welfare Case Management Provider and SRS staff must be resolved at the level at which they arise by respectful and open communication. The Regional Contract Specialist is available to provide contract clarification and assist with problem solving.

The resolution process is a management tool that can and shall be used frequently to work out issues quickly and appropriately. Only when the informal process cannot resolve an issue should the formal process be initiated.

A. Informal Process
The informal process stresses immediate and ongoing communication: telephone call and e-mail are important elements of this type of process. If SRS or Provider

staff are unable to resolve their concerns, supervisory staff shall become involved. If the SRS supervisor and Child Welfare Case Management Provider supervisor cannot agree, they shall discuss the issues with the Regional CFS Program Administrator and the Child Welfare Case Management Provider Program Director. If consensus cannot be reached, the issue shall be pursued through the formal process.

B. Formal Process
The formal process may involve three levels of resolution and requires written reports of the specific issues needing resolution.

First Level: If not resolved through the informal process, both SRS and Provider supervisors present the following written documentation to the Regional CFS Program Administrator and the Child Welfare Case Management Provider Program Director.

- Pertinent case specific facts
- Specific areas on which there is disagreement and the rationale from each on the reason for disagreement.
- Expected results.

Second Level: If the dispute is not resolved at the first level, the written documentation cited above will be sent to the Regional Director (or designee) and the Child Welfare Case Management Provider's CEO (or designee) for review and resolution.

Third Level: If not resolved at the second level, the written documentation cited above will be sent to the Director of Children and Family Services (CFS) for review and resolution.

At each level, there is a maximum limit of five working days for written response. If the situation necessitates a shorter period of time in which to make a decision, the time period shall be adjusted accordingly.

5100 In Home Services

A. Family Preservation Services are made available to the child/children and the family in the parental home. The goal is to provide a full range of services to the family in order to keep the child(ren) safe, improve family functioning, and prevent the unnecessary removal of the child(ren) into the state's custody. The family preservation program builds upon a family's strengths and abilities to resolve the crisis that places the child at risk, maintain the family as a whole, and teach families new skills to prevent future crisis.

B. The level of intensity needed for service delivery is defined primarily by the family, with input by SRS staff at the time of the referral, as well as the Family Preservation

Case Management Provider. All parties should work from the expectation that the intensity level is established to reduce the risk of harm to the child(ren), as well as the risk of removal. Families are given the time and services they need when they need them. Family Preservation services include the following characteristics:

1. Services protect the child(ren) and strengthen the family;
2. Services are provided to alleviate a current crisis situation that places the children at risk of removal from the home;
3. Services are delivered primarily in the family home or community;
4. Services are designed for families who require more frequent contact, including the availability of staff twenty-four hours a day, seven days a week;
5. Services are committed to reinforcing the strengths of the family and its members and empowering the family to solve problems and become self-sufficient;
6. Services enhance parenting skills, family and personal self-sufficiency, functioning of the family, and reduce stress on families;
7. Services are designed to be a therapeutic intervention, and
8. Services help families locate and use additional assistance including, but not limited to, the development and maintenance of community support systems, counseling and treatment services, housing, child care, education, job training, emergency cash grants, state and federally funded public assistance, and other basic support services.

5101 Criteria for Referral

A. The Family Based Assessment process shall be utilized to determine the level of intervention and recommendation of services for a family in crisis. General guidelines for recommending services include:

1. The Safety Decision on the Safety Assessment is "conditionally safe"; or
2. The Risk Level on the Risk Assessment is "Moderate", "High", or "Intense", "Risk Present"; or
3. The Risk Conclusion on the Risk Assessment is "Risk Controlled" or "Risk Present"; or
4. The Assessment Conclusion on the CINC NAN: Non-abuse/Neglect Assessment is "Problem Behavior Controlled or Present".
5. The family has specifically requested services.

B. A family is eligible for a referral to Family Preservation when:

1. There is a risk for removal of a child from the home, and

2. A parent/care giver is available to protect the child; and

3. A parent/care giver is willing and able to participate in service.

4. Family with chronic problems has experienced significant progress and now demonstrates ability to care for the family and children.

5. A parent/caregiver with mental/emotional health issues has been stabilized so they now demonstrate ability to care for self and children.

6. A parent/caregiver with limitations now demonstrates ability to care for self and children.

7. A parent/caregiver with substance abuse issues now demonstrates an ability to care for children.

8. A pregnant woman is using substances. See PPM Section 2723-Family Preservation Referral Criteria for Pregnant Woman Using Substances.

5102 Excluded from Family Preservation Services

Families having at least one child in Custody as Child in Need of Care and are referred to the Foster Care/Reintegration Service Provider or who are already in out of home placement will not be referred to Family Preservation

5103 Criteria for Adjudicated Juvenile Offenders

A. If there is only one child in the home and that child is adjudicated as a juvenile offender and is in the custody of the Juvenile Justice Authority (JJA), either before or after referral for Family Preservation services, services to that child are the responsibility of the JJA. Family Preservation services or any other type of services deemed necessary by JJA or the legal system can be purchased by JJA from a provider of their choice.

B. If there are other children in the home who meet the criteria for family preservation services, a referral can be made or the service can continue if the adjudication and custody occur after referral. The child/youth that is adjudicated and in the custody of the JJA may participate as a member of the family in these services.

C. A juvenile offender who needs services related to abuse/neglect which are distinct and separate from the juvenile offender issues, may be considered for a Family Preservation referral. Such services would result from an Abuse/ Neglect investigation by SRS.

D. A child may have juvenile offender charges or be adjudicated as a juvenile offender and JJA not be involved. The charges may be pending or the Court may have another entity, i.e. Court Services, provide the supervision outlined at the dispositional hearing.

5104 Special Circumstances

A. If a child/children of a family receiving family preservation services changes residences, the need for family preservation services shall be assessed independently for a possible family preservation referral. This may arise when a child changes their residence to live with the other parent, a relative or other kin.

B. Services may occasionally be court ordered. When the court orders both parents to participate in family preservation services but the child lives with only one parent, family preservation services shall be delivered to the custodial family. A referral to family preservation for the non-custodial parent family will be assessed on its own merit.

5110 Referral Process for In Home Services

A. As soon as a family is identified as eligible for Family Preservation, a referral shall be made to the Family Preservation Service Provider within 24 hours.

B. When the determination has been made to refer a family for family preservation services, the SRS social worker shall e-mail or fax the following information to the Family Preservation Service Case Management Provider:

1. Family Preservation Referral and Transmittal Sheet, CFS 2020;
2. CFS 1000 face sheet;
3. CFS 2003, Family Based Safety Plan, if applicable;

C. The SRS social worker shall be available to answer any questions the Provider may have regarding the referral for two hours following the faxing or e-mailing of the information.

D. Any other pertinent case material including, but not limited to, case planning documents, court orders, and releases of information shall be mailed or faxed to the Family Preservation Case Management Provider. It is very important to share all relevant information with the service provider. SRS shall inform the service provider of any information in SRS files which cannot be released. For example, if SRS has information that a child in the family has received an evaluation by a private psychologist, the Family Preservation Case Management Provider shall be informed of the existence of the evaluation from the psychologist.

E. When a situation requires that an initial FP referral be made outside of the Region, the new Region needs to be contacted and assist with the referral because they will be the Region paying for the new referral.

5111 Referral-SRS Custody: Maintenance at Home

When a child(ren) is in custody but is not in need of out of home services, is not being served by a Child Welfare Case Management Provider, and meets the criteria for referral, then a referral may be made to the Family Preservation Case Management Provider. If a custody case plan is due within 15 calendar days of a referral for Family Preservation services, then SRS shall complete the plan and invite the Family Preservation Case Management Provider, as well as the family, and negotiate the tasks to be included as the Family Preservation Case Management Provider is responsible for ensuring all tasks are completed.

If at the conclusion of the intensive services phase, the child(ren) remain in custody, the Child Welfare Case Management Provider shall continue to provide custody supervision services. This would include but is not limited to maintaining a current case plan, monthly face-to-face contact with the child, court appearances, assisting the family in following court orders, etc.

5112 Recommendation for Continuation of Specific Services

When a family receiving services under a client services agreement is referred for family preservation services, the SRS worker may recommend the current client service agreement be continued. If a recommendation is made, SRS is responsible for the costs associated with the client service agreement. The continuation of such services is to be authorized at the time of the referral and documented on the CFS 2020. When a referral to family preservation is under consideration or is made, no other new service referrals are to be made by SRS

5113 Request for Retraction

If the Family Preservation Case Management Provider believes a retraction is warranted, the Family Preservation Case Management Provider will complete and submit the "Request for Retraction of a Family Preservation Referral", CFS 5002, to the Regional Contract Specialist within three business days of referral. Once the Family Preservation Case Management Provider submits the request for retraction, timelines associated with the case will be suspended until the RCS decides whether to grant the request for retraction. The RCS shall consult with the SRS Social Worker and Supervisor and make a final determination on the request for retraction. If the RCS approves the request for retraction, the Family Preservation Case Management Provider receives no payment for the referral and the referral is not reflected in any of the outcomes.

Situations which may result in a request for retraction are:

A. the family has moved and their location is unknown by SRS;
B. another Child Welfare Case Management Provider has contractual responsibility to provide services to the family;

C. child(ren) no longer in the home due to a family decision with no established date for return of the child(ren), and the family is no longer interested in Family Preservation services
D. one child in the home has been moved into out of home placement prior to the initial case plan meeting (OOH referral is made to the reintegration provider)
E. parents/caregivers refuse to accept Family Preservation services within the first three days after referral. (Also see Section 5140.)

5121 SRS

Following the referral to family preservation, the SRS social worker (unless otherwise noted) shall be responsible to:

A. provide the family a copy of the Family Preservation Case Management Provider brochure (Providers will supply SRS with their current brochure as needed.)

B. provide current information for data entry into FACTS,

C. assist the family preservation case management provider in the engagement process with the family.

D. participate in the Initial Team Meeting

E. complete all child abuse/neglect assessments in accordance with PPM section 2000.

F. inform the Family Preservation Case Management Provider of ongoing child abuse/neglect assessments.

G. provide the Family Preservation Case Management Provider a copy of the CFS 2012. Inform the provider of the status of appeal, if applicable

H. notify the Family Preservation Case Management Provider when a child is placed in SRS custody and provide a copy of the journal entry/court order.

I. participate in case planning, as needed

J. complete the sections designated for SRS Social Work staff on the Family Case Plan

K. authorize or deny requests for hard goods in excess of the $500.00 contract obligation, based on availability of resources and customer need

L. meet with the family and family preservation provider to discuss options if there is a refusal of services

M. assure the Family Preservation Case Management Provider completes the CFS 5001, Family Preservation Non-Completion of Case Plan (NCCP), if a case plan is not completed within the required timeframe or a child is referred out of home prior to completion of the case plan. The initial case plan should be completed approximately 20 days after referral and received by SRS within 3 business days following the date the case plan was held. When a referral ends as a non-completion, SRS should receive the CFS 5001, Family Preservation Non-Completion of Case Plan within 30 calendar days of referral. When appropriate, the timeframe for completion of the case plan may be extended by documented mutual decision.

N. provide reports to the court as indicated.

O. the Regional Contract Specialist will reconcile names of referrals, and names of non-completion of case plans with the Family Preservation Case Management Provider. Additionally, the Regional Contract Specialist shall be consulted, in writing, on any case plans that will be completed beyond 30 days from referral.

5122 Family Preservation Case Management Provider

Following the referral to family preservation, the Family Preservation Case Management Provider shall:

A. Provide direct services to the referred family for twelve months.
B. Acknowledge receipt of the Family Preservation Referral within 24 hours by submitting the Acknowledgment of Referral/Change form CFS-2021.
C. Access through the KIDS system the Safety Assessment (CFS 2030B), Risk Assessment (CFS 2030D), CINC/NAN Summary (CFS 2030E) and Family Based Assessment Summary (CFS 2030F).
D. Access through the FACTS system any needed information.
E. Contact the family within 24 hours to schedule the Initial Team meeting with the family, to be held within two business days of the referral.
F. In consultation with the family, schedule and hold the initial Family Case Plan conference within 20 calendar days of referral and submit the original copy of the Family Case Plan documents to the SRS social worker 3 days following case plan meeting. If the family requests the Family Case Plan meeting occur beyond 20 days of referral, the provider shall consult with the SRS social worker. If SRS approves the family's request, the provider shall notify the Regional Contract Specialist. If SRS does not approve the family's request, the provider shall complete the CFS 5001, Family Preservation Non-Completion of Case Plan.
G. In consultation with the family, schedule and hold a Family Case Plan conference within 170 days of the most recent case plan, if the case remains open in the intensive phase.
H. In consultation with the family, schedule and hold a Family Case Plan conference within 20 days of resumption of intensive services, unless the family requests it to occur beyond the 20 days. Submit the original copy of the Family Case plan documents to the SRS social worker within 3 business days following the date of the case plan meeting.
I. Submit the following case plan documents when the child is not in SRS custody:
    1.
    2. CFS 3050 Family Service/Preservation Case Plan
    3. CFS 3057 Family/Permanency Plan Services and Service Codes
    4. CFS 3055 Family/Permanency Plan

J. In addition to the above documents, submit the following case plan documents when the child is in SRS custody:

    1. CFS 3051 Permanency Plan for Child in Custody

2. CFS 3052 Permanency Plan for Child in Custody Administrative Requirements
3. CFS 3054 Visitation Schedule
4. CFS 3055 Family/Permanency Plan Review
5. CFS 3057 Family/Permanency Plan Services and Service Codes

K. Complete the CFS 5001, Family Preservation Non-Completion of Case Plan, if a child is removed from the home after the initial team meeting and SRS refers the child to the Reintegration/Foster Care services Child Welfare Contract Management Provider. The provider shall submit the CFS 5001 within 30 calendar days of referral.
L. Conduct worker/child visits with each child in the family at least monthly during the active phase. Continue to conduct monthly visits for child(ren) in SRS custody but still in the home. Visits shall address the safety, permanency, well-being and promote achievement of case plan goals.
M. If there is court involvement, provide the SRS social worker a court report a minimum of 10 days before it is due to the Court.
N. Provide documentation to the SRS social worker when a child cannot safely remain in the home.
O. Attend court hearings.
P. Testify in court as requested.
Q. Reconcile names of Referrals and names of Non-Completion of Case Plans with the SRS Regional Contract Specialist monthly.
R. Submit Encounter Data to CFS as required and respond to Error Reports timely.
S. Maintain the Case Activity Log to document services provided.
T. Provide every family engaged an application for Medicaid and/or Healthwave.
U. Assure all children with Medicaid eligibility receive Kan-Be-Healthy services.
V. Notify SRS timely of lack of engagement with the family or refusal of services by the family after referral.
W. For Pregnant Women using Substance referrals, complete substance abuse testing within 24 hours of birth and report toxicology results to SRS on the CFS-2021.
X. Complete and submit to SRS, within 48 hours the Acknowledgment of Referral/Change form (CFS-2021) when appropriate.

5130 Initial Team Meeting for Family Preservation

The initial team meeting initiates building the relationship between those persons who will share the responsibility for ensuring the child and family receive the services and supports required to maintain the family structure.

5131 Initial Team Meeting Participants

A. Persons required to attend the initial team meeting are as follows:

1. SRS social worker
2. Family Preservation case manager
3. The parent(s)
4. Other family members

B. The family should be encouraged to invite other persons who are a part of the family's support network. The assigned SRS social worker and the assigned Family Preservation case manager shall attend the initial team meeting, however, if either or both are unable to attend, each agency is responsible to designate other staff members. The preferred designee is a staff member who has or will have involvement with the family. The case file shall document the designee's involvement with the family.

C. Parents shall sign release of information forms to authorize the sharing of information with meeting participants.

5132 Initial Team Meeting Timeframe and Location

A. The Family Preservation Case Management Provider shall contact the family within 24 hours of the referral to introduce themselves and to plan for the initial team meeting. The family's preference shall be considered when selecting the time and location for the meeting.

B. The initial team meeting shall occur in person within two business days from the time of the referral. Only the family may request to exceed the two business day requirement, and family requests should be limited to accommodation of schedules or allowance for a support person to attend. If not held within the two business days, the initial team meeting shall be held as soon as possible, preferably within the next 24 hours. The case file shall reflect the reason for the extension of the initial team meeting time.

5133 Purpose of Initial Team Meeting

The purposes of the initial team meeting are as follows:

A. Families are provided the opportunity to describe their experiences, identify their strengths, resources, and skills, and play a lead role in the development of the initial service plan

B. When the meeting is over, families feel their perspectives are valued and there is a commitment to helping them achieve success

C. Supports for the family have been identified

D. Roles and responsibilities of all team members are clarified: families, child, Case Management Provider, SRS, service providers, and other team members

E. Full disclosure of SRS expectations, consequences of actions, and timelines for decisions about child permanence

F. A plan is made for the continued gathering of assessment information that can support the initial case plan, including the signing of releases to review information already collected, or to contact individuals to obtain new information.

5134 Documentation of Initial Team Meeting

The Family Preservation Case Management Provider shall document the following information in the case file:

- Date, time, and location of meeting
- If not held within required time frame, the reason
- Persons invited
- Persons attending and their role
- Issues discussed
- Next steps planned

5140 Refusal of Family Preservation Services

A. When a referral retraction has been approved or when the client continues to refuse Family Preservation services, then prior to case closure the SRS social worker will meet with the Social Work Supervisor to review the current risk and safety assessment to determine if there are any safety issues. Additional steps could include referral to other community services, a request to the County/District Attorney for removal, or case closure. This discussion and decision shall be clearly documented in the case file.

B. If the family refuses services, prior to signing the case plan but after the three day referral retraction period, both SRS and Family Preservation Service Provider should work with the family, i.e. meet with the family to discuss refusal and other available options/services. If the family continues to refuse services after meeting with them, the Family Preservation Service Provider shall complete and send to the SRS Regional Contract Specialist the Non-completion of Case Plan form within 30 days after referral. This information shall be provided by the SRS Regional Contract Specialist to the appropriate SRS staff for entry into the FACTS system.

5150 Transfer of Family Preservation Cases and Change of Venue

If there is an open Family Preservation case at the time the family moves to a different location served by a different SRS region, the SRS case shall transfer to the receiving SRS office. The SRS case file, including the Family Preservation Transfer Case-Initial Transfer form (Appendix 5D), shall be forwarded to the CFS Regional Program Administrator or designee responsible for the receiving SRS office.

(Refer to Section 5104 for when a child moves to another parents home.)

A. Child(ren) not in the Custody of the Secretary

If the family moves to another contract region during the Family Preservation service period and the child is not placed in custody of the Secretary, the original Family Preservation Case Management Provider shall:

1. Continue responsibility for 12 months after referral.
2. Choose to serve the family in their new location, or subcontract for services with the Family Preservation Case Management Provider in that region or another provider of their choice.
3. Remain responsible for all contractual obligations and reporting for these cases.

B. Child(ren) in the custody of the Secretary

If the family moves to another contract region during the Family Preservation service period and the child is placed in the custody of the Secretary but still at home, a new referral to the Family Preservation Case Management Provider will be made if court jurisdiction is changed.

5160 Responsibilities following Intensive Services

A. The Family Preservation Case Management Provider is responsible for providing services and supports for 12 months following the referral. It is the expectation that initial service provision to the family will be intensive and then gradually decrease in intensity. At the conclusion of the delivery of intensive services, and with the expectation the Family Case plan goals have been met, the family, Family Preservation Case Management Provider, and any other pertinent parties shall develop a mutually agreed upon plan addressing the expectations of the family and Provider, for the remaining months of service. These plans will be reviewed and revised throughout the remaining months of service.

B. If the family is in need of additional intensive services during the 12 month period, the Family Preservation Case Management Provider shall be responsible for providing these services without a new referral.

5161 Resumption of Intensive Services

The family or SRS may request during the twelve months following referral, resumption of intensive services. This request may be based upon; a report alleging abuse/neglect or non-abuse/neglect concerns, the opening of a new case involving allegations of abuse/neglect, or non-abuse/neglect, or the family believes they are in need of intensive services.

A. SRS Responsibilities:

If SRS requests the resumption of intensive services, SRS shall submit to the Family Preservation Case Management Provider the following:

1. Initial CFS 2020 with "Resumption of Intensive Services" checked at the top of the page.
2. CFS 1000, if applicable,
3. CFS 2003 Family Based Safety Plan, if applicable

B. Family Preservation Case Management Provider Responsibilities:

1. Provide information as requested by the Regional Protection Report Center on a new report regarding a family.
2. Any contract with family by the Child Welfare Case Management Provider regarding a new report should be coordinated with SRS.
3. Make face-to-face contact with the family to ascertain if additional after care services are indicated when Regional Protection Report Center staff notifies the Provider of receipt of a report which was closed with no further CFS action needed.
4. Coordinate with the SRS Social Worker prior to any contact with the family by the Child Welfare Case Management Provider if SRS determines an investigation and/or further assessment is indicated.
5. If the family returns to the intensive phase during the 12 months of service delivery, complete and e-mail to SRS, within 48 hours, an Acknowledgment of Referral/Change form (CFS-2021), with "Reinstatement" marked.
6. In consultation with the family, schedule and hold a Family Case Plan conference within 20 days of resumption of intensive services. Submit the original copy of the Family Case plan documents to the SRS social worker within 3 business days following the date the case plan was held.
7. Reflect the resumption of intensive services on the Contract Monthly Report

5200 Out of Home Services

The mission of the Division of Children and Family Services is to protect children, promote permanent, nurturing families, and strengthen community partnerships to serve

families. Safety, permanency, and well being for children cannot be accomplished by SRS alone. Child Welfare Case Management Providers are responsible for reintegration/foster care/adoption services including case planning, placement, service delivery, reporting to court, and collaboration with community resources to ensure appropriate services are available in close proximity to the child's home

SRS, through the Child Welfare Case Management Providers, is the state agency responsible for care and treatment of children removed from their parents or other care givers. When the court determines the child is in need of care or protection and cannot remain safely in the home, custody of the child may be granted to the Secretary of SRS. SRS is responsible to provide care and treatment for that child and the child's family until the child is removed from the custody of the Secretary by the court.

Out of home services are planned, goal-directed services delivered to children and their families when the children are in need of protection from abuse and/or neglect by parents or care givers or because of the action of the children themselves to ensure safety. Out of home services are designed to respond to the needs of children and families by building on their strengths and offering the support of agency and community based services through a family centered systems of care approach.

5201 Child Welfare Case Management Providers of Out of Home Services

Child Welfare Case Management Providers of Out of Home Services shall join with other community partners to develop a wide range of services to children and families. The goal of these services is to achieve permanency for the child and to assist the family in accessing services from local community providers in a short amount of time. Providers shall teach and empower families to access resources in their community in addition to utilizing their natural support system. Child Welfare Case Management Providers are not required to pay for services required by other members of the family. Providers may assist with the cost of these services if the family is unable to meet these expenses, no other sources of funding are available, and services will help facilitate an earlier reintegration or other permanency for the child.

5203 Referrals to Reintegration/Foster Care/Adoption Provider

A. A referral is made to the Reintegration/Foster Care/Adoption Provider when:

1. The Secretary has custody of the child by the court, and a determination has been made that the child is in need of out-of-home placement. or

2. A child is living with relatives at the time the child is placed in the Secretary's custody and reintegration plans with a parent have been ordered.

B. Excluded from Referral:

1. Children in the custody of SRS who remain in their own home;
2. Child living with a relative who is the child's care giver at the time of a new intake and is considered to be the child's permanent home;.
3. Children on runaway status or CINC children in court ordered detention;
    a. children will be referred when the child returns from runaway status or
    b. released from detention
4. Children who are hospitalized in a medical hospital or acute psychiatric care at the time they are placed in the custody of the Secretary;
    a. Children shall be referred when ready for discharge.
    b. If there is a need for Provider involvement prior to the date of discharge, a client services agreement for purchase of service may be developed.
5. Children in state hospitals for developmentally disabled;.
6. Children, not in Secretary's custody, placed by law enforcement in police protective custody.

5204 SRS Responsibilities at the Time of Referral to Case Management Provider

A. At the time the decision is made that out-of-home placement is required and SRS has documentation of custody, the SRS social worker or designee shall:

1. Notify the mother, father, grandparents, aunts, uncles, adult siblings and any other adult relative suggested by the parents that the child has been removed from the custody of the parents by providing the Relative Notification Letter, CFS 3032, and the Relatives as Caregivers Card, CFS 3033 within 30 days of the child's removal, unless documentation exists regarding a listed relative confirming safety issues related to family and domestic violence;.
2. Provide names, relationships and contact information of those notified to the Provider;.
3. E-mail pages one and two of the "Initial Referral to Out of Home Placement Provider", CFS 3030, to the Case Management Provider. Include on the CFS 3030 information about possible relative/kin placement resources;.
4. Telephone the Provider to alert them of the referral, if possible;.
5. Contact Case Management Provider to verify receipt of all referral materials;.
6. Be available to answer any Provider questions regarding the referral.

B. At the time the child is placed with the Case Management Provider, the SRS social worker or designee shall provide the following information:

1. Page 3 of the Initial Referral to Out of Home Placement Provider- CFS 3030-if not already sent at same time as page 1;
2. Copy of CINC petition, if available;
3. Journal Entry or other documentation of custody;
4. A recently signed Consent for Medical Care, CY 2822 or CY 2822.1;
5. Authorization for Release of Confidential Information, CFS 4001;
6. Notice of Medical Coverage, accompanied by either a screen print of the current medical card, if available, or a copy of the case profile screen in KAECSES that verifies the child's eligibility for foster care medical coverage;
7. CFS 4003, Authorization to Disclose Information Including Child(ren)'s Individually Identifiable Health Information (for foster care database);
8. KSDE Consent for Release of Information (for foster care database).

C. SRS shall pick up the child's clothing and personal items and provide them to the Provider at the time of child's placement. SRS shall transport the child to a SRS regional location designated by SRS when the child's physical location is at the child's home at the time of referral. Staff picking the child up shall have proper identification available indicating he or she is an SRS employee and has authority to transport the child. The Provider shall obtain the child's clothing, personal possessions, medications, etc. upon receipt of physical custody of the child if SRS has not been able to obtain these items beforehand.

D. If the placement resource for the child is employed by the Child Welfare Case Management Provider, the Child Welfare Case Management Provider shall obtain prior written approval from the SRS CFS Program Administrator or designee for the region where the child's SRS case is located.

E. At the time of referral, but no later than 2 working days from the date of the referral, SRS shall provide a copy of the following additional information with the above, if available. Such information includes:

1. Family Assessment tools such as Genogram and Eco-map
2. Court Service Officers reports
3. Services provider reports (transfer/discharge summary or most recent report)
4. Medical, dental, immunization records
5. Psychological/Psychiatric Reports
6. Copy of birth certificate or verification
7. Copy of school records

8. Third party insurance information
9. Verification of Social Security Number
10. Family Based Safety Plan, CFS 2003

When the above information or documents are not available in the case record at the time of referral, the Provider shall obtain the information or documents needed, with the exception of the social security card. SRS shall make application for a social security card, or a copy of the child's social security card for employment purposes. (See Appendix 6D for instructions and sample letter)

F. Within 2 business days of the referral, SRS shall participate in the Initial Team Meeting. The Family Handbook shall be provided to the family at this meeting. (See CFS 4002)

G. Within 2 working days of referral, SRS shall furnish the Provider a current photo of the child.

5206 Responsibilities Regarding Financial Support

A. When a child is placed in the custody of the Secretary for out of home placement, parents are not relieved of their financial responsibility to support the child. SRS is responsible to complete an assessment of the ability of both parents to provide financial support for the child who resides in out of home placement. Within two days of a referral to the Case Management Provider, SRS staff shall complete a referral to Child Support Enforcement regarding the financial obligation of the parents.

1. Complete and explain an "Acknowledgment of Parental Obligation" form, CFS 3035, with participation from the obligated parent(s) after a child is removed from the home.

2. If one or both of the parents are not readily available, a CFS 3035 with the SRS worker statement portion filled in shall be mailed to the unavailable parents at their last known address. This form shall only be sent to parents with established legal paternity.

B. SRS is responsible for determining eligibility for foster care funding. The foster care program is financed with state funds and federal Title IV-E funds. Eligibility for Title IV-E funding shall be determined by SRS staff on each child placed in the custody of the Secretary for out of home placement. This determination is necessary to assess whether state or federal funds will be accessed for each foster child's care.

1. Initial eligibility for Title IV-E funding is determined on the CFS 4030A, which is completed by the SRS Social Worker.

2. The CFS 4031A, which is completed by the Child Welfare Case Manager, is used for re-determination for Title IV-E eligibility. (See Section 5900 for further information.)

C. SRS is responsible for determining eligibility for Medicaid.

1. Initial eligibility for Medicaid is determined on the CFS 4030A, which is completed by the SRS Social Worker.

2. The CFS 4031A, which is completed by the Child Welfare Case Manager, is used for re-determination for Medicaid eligibility. (See Section 5900 for further information.)

5208 Case Management Provider Referral Responsibilities

The Case Management Provider shall:

A. Accept all referrals from SRS of children in the custody of the Secretary and in need of out of home services;

B. Accept physical custody of the child and the placement packet within four hours of the referral from SRS;

C. Make transportation arrangements for the child;

1. The Child Welfare Case Management Provider may request SRS staff assist in transportation of the child.
2. Staff picking up the child shall have proper identification available indicating he or she is a Child Welfare Case Management Provider agency employee and has authority to transport the child.

D. Make a placement that meets the needs of the child and meets licensing requirements;.

1. If the placement resource is employed by the Child Welfare Case Management Provider, the Child Welfare Case Management Provider shall obtain written approval from the SRS CFS Program Administrator or designee for the region where the child's SRS case is located.

E. Provide the foster family a copy of the CFS 3030-Initial Referral for Out of Home Placement Services at the time of placement;

F. Schedule the Initial Team Meeting that shall occur within 2 business days of referral;

G. Notify the parent(s) within 24 hours of the location of their child, including the address and phone number;

1. If a parent is not notified, document the compelling reason for no notification and inform SRS the parents were not notified.

H. Provide the parent(s) the name(s) and phone number(s) of Provider staff for contact;

I. Contact the HCBS Waiver Case Manager, if applicable, to provide information about the child's new location;. (For information about the waivers, refer to Section 0614.)

J. Access the SRS FACTS and KIDS data systems to obtain assessment information completed by SRS (safety, risk, family based assessment summary, CINC/NAN summary) as well as case finding information;

K. Complete the "Acknowledgment of Referral/Notification of Move/Placement/Change" form (CFS 3031) and e-mail to SRS and the court within 48 hours of referral.

5211 SRS Roles and Responsibilities

A. SRS is ultimately responsible for children in the Secretary's custody and is accountable to the court. SRS is responsible for reviewing Case Management Provider service delivery following a referral to the Case Management Provider

B. SRS is responsible to:

1. ensure SRS social worker participation in initial team meeting and initial case planning conference;,
2. review and approve subsequent custody case plans- this task must be completed by a social worker;
3. notify Case Management Provider of Infant/Toddler/TinyK contact information for those children under age 3 for whom a referral has been made for these services;
4. notify Provider staff of changes in after-hours contact telephone numbers;
5. notify Provider staff of any critical changes in the family's situation within 12 hours verbally and 24 hours in writing after the information becomes known to SRS (For example, new allegation of abuse/neglect; child placed in detention by law enforcement, etc.);
6. assure necessary staff receive notification of any placement changes via a copy of the Acknowledgment of Referral/Notification of Move/Placement/Change;
7. Notify Child Welfare Case Management provider staff of child support enforcement orders;
8. ensure current information is available for data entry into FACTS;

9. inform the Provider of the status of any abuse/neglect assessments;

10. notify the Case Management Provider when a child in after care requires a new out of home placement;

11. provide technical assistance to Case Management Provider staff regarding expected outcomes;

12. prepare for case reads and audits.

5212 Child Welfare Case Management Provider Roles and Responsibilities

A. Upon referral, the Child Welfare Case Management Provider is responsible for direct service delivery to the child and family, recognizing the child and family's culture, with input by SRS. This responsibility extends until the child achieves the case plan goal or the child is released from the Secretary's custody for another reason, and the aftercare period expires. (Refer to the Permanency Flow Chart Appendix 3P.) If there is a change in case manager during the life of the case, the Child Welfare Case Management Provider, within 30 days, shall notify all appropriate parties, including, but not limited to the parents, SRS, and the court.

B. The Child Welfare Case Management Provider shall:

1. Provide Case Management Services as described in Section 3000 and Child Welfare Case Management Services as described in Section 5200 and 5300 of the CFS PPM.

2. Maintain confidentiality as required by law (including HIPAA) and SRS policy.

3. Share Information with the family and other professionals, as needed, to meet the needs of the child.

4. Collaborate with the Family Preservation Provider when initiating services to a family who has a child removed during Family Preservation program involvement.

5. Maintain license as a Child Placing Agency.

6. Maintain caseload sizes consistent with accreditation.

7. Provide accessible staff to the child, family and SRS 24 hours per day and provide this contact information to the family and SRS.

8. Respond to family crisis situations after reintegration within one hour and document this response in the child's case file.

9. Maintain an annual photograph of the child in the case file.

10. Cooperate with collection and submission of data elements and surveys of youth receiving Independent Living Services, pursuant to federal requirements.

11. Complete Interstate Compact referrals

12. Provide the court, or county/district attorney as appropriate, with contact information for the Native American tribe to assist the court in notifying the tribe of pending proceedings, for those cases in which ICWA applies

13. Send copy of case plans to the tribe for cases in which ICWA applies

14. Maintain foster care records for 6 years (per HIPAA regulations) and the child is at least two years past the age of majority.

15. Release client records/progress reports to SRS within five (5) working days of request.

16. Maintain case file with historical and current assessment information, services provided, and the progress toward meeting goals and outcomes.

17. Organize the case file per policy.

18. Submit encounter data to SRS to support federal financial reimbursement

19. Make face-to-face contact with the family to ascertain if additional after care services are indicated when Regional Protection Report Center staff notifies the Provider of receipt of a report which was closed with no further CFS action needed.

20. Coordinate with the SRS Social Worker prior to any contact with the family by the Child Welfare Case Management Provider if SRS determines an investigation and/or further assessment is indicated.

21. Cooperate with Kansas Legal Services (KLS) in obtaining Supplemental Security Income (SSI) eligibility.

22. Cooperate with the Child Support Enforcement (CSE) in locating absent parent and determining parental payment obligation.

23. Participate in SRS pre-service training for all direct care and administrative staff.

24. Participate in any mandated trainings and provide training required due to CFSR PIP, new policy or statutory changes, and/or CFS initiatives.

25. Assure family involvement at a policy-making level for the organization and hold at least one stakeholder feedback meeting per year to solicit input and feedback from families and youth concerning agency policy.

26. Participate in stakeholder, policy, program improvement, and other regional and statewide events to support and promote child welfare issues; for example, youth advisory councils, computer camps, and national foster care and adoption months.

27. Participate in Quality Assurance activities.

28. Submit quarterly management reports.

29. Maintain a public image that is cooperative towards the public/private partnership.

5220 Initial Team Meeting for Out of Home Services

The Case Management Provider shall contact the family the same day as the referral to introduce themselves and to plan for the initial team meeting. The initial team meeting shall occur within 2 business days from the time of the referral. The only time it is acceptable to exceed this timeframe is when the family makes a request for this to accommodate their schedules or to allow for participation by a support person who cannot meet the 2 business days timeframe. If not held within the 2 business days, the meeting needs to be held as soon as possible-preferably within the next day.

If the parent(s) or primary care giver from whom the child was removed are unwilling or unable (i.e. whereabouts unknown) to participate in the initial team meeting, this shall be documented in the child's case file. In these instances, the initial team meeting will not occur.

During the initial contact with the family, the Provider shall consult with the family to determine date, time, and location for the initial team meeting. Consideration shall also be given to staff and child safety when determining the location of these meetings (i.e. meth lab in the home, removal reason relates to physical condition of the home, etc.)

5221 Initial Team Meeting Participants

The persons required to attend the initial team meeting are:

A. SRS social worker
B. Case Management Provider case manager
C. The parent(s)or primary care giver from whom the child was removed
D. The child (age 7 and older)

In addition to these persons, the family shall be encouraged to invite other persons who are a part of the family's support network. The placement resource shall be strongly encouraged to participate. If the foster family is unknown to the child or parents, the meeting provides an opportunity for the family to meet the foster family and to understand each other's roles and responsibilities in achieving permanency for the child. The Provider shall provide support to the placement resource to enable them to participate in this meeting. A tribal representative shall be invited to attend the initial team meeting when ICWA applies. The name of the tribe, and name and address of tribal representative invited shall be documented in the child's case file.

The assigned SRS social worker and the assigned Reintegration/Foster Care case manager shall attend the initial team meeting. However, if either or both are unable to attend, each agency is responsible to designate other staff members. The preferred designee is a staff member who has had or will have some involvement with the family. The case file shall document the designee's involvement with the family.

If it is determined that it would be detrimental for the child to participate in the initial team meeting, the child may be excused. This shall be the exception rather than the rule. The child is an important member of this team, and their input is desired.

5223 Purpose of Initial Team Meeting

The purpose of the initial team meeting is:

A. Families are provided the opportunity to identify their needs and play a lead role in the development of the initial service plan

B. Families feel their perspectives are valued and there is a commitment to helping them achieve success

C. Supports for the family have been identified

D. Roles and responsibilities of all team members, including parents, child, Case Management Provider, SRS, placement resource, other service providers, tribe (if applicable), and other team members are clear

E. Full disclosure occurs including expectations of SRS, consequences of actions, and timelines for decisions about child permanence

F. A plan is made for the continued gathering of assessment information to support the initial case plan. This includes the signing of releases to review information already available, or to contact individuals to obtain new information

G. If the child's placement is not with relatives or other kin, more information shall be gathered about possible relative or non-related kin placement resources

H. A plan for parent child interaction, worker/child and worker/parent visitation is developed

5224 Documentation of Initial Team Meeting

The Case Management Provider shall document the following information in the case file:

A. Date, time, and location of meeting

B. If not held within required timeframe, the reason

C. Persons invited

D. Persons attending and their role

E. Issues discussed

F. Parent/child interaction planned

G. Next steps planned

5230 Placement Services

While the child is in out of home placement, their connection to family members remains of crucial importance. Intensive efforts shall be made to assist families in resolving the issues which led to the child's removal, place children with relatives whenever possible, and place siblings together. To assist in this effort, the placement resources shall work in partnership with the parents as a mentor and role model. All placements shall be related, licensed, or approved.

5231 The Multi-Ethnic Placement Act (MEPA)/Interethnic Adoption Provisions (IEPA) and The Indian Child Welfare Act

All placement decisions for non-Native American children shall conform to the Multi-Ethnic Placement Act (MEPA)/Interethnic Adoption Provisions (IEPA). These Acts are intended to:

A. reduce the length of time that children wait to be adopt

B. facilitate the diligent recruitment and retention of foster families and

C. eliminate discrimination on the basis of the race, color, or national origin of either the foster family or the child.

The placement of a child shall not be delayed while searching for a family of the same racial or ethnic background when there are families of other racial or ethnic backgrounds available who otherwise would be appropriate for the child and would meet the child's social, emotional, and physical needs.

Diligent recruitment of foster families who reflect the ethnic and racial diversity of children needing out of home placement is required. Non-compliance with these acts constitutes a violation of the Civil Rights Act.

The Indian Child Welfare Act supersedes the Multi-Ethnic Placement Act/Inter Ethnic Adoption Provisions. For information about compliance with the Indian Child Welfare Act in regard to out of home placements, refer to Section 0700.

5232 Least Restrictive Placement

Case Management Provider staff shall use the placement screening tool approved by their agency to determine the most appropriate, least restrictive, out of home placement setting for each child referred.

Provider staff shall consider placement with maternal and paternal relatives as well as non-related kin at the time of initial placement and through out the out of home episode. This consideration shall be documented in the child's case file. If a relative/kin

placement is not selected, documentation of reason shall be included in the child's file for each relative/kin explored.

When the child's needs require placement in a setting which provides more structure and supervision than is provided in a family foster home, the need for continued placement in that setting should be periodically re-assessed.

5233 Licensing/Approvals for Out-of-home Placements for Children

A. Any person caring for a child under the age of 16 years who is not related to the child by blood, marriage, or adoption shall be licensed by the Kansas Department of Health and Environment (KDHE) to care for the child, and shall be sponsored by a licensed Child Placing Agency in Kansas. Pre-adoptive homes are not licensed, but shall have an approved adoptive home assessment, whether or not they are related to the child. Foster parents and adoptive parents shall complete the national fingerprint background check. Foster parents, adoptive parents, and adults living in their households who have lived in Kansas less than five years shall clear a national child abuse/neglect registry check. The fingerprint background check and national child abuse/neglect registry check is required only once if the family is continuously licensed. If a fingerprint check is returned two times as illegible, a national name check is acceptable.

B. SRS requires:

1. Children, regardless of their age, in the custody of the Secretary who are living with individuals related to them by blood, marriage, or adoption must reside in homes that are either approved as meeting KDHE licensing standards or approved as meeting Provider agency standards
2. Children in the custody of the Secretary who are age 16 or older and living with unrelated care givers must reside in living arrangements which are either approved as meeting KDHE licensing standards or Provider agency standards. Providers negotiate with the caregivers regarding payments, if applicable. Case Management Providers are strongly encouraged to have homes approved by KDHE as meeting licensing standards in order to maximize federal reimbursement for these placements

C. SRS policy requires licensed foster parents complete the Partnering for Safety and Permanence/Model Approach to Partnerships in Parenting (PS-MAPP) training curriculum before accepting placements of children in the custody of the Secretary. Although PS-MAPP is encouraged for every family caring for children, it is not required for families caring for related children unless those families are licensed by KDHE to provide foster care.

5234 Relative Home

A. SRS defines a relative by the following standards:

1. A person who can trace a blood tie to a child. Persons related by blood include a parent, grandparent, sibling, great-grandparent, uncle or aunt, nephew or niece, great-great grandparent, great uncle or aunt, first cousin, great-great-great grandparent, great-great uncle or aunt, or a first cousin once removed (the child of a first cousin). Termination of parental rights does not alter or eliminate the blood relationship to other relatives.
2. A person who is or was related to the child through marriage and with whom the child maintains a kinship relationship. This includes but is not limited to step parents, step grandparents, step aunts and step uncles to the first degree, even though the marriage may have ended in divorce.
3. Legally adoptive parents and other relatives of adoptive parents as designated in groups (1) and (2).
4. A person who is court-appointed to be a guardian, conservator, or the legal custodian.
5. The spouses or former spouses (after marriage is terminated by death or divorce) of any persons named in the above groups.

B. Relatives shall be provided the options of receiving TAF assistance from SRS, financial support from the Case Management Provider, or becoming the payee for benefits the child receives such as SSI, SSA, etc. If the child does not receive benefits such as SSI, SSA, etc. and the relative chooses not to receive TAF, the Case Management Provider shall negotiate a financial support plan with the relative.

C. For placement purposes, parents of the child are not considered an out of home placement. If the child is residing with either parent, the child is considered to be "in the home".

D. When attempting to locate relatives of the child for whom the parents do not have current information, there are a number of websites available to assist in the search effort. A listing of some of these websites is found in Appendix 3O--Family Finding Search Websites.

Relatives may provide out of home care by becoming:

1. A Licensed Relative Home - Relatives choosing to provide care for related as well as non-related children shall meet the same standards as other licensed foster homes, including completion of the PS-MAPP curriculum, criminal background and child/abuse neglect registry checks required by KDHE, and meeting annual training requirements. Relatives must also be sponsored by a licensed Child Placing Agency in Kansas.

2. Relative Homes Approved as Meeting KDHE Licensing Standards - Relatives choosing not to become a licensed home through KDHE may care for related children in the custody of the Secretary by being approved as meeting KDHE licensing standards. Provider staff are responsible to send completed applications for approved as meeting licensing standards homes to KDHE. KDHE completes the home assessment and sends the relative a notice of the approved status. Completion of the PS-MAPP curriculum by these relatives is at the discretion of the Provider, but it is encouraged. Relatives must complete criminal background and child/abuse neglect registry checks required by KDHE. Payments made to these homes are not Title IV-E reimbursable until KDHE has approved them as meeting licensing standards.

3. Relative Homes Receiving Temporary Assistance for Families (TAF) - Relatives choosing to receive a TAF payment in lieu of becoming licensed or approved as meeting licensing standards shall be assessed by the Provider to determine these homes are environmentally and psychologically safe for children. The assessment shall include the KBI and SRS Central Registry check as well as pertinent social information regarding the family. The assessment shall be documented in the child's case file. Completion of the PS-MAPP curriculum is at the Case Management Provider's discretion, but it is encouraged. If the relative has been receiving TAF benefits and the child becomes ineligible for TAF due to child support collected exceeding the amount of income to remain eligible for TAF, the relative shall be offered the choice of becoming payee for benefits the child receives such as SSI, SSA, etc. or receiving financial support from the Case Management Provider. If the relative chooses financial support from the Case Management Provider, the Provider shall negotiate a financial support plan with the relative.

4. Relative Homes Approved using Provider agency standards - Relatives may be approved using Provider agency standards instead of being approved as meeting KDHE licensing standards. These homes shall be assessed in the same manner as the relative homes choosing to receive a TAF payment. The assessment shall include the KBI and SRS Central Registry checks. The assessment shall be documented in the child's case file. Completion of the PS-MAPP curriculum is at the Provider's discretion, but it is encouraged.

5235 Non-Related Kin Placements

Per KSA 38-2202(p), "Kinship care" is defined as the placement of a child in the home of the child's relative or in the home of another adult with whom the child or the child's parent already has a close emotional attachment. SRS strongly advocates care for children by their kin as the first choice for placement when the child's family cannot provide adequate care. If the kin are not related to the child, they shall be required to

meet KDHE child care licensing laws and regulations in order to provide out of home services.

To expedite placement of children with non-related kin, the requirement for the completion of PS-MAPP (the group process or Deciding Together) and the other training required prior to a child being placed in the home is waived. The non-related kin shall be required to complete the PS-MAPP curriculum and other pre-service training prior to licensure. If the non-related kin meets the requirements for informal care (which does not require licensure), including compliance with the background clearances and home assessment, the child may be placed in informal care for the first 30 days of out of home care.

Prior to the child's placement, the Provider shall request from the local SRS Service Center a Child Abuse/Neglect Central Registry check on all members of the non-related kin family who are age 10 and over. The Provider shall also require the members of the family who are age 10 and over sign a statement, Appendix 5F-Declaration of No Prohibitive Offenses for KDHE Licensure. Signing this form indicates a check of the criminal history database required by KDHE licensure will not reveal conviction for any offenses, unless they have been expunged, which would prohibit KDHE licensure. KDHE shall complete the KBI criminal history background check prior to issuing the temporary permit. The KDHE criminal history background check and child abuse/neglect registry checks required for all licensed foster parents shall be completed prior to full licensure.

Immediately following placement, the Provider shall complete the family assessment and licensing packet. The packet shall be sent to KDHE no later than 2 weeks after the child's placement. KDHE shall review the packet and, if all requirements are met, issue a temporary permit within 30 days after the child's placement. The temporary permit remains in effect for 90 days from the date of issuance. This temporary license may be extended for one additional period not to exceed 90 days, to allow the kin time to complete PS-MAPP. No further extensions shall be granted. Non-related kin shall comply with all licensing requirements of KDHE prior to a full foster home license being issued.

Case Management Providers shall negotiate a daily payment with the non-related kin providers to cover the cost of the child's room and board. They shall also provide the same level of supports and services which are provided to other foster families to ensure the child's needs are met and the placement remains stable.

5236 Foster Family

A foster family provides temporary out of home care for the child.

A. Selection of Foster Family

The goal for selecting a foster family is having the child's first placement be their only placement. Case Management Provider staff shall ensure the child and child's family are fully involved in making this decision to the extent that they are willing and able to participate. Selection of a foster family which can best meet the needs of the child takes into consideration:

1. Proximity to the child's family in order to facilitate parent/child interaction and reintegration.
2. Preservation of the child's racial, cultural, ethnic, and religious background
3. Proximity to the school the child was attending when they entered out of home placement, so the child can continue to attend this same school
4. Interests, strengths, and abilities which enable the family to relate to the child's needs including individual needs, age, interests, intelligence, moral and ethical development, family relationships, educational status, social adjustment, and plans for the future
5. Ability to serve as a mentor to the parents to facilitate a more timely reintegration and continue to be a source of support following reintegration
6. Placing siblings together
7. Ability to support and encourage the child's relationship with his family and can actively participate in permanency planning for the child
8. Proximity of the foster family to specialized services or facilities which the child may need

B. Information Shared with the Foster Family

To assist the foster family in making an informed decision regarding their acceptance of a particular child, the Provider agency shall provide in full the following information as it becomes available:

1. Strengths, needs, and behavior of the child
2. Circumstances which necessitated placement
3. Information about the child's family and the child's relationship to the family which may affect the placement
4. Important life experiences and relationships which may affect the child's feelings, behavior, attitudes, or adjustment
5. Medical history of the child, including third-party coverage which may be available to the child
6. Education history, to include present grade placement, special strengths, and needs
7. Case plan goals for the child
8. Role of the foster family in helping maintain the parent/child interaction schedule and contact with significant others

9. Role of the foster family in mentoring and serving as a role model for the parents

C. Maintaining the Foster Family Placement

Case Management Provider staff shall work with foster families to achieve stability of care for children in out-of-home placement.

Stability of care is best achieved when:

1. Children are carefully matched with families who can meet their individual needs
2. Foster families are adequately prepared and supported to provide services to the child and the family
3. Foster families partner with parents to obtain the resources necessary to meet the child's needs
4. Foster families are active members of the planning team for the child and family

D. Termination of the Foster Family Placement

Except in emergency situations, termination of a placement shall be anticipated as part of the service plan for the child and his/her family, and preparation for this event shall begin well in advance of the expected date of termination. When there is a threatened disruption in the placement, Provider staff shall offer services needed to prevent the disruption and maintain placement stability.

5237 Sibling Placements

Siblings shall be placed with the same placement resource whenever possible. If siblings are not placed together when they enter out of home placement, a plan shall be made to move them into the same placement as soon as possible. If after 90 days the siblings are still not in the same placement, a staffing which includes the children, parents, kin and other significant people, shall be held to review the actions taken to reunite siblings and plan further actions needed to accomplish this goal. The staffings shall occur every 90 days until the siblings are placed together unless the Case Management Provider documents that the sibling separation during foster care is due to the safety or well-being of any of the siblings.

When siblings are not placed together during foster care, a visitation plan shall be in place which allows for frequent and regular contact between the siblings not placed together, unless the Case Management Provider documents that visitation is contrary to the safety or well-being of any of the siblings. Sibling visits shall occur at least twice monthly. At least one of these visits shall occur during a parent/child interaction to allow

the parent(s) and all children to be together at least once per month (N/A if PRT has occurred). At least one of these visits shall be with only the siblings.

5238 Teen Parents/Infants

The Child Welfare Case Management Provider shall arrange placements for teen parents with their infants when infants are not in SRS custody.

A. The Child Welfare Case Management Provider shall provide necessary child care expenses for children and for the infants of teen parents when funds for child care are not available from other sources. The exception to this policy occurs when the teen parent and non-custody infant are residing in a foster placement and a TAF payment is received for the room and board expenses for the infant. Under these circumstances, if the placement is a foster home and the foster parents are employed outside of the foster home, the foster parent may make application to the Economic and Employment Support (EES) division of SRS for Income Eligible Child Care. The foster parent may receive child care for the hours of employment. Please refer to the Kansas Economic and Employment Support Manual (KEESM), Section 2800, for additional information

B. Teen Parents/Infants (infants not in custody)

1. Teen parents in the custody of the Secretary and their infants shall be placed together. The teen parents shall be given every opportunity to parent the infant with support from the care provider.
2. The teen parent's case plan shall reflect a need for services, goals, and objectives which will allow the infant to remain in placement with their parent.
3. Foster families, relative providers, and group facilities may apply for TAF funds on behalf of the teen parent to defray the costs of expenses for the infant who is not in the custody of SRS. These applications shall be made to the local SRS office.

C. Teen Parents/Infants (in custody)

1. When both the teen parent and the infant are placed in the custody of the Secretary, a referral of the infant shall be made to the Case Management Provider.
2. The Provider shall place the teen parent and infant in the same placement setting as long as there are no issues involving the safety of the infant that would preclude the placement together. The Provider shall provide services to the teen parent to facilitate the parent's ability to provide on-going care for the infant.
3. When the teen parent is in an independent living situation, the infant shall be considered to be reintegrated as of the date the teen parent enters the independent living situation. If the teen parent is leaving care at age 18 and

therefore has no aftercare the 12 months of aftercare for the infant shall continue until completed.

5240 Informal Care

KDHE has provisions in licensing regulations which allow for unlicensed informal care. Informal care is defined as 24 hour care to be provided for not more than one calendar month, on a one time basis, for a specific child or children in the temporary absence of the person with whom the child lives.

SRS shall permit the use of informal care for those instances when the most appropriate placement for the child is non-related kin who are not already licensed as a foster parent through KDHE. Refer to PPM 5235 for Non-related kin placement procedures.

5241 Slumber Parties and Sleepovers

Children in the custody of the Secretary are allowed to attend slumber parties or sleep overs with age mates in homes that are not licensed foster homes, as long as these are not prohibited in the child's case plan. Foster families and Case Management Providers shall exercise good judgment in granting permission for a child to attend a slumber party or sleep over. The child, birth parents, and foster family shall be aware of and in agreement with the child participating in such activities prior to their occurrence.

5242 Request for Extension of Foster Care Payment During Trial Home Placements

To facilitate reintegration of a child, the Case Management Provider shall seek written approval from SRS for continued payment during the trial home placement. The reason to seek a 30 day trial home placement shall be documented in the case plan or court report. A new case plan with a permanency goal of “maintain at home” shall be developed within the first 30 days of the trial home placement. The Provider shall submit the Request for 30 Day Trial Home Placement form, CFS 3040, to SRS at least 14 days prior to the start date of the trial home placement, if possible. SRS staff shall review the request, make the determination in regard to approval/non approval, and return the CFS 3040 to the Provider within 3 working days. If SRS approves continued payment for the 30 day trial home placement, the Provider must notify the court 14 days prior to the child's return to the home, unless the court gave prior approval.

The Case Management Provider shall e-mail an Acknowledgment of Referral/Notice of Move/Placement/Change (CFS 3031) to SRS indicating the date on which the 30 day trial home placement began. For purposes of payment to the Provider, the child is not considered to have been reintegrated until the end of this 30 day trial home placement. The aftercare period begins at the end of the 30 day trial home placement period.

Once the child enters the 30 day trial home placement, the child no longer is eligible for a foster care medical card. The Child Welfare Case Management Provider shall assist the family in completing the Healthwave application. If the trial home placement is unsuccessful, another case plan shall be completed within 30 days of the removal from the home.

5243 Visit versus Change in Living Arrangement

A visit can be described as a temporary stay of a social or therapeutic nature with definite beginning and ending points with a friend or relative who has not assumed the legal responsibility of providing ongoing care of the child. Visits shall not interfere with the child's school schedule. A transfer to another school during a visit would indicate the situation is not a visit, but a change in the living arrangement of the child.

A visit which is for the purpose of providing respite for the care giver shall not exceed 7 calendar days, unless approval is granted by the SRS Regional CFS Program Administrator or designee.

If the stay, from the outset, does not have an expressed termination date, or if a termination date is not clear from the circumstances, the situation shall be considered a placement or proposed placement and not a visit. Reimbursement to a placement other than the home where the visit occurs shall continue and encounter data submitted to CFS.

5244 Consents

Persons authorized to give consent for matters involving a child depends on the purpose of the consent and the legal status of the child. Consents for children who are or may be in need of care are controlled primarily by K.S.A. 38-2217 for health care and K.S.A. 38-2218 for educational decisions.

A. Medical Care Consents

1. If parental rights are terminated or relinquished, the parent has no authority to consent.
2. Courts may consent to medical care overruling parental objections.
3. When custody (ex parte, temporary or adjudication) has been awarded to a person other than a parent, the custodian or agent of the custodian may consent to medical care over the objection of the parent.
4. Prior to adjudication the authority of the custodian or agent of the custodian is limited to dental treatment by a licensed dentist, diagnostic examinations, releases and inspection of medical history records, immunizations, administration of prescribed drugs.

5. At or after adjudication, unless limited by the court, the custodian or agent of the custodian has full authority to consent to medical care. However, absent termination of parental rights, the parent's consent shall always be sought first.

6. K.S.A. 59-3075 (e) 4,5,6 state specific procedures the custodian or the agent of the custodian do not have the authority to provide consent:

a. to any psychosurgery, removal of any bodily organ, or amputation of any limb, unless such surgery, removal or amputation has been approved in advance by the court, except in an emergency and when necessary to preserve the life of the ward or to prevent serious and irreparable impairment to the physical health of the ward;

b. the sterilization, unless approved by the court following a due process hearing held for the purposes of determining whether to approve such, and during which hearing the child is represented by an attorney appointed by the court;

c. the performance of any experimental biomedical or behavioral procedure on the child or for the child to be a participant in any biomedical or behavioral experiment, without the prior review and approval of such by either an institutional review board as provided for in title 45, part 46 of the code of federal regulations, or if such regulations do not apply, then by a review committee established by the agency, institution or treatment facility at which the procedure or experiment is proposed to occur, composed of members selected for the purposes of determining whether the proposed procedure or experiment

d. The Secretary or the agent of the Secretary is prohibited from consenting to inpatient care in a state psychiatric hospital.

B. Non-Medical Consents

1. General Educational Decisions - When consent is needed for General Educational Decisions and parental rights are not terminated, permission shall first be sought from the parent(s). If, after diligent efforts, it is not possible to get consent from the parent(s), contract agency staff shall sign needed consents. As a last resort, and only when parent(s) and contract agency staff are not available shall SRS staff sign general educational consents. If parental rights are terminated, then contract agency staff shall sign for general educations decisions. If contract agency staff are unavailable, SRS staff shall sign general educational consents.

2. Special Education - When consent is needed for special education situations and parental rights have not been terminated, permission shall first be sought from the parent(s). If, after diligent efforts, it is not possible to get consent from the parent(s), consent shall be given by an educational advocate. If parental rights are terminated, consent shall be given by the educational advocate.

3. Other Non-Medical Consents - Unless otherwise specified in a court order, the parents are the primary source for all other non-medical consents and their

consent should be sought whenever possible. When obtaining a parent's consent is not possible, the provider or the child's caregiver may consent for special events, such as a field trip sponsored by a school, church or community organization.

C. Physical/Dental Health Records

Hospital, Medical, Surgical, or Dental Treatment or Procedures; Release or Inspection of Medical and Hospital Records (see 5244A for restrictions) - When a child in the custody of the Secretary is in need of Medical care, to include; hospital stays, surgery, medical care, dental treatment or procedures or has records that need to be released and his/her parental rights have not been terminated, the parent(s) permission shall be sought. If, after diligent efforts, it is not possible for the parent(s) to give consent, staff from the contract agency shall sign necessary and appropriate releases and consents. If contract agency staff are not readily available, designated SRS staff shall sign necessary and appropriate releases and consents. If parental rights are terminated, contract agency staff shall sign necessary and appropriate releases and consents. If contract agency staff are not readily available, designated SRS staff shall sign necessary and appropriate releases and consents.

D. Alcohol/Drug Evaluation - When a child in the custody of the Secretary is in need of an Alcohol or Drug Evaluation and his/her parental rights are not terminated, parental permission shall be sought. If, after diligent efforts, it is not possible to obtain parental permission, contract agency staff shall sign necessary consents. If contract agency staff are not readily available, designated SRS staff shall sign necessary consents. If parental rights are terminated, contract agency staff shall sign necessary releases. If contract agency staff are not readily available, designated SRS staff shall sign necessary consents.

E. Abortion, Experimental Drugs, Do Not Resuscitate Orders - When a child in the custody of the Secretary desires an abortion, requires a Do Not Resuscitate Order or is appropriate for an experimental drug trial and parental rights are not terminated, the parent(s) consent shall be sought. If, after diligent efforts, it is not possible to obtain parental permission, consent shall be given by the Secretary or the Secretary's designee. If parental rights are terminated, consent shall be given by the Secretary or by the Secretary's designee.

F. Mental Health

1. Care and Treatment Other Than State Psychiatric Hospital (see 5244A for restrictions) - If a child in the custody of the Secretary is in need of mental health services with the exclusion of admission into a state psychiatric hospital and his/her parental rights have not been terminated, parental permission shall be sought. If, after diligent efforts, it is not possible to obtain parent(s) permission, contract agency staff shall give consent to mental health treatment. If contract agency staff are not readily available, designated SRS staff shall sign consents. If

parental rights are terminated, consent shall be given by contract agency staff. If contract agency staff are not readily available, designated SRS staff shall sign consents.

2. Admission to State Psychiatric Hospital - If a child in the custody of the Secretary is in need of admission to a State Psychiatric Hospital and his/her parental rights are not terminated, parents' permission shall be sought. If, after diligent efforts, it is not possible to obtain parent(s) permission, a court order for placement shall be sought. This will require coordination between the contract agency, SRS and the County/District Attorney. If parental rights are terminated, a court order shall be sought. K.S.A. 38-2217(4) specifically prohibits placement by the Secretary of children in the Secretary's custody in a state psychiatric hospital and authorizes commitment proceedings or voluntary admission.

G. Out of State Placements/Travel

1. Interstate and international travel shall be planned in cooperation with the parents, if parental rights are intact. The court, GAL, and county or district attorney shall be notified a minimum of 10 days prior to departure of all interstate and international travel. Foster families shall take the child's placement agreement, medical consent form, and medical card. See Section 5254 for information on utilizing an out of state medical provider.

2. Written permission for international travel shall be obtained from the Regional Director prior to making travel arrangements. The written request to the Regional Director for international travel shall indicate the Case Management Provider possesses contact information for the child while abroad, and a current photo of the child is in the case file. Approvals for passports shall be obtained from parents or guardians, or if they are not available, the Regional Director.

5245 Responsibilities When Child Is Missing from Placement

When a child is missing from an out of home placement due to being a runaway, being abducted, or missing for an unknown reason, the Case Management Provider shall follow the procedures for reporting a critical incident (see 5020-Reporting Critical Incidents). In addition to these requirements, the Provider shall also take the following actions:

1. file a missing person report with the appropriate law enforcement agency in the area in which the child has been residing immediately, and in no case later than 2 hours, after being notified of the child's whereabouts being unknown;

2. provide the law enforcement agency with a current photo of the child; contact the child's parent(s), if applicable, to make them aware of the child missing from placement, elicit their assistance in locating the child, provide frequent updates on search efforts, and consult regarding whether to issue a press release;

3. notify the court of the child's missing status

4. contact the child's school to make them aware of the child's missing status and ask for their assistance in locating the child;

5. contact friends and other relatives of the child to obtain information from them and also gain their assistance in locating the child;

6. follow up with law enforcement on frequent basis to check on the status of the investigation;

7. provide emotional support to the birthparents, siblings, and placement provider in dealing with the child's missing status;

8. when the child is returned, re-assess the child's safety, permanency, and well being;

9. notify law enforcement no later than 24 hours after the child returns or is located;

10. re-assess the placement, treatment, and permanency plans and make changes as appropriate;

11. discuss with the placement provider, child, and birthparents ways in which the risk of future missing episodes for the child can be reduced;

12. document these above activities in the child's case file;

5251 Psychiatric Residential Treatment Services

The following process is specific to children assigned to the Reintegration/Foster Care/Adoption Case Management Providers. See Section 0607 for the processes specific for non-custody children served by SRS when authorizing Psychiatric Residential Treatment Services. Psychiatric Residential Treatment Services must be provided by a Medicaid enrolled provider of the service.

A. Prior Authorization Process:The Community Based Services Team (CBST) recommends a Psychiatric Residential Treatment Facility screen be completed by the Community Mental Health Center for approval through Kansas Health Solutions (KHS). The CBST consists of parents (if not PRT) and support persons the parents choose to have attend, SRS, Case Management Provider, Community Mental Health Center (CMHC), and may include other parties who can provide information to assist in determining the most appropriate treatment choice for the child. Parent involvement in these meetings is very important, as they have the most complete information about the child's history. Every effort shall be made to ensure parent participation. If the parent(s) has been provided adequate attempts to contact and involve in the CBST meeting and they do not appear, the CBST meeting and process shall continue. Efforts should continue to involve them in the treatment process.

B. The CMHC shall be the lead agency in setting up the CBST meeting, in collaboration with the Case Management Provider. The tasks of this team are to:

1. Review the treatment history and current needs of the child
2. Ensure all community based treatment services have been explored and/or utilized or document the services required by the child cannot be provided in a community setting.
3. Determine if the child requires a screen for PRTF treatment.
4. The screen shall be accessed through the CMHC for approval by KHS.
5. Screening results are provided by CMHC to KHS
6. If the screen determines medical necessity for PRTF placement, the Case Management Provider is authorized to place the child in a PRTF facility.
7. Within 2 days of admission and discharge, the PRTF completes and sends to KHS the KHS Admission/Discharge form.

See Appendix 3M for additional information.

C. Initial Authorization for Psychiatric Residential Treatment Facility (PRTF) services

1. The initial authorization is for a period of time up to 90 days.
2. Child Welfare Case Management Provider staff shall participate in the PRTF treatment planning meetings which occur within approximately the first 10 days and then at least every 30 days thereafter.

D. Initial Extension of PRTF Services

1. Approximately 60 days after the initial PRTF authorization period, the designated person at the Child Welfare Case Management Provider agency will receive written notification to contact KHS within 7 calendar days stating if they plan to request an extension screen for further PRTF treatment.
2. KHS will notify the CMHC closest to the facility in which the child is placed to complete the screen. The CMHC is responsible for the CBST process and completing the screen. The CMHC is required to contact the CMHC where the child's family resides and/or the current case exists to participate in the CBST process.
3. The screening shall be completed prior to the 90th day of the initial PRTF prior authorized period.
4. If the screening indicates continued treatment in a PRTF facility is medically necessary, the child will be authorized to continue to receive treatment in the PRTF facility for up to 60 days. The PRTF facility and Case Management Provider will receive notice of the extension by KHS.

E. Subsequent Extensions of PRTF Services

1. The above process shall be followed for any further PRTF extension, with the extension screen being completed prior to the 60th day of PRTF treatment extension.

F. Discharge planning begins upon admission to the PRTF. At the point in time the child's treatment team determines the child no longer meets medical necessity for continued PRTF treatment, or the child is screened for a PRTF extension and is determined to no longer meet criteria for PRTF treatment, the PRTF facility, CMHC, Case Management Provider, and other community providers (CBST Team) will be responsible for execution of the discharge plan to support the child in the community.

If medical necessity is not met, the child may continue in placement only if the Case Management Provider serving the child assumes responsibility for payment of the per

5253 Inpatient Psychiatric Treatment

Children and youth under age 21 who are in the custody of the Secretary and require inpatient psychiatric treatment shall receive a screening prior to placement in an acute, sub-acute or inpatient psychiatric treatment facility.

The Community Mental Health Center (CMHC) completes the CMHC Screening Assessment. The assessment is located at www.kansashealthsolutions.org/providers/index/resources_forms. KHS shall be notified at 1-800-466-2222. KHS is responsible to contact the local CMHC who assigns qualified staff to complete the screening.

See Appendix 3M for additional information.

If the CMHC Screener determines there is a medical necessity for treatment in an inpatient psychiatric treatment facility, the child shall be placed according to the outcome of the screening.

5254 Coordination With the School System

Case Management Provider staff shall work with the school system to ensure children in the custody of the Secretary receive educational resources according to individual need.

A. All school-age children in out-of-home placement shall attend school as required by state law. The school shall be accredited by the Kansas State Department of Education. Provider case managers, the child's parents, and resource families shall help children in care achieve the highest level of formal education the child is capable of completing.

B. When placed in family foster care, school-age children shall be maintained in their own school whenever possible. Placement in out of home care shall take into

consideration the child's proximity to their home school, the appropriateness of the educational placement, and whether transportation to the home school is necessary to achieve educational stability for the child.

C. Providers have responsibility to notify schools when children in out of home placement move into their area of service. Provider staff are responsible to refer appropriate children for Education Advocates.

1. Educational Enrollment Information Form (EEIF)/Foster Care Database - Case Management Provider staff are responsible to provide schools with necessary student information for children who are in the custody of the Secretary and in out of home placement. The foster care database is an electronic method for Provider staff to provide educational enrollment information to the school prior to or at the time of the child's enrollment so educational records can be transferred between schools. School personnel are able to access the database to obtain the child's information, rather than receiving a hard copy of the EEIF. The Provider shall:

a. enter information into the database for all school-aged children who are in out of home placement and attending a public school

b. update this information each time a child experiences a change in school, even within the same district. This includes placements where the school is on-site, such as correctional facilities, detention centers, state hospitals, and some residential facilities. This update is not required when the child is moved back to the parent, as the child is no longer in out of home placement

c. enter information into the database timely to facilitate the planning required to meet the child's educational needs

d. provide hard copy of EEIF if the child has an IEP and the parent or Education Advocate are unable or unwilling to sign the required releases

e. continue to attempt to obtain releases, and if able to do so, add the child's information to the database at that time

2. Two separate releases of information shall be signed before a child's information may be added to this database:

a. The CFS 4003- Authorization to Disclose Information Including Children's Individually Identifiable Health Information, and the

b. KSDE Consent for Release of Information form (this form authorizes the school to release information to SRS and other agencies involved with the child's care).

3. SRS staff shall attempt to obtain the parent's signature on these two releases prior to the time the child is referred to the Provider. It is always preferred to have the parent sign these forms, but if SRS staff are unable to obtain the parent's signature, Case Management Provider staff or SRS are authorized to sign the

CFS 4003 and the KSDE Consent for Release of Information form for those children who do not have an IEP.

4. For children with an IEP, only the parent, a relative care giver, or Education Advocate is authorized to sign the KSDE Consent for Release of Information form. State statute and KSDE allow relatives to act as parents in educational decision making. Therefore, children receiving Special Education services who are placed with a relative will not need an Education Advocate appointed when parental rights have been terminated or the parents have been determined to be unavailable per Section 5257. The relative can sign the KSDE Consent for Release of Information form.

5. Students shall not be denied enrollment if the EEIF (hard copy or database entry) is not fully complete. Provider staff shall provide the school with the information which was absent or changed from the EEIF at enrollment in a timely manner. Refer to Appendix 6H for a copy of the EEIF.

D. Notifying Schools of Placement Changes

1. Case Management Provider staff shall notify the withdrawing school the child will be leaving the school. Notification to the withdrawing school shall be made as soon as Provider staff become aware of plan for child to be enrolled in a new school, usually due to change in out of home placement. The following information shall be provided to the withdrawing school to assist the school with transferring the educational record:

a. child's name

b. anticipated date of withdrawal

c. name and district of enrolling school where records are to be sent

d. anticipated date of enrolling at the new school.

2. Notification to the enrolling school shall be made as soon as the Provider staff become aware of the new school the child will be attending. The following information shall be provided to the enrolling school:

a. child's name

b. name of withdrawing school and/or school district where records can be obtained

c. education advocate (name, address, phone number), if applicable

d. assigned Provider case manager (name, address, phone number)

e. name of SRS social worker (SRS office, phone number) anticipated date of enrollment.

5255 IGRAD

iGRAD serves youth 15 and over in out of home placement to assist youth in meeting their educational goals. Case Management providers shall work with Educational liaisons from Keys for Networking, agency staff, resource families, youth and biological parents to help youth in care achieve educational success.

A. SRS shall provide the following information to iGRAD on youth 15 and over referred to Child Welfare Contract Management Provider for out of home placement:

1. KSDE release. If SRS obtains parent and/or Legal Guardian signature(s) at time of referral to Child Welfare Contract Management Provider for out of home placement, SRS provides KSDE release to Keys for Networking within seven (7) business days from date of referral to Child Welfare Contract Management Provider.
2. Monthly data report submitted electronically with information on each youth 15 and over in out of home placement. Data shall include all education and placement information as identified in the iGRAD portfolio for each youth;
3. Monthly data report submitted electronically with information of no-contact orders on parents of youth 15 and over in out of home placement.

B. Child Welfare Contract Management Provider shall provide the following information to iGRAD on youth 15 and over referred to Child Welfare Contract Management Provider for out of home placement:

1. KSDE release. If Child Welfare Contract Management Provider obtains parent and/or Legal Guardian signature(s), Child Welfare Contract Management Provider provides KSDE release to Keys for Networking prior to first case plan conference;

All KSDE releases shall be sent to Keys for Networking at Fax #785-235-6659

5257 Education Advocates

K.S.A. 38-2218 defines when a parent may be considered unavailable for the purpose of appointing someone to advocate for the child when decisions must be made regarding their plan for special education known as an individual education plan or IEP. When a child does not have an available parent, the Provider shall make a referral for an Education Advocate. Documentation shall be provided to demonstrate a parent is unavailable or unable to fulfill the role of education advocate for their child.

A. Eligibility

1. Education Advocates shall be appointed for a child receiving Special Education Services or in need of an evaluation to determine eligibility for Special Education Services and their parents are unavailable. This also includes gifted children.

2. Parents are considered to be unavailable when:
   a. The identity of a parent(s) is unknown
   b. The parental rights of both parents have been terminated
   c. The whereabouts of the parent(s) is unknown
   d. The parent(s) has abandoned the child
   e. A no-contact court order exists or the statutory criteria has been met

3. The Kansas State Department of Education (KSDE) currently contracts with Families Together, Inc. to provide training for and assistance in finding Education Advocates for eligible children.

4. Children in the Secretary's custody placed with relatives (persons related to them by blood, marriage or adoption) are not eligible for appointment of an Education Advocate. State statute and the KSDE allow relatives to act as parents in educational decision making. Therefore, these children will not need Education Advocates appointed. If there are questions about eligibility, these may be directed to Families Together, Inc.

B. Due Diligence Effort to Locate Parents

1. Parents shall be involved in the educational process unless they are unavailable. If both parents are determined to be unavailable to make educational decisions for their child, a referral may be made for an Education Advocate.

2. Before making a decision to refer a child for an Education Advocate, the Case Management Provider staff must exercise due diligence/reasonable efforts to find the parents. The Case Management Provider staff must also make reasonable efforts to assist a parent to participate in the educational planning for the child.

3. There is a difference between a parent who is unavailable and a parent who is unwilling to participate in the education decisions that effect their child(ren). A parent who is uncooperative in participating in the educational planning for the child, but who can be located by mail, personal visits (if the home is located within the state of Kansas), or phone is not considered unavailable. If they fail to respond to the school's attempts to involve them in the student's educational process, they may meet the statutory definition at K.S.A. 38-2218(a), and in this instance the Judge may determine the child is eligible for the appointment of an education advocate.

4. No referral for Education Advocate services may be made unless due diligence/reasonable efforts have been made and documented in the child's case file.

C. Referral

1. The Case Management Provider staff shall refer any eligible child by completing the CFS-3037, Education Advocate Referral Form. The CFS 3037 and any other correspondence regarding the referral shall be sent to Families Together at the address provided on the CFS 3037.

2. All persons desiring to become an Education Advocate shall attend training and be appointed by KSDE.

D. Case Management Provider Responsibilities

1. Provider staff shall update Families Together when:
   a. the child moves
   b. the child is adopted
   c. the child's name changes due to adoption
   d. a new Provider case manager is assigned to the case, including their contact information
   e. the child is no longer receiving Special Education Services

2. The Case Management Provider staff shall monitor and document in the case file the following:
   a. The assignment of an Education Advocate before the next Individual Education Plan (IEP) meeting following the referral
   b. Any delay in the assignment of an Education Advocate
   c. Continued efforts made on the part of Provider staff to secure the appointment of an Education Advocate
   d. Adequate receipt of Education Advocate service by the child and efforts to notify Families Together, Inc. of the need to correct inadequate service for the child in such a case.

5258 Child Care for Children in the Secretary's Custody

Children in the custody of the Secretary shall receive child care services that meet state regulations. The Kansas Department of Health and Environment (KDHE) provides the guidelines regulating child care in Kansas. Individuals providing care for children in the

custody of the Secretary shall meet the guidelines established by KDHE for licensed, registered, or relative care, and agree to accept SRS rates.

There may be situations when foster families wish to use babysitters while they occasionally attend social functions, meetings, etc. for a few hours. In these instances, SRS allows the foster family to utilize a sitter as a substitute care giver. KDHE regulations shall be followed regarding substitute care givers. Foster families and agencies should exercise good judgment in choosing substitute care givers for children.

5259 Completion and Maintenance of Lifebook

The Case Management Provider is responsible to provide a lifebook to each child in out of home placement and to ensure the lifebook is initiated and updated during the entire episode of out of home placement. Parents, placement resources, teachers, therapists, and others involved in the child's life may assist in keeping the information in the lifebook current.

A Lifebook is a record of the life of a child who is in out of home placement. It is essential that the child participate in the development and maintenance of their own lifebook. The book belongs to the child, and they determine with whom this book is shared.

SRS does not have a set lifebook format. Case Management Providers may devise their own format.

5260 Transition to Alternate Permanency Options

A. When reintegration is no longer a viable option, an alternate permanency goal shall be established, or the concurrent goal shall become the primary goal. The change in Case Plan goal shall be documented and recommended to the court prior to the permanency hearing. The Child Welfare Case Management Provider shall review and update the needs assessment and social history of the child at this time. Issues to consider when planning for an alternate permanency:

1. safety of the child(ren)
2. well-being of the child(ren)
3. maintaining meaningful relationships with; kin, culture and community i.e. keeping siblings together, keeping children within their extended family whenever appropriate, or kinship

(See Permanency Staffing Guide Appendix 7A)

B. Adoption (see PPM 5300)

Adoption is a legal and social contract establishing the relationship of parent and child between persons who are not so related.

The Kansas Department of Social and Rehabilitation Services (SRS) is legally responsible for the care of children in the custody and guardianship of the Secretary of SRS whose parental rights have been terminated. The focus of the program is on the child and selecting families who are most likely to meet the needs of the child.

C. Permanent Custodianship (see PPM 5400)

A recommendation for Permanent custodianship shall be limited to a child where a determination has been made that:

1. the child cannot be reintegrated with the parent(s); and
2. a compelling reason exists not to terminate parental rights; or
3. adoption is not a viable option for the child.

(See Appendix 6N for examples of commitment agreements.)

D. Other Planned Permanency Living Arrangement (OPPLA) (See PPM 3231)

1. A planned permanency living arrangement is a specific permanent placement for the child, not long term foster care. A planned permanent living arrangement is subject to ongoing review at later permanency hearings. More permanent options for the child shall continue to be explored throughout the time the child is placed out of the home. At no time shall the permanency option of OPPLA rule out other more permanent options.

2. The permanency goal of Other Planned Permanency Living Arrangement is appropriate only when documentation has been provided to the court of compelling reasons which make all other permanency options unacceptable. The compelling reasons may include:

   a. An older teen requests emancipation;

   b. A parent with a disability cannot care for a child, a significant bond exists between them and the placement resource is willing to sign a commitment agreement for the child to remain in their home, but is not willing to adopt or be a permanent custodian for the child;

   c. A tribe has identified a planned permanency living arrangement for a Native American child.

3. When the child is in an Other Planned Permanent Living Arrangement, the plan for the child to stay in the placement resource until achieving permanency shall be documented. The youth and the placement resource will sign an agreement indicating their understanding of this plan. (See Appendix 6M for examples of commitment agreements.)

5261 Child Welfare Case Management Provider Responsibilities for Alternate Permanency Options

The Child Welfare Case Management Provider shall document on the Case Plan and provide to SRS and the court a report which contains the following:

A. basis for the decision to pursue the recommended alternate permanency;

B. reasons why reintegration or adoption (if adoption is not recommended) are not the preferred permanency options for the child;

C. significant relationships to be maintained;

D. visitation plans with extended family; if any,

E. communication structures needed to maintain significant relationships; and

F. services needed for the child's continued stability.

If the alternative permanency is regarding a youth who will be leaving care at age 18, see Section 3214 regarding Transition Plans.

5262 Special Considerations for Undocumented Youth

To achieve permanency and facilitate self-sufficiency, children and youth may petition for lawful permanent resident status in the United States through Special Immigrant Juvenile Status (SIJS) If granted special immigrant juvenile status and their petition for adjustment of status is approved, then the child/youth becomes a legal resident alien of the United States with the ability to live and work within the U.S. without fear of deportation. After five years, legal resident aliens may apply for citizenship, if they choose. The link to the complete SIJS manual can be found at http://www.ilrc.org/sijs.php

Undocumented youth in care with a case plan goal other than reunification shall be given the option to apply for SIJS. Adoption does not automatically naturalize a youth who is undocumented and immigration status will still need to be addressed.

A child or youth loses the option of applying for SIJS once the juvenile courts no longer have jurisdiction or the youth turns 21 years of age, whichever comes first.

SIJS does not alter the youth's status as a child in need of care. All requirements of the state and federal law as well as agency policy continue to apply throughout the process of seeking SIJS until the Secretary is relieved of custody.

A. Eligibility Standards for SIJS

Unmarried children who are under age 21 and meet the following three standards may apply for SIJS:

1. A youth must be under the jurisdiction of a court in a child in need of care or juvenile offender proceeding.

2. The court must find that reintegration is not a viable option even when termination of parental rights is not in the child's best interest. The case plan goal shall be a permanency option other than reintegration.

3. The court must further find that it is not in the youth's best interest to return to his or her home country. This determination can be based on information gathered using a variety of methods: interviewing the youth to find out whether there is any known and appropriate place to go if returned to the home country or country of last residence; reports from third parties about the unsuitability of relatives' homes available to the child in the home country, etc. The court must be clear that the proceeding did not arise to secure SIJS but because the child was abused, neglected, or abandoned.

B. Risks and Benefits

If an application is submitted for SIJS, there is risk of denial of their petition and a decision to send them back to their country of origin. However, if a youth is already in deportation proceedings for his or her removal, the youth has nothing to lose by filing an application for SIJS.

There is also risk for youth who do not apply. Youth can apply for SIJS up until they turn 21 years of age. If the juvenile court and foster care case is closed, youth have no option to apply for SIJS. If a youth is emancipated without legal documentation, he or she may not have another chance to apply for legal status in the United States.

How to Apply for SIJS:

1. Evaluate the minor's case to make sure that it fits within each of the three eligibility criteria.

2. Discuss the option fully with the youth, explaining in plain language what SIJS is, what it could do for the youth and the risk involved. It is important to emphasize the risk of deportation and the impact SIJS has on the youth's rights toward birth parents and siblings.

3. If the youth decides to proceed with application for SIJS an experienced immigration attorney is advised. Cases with a mitigating factor (i.e. arrests, convictions, drug abuse, testing positive for HIV), are not impossible but they are more difficult and require a more intricate knowledge of the process. Even without mitigating factors, immigration law is a challenging specialized practice and success is unlikely without expert assistance.

4. The court must hear evidence on the three criteria.

5. The court's findings must be recorded in an "Order Regarding Minor's Eligibility for Special Immigrant Juvenile Status" or similar format that includes the required

factual findings. Although not conclusive, this order must be included in the child's application for SIJS. An example of the proposed order on the three criteria using specific language can be found at http://www.ilrc.org/sijs.php of the SIJS manual in appendix E.

6. Both an SIJS and a change in legal status form must be completed and filed with to the closest Citizen and Immigration Services or CIS (formerly INS) office.

7. The applicant minor should request employment authorization while the case is pending and the case manager should schedule an appointment for the youth to be fingerprinted for an FBI criminal activity check.

8. Next, the CIS will schedule an interview, which a number of people (social worker, lawyer, etc) may also attend. The CIS might make a decision on the application at the interview, or may ask for further information or time.

9. This process can take as long as 3 years and shall be initiated early enough that the juvenile court can maintain Jurisdiction until it is complete.

Important points to remember in the application process are included in appendix 5-J.

5270 Aftercare Responsibilities of the Case Management Provider

A. The Case Management Provider shall provide services and supports for 12 months following the achievement of reintegration, permanent custodianship or finalization of adoption. These services are provided to assure stability of the placement for the child and to assist all family members in obtaining identified services through the network of community providers to improve family functioning.

1. The Case Management Provider and family shall develop a mutually agreed upon plan that details services and expectations during this 12 month period. These plans shall be reviewed and revised, as needed, during this after care period. Documentation of the planned and provided services shall be included in the child's file.

2. The Child Welfare Case Management Provider shall assist the family in accessing medical services for which they are eligible. This includes:

   a. The child being added to the parents'/caregivers' insurance, or

   b. Submitting an application to the Clearinghouse for Healthwave with "returning from foster care" written at the top of the form, or

   c. Submitting an application to SRS for an income eligible or SSI medical care, or

   d. Requesting an medical card from SRS through an adoption assistance agreement or permanent custodianship agreement.

See Section 5900 for additional information.

B. For the portion of the aftercare period in which the child remains in SRS legal custody, the Child Welfare Case Management provider remains responsible for case plan completion and submission to SRS, the court, and other required parties. If the child is not released from the custody of the Secretary before the end of the aftercare period, the Child Welfare Case Management Provider shall provide information to the Regional SRS office at least 30 days prior to the end of aftercare so that continued services can be provided. Appendix 6O may be used for this purpose. If the case plan is due within 30 days of the end of aftercare, the Provider shall update the case plan.

C. If the child re-enters out of home placement during this 12 month aftercare period, the Case Management Provider shall be responsible for serving the child and family. This includes payment of out of home placement expenses that are the responsibility of the provider, without a new referral being made to that Provider. The original aftercare period is terminated. When the out of home episode has ended for reasons of reintegration, permanent custodianship or finalization of adoption, a new 12 month aftercare period begins.

5271 Exceptions to Aftercare Responsibility of Case Management Providers

The aftercare period does not apply to:

A. youth who are released from custody at age 18 or older. Regional SRS staff shall provide Independent Living services to this age group of young adults, at their request.

B. Youth who are transferred to Juvenile Justice Authority or to the Tribal Court.

5300 Adoption Services

Adoption services involve matching children in need of adoptive homes with parents who wish to adopt them, preparing the child(ren) and prospective adoptive families for the process of adoption, and helping them legalize the relationship through finalization. Adoption services shall begin at the point the case plan goal is adoption.

5301 Roles & Responsibilities

When parental rights are terminated or relinquished, the following responsibilities apply:

A. SRS Responsibilities

1. Forward immediately to the regional attorney the PRT Journal Entry for review of legal sufficiency.
2. Assess whether parental relinquishments should be accepted
3. Send the Case Management Provider the approved Journal Entries terminating parental rights or accepted relinquishments on both parents within three (3) working days of receipt of documents.
4. Follow up with the CINC court to assure the Decree of Adoption was filed.

B. Case Management Provider Responsibilities

1. When there is an identified resource for a child
   a. Explain the difference between temporary foster care and adoption, including parental responsibility
   b. Complete a thorough adoptive home assessment
   c. Complete National Child Abuse and Criminal Background checks (see Section 5233)
   d. Place siblings together, or determine if a sibling split should be considered
   e. Prepare the child and the family for a life-long commitment to each other
   f. Send the request for adoption assistance to the SRS Adoption Specialist (if appropriate)
   g. Coordinate signing the Adoptive Placement Agreement and the Adoption Assistance Agreement (if appropriate) with the family and SRS Adoption Specialist
   h. Supervise the adoptive placement and provide services necessary to maintain the child in the adoptive home
   i. Prepare and gather paperwork for the finalization of the adoption
   j. Provide one year of aftercare.

2. When there is not an identified resource for a child:
   a. Assure no appropriate relative has decided they are willing to be a resource and review prior decisions regarding relative placements
   b. Review the child's file to determine if all known prospective resources have been explored prior to sending the Adoption Exchange Information form
   c. Send the Adoption Exchange Provider the completed CFS 3025, Adoption Exchange Information form within five (5) working days of the receipt of journal entries of termination of parental rights.
   d. Send the Adoption Exchange Provider the CFS 3027, Adoption Exchange Child Update Status Form when there is a change in the child’s circumstances.

e. Update the CFS 3025, Adoption Exchange Information Form, annually and send it to the Adoption Exchange Provider.

3. When there is not an identified child for an adoptive resource:
   a. Send the Adoption Exchange Provider the completed CFS 3026, Adoption Exchange Family Website Registration form
   b. Send the Adoption Exchange Provider the CFS 3028, Adoption Exchange Family Update Status Form, when there is a change in the adoptive family's circumstances.
   c. Review of the Permanency Flow Chart (Appendix 3P)

5311 Preparation of the Child

Preparation of the child for placement with an adoptive family is the responsibility of the Case Management Provider. It helps the child understand past experiences and engage in future planning. All children moving into an adoptive placement require preparation for adoption, even those who are currently residing with relatives or foster parents who want to adopt them.

A. Participants in the preparation process include:

1. the Case Management Provider;
2. the current placement;
3. other individuals who know the child well, e.g. SRS social worker, teachers, therapist.

B. Preparation Techniques

The Case Management Provider is responsible for designing a plan to prepare the child for adoption.
Case Management Provider shall take into consideration the following:

1. the child's past experience with moves and changes;
2. the relationship of the child to the prospective adoptive parent(s);
3. age of child;
4. cognitive ability of child to understand changes;
5. the degree to which the child has accepted the fact they will not be returning to their parent(s), recognizing they may need time and support to cope with the facts and consequences of their parents acts and decisions;
6. the child's expressed interest and willingness to accept the adoption.
7. the child's preferences regarding adoptive placement.

5312 Adoption Exchange Provider

When there is not an identified adoptive resource for the child, the child shall be registered on the Kansas Adoption Exchange. The Adoption Exchange Provider receives the Adoption Exchange Information form and registers the profile of the child on the exchange. The profile shall describe the child in such a way to promote a successful adoption of the child.

The Adoption Exchange Provider shall also provide general and targeted recruitment services of adoptive families.

The Adoption Exchange Provider is responsible to:

1. maintain a statewide Adoption Resource Exchange;
2. provide a Statewide system of intake for families interested in adopting;
3. Implement strategies and outreach statewide to raise public awareness of the need for families willing to adopt children in the custody of the Secretary of SRS who are without an adoptive resource.

The Child Welfare Case Management Provider and the Adoption Exchange Provider shall share information with each other to ensure that the cases they both serve move toward adoption.

5313 Specialized Recruitment Initiatives

A. When there is not an identified adoptive resource for the child, the Child Welfare Case Management Provider shall develop an individualized adoption recruitment plan with the child. (See Appendix 6P for an example of an IRP.) Child Specific Recruitment:

1. Is an individualized, detailed plan that is strengths based and community focused. The goal is to widen the circle of adults who know about the child and potentially may be interested in adoption. Components of child specific recruitment may include a professional photograph, posting on the state and national adoption websites, T.V., radio and print media profiles, church bulletins, and MATCH nights.
2. Identifies a child’s strengths and interests, matching those with adults who share some similarities. The strategy is facilitated by the child’s case manager/adoption specialist.
3. Begins by comprehensively assessing the youth's history, including case files, and previous relationships, and bringing this information into the current context. Every effort shall be made to involve the child or youth, as developmentally appropriate.

B. All recruitment initiatives shall respect the dignity and confidentiality of the child.

The plan shall reflect the:

1. characteristics of the child;
2. individual strengths and needs of the child;
3. type of family needed;
4. identification of specific recruitment methods based upon the comfort level of the child.

5320 Legal Risk Adoption Situations

A. The Child Welfare Contract Management Provider may consider placement with a potential adoptive family prior to the time all legal issues pertaining to the termination of parental rights have been addressed.

B. A legal risk placement may be considered when legal issues exist which delay SRS from being able to issue the Consent to Adopt, such as:

1. technical problems with legal document (i.e. Journal Entry has incorrect or missing information);
2. procedural problems with termination and dispositional hearing; or
3. an appeal is filed but the court's decision is expected to be upheld.

C. For legal risk adoption the adoptive parents shall meet KDH&E licensing requirements. The Case Management Provider shall document the legal risk placement on the CFS-3051, Section VI.

5330 Assessing the Adoptive Family Assessing the Adoptive Family

A comprehensive assessment of a family interested in adopting a child in the custody of the Secretary of SRS shall be completed by an agency or person authorized by KSA 59-2132 to complete adoptive home studies and shall include the items listed.

5331 Considering Relatives as an Adoption Resource

A. Relative placements shall be given preference to provide the following benefits:

1. adoption by a person the child knows and trusts;

2. reduction of trauma the child experienced when the child is placed out of the home;

3. reinforcement of a child's sense of identity and self esteem by maintaining the family history and culture;

4. promoting and encouraging the family's reliance upon their own family members for support and resources;

5. reducing the number of moves experienced by the child;

6. promoting timely permanency planning.

B. Determination of a relative as an adoptive placement shall consider:

1. inter-generational conduct, co-dependency, anti-social behaviors, physical and/or sexual abuse which would make placement of any child ill advised;

2. willingness to assure the child will be protected from those who perpetrated the abuse or neglect;

3. understanding and objectivity regarding the reasons the child was removed from the parental home;

4. results of the fingerprint based criminal history and child abuse/neglect registry checks;

5. ability to help the child understand the strengths and needs of their birth parents;

6. services the family might need to assure stability of the placement;

7. willingness to be a placement resource for siblings.

C. The relatives shall be offered a review of the child's file prior to making the final decision to proceed with the adoption. This shall be completed within 15 working days of the Best Interest Staffing decision and approval. The relatives may indicate in writing they do not want to review the file. See Section 5350B also.

5332 Foster Families as an Adoptive Placement

When adoptive placement with a relative is not possible, adoption by foster parents who already know and are connected to children may be in their best interest.

A. When considering a foster family as the adoptive family, the following shall be considered:

1. factors listed in 5341;

2. the family's understanding of the difference between fostering and adoption;

3. the family's understanding of the impact this adoption has on this child and their family;

4. the family's willingness to delay fostering additional children until finalization of the adoption or to discontinue fostering altogether if necessary for the child's adjustment.

B. The foster family shall be offered a review of the child's file prior to making the final decision to proceed with the adoption. This shall be completed within 15 working days of the Best Interest Staffing decision and approval. The foster family may indicate in writing they do not want to review the file. See Section 5350B also.

5333 Adoption By a Family Unknown to the Child

If a child does not have an identified adoptive resource, a family listed on the Kansas Adoption Exchange shall be considered as a possible match for the child. When there is not a good match listed on the Kansas Adoption Exchange or AdoptUSKids Exchange, the search for an adoptive resource is an ever widening circle of inquiry. There may be families who live in another state or country who would be the best resource for meeting those needs.

Case file mining and searches for extended relatives may also be necessary to assist the child in achieving permanency through adoption. Adoption by a family that is unknown to the child requires more planning and preparation. See Section 5331 and 5332 for additional information.

Home studies shall be updated to include information on a specific child prior to requesting consent to adopt. The adoptive family shall be offered to review the child's file prior to making the final decision to proceed with the adoption. The offer of this review shall be completed within 15 working days of the Best Interest Staffing decision and approval See Section 5350B also.

5340 Best Interest Staffing

Prior to a Best Interest Staffing (BIS), the Child Welfare Case Management Provider shall submit the prospective adoptive home studies, including fingerprint checks, child abuse registry checks, health reports, and budget, and the child's social history to a staffing team for review. The team shall review the packet and let the Provider know if there are concerns or questions about a family's suitability for the child that should be addressed prior to the meeting.

A. All decisions related to the selection of an adoptive family shall be made by a staffing team comprised of at least three individuals, including:

1. the Child Welfare Case Management Provider as lead,
2. A professional who is knowledgeable about the adoption process, and who is not involved with the child(ren) or families being considered (this may be someone

from SRS, the Adoption or Child Welfare Case Management Provider, a private adoption agency, etc.).

3. one or more individuals who know the child well

Other team members who should be invited to participate include the GAL, CASA, SRS staff, therapist, teacher, other service providers, placement resource (if there is not a conflict of interest) and appropriate supervisors.

B. A best interest staffing (BIS) shall be held even when the relative or resource family is the only family being considered for the child. The Child Welfare Case Management Provider shall document how interested relatives/kin who have not previously been ruled out were given preference as the adoptive resource in the staffing process. If siblings are not being adopted together, the Child Welfare Case Management Provider shall document the reasons and complete a sibling separation request. (See Appendix 6I.) The sibling separation request shall be approved by the Child Welfare Case Management Provider Program Director or designee.

C. The Child Welfare Case Management Provider shall identify approved adoptive families to be considered in an adoption best interest staffing for a specific child. When selecting families to be considered in an adoption staffing, the Provider shall exclude families who do not have the capability of meeting the child's emotional and social needs, but they shall not exclude families based solely on their race or national origin. (See the Multi- Ethic Placement Act in Section 5231).

D. All adoptive parents considered shall have:

1. a certificate verifying completion of the PS-Model Approach to Partnerships in Parenting (PS-MAPP) family preparation program in its entirety prior to child's placement or Deciding Together (Relatives are not required to complete the PS-MAPP or other family preparation to be considered as an approved adoptive family);

2. a written adoptive family assessment completed by a licensed child placing agency which is updated at least annually;

3. current medical reports on all family members; and

4. clearance through KBI and a national criminal history finger print check.

   a. if a national criminal history check has been completed on a foster parent that has been continuously licensed, a second check does not need to be done.

   b. if the national criminal fingerprint check has been sent to the FBI two times and the fingerprints are not legible, a name check is acceptable

5. all family members 18 years and older cleared through the Kansas Child Abuse and Neglect Central Registry and, if residing out of state for the last five years, child abuse registry checks in the state(s) where they resided.

a. If a national child abuse registry check has been completed on a foster family that has been continuously licensed, a second check does not need to be done.

6. If a family completed a different family preparation program in another state, the Child Welfare Case Management Provider shall request a waiver of PS-MAPP participation for the family from Children and Family Services. Other preparation programs shall meet the training equivalency criteria specified by SRS.

E. The Case Management Provider shall convene the staffing and provide notification to all participants. Participants shall:

1. review the child's and prospective families information prior to the staffing date; and

2. be prepared to discuss the families' strengths and needs related to the strengths and needs of the child for whom an adoptive family is being sought.

5341 Selecting an Adoptive Family

The Best Interest Staffing Team shall:

A. Consider the best interests of the child(ren);

B. Consider the family's ability to:

1. meet the needs and temperament of the child currently and over time;

2. understand the current and future impact adopting this child will have on their family;

3. advocate for the needs of this child;

4. understand and support the child through loss and grieving issues;

5. accept adoption of this child is a life-long commitment with many unknown challenges;

6. provide the child with a safe and secure environment;

7. provide unconditional love and acceptance of the child;

8. understand and accept the child's emotional, physical, social, educational, and developmental needs;

9. understand the effects deprivation, abuse and neglect have on a child and the potential impact on the child's behavior;

10. allow the child(ren) to develop at his/her own rate to reach his/her own potential;

11. accept and support the child's background, culture, ethnicity, heritage, race, medical and mental health needs, and genetic and social history;

12. help a child to learn and accept his/her background;

13. understand the importance of planning for child/children's future contact with siblings and/or other family members as deemed appropriate;
14. manage their financial resources.

C. Documentation of the Staffing Team's Decision

Documentation of the decision shall be on a form designed by the provider for this purpose which shall include:

1. names of the families considered;
2. a summary of why the family of choice was selected;
3. a summary of why other families considered for the child(ren) were not selected;
4. a plan for future contact with siblings and/or other appropriate family members;
5. date of the staffing and;
6. signatures of all participants.

D. Regional SRS Review of Best Interest Staffing

Within 3 business days of the Best Interest Staffing and prior to notifying a family that they were selected to be an adoptive resource for a child, the Child Welfare Case Management Provider shall inform the SRS Regional Director, or designee, of the outcome of the staffing. Documentation of the staffing team's decision with results of the required background checks shall be sent to the SRS Regional Director, or designee. The SRS Regional Director, or designee, shall review the documentation provided within 5 business days and address any questions to the contract administrator.

5342 Appeal of Staffing Team's Decision

When the Case Management Provider receives a concern about the outcomes of a Best Interest Staffing, an internal review of the process shall be completed without delay to assure that the decision making process was fair and the decision was consistent with best interest of the child. If an administrative appeal is filed regarding an adoption staffing decision, a motion to dismiss shall be filed based on the ongoing jurisdiction of the District Court under Chapter 38. When the District Court places the child(ren) in the custody of someone other than the Secretary, the guardian ad litem, prosecutor and all members of the case planning team shall be informed that the child is unlikely to be eligible for adoption assistance. If the Court recommends a specific placement, the recommendation shall be given serious consideration and, if another placement is chosen, the basis for not following the Court's recommendation shall be documented in the case plan and provided to the Court.

5350 Preparation for Adoption by a Family Unknown to the Child

A. When a family has been selected for a child and the child has been prepared for placement, the case manager and family shall develop and implement an individualized plan for how and when the child will move into the family's home. The plan carefully considers the needs of the child and family in order to:

1. Provide continuity of care giving
2. Ease the child's adjustment
3. Enhance the child's understanding of the event
4. Allow an opportunity for important people in the child's life to help the child transition
5. Facilitate new attachments
6. Plan for post-adoption contacts
7. Help the family and child cope with changes and stress
8. Reduce trauma experienced by the child as a result of the move.

When the adoptive family is sponsored by a Child Placing Agency (CPA) that is not the Reintegration/Foster Care/Adoption Provider, services to the family shall be coordinated. The Child Welfare Case Management Provider is responsible for assuring children and families receive needed adoption services.

B. Information about the Child to be Shared with the Family

If the child(ren) is moving to a different family, the family will need to know as much information about the child as possible. The prospective adoptive family shall be given a blank copy of CFS 5342 and it shall be discussed with the case manager and placement resource.

C. Pre-placement Visits

The selected adoptive family shall have read the file and made a commitment to adopting this child prior to any visits occurring. Video tapes and other tools can be used to help the family become more familiar with the child so concerns and questions are addressed. All children shall have the opportunity to visit with their selected adoptive parents prior to the actual placement.

The Child Welfare Case Management Provider shall plan the details of the pre-placement visits.

The purpose of pre-placement visits is to:

1. reduce the trauma and anxiety a child experiences with a move to a new family;
2. help the child begin to make new attachments;
3. help the child process changes taking place in his/her life.

D. The Child Welfare Case Management Provider shall:

1. process the visits with the child, answer the child's questions about the family and gauge the child's emotional readiness to move permanently into the adoptive placement;
2. give the family written information regarding the child's background, life history, genetic, psychological, and medical history, etc. Any information prepared by SRS or provider staff shall be shared with the family. See Section 0315 for further information
3. inform the family of the confidential nature of any information released to them;
4. plan all pre-placement visits with prospective adoptive family, current placement resource and prospective adoptive family's social worker;
5. accompany the family to the child's place of residence for the first pre-placement visit;
6. arrange for the family to meet with the child's doctor, therapist, teacher, foster family, etc. as appropriate;
7. inform the family of the legal status of the child (The family may request that SRS forward all documents pertaining to the termination process to an attorney of their choice. The cost of this consultation is met by the family. This may be reimbursed though non-recurring adoption expenses. See Section 6200 for more information);
8. monitor the pre-placement visits, answer the child's and family's questions as the placement process progresses;
9. provide the SRS social worker with information needed to determine the child's eligibility for adoption assistance (See PPM section 6200).

5360 Procedures Related to Signing the Adoption Agreement

When the Child Welfare Case Management Provider, the adoptive family and the child, if appropriate, agree they are ready to proceed with the adoption, the Child Welfare Case Management Provider shall schedule a meeting to sign the adoptive placement agreement.

A. The Agreement to Place a Child in an Adoptive Home shall be signed in the presence of the Child Welfare Case Manager Provider.
SRS staff shall:

1. review all the information provided by the Child Welfare Case Management Provider with the family;
2. assure the family has been provided with all available information concerning the child;
3. explain to the family that adoption is a life time commitment to the child;
4. review the entire agreement with the family prior to signing;
5. sign the placement agreement;
6. inform the family of their right to request adoption assistance;
7. determine the child's eligibility for adoption assistance (see PPM section 6200);
8. negotiate the adoption assistance agreement with the family;
9. share information about ICAMA (see Section 9600).

B. The child's case shall remain open until the final decree of adoption is received that states the adoption has been finalized and the child has been released from SRS custody on the CINC case (see PPM section 5370).

5361 Roles and Responsibilities for Post-Placement Services

A. Child Welfare Case Management Provider Responsibilities

The Child Welfare Case Management Provider assumes the leadership role in planning and service delivery to child and/or adoptive family and is the primary provider of services for the child.

This includes responsibility to:

1. schedule a new case planning conference with the adoptive family , coordinating with the sponsoring CPA if involved; (see PPM section 3200 for information on holding and scheduling case planning conferences)
2. develop an Achievement Plan with the adoptive family;
3. provide a full array of services to meet the needs of the child placed in an adoptive family to assure the child's safety and well being and promote permanency through adoption;
4. help the family resolve problems that arise as a result of the adoption, working in partnership with the sponsoring CPA, if involved. Services may include:
    a. in home family services
    b. referral to parent support groups
    c. individual or family therapy

d. mediation

e. parenting classes

f. respite

5. respond to a crisis in the family within one hour and document the incident/response in the child's case record.

6. convene a staffing to assess the situation and arrive at possible solutions if problems arise which may jeopardize the placement.

7. conduct Case Planning Conferences every 170 days until the adoption is finalized;

8. meet face to face with the child and family at least monthly;

9. meet with the child alone, if the child has the verbal and cognitive ability to communicate with the case manager;

10. meet with the entire family so other children in the family are able to process to include their feelings, ideas and observations regarding the placement of the new child into the family unit;

11. assist the child in understanding the adoption process;

12. help the child understand the dynamics of the relationships in the new family;

13. assist the family in accessing services of other community agencies as needed;

14. maintain the confidentiality of the family and child as required by statutes and SRS policy. (see PPM section 0300);

15. document all contacts with family and child

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B. SRS Responsibilities:

1. Review and approve case plans

5362 Adoptive Placement Disruptions

The disruption of an adoptive placement shall be considered only after all efforts to preserve the placement have failed. When it appears the adoptive placement cannot be saved, a best interest staffing shall be held.

A. If it is in the best interest of the child to disrupt the placement the Child Welfare Case Management Provider shall:

1. support the child and family through the disruption;

2. locate a suitable placement for the child;

3. conduct a case planning conference to assess the current needs of the child and review the permanency plan;

4. prepare a disruption report to share with the court, therapist and SRS detailing the factors contributing to the disruption, services provided to prevent disruption, current placement and an updated plan;

5. notify the SRS social worker of the move in writing, forty-eight (48) hours advance notice if it is a planned move, or within twelve (12) hours verbally if it is an emergency move, followed by written notification within forty-eight (48) hours (Follow Notification of Moves requirements).

B. The decision to disrupt an adoption is based on a staffing team consensus. The adoptive family shall be a part of this team and the disruption shall be planned in such a manner to minimize the trauma to the child. It should be a planned move and the child shall be informed and mentally and emotionally prepared for the move. It is the responsibility of the case manager to help the adoptive family tell the child about the move and provide the child with honest answers in a non-blaming manner.

5363 Services to Finalize the Adoption

The Child Welfare Case Management Provider, the sponsoring CPA, if involved, and family shall decide together when it is time to finalize the adoption.

A. The Child Welfare Case Management Provider shall submit a current written comprehensive report to SRS.

This report shall include:

1. the child and family's adjustment to each other;
2. copies of medical or psychological reports not previously made available;
3. the child's progress in the adoptive placement;
4. the child's preparation for finalization and understanding of the process if the child has the cogitative ability to comprehend it;
5. the identification of services needed after finalization.

B. The Child Welfare Case Management Provider is responsible for providing the SRS social worker with a current adoptive family assessment and report on the child and family's adjustment since placement. The sponsoring agency, if involved, should be consulted regarding the contents of the report.

This report and assessment shall include:

1. an updated social assessment of the family including their ability to parent this specific child;
2. the family's strength and needs;
3. a summary of the family's financial situation;

4. medical reports on parents and the adoptive child;
5. significant changes in the family's life;
6. KBI and Kansas Child Abuse and Neglect Central Registry clearances done within the past year;
7. document the family has completed MAPP or PS-MAPP, or an approved equivalent program.

This report shall be sent to SRS with a request for the Consent to Adopt.

C. SRS is responsible to:

1. review the material submitted by the Child Welfare Case Management Provider to assure it justifies issuing the Consent to Adopt and meets court requirements including completed YA 2300, Medical and Genetic Information for Child on both parents, and all information needed to file the petition to adopt as per KSA 59-2278;
2. request in writing any additional information needed within five (5) working days from the receipt of the report;
3. confirm with the court of jurisdiction there are no appeals or other legal issues which would prevent the issuing of consent.

D. The SRS Regional Director or designee shall sign the Consent to Adopt within 30 days of receipt of the request, or receipt of the requested additional information.

E. The Child Welfare Case Management Provider shall:

1. deliver the Consent to Adopt to the family;
2. assure the family has the information needed to file the petition to adopt as per Kansas Rules and Regulations 59-2130, (See Appendix 7E for complete list);
3. coordinate with SRS if information needed for filing the petition is not available to the Case Management Provider

F. The file stamped date on the Journal Entry (Decree of Adoption) is the official date of finalization. When the adoption decree has been filed with the CINC Court the Secretary’s custody ends and the court's jurisdiction over the child ends.

When the Child Welfare Case Management Provider receives the final decree of adoption from the adoption court, a certified copy of that decree shall be sent to the prosecutor for filing and to SRS.

5370 Post Finalization Services to the Adoptive Family

It is the responsibility of the Child Welfare Case Manager Provider to provide or purchase a full array of post placement services to assure the success of the placement for twelve (12) months after the adoption is legally finalized. Such services are to be available to the family on an on-going basis and shall not be limited to crisis situations.

5371 Dissolving an Adoption

When a dissolution appears likely and the adoption has been finalized for 12 months or less, the Child Welfare Case Management provider shall take the lead in coordinating staffing and planning for the child. All efforts shall be made to maintain the adoption, however, if it is determined that it is in the best interest of the child to dissolve the adoption, SRS shall be involved in the decisions made.

A. Before deciding to dissolve an adoption the team shall consider:

1. what services might salvage the adoption;
2. what services the child needs after removal;
3. how best to prepare the child for the adoption dissolution;
4. what support services the adoptive family may need;
5. if relinquishment of the child directly to SRS would be appropriate.

B. If there are abuse or neglect issues, a child protective service report shall be made.

C. To dissolve a finalized adoption, SRS may accept a voluntary relinquishment from the adoptive parents after a CINC petition has been filed and the Secretary has been given custody. If the staffing team determines that it is in the best interest of the child, SRS shall request that the county or district attorney file a petition with the court to terminate parental rights. Reasonable efforts to maintain the child at home must be documented.

D. If it is within the aftercare period, the Child Welfare Case Management remains responsible for the case and no new referrals are required. The team shall work closely together to plan for terminating the placement in the least damaging way for the child and family.

The Child Welfare Case Management Provider shall:

1. plan for another placement for the child
2. hold a new case plan and provide services to the child
3. document all efforts to maintain the placement;
4. provide a full account of the services provided to the family and child;
5. provide documentation as to why parental rights should be terminated;

6. seek a new adoptive resource and notify the Adoption Exchange Provider of the need to place the child on the adoption exchange to recruit an adoptive resource, if there is no identified resource

E. Relinquishment of parental rights to SRS by an adoptive family shall require approval by the Regional Director or designee.

F. If the adoption has been finalized for more than twelve (12) months all services and planning is the responsibility of SRS. Referral for services is processed by the Intake and Assessment Unit of SRS in accordance to SRS policies in PPM section 1000.

5400 Guardianship/Custodianship

The Child Welfare Case Management Provider shall assess if permanent custodianship or guardianship best meets the child's needs. The Case Management Provider shall also prepare the family for the responsibility associated with custodianship or guardianship including an assessment of the family's capabilities of parenting a specific child. Factors to be considered in the case planning conference when determining if an individual family might be suitable for the custodianship or guardianship of a child in SRS custody are similar to those considered when considering a relative or resource family for adoption. (See Appendix 7A).

A. The Child Welfare Case Management Provider shall:

1. complete a written family assessment,
2. complete Kansas Child Abuse and Central Registry and KBI clearances,
3. provide follow up services to the family as per the contract expectations,
4. provide any reports the court requests

B. A full array of services shall be provided to the family on an as needed basis to assure the success of the placement. Custodians or guardians, as well as other families or individuals who enter into a plan to provide care for the child until the child is 18 or graduates from high school, may need help in understanding the effects of separation, abuse and neglect. Families may need added services such as transportation, respite care, mediation, etc. in order to assure the success of the placement.

Children age 15 and older who have been receiving Children's Residential Services through the MR/DD waiver while in foster care are eligible to continue to receive these services when a guardianship is granted by the court.

C. The Child Welfare Case Management Provider may request the family participate in PS-MAPP , if it is deemed that such participation would be valuable to the family. Custodians/Guardians need to be aware that such a plan means full commitment to the

child and should not be agreed to without full consideration of the ramifications of such a placement to the entire family consultation.

D. The Child Welfare Case Management provider shall supply the court with all the necessary information and court reports recommending and supporting the applicants request for guardianship or custodianship.

5411 Permanent Custodianship under the Children in Need of Care

Permanent Custodianship provides the custodian and the child with the assurance the placement will not be disrupted, enables the custodian to exercise all the rights and responsibilities of a parent. All custodians are expected to provide for the child's education, support, medical care and maintenance. Changes in both state and federal statues recognize guardianship as a means of achieving permanency for a child when re-integration with the birth family or adoption is not possible.

The Kansas Code for the Care of Children (K.S.A. 38, Article 22) authorizes the juvenile court to appoint a permanent custodian. This is a judicially created relationship between the child and the caretaker, and is self-sustaining without on-going oversight or intervention. The permanent guardian stands in loco parentis and exercises all the rights and responsibilities of a parent.

If after finding the parent unfit, the court subsequently determines a compelling reason exists why it is not in the best interest of the child to terminate parental rights, the court may award permanent custodianship to an individual. For certain children with parental rights terminated the Case Management Provider may request that custodianship be awarded to a specific individual when adoption does not appear to be an option for the child.

A. Advantages of Permanent Custodianship:

1. When adoption is not the plan, custodianship provides the caretaker and the child greater assurance that the placement will not be disrupted.
2. The custodian stands in loco parentis and exercises all the rights and responsibilities of a parent without state oversight or intervention.
3. It is not necessary for parental rights to be terminated in order to achieve permanent custodianship.
4. If parental rights are not terminated, parents may remain financially responsible for the support of the child.

The child may be eligible for some post secondary education and training benefits funded through the Education and Training Voucher Program and the Permanent Custodianship

Subsidy.

B. Disadvantages of Permanent Custodianship:

1. Foster care payments and other services are lost.
2. It denies the child the rights of an adopted child.
3. If placement dissolves, a child in need of care hearing is required.

5412 Probate Guardianship

K.S.A. 59-3050 et seq. authorizes the probate court to appoint a guardian for a child. Any person may file to become a guardian of a minor child in probate court. The guardian may use the child's own resources to meet the needs of the child, including, but not limited to insurance benefits, social security, annuities, and inheritances.

Under probate guardianship the guardian is required to file an annual report to the court concerning the condition and estate of the child. The court may request other information or reports. The guardianship may be terminated upon order of the court when there is no further need for the guardianship. The court may not appoint a guardian or continue the guardianship over the objection of either parent.

A. Advantages of Probate Guardianship

1. Birth parents are not found unfit and continue to have rights and responsibilities related to their child.
2. Family relationships are not legally affected.
3. It is a good alternative for birth parents that cannot care for their child for a period of time, but may be able to do so at a later date.
4. It provides for the return of child to the birth parents through probate proceedings.
5. There is continued court oversight and guardian responsibility for annual reports to the court regarding the child and the child's estate

B. Disadvantages of Probate Guardianship

1. The child is left vulnerable to custody challenges and changes.
2. Foster care payment, the possibility of Permanent Custodianship Subsidy, and supportive services are lost.
3. It may be viewed as a lack of commitment to permanence.
4. There is continued court and/or state oversight.

5800 FACTS Child Welfare Case Management Provider Procedures

Complete screen navigation requirements for adding Child Welfare Case Management Provider information are located in the Plan Management section of the FACTS User Manual Volume II, Section 400. Codes for applicable screens in FACTS are located in the USER Manual Volume I, Section 800. The PROM screen is the only screen providers add or update. If the case plan involves a referral to a Child Welfare Case Management Provider, then information regarding that referral service action on INIT, PLAN, and RESP (as applicable to plan type) must be complete and added on the same day of referral to the provider. Otherwise, information shall be entered on INIT, PLAN and RESP (as applicable to plan type) within 5 business days from the date of occurrence, action, or agency decision regarding a child or family.

5810 Establishing Family Preservation Services for In Home as a Case Action Type

A case is coded in FACTS as a family preservation service case if SRS makes a referral to the family preservation case management. A case action service type in FACTS reflects the service action decision located in Section IV of the CFS 2030F, or other documentation of service action decisions subsequent to the initial plan for the family.

5811 Entering A Family Preservation In Home Referral into FACTS

A. All Family Preservation Service Cases

1. To reflect a family preservation referral in FACTS, the following combination of codes are entered. Enter on INIT if this a new plan, on PLAN, if the plan already exists. Enter a FP plan type for each member of household with goal type of maintaining the child in the family (MFM). On RESP, enter a service action of PR03N and source of the service as the Family Preservation Contractor (FPC) for each case member. Enter the Service Status as initiated (IN) and indicate the effective referral date from the CFS 2020.
2. When the Family Preservation Case Management has concluded their intensive/active period and are not in custody, end the service action with FPS provider conclusion date per CFS 2021 form and with "CM" status closure code. Close all other responsibilities on plan. Plan should remain open until the conclusion of the 12 month case responsibility per CFS 2021 form. If the intensive/active period is reinstated within the 12 months of the FPS referral start date per CFS 2021 form, reopen the original PR03N service action code. The start date will not change. If in custody, leave open responsibilities and plan until

Family Preservation Case Management has concluded their 12 months case responsibility.

3. If the case involves a noncompletion, the end date is when the service ended for the family per the Noncompletion of Case Plan form. Use "CM" status closure code. Close all other responsibilities and then close the plan.
4. (a) If a new Family Preservation referral has been made and the case involves a change in casehead and all children are moving to a new case, end date the PR03N responsibility under the first casehead and each child, and establish a new plan and PR03N responsibility for each individual on the new case.

   (b) If a new Family Preservation referral has been made and the case involves a change in casehead and all children are not moving to a new case, end date the PR03N responsibility of the children moving to the new casehead, and establish a new plan and PR03N responsibility for each child who moved to the new case.

B. Family Preservation Service Cases Involving Child Custody

If the FPS provider is providing services to a family with a child in SRS custody, a SRS custody only plan (SC) is established for the child. This SRS custody plan is established in addition to the above steps of recording the service action for the head of household.

C. Family Preservation Service Cases Involving a Pregnant Woman using Substances

If a family preservation referral is made to provide services to a pregnant woman using substances as per CFS 2020 form, a family plan (FP) is established for the pregnant woman. Enter the service action code of HP01N and service source code of ADS on the RESP screen. The start date is same as the date referred to family preservation. On RESP, enter a service action of PR03N and source of the service as the Family Preservation Contractor (FPC) to show the referral to family preservation. If there are other children in the family being served by the FPS provider refer to PPM section 5811A for steps on entering a family preservation referral for each child.

5812 Case Plan Activity

Services and Tasks

Enter all possible service actions located on the CFS 3050 or CFS 3051 and tasks from case planning documents that are planned, recommended, or initiated. Enter any additional services to the family that may be provided outside the FPS contract as indicated in case file documentation. Update these services as needed through the life of the case plan.

5813 Entering Pregnancy Result/Outcome

On family preservation referrals for pregnant woman using substances, a service action code of PG01N shall be entered on the RESP screen of the FP plan when pregnancy results are received per CFS 2021 form. Four service source codes shall be used with the PG01N service action code. If the results for the baby or the mother are negative for drugs, enter the service source code of NEG. If the results for the baby are positive for drugs, enter the service source code of POS. For a live birth where the mother tests positive and the baby was not tested, enter the service source code of BNT. If the pregnancy ends with a miscarriage or still birth, enter the service source code of DBA.

5820 Establishing an Out of Home Case Action Type

A foster care case action type is opened for each child referred for out of home services and remains open until custody is discharged or child has been placed at home for 6 months, whichever comes first.

5821 Entering A Foster Care Referral into FACTS

All children who have been in state custody at least 30 days regardless of goal type, must have the "Child Ever Adopted" field and "Prior Adoption Finalized Date" field completed on the ADOP screen. This is an AFCARS requirement (See PPM section 5881 for additional information).

5822 Entering Adult Case Information

On PLAN, enter an FP plan type for the Head of Household and any additional adult with goal type of reintegration (RUC).

5824 Out of home placement with the Reintegration/Foster Care provider

To reflect a Reintegration/Foster Care referral for a child in FACTS, the following combination of codes is entered. Establish on INIT or update PLAN with a child custody (CC) plan for each child referred to the provider and enter reason(s) for removal located on the CFS 3030. Enter the appropriate case plan goal. On RESP, enter a service request for CM; service action of PR09N; and source of the service as the Foster Group Contractor (FGC) for each child referred. Enter the Service Status as initiated (IN) and indicate the effective referral date from the CFS 3030.

When the Child Welfare Case Management Provider closes their active service delivery, end the service action with provider closure dates and "CM" status closure code.

5826 Entering Provider Changes On Child Information

If a contract award results in a change in Child Welfare Case Management Provider, only the provider name in the specific description field is updated. A new responsibility is not required to reflect the change in provider name for contract changes.

5831 Adding Placement Information

Enter all planned and initiated placements for a child in SRS custody on RESP. FACTS will only allow one initiated placement responsibility at a time. Placement information is located on the Acknowledgment/ Change of Placement form from the provider. Service action codes and sources entered into FACTS shall match documentation from the provider. The options for services requested in FACTS for children in agency custody are involuntary placement, emergency shelter for member, or voluntary placement if the youth is a runaway. Episodes of runaway are recorded in FACTS with the service action code of FO09N. Episodes of Drug and Alcohol Inpatient Treatment are recorded in FACTS as a placement with the service action code of FO02N and with the service source code of DAT. If documentation received from the provider is believed to be in error, seek resolution with the assigned worker or regional contract specialist. For each move, MACL shall be updated with child's current placement address, current school district code, and any other applicable information.

5832 Updating Placement Effective Dates

A. Moves

When a placement type ends, the status and effective date are updated. Change the status code to the applicable closure code. If a placement ends due to a move, enter "AD" as the status code. If the placement ends due to release of custody, enter "CM" as the status closure code. If the user enters "CM" as a status closure code, FACTS will require the user to enter a reason for discharge from SRS custody. The placement responsibility that the discharge reason code is entered on, SHALL be the last responsibility on the RESP screen that has data entry.

B. Changes in Provider Types

When information is received from a provider regarding a placement provider source change (e.g. family foster home to diversion foster home), no updates are made to the placement service action code (FO...) responsibility, however, update the service source code as necessary. The information also needs to be reviewed with regard to impact on IV-E Payment Eligibility. Update payment eligibility information as necessary.

5833 Services That Are Not Considered Placements

Respite care is considered a service to the placement provider, not a change in placement. If respite care is provided for a child, enter that service (PR06N) as a separate responsibility with applicable effective dates and appropriate source of that respite, such as emergency shelter (EMS), family foster home (FFH), etc. Admissions to hospitals that require inpatient acute care for medical attention or psychiatric evaluation are not considered a placement or move i.e. infant placed in SRS custody while in the hospital. Enter subsequent inpatient psychiatric evaluation settings as (MD03N/P). Enter medical hospital stays as in patient treatment (MD03N/P). Drug and Alcohol Outpatient Treatment is considered a service to the placement provider, not a change in placement. If drug and alcohol outpatient treatment is provided for a child, enter that service (OT04N) as a separate responsibility with applicable effective dates. Placements in an emergency shelter prior to agency custody is considered a protective action service (PR08N), not a placement (FO...) code.

5834 Entering Out of Home Placement End Information

The Out Of Home (OOH) End Reason and EndDt fields are enterable fields to reflect the date and reason the out of home placement has ended. When a child has been reunified with any parent, or reunified with any person defined in the Child Welfare Contract Management provider contract as a reintegration resource, indicate Reintegration (RUC) as the reason and enter the date of reintegration in the "EndDt" field. If a child is removed from home post reunification, but prior to release of SRS custody, delete the OOH end reason and date and update the PLAN screen.

When SRS has been relieved of custody for reasons of Emancipation (EMA), Guardianship/Custodianship (GUS), or Other (ex: child death) (OTH), indicate the appropriate code and enter the date of discharge in the "EndDt" field. When a child's adoption is finalized, enter (ADP) and the date of finalization.

When custody is discharged due to transfer to an agency other than the JJA, use Transfer to Another Agency (TAA) as the reason and enter the date of discharge in the "EndDt" field.

5835 FACTS information regarding Trial Home Placements

When a child returns to a placement at home, FO06N is entered with a start date of the date placed home and the OOH end reasons and dates are entered. PPM 5243 details exceptions for payment purposes when a child is not considered reintegrated until the end of a 30 day "trial home" placement. If a child's circumstances fit the payment provision of "trial home" placement, FACTS is entered with the placement and OOH end dates of the actual date placed at home.

5836 Entering Information when there is an Exception to Aftercare

In exceptional circumstances per 5271 C and D, there are times when a child's case circumstances are considered (for the purpose of payment) a new referral:

A. If a child's circumstances fit 5271 C or D and there was no discharge from custody between permanency date and return to out of home care, then there is no new PR09N initiated. To assure payment accuracy, send email to eScripts Helpdesk with dates of re-entry to out of home.
B. If a child's circumstances fit 5271 C or D and there was a discharge from custody between permanency date and return to out of home, then this is a new removal episode, new CC plan and new PR09N.

5837 Recording Adoption Placements

A. Placement Change Involving a Move to an Adoptive Home

If the child moves to an adoptive home at the time the adoptive placement agreement is signed, enter the placement service action on RESP as trial adoptive home (FO08N). Enter the service requested as IP; source is family foster home or relative as indicated. If the adoptive placement agreement is with an new resource family, use the service source code of ADH. Initiate the service with the effective date of the adoption placement agreement; and link the family foster provider, relative, or new resource family to a provider number. Update the child's placement information and school district on MACL.

B. Adoptive Placement Agreement with Current Provider

If the child's current provider becomes the adoptive placement, do not show a separate responsibility start and end period for this adoptive placement. When the current provider becomes the adoptive placement, update the service action code for that

placement to FO08N and do not change the effective date to the date indicated on the adoption placement agreement. In these instances, the provider should already be linked to a provider number and there is no requirement to change or update the provider link at this point in the child's case.

C. Disruptions That Do Not Involve a Change in Placement

If an adoption disrupts prior to finalization or is never finalized with a current placement provider, change the placement service action from FO08N (pre adoptive placement) to a relative or family foster home service action and update effective dates to reflect the dates this status changed. Assure that the provider number is linked to a relative or family foster home, not adoptive home. End any adoption subsidy service actions and amounts of subsidy on ADOP. Enter an "S" in the Adoption Monthly Subsidy Ind field to identify the subsidy has stopped. The end date of subsidy on ADOP in this circumstance is the date of disruption.

D. Disruptions That Involve A Change In Placement

If the child moves in association with the adoption disruption, end the current placement service action with the date of disruption and start a new placement as indicated in case documents. Update the necessary fields, such as adoption agreement date, monthly subsidy amount, etc., on the ADOP screen with any new information.

5838 Entering Information Regarding Finalization

A. Placement Information

When the adoption decree is received, update only these data fields: change service source to adoptive home (ADH), and link the provider to an ADH provider number.

B. Adoption Information

On ADOP, enter the file stamp date on the Journal Entry (Adoption Decree) as the adoption finalization date and enter any adoption reimbursement amounts for non-recurring expenses.

C. Adoptive Family Structure Code

For AFCARS reporting, the family structure code of the adoptive placement must be entered. For public adoptions, link the ADH provider with the adoptive placement responsibility (FO08N) to secure family structure code. For private adoptions, link the ADH with the AO05N responsibility.

D. Entering Custody Discharge Information

End the adoptive placement with a responsibility status closure code of "CM", reason of "AP" and effective date of the date SRS is released from custody. For the release of custody date, use the file stamp date on the Journal Entry (Adoption Decree). Close any remaining open case plan service actions and court activity with the date the child was discharged from custody (file stamp date on the Journal Entry (Adoption Decree). The placement responsibility that the "AP" discharge reason code is entered on, SHALL be the last responsibility on the RESP screen that has data entry. Change the child's placement type to "R" for residence on MACL, and close out plans. Close the child's case or remove the child from the open case, if there are other siblings being served on that current case number. If the child is removed from the case number, the reason left code on MACL is adoption "ADP" with the date that child was discharged from custody.

5840 Service Actions as Outcome Indicators

A. For children adjudicated as a juvenile offender:

To indicate a child has been adjudicated as a juvenile offender as reported on forms CFS 3052, CFS 3030 or CFS 7000, initiate (IN) the service action code of AD01N with the service source code of CRT and service request code of CM on the RESP screen. The start date is date child was adjudicated as a juvenile offender and the end date is when child is no longer a juvenile offender or when plan ends, whichever comes first. This is a NYTD requirement.

B. For children in out of home placement

To indicate a child has a sibling in out of home placement and is placed with at least one sibling, initiate (IN) the service action code SI01N with service source code FAM and service request code CM on the RESP screen per notification of change of placement. In the description, type the name of the sibling with whom the child is placed. The start date is the date placement with the sibling started. The end date is the date placement ended with the sibling or the date out of home placement ends, whichever comes first. Use status closure code "CM".

To indicate a child has a sibling in out of home placement and is not placed with at least one sibling, initiate (IN) the service action code SI02N with service source code FAM and service request code CM on the RESP screen per notification of change of placement. The start date is the date placement with the sibling ended. The end date is the date the out of home placement ended or the date a placement with a sibling starts, whichever comes first. Use status closure code "CM".

C. For children of school age and in out of home placement

To indicate that a child is attending the same school as prior to removal, initiate (IN) the service action code SC01N with service source code SCL and service request code CM on the RESP screen per notification of change of placement . If

child age 6 or over (or in 1st thru 12th grade) and there is no SC01N, it is assumed the child is not attending the same school as prior to removal. Start date is the date the child's same school attendance begins. The end date is the date out of home placement ends or the date the child is no longer meeting the same school criteria, whichever comes first. Use status closure code "CM".

D. For youth receiving Independent Living Services:

To indicate a youth is receiving independent living services as indicated on forms CFS 3057 or CFS 7000, initiate (IN) all independent living service action code(s) (IL01N through IL15N) with the service source code of INL and service request code of 'IL' on the RESP screen. The start date is the date of the case plan and the end date is date when youth is no longer receiving independent living service or when plan ends, whichever come first. The independent living codes can be used on the following plan types: FP, SC, CC, RC, EC, and SS. These codes shall only be used for youth age 15 and older. This is a NYTD requirement.

5851 Entering Placement Descriptions

Each responsibility has a field for a short description of the provider. For facility locations, enter the facility name as it appears on the SRS residential rate sheet. Non facility placements are entered in the following text manner:

<Last Name, First Female/Male>

Enter as many characters that will fit in the field space.

5852 Linking Provider Information

Types of Providers

Each family foster home, relative and adoptive provider shall be linked to a specific provider identification number. Linking providers to a unique ID numbers is an AFCARS requirement. For each of these three placement types, flow to the provider listing (PRLS), select desired provider, and return to RESP to update and process the placement service action with the provider ID linked to the placement type. If a provider is not listed in PRLS, they need to be added. Information on how to add providers to FACTS is found in the FACTS User Manual volume II, Section 600 Provider Maintenance.

Provider Maintenance

For each of the three provider types above, a PROM screen shall be entered and updated by the Child Welfare Contract Management Provider as needed. Race,

ethnicity, gender, date of birth, and family structure codes are AFCARS requirements and mandatory fields for completion.

5861 Entering Review Dates

See PPM 3812 for information on entering review dates

5862 Entering Case Plan Participation

Persons in Attendance

Add or update COLL with names of all case plan participants associated to this case. Collaterals established as case plan participants on this case will populate onto SESS. To search for a collateral already known to the system, utilize COLS.

Completed Conferences

All case plan conferences shall be entered on SESS. To view a list of all case plan conferences for a family, utilize the SELS screen. The SESS screen is completed on the case, not each child. If multiple children are on a case, only one SESS screen needs to be completed.

5863 Permanency Goals

Case plan goal information in FACTS shall match case planning documentation. Enter an initial permanency goal, and update this goal as required through the life of a case as indicated on the CFS 3050 and CFS 3051. Applicable permanency goals include maintain with family (MFM), reintegration (RUC), adoption (ADP), guardianship/custodianship (GUS), and Other Planned Permanency Living Arrangement-OPPLA (EMA).

5864 Case Plan Tasks

Enter all service actions located on the CFS 3050, CFS 3051 and tasks from other case planning documents that are planned, recommended, or initiated. Enter any additional services to the adults of children that may be provided outside the foster care contract as indicated in case file documentation. Update these services as needed through the life of the case plan.

5871 Adding Court Hearings

The CORT screen shall be completed for each child with a child custody (CC) plan and SRS custody only (SC) plan. Add court information and update each type of court hearing involving the child. The next hearing date field shall only contain actual hearing

dates. In the reason field for each hearing, indicate whether the proceeding was contested/adversarial (AV), or stipulated/relinquished (RL). If parental rights are terminated, MACL and ADOP shall be updated.

5872 Entering Court Activity for Parental Right Termination hearings

When parental rights are terminated (PRT) by the court, enter the actual date of the PRT hearing or the date of judge's decision on the child's MACL screen. If a parent voluntarily relinquishes their parental rights, enter the date SRS accepted the relinquishment on the child's MACL screen. If a child's parent is deceased, enter the date of death in the respective parent's date of death field on child's MACL screen. When both parental rights have been terminated, add a new adjudication code of CP (CINC-PRT) and the adjudication date as the date that the last parent was PRT/REL on CORT. The CORT screen must be successfully added prior to accessing adoption information for the child on ADOP in FACTS.

5873 Entering Change of Venue

If there is change of venue for a case, end custody on the first court case number and add a new CORT screen with new court case number and all previous court hearing type information. In order to close a case, all court hearing information must have end dates.

5880 Entering Other Services

If a child receives a Kan Be Healthy screening, enter a service action code of MD01N and indicate Kan Be Healthy in the description field. If the child is appointed an education advocate, enter a service action code of ED08N. For youth who have graduated from high school or completed their GED, enter the service action code of ED04N and date of GED completion or date of graduation. A complete list of codes to match services that a child or youth may receive is located in the User Manual and should be reviewed to determine if case planning or case management activities need to be entered into FACTS.

5881 Adoption Circumstance Information

A. Enter the date of the placement from the adoption placement agreement on the "adoption placement agreement" date field on ADOP.

For AFCARS element 16, the "Child Ever Adopted" field and "Prior Adoption Finalized Date" field must be completed on all children who have been in state custody at least 30 days regardless of goal type. On the "Child Ever Adopted" field on ADOP, enter a value of "Y" (Yes), "N" (No) or "U" (Unable to Determine) within 30 days of custody start date.

If there have been any previous finalized adoptions for the child, enter "Y" in the "Child Ever Adopted" field and the finalization date of the previous adoption in the "Prior Adoption Finalized Date" field. If there has not been a previous finalized adoption, enter "N" and leave the "Prior Adoption Finalized Date" field blank. Enter "U" in the "Child Ever Adopted" field only if the child has been abandoned or the child's parents are otherwise not available to provide the information. All children in the custody of SRS at the time the adoption is finalized shall be coded as placed by a public agency (PUA). Indicate from where the adoption was received. Most adoptions of children in SRS custody will be received from within the state (WIS); however, if a child in SRS custody was ever previously adopted from another country or another state, use the code for another country (ANC) or for another state (ANS) regardless of most recent custody locale. If a child has been adopted before, enter the prior finalization date on ADOP. The relationship of the adoptive parent to the child - step parent "S", relative "R", foster parent "F", foster parent and relative "B", step parent and relative "C", or other "O" shall be recorded. If the relationship of the adoptive parent to the child is both foster parent and relative, enter the code "B". If the relationship the relationship of the adoptive parent to the child is both step parent and relative, enter the code "C".

B. Birth Parent Information

Verify accuracy of the parental rights termination dates that migrate from MACL. Father and mother's year of birth and mother's marital status at the time of the child's birth are AFCARS requirements and must be completed. If one or both parents are unknown, leave the appropriate year of birth field blank.

C. Financial Information

Indicate "Y" or "N" in the adoption subsidy indicator regarding whether or not the adoptive parent receives a cash subsidy. Indicate "Y" or "N" whether that cash subsidy is funded through Title IV-E. Do not enter adoption reimbursement amounts until information regarding the adoption is finalized.

D. Special Needs

If a child is identified to have special needs related to the adoption, enter all applicable codes for these special needs onto ADOP with the primary special need listed first. Information regarding these special needs, including the primary special need, can be located on the CFS 4019 Eligibility for Adoption Subsidy form. When special needs related to adoption involve a diagnosed disability, these disabilities shall be entered onto the child's MACL screen. Specifically, the special needs from ADOP that require a disability be entered on MACL are: Emotional disability (EMD; Medical Condition (MEC); Mental disability (MED); or Physical Disability (PHD). For the special need of Guarded Prognosis, use the special needs code of GRD. For the special need of Developmental Disability use the special needs code of MEC.

E. Entering Information on Private Adoptions

If a child is released from SRS custody by the judge to facilitate a private adoption, on the RESP screen end the placement with a responsibility status closure code of "CM", reason of "AP" and the date of discharge from SRS custody. The placement responsibility that the discharge reason code is entered on, SHALL be the last responsibility on the RESP screen that has data entry. On the ADOP screen, the finalization date will be the same as the date of discharge. If there has not been an adoptive placement agreement the date will be the same as the date of discharge. For adoption placed by, enter PRA for private agency to assure no public adoption is recorded for AFCARS.

F. Private Adoption Plans

States are required to report private adoptions in AFCARS for each child not in state custody who receive adoption assistance from the state. This plan type affects AFCARS requirements. Enter a private adoption plan type (PA) for children not in state custody and for whom the agency is providing adoption assistance in the form of either non recurring expenses or on going subsidy. Open the case with adoptive parents and child(ren) with an event and presenting situation code as NCN. Establish relationships on RELS and open an initial (INIT) PA plan type on each child receiving subsidy. The relationship of adoptive parent (AM) and adopted child (AC) shall be recorded. Do not enter a review date. The Plan Start date is the date on the adoption assistance agreement. Initiate a AO05(N/P) service action code per PPM 6320, depending on type of subsidy. On RESP, link a provider type of ADH to the AO05(N/P) service action code. If a court case number is available, it may be entered. If not, ADOP can be accessed by selecting (S) the court case on the screen, and flowing directly to ADOP. On ADOP, enter adoption information.

G. Adoptions from Other States

When Kansas is the receiving state in an adoption from another state and SRS' sole responsibility as an agency is to issue a medical card, no FACTS is established.

5891 Basic Eligibility

The start date of a child's basic eligibility for Title IV-E is located on the MACL screen. This information migrates from KAECSES and is not entered into FACTS by users.

5892 Payment Eligibility

Payment eligibility is an AFCARS requirement. An eligibility segment shall be entered into FACTS for every child in an out of home placement, regardless of case plan type.

Each change in payment eligibility shall have a separate service request responsibility entered onto the RESP screen. Effective dates for payment eligibility shall not overlap.

Enter the date the new payment eligibility took effect. The end date is the day before the next eligibility segment start date.

If dates for a specific payment eligibility responsibility are entered in error, delete the responsibility and enter the correct information on a new responsibility.

Eligibility segments (EP Segments) for foster care shall end when the child returns to a parent (whether or not if custody continues). If the child returns to the specified relative removal home, the EP Segment shall end.

Entry of the Eligibility for Payment segment on RESP:

The EP segments shall be entered as indicated below:

ServReg	EP
AchDate	6 month from EffDate
Service Action	5 digit code to identify reason for payment eligibility
Service Source	3 digit code to identify payment eligibility
SpecDesc	Description reason for service source
RespStatus	IN
EffDate	Date new payment eligibility took affect

To End an EP Segment:

EffDate	Enter day before next action occurred
RespStatus	CM

Service Action and Service Source Coding

There are two types of codes that are to be entered in FACTS.

1. The Service Action code identifies the child's payment eligibility.

2. The Service Source code indicates the primary reason for a child's payment eligibility status.

Types of Eligibility

A. Pending Eligibility.
Cases with eligibility yet to be determined enter:

Service Action code: GA01N
Service Source code: PEN

Eligibility shall be entered within 5 working days of the youth entering out of home placement and in the custody of the state

B. GA Basic Eligible:
If a child does not meet all basic IV-E eligibility requirements enter:

Service Action code: GA01N

Service Source code options:
There are Seven (7) code options to be used with GA01N to indicate the reason the case is GA. They shall be used in the following order of priority:

1. ADH: Placement in a pre-finalized adoptive placement with a completed Adoption Assistance Agreement.
2. CTW: No judicial finding of contrary to the welfare in the initial JE.
3. NRI The initial custody and removal order lacks reasonable efforts language and the child is not eligible due to excess income or resources
4. NRD: The initial custody and removal order lacks reasonable efforts language and the child is not eligible due to no initial deprivation.
5. EIR: Not eligible due to excess income or resources in the removal home.
6. NDP: State only due to no initial deprivation, or no removal, or has not lived with a specified relative in the previous 6 months.
7. GAB: Other reasons why the youth is GA only.

GA basic eligible children who receive SSI benefits require 2 EP segments entered on the RESP Screen. The first EP segment indicates the reason the youth is GA basic eligible (GA01N and one of the above 6 service source code). The second EP segment shall be coded GA01N SSI indicating the youth receives SSI benefits, regardless of the payee.

C. AF Basic Eligible and IV-E Payment Eligible :
The child meets IV-E basic eligibility and all IV-E payment eligibility requirements, enter:

Service Action code: AF01N
Service Source code: AFP

D. AF Basic Eligible, but not IV-E Payment Eligible:
The child meets AF basic eligibility, but is not IV-E payment eligible, enter:

Service Action code: AG01N

Service Source code: There are nine (9) Service Source codes that can be used with AG01N and they shall be used in the following order of priority indicating the reason the child is payment ineligible:

1. ADH: Placement in a non-finalized adoptive placement with a completed Adoption Assistance Agreement
2. SSI: Eligible for SSI, regardless of who is payee
3. NIR: Journal Entry lacks Reasonable Efforts judicial language in the Initial Custody and Removal Order.
4. NOR: No continuing reasonable efforts judicial language as required every 12 months
5. ULR: Placement with an unlicensed relative
6. UNP: Placement in an unlicensed non related person
7. TMP: Placement in a temporary license
8. IPL: Placement not IV-E Eligible such a Juvenile Detention, Juvenile Correctional Facility (JCF), Psychiatric Residential Treatment Facility (PRTF) or public ran group home over 25 beds.
9. AWL: AWOL

Changes to the eligibility segments shall be entered within 5 working days.

5900 Eligibility and Payment Procedures for Out of Home Program and Services

5901 SRS Children and Family Services Responsibilities

Eligibility and payment responsibilities include:

A. Initial determination of eligibility for either GA Foster Care or Title VI-E Foster Care

B. Redetermination of Title IV-E Foster Care eligibility

C. Initial and ongoing Medicaid eligibility while in out of home care

D. Process benefits for the child; i.e. SSI, SSA, VA, Railroad, etc

E. Maintain documentation for all eligibility and payment activities

F. Closing Foster Care and Medicaid Cases in KAECSES

G. Closing EP segment in FACTS when the child leaves out of home care

5902 Eligibility Determinations

A determination of Title IV-E foster care eligibility and Medicaid eligibility shall be completed as part of the referral process. A medical card shall be issued. The following is the documentation needed to complete eligibility determinations:

A. Journal Entry awarding SRS custody and ordering removal from the home.
B. Form CFS 4030-A (IV-E Eligibility Determination).
C. The Petition or Complaint initiating state custody

5903 Payment to the Child Welfare Case Management Provider of Out of Home Services

Payments to the Child Welfare Case Management Provider of out of home services are made by Children and Family Services Division. New referral information is entered into FACTS by SRS staff which is then downloaded into SCRIPTS by CFS. The referral in SCRIPTS initiates payments.

Child Welfare Case Management Provider of out of home services are paid monthly. All services provided, including services provided by Child Welfare Case Management Provider subcontractors, are submitted as encounter data on a monthly basis.

A. Ongoing Payments

Child Welfare Case Management Providers reconcile their system against a report they run in eScripts of children in placement on the last day of the previous month. Any corrections needed to eScripts are made by the Provider. Child Welfare Case Management Providers send a confirmation e-mail to central office by 6 p.m. on the 2nd business day of the month to assure that the payment-eligible clients in eScripts match their system. After payments are issued, a report identifying children for whom a monthly payment was made is e-mailed to the Child Welfare Case Management Provider.

Except new referral information, which is entered by SRS staff into FACTS, Child Welfare Case Management Providers data enter additional information into eScripts. Such information can consist of, but is not limited to, corrections in the client's name, date of birth, or Social Security Number; additions of permanency dates and referral end dates. Regional SRS Offices monitor the information in eScripts against their own tracking systems and reports generated from SCRIPTS or eScripts for their use.

B. Encounter Data

Encounter data for all services provided during the previous month to each child is due on the 10th of each month; subcontractor data is included. Should the 10th fall on a weekend or holiday, the encounter data is due on the next working day.

CFS reviews encounter data for accuracy and to ensure only contract required placements and services are reported. Documentation of these encounters is noted in the child's case record. Encounter data with errors are to be corrected by the next month's submission. Encounter Data not corrected each month appears on a pending error report distributed at the end of the following month.

C. Placement Rates

CFS shall review the amount of the payments made for foster care maintenance to assure continued appropriateness.

5910 Overview of the Title IV-E Program

Title IV-E payments are an individual entitlement for eligible children placed in state custody and out-of-home care either by the Department of Social and Rehabilitation Services (SRS) or by the Juvenile Justice Authority (JJA).

The Title IV-E foster care maintenance program is based on Title IV-A, Part A, of the Social Security Act as the program was in effect in Kansas on July 16, 1996. Children's eligibility for IV-E payments is based upon the AFDC relatedness criteria that was in effect in Kansas on July 16, 1996. IV-E eligibility is not based on the Temporary Assistance for Families Program (TAF) criteria which replaced the AFDC program under Welfare Reform.

A. Reimbursable Activities
Through Title IV-E, the federal government shares in the cost of:

1. Foster Care Maintenance:
   Maintenance costs are the costs associated with maintaining the child in out-of-home care. These costs include the room/board and other supervision costs, including child care, for Kansas Department of Health and Environment licensed/approved foster parents, child care institutions, shelter care, and group homes.
2. Administrative Services:
   Administrative costs are incurred when working with the child, the child's family, and the care provider. Staff shall complete the REST or RMTS survey when sampled. Staff shall refer to the description of the activity and program codes to ensure the coding accurately reflects the activity/service they provided at the time of sampling.
3. Training:
   IV-E training costs are the costs of training people who work with the child, including resource parents and those who administer the foster care system for the child.
4. Candidates for Care:
   Candidates for Care are children receiving in home services and determined to be at imminent risk of removal from the home. Title IV-E provides reimbursement of some administrative activities for these children. The SRS

social worker shall determine the child is a candidate for care by reviewing the case plan and documenting it on the CFS 3050C. Eligible administrative activities are documented through the REST or RMTS process.

B. IV-E Basic and Payment Eligibility

An eligible child enables the State to collect Title IV-E funds in two ways:

1. IV-E Basic Eligibility:
   The determination of IV-E basic eligibility qualifies the State to obtain IV-E reimbursement for administrative and training costs associated with the child.
2. IV-E Payment Eligibility:
   The determination of IV-E payment eligibility qualifies the State to also obtain IV-E reimbursement for maintenance costs (board and care) associated with the child.

   A child must first be determined IV-E basic eligible in order to be determined IV-E payment eligible. Initial basic eligibility is based on information obtained when the child first enters out-of-home care and into custody of the State. If a child is determined not eligible for basic eligibility, the child is ineligible for the duration of the custody episode for both IV-E basic eligibility and payment eligibility. A custody episode begins when the State initiates custody and OOH placement begins, and ends when the State's custody terminates. A new custody episode occurs when a child re-enters foster care following release of custody, following six months at home with continuous custody or following six months on run status with continuous custody. See Section 3251(C) for information on trial home placements.

5911 Documentation for IV-E Determination

Documentation of IV-E eligibility determination decisions shall meet the 'prudent person' standard. The prudent person standard requires a prudent person would concur that the case meets IV-E requirements.

A child shall be made IV-E eligible if the worker has adequate facts which clearly support that a prudent person would determine the child meets IV-E eligibility criteria. If the worker has reasonable doubt about whether the child is eligible, the child shall be made ineligible or pending determination while additional information is pursued. Case forms, court orders and computer screen print-outs which document a child's eligibility shall be included in the foster care eligibility section of the financial section of the child's case file. Documentation of IV-E eligibility may be in another case file (i.e., court file, administrative case review file, etc.) but it must also be in the foster care eligibility section of the child's case file. Information obtained from conversations with persons knowledgeable about the child (i.e., relatives, the case manager, etc.) must be documented on the case log.

A. Initial IV-E Basic Eligibility Criteria

Basic Eligibility Period
A child who meets all of the eligibility criteria in this section, Section 5911, is IV-E basic eligible. Title IV-E basic eligibility is determined each time a child comes into State custody and is removed from the home (episode of care). If a child is determined initially as IV-E basic eligible, the child continues to be IV-E basic eligible, except as indicated in 5914 of this manual. If a child is not eligible for initial basic eligibility, the child cannot be IV-E basic or payment eligible at anytime during the custody episode.

The basic eligibility effective date is the first day of the month in which all of the eligibility criteria are met. A child who is IV-E basic eligible during any part of the month is basic eligible for the entire month.

B. IV-E Basic Eligibility Judicial Requirements

1. Court Order Custody

a. In order for a child to be IV-E basic eligible, there shall be a court order establishing the state agency has custody of the child.

b. For a child to be IV-E basic eligible, the initial court order must include a statement that continuation in the home would be contrary to the welfare of the child or that removal is in the "best interest" of the child, or words to that effect (per 45 CFR 1356.21). See Section 5912 A for initial removal order judicial determination requirements.

c. On occasion, a child may be adjudicated as a juvenile offender and placed in an out-of-home placement in JJA custody pursuant to a juvenile offender court order. In this instance, the child may be determined to have IV-E basic eligibility if the initial court order includes a statement that continuation in the home would be contrary to the welfare of the child or that removal is in the best interest of the child, or words to that effect.

Affidavits or nunc pro tunc orders are not accepted for meeting the contrary to welfare or best interest judicial language requirement. This requirement is effective on and after March 27, 2000.

d. Court orders referencing the State law are not accepted for meeting the contrary to welfare or best interest judicial language requirement. This requirement is effective on and after March 27, 2000.

2. Relinquishment of Parental Rights

A child placed in a foster home without court action, due to a parent voluntarily relinquishing parental rights to the State, may only be IV-E basic eligible if the initial court order is received within six months of the relinquishment which must include the contrary to welfare or best interest judicial language.

C. IV-E Basic Eligibility - AFDC Relatedness, General Information

To be IV-E basic eligible, a child must meet the AFDC relatedness criteria during the eligibility month.

1. Eligibility Month

a. AFDC relatedness, assessment of income, resources, and deprivation factor in the removal home, must be assessed based upon information during the eligibility month.

b. The eligibility month is the month of the initiation of court proceedings that led to the removal of the child. An example of the initiation of court proceedings is typically a petition or complaint which results in the removal of the child.

c. The date the child entered out-of-home placement does not necessarily define the eligibility month. The date a child was removed or was placed in out-of-home care may be different than the date of the actual petition or initial custody order. As stated above, it is the month of the initiation of court proceedings that led to the child's removal, not the date of the removal or placement that defines the eligibility month.

d. In rare circumstances the petition or complaint may be filed more than six months prior to the state being awarded custody and the subsequent removal of the child. In these situations, the eligibility month is the month of physical removal.

2. Determination of AFDC Relatedness

For a child to meet initial IV-E basic eligibility, the child must meet the AFDC relatedness criteria applicable to the Title IV-E program. These criteria include: age, citizenship, lived with a specified relative/removal, deprivation, and met financial need (income and resources).

The federal IV-E program requirement for AFDC relatedness states that a child meets AFDC relatedness if one of the following two conditions is met:

a. The child lived with a specified relative and would have received AFDC in the eligibility month, or in any of the six months prior to the eligibility month if an AFDC application had been made; or

b. The child was removed from a home, other than a specified relative, but had lived with a specified relative at some point within six months prior to the eligibility month and would have received AFDC in that home had an application been made.

D. IV-E Basic Eligibility - AFDC Relatedness; Age

To be IV-E basic eligible, the child must be either under age 18 or, between age 18 and 19, and in secondary school or training full time, and expected to complete the

schooling or training before turning age 19. IV-E basic eligibility always discontinues when the child reaches age 19.

IV-E basic eligibility ends the month of the child's 18th birthday, end of the month of graduation or end of the month in which the child is not in school full time or end of the month of the child's 19th birthday.

E. IV-E Basic Eligibility AFDC Relatedness Citizenship

To be IV-E basic eligible, the child must be either a United States citizen by birth or naturalization, or legally admitted for permanent residence in the United States. The U.S. citizenship of the child follows that of his U.S. citizen parent(s) or is established by being born in this country. Permanent legal resident status can be verified by the alien registration card designated as form I-94. Children who are in the U.S. under a visitor's or tourist's visa or under a student arrangement are not eligible for Title IV-E.

F. IV-E Basic Eligibility - AFDC Relatedness; Specified Relative/Removal

For a child to meet initial IV-E basic eligibility, the child must have lived with a parent or specified relative during the eligibility month, or within any of the six months prior to the eligibility month. The specified relative with whom the child most recently lived during the eligibility month or within six months prior to the eligibility month, is considered the relative from whom the child was removed.

1. The definition of Specified Relative includes any of the following:
    a. Father, mother, brother, sister, uncle, aunt, first cousin, child of a first cousin, nephew, or niece
    b. Relationships to persons listed above of preceding generations denoted by prefixes of grand, great or great-great are within this definition
    c. The parental relationship can be birth, adoptive or step. The sibling and grandparent relationships can also be birth, adoptive, step, or half; and
    d. Spouses of any persons named in the above groups are within the scope of these provisions, even though the marriage is terminated by death or divorce
2. Living with a specified relative is met if a newborn child is placed in the State's care and custody directly from its birthplace in a hospital or following birth to an incarcerated prisoner.
3. Identifying the correct specified relative home where the child lived and was considered removed from is critical for two very important reasons:
    a. it identifies the removal home, and
    b. it determines the AFDC group members.
4. Determining the Removal Home

To meet initial IV-E basic eligibility a child must be in SRS or JJA custody and have been removed from the home. The worker must determine the home from which the child is considered removed. There are two types of removal when determining the removal home; physical and constructive removal.

The removal home is the Home addressed in the judicial determinations.

a. Physical removal occurs when the agency has physically removed the child from the home of a parent or specified relative. When a child is physically removed from the home of a non-parent specified relative, the judicial determinations of contrary to the welfare and initial reasonable efforts are required to be regarding the circumstances in the home of the non-parent specified relative. If the judicial determinations are not about the circumstances of the home of the non- parent specified relative, the removal home must be considered to be the parent the child most recently, within six months of removal, lived with.

b. Constructive removal is considered "paper removal": the agency has obtained custody of the child, but the agency did not physically remove the child from the home of a specified relative, however the child lived with a different specified relative within six months of the eligibility month (per 45 CFR 1356.21).

The specified relative criteria and removal requirement are inter-related in that the specified relative with whom the child most recently lived (during the eligibility month or within six months prior to the eligibility month) is considered the relative from whom the child was removed; this is considered the removal home.

There are five types of scenarios for meeting the living with specified relative and removal criteria:

i. The child was removed from a specified relative at the time the agency initiated custody (eligibility month) and placed the child in out-of-home care. Removal home is the home of the specified relative from which the agency removed the child.

ii. State removed the child from a non- specified relative but the child did live with a specified relative within six months prior to the agency initiating custody (eligibility month.

Removal home is the home of the most recent specified relative where the child resided within the six months prior to the eligibility month.

iii. At the time of initiating custody the State leaves the child in the home of a non-parent specified relative but the child lived with a different specified relative within six months of the petition or initiating custody (eligibility month.

Removal home is the home of the most recent specified relative, where the child resided within six months prior to the eligibility month.

iv. Child has been living with the same specified relative for over six months prior to the State initiating custody (petition). The state obtains custody of the child and leaves the child in the home of that specified relative but the agency removes the child at a later date within six months after the petition or initiating custody (eligibility month).

Removal home is the specified relative home with whom the child lived prior to, during and after the eligibility month at the time agency physically removed the child (within six months after the eligibility month).

If the agency did not remove the child within six months after the eligibility month (state receives custody at the time of the petition) the child could not be IV-E basic eligible until the child re-entered State placement and custody and a new initial IV-E eligibility determination was conducted.

v. State removed the child from a non-parent specified relative and the judicial determinations of contrary to the welfare and reasonable efforts are regarding the circumstances of the non-parent specified relative OR about the parent with whom the child most recently (within six months), lived.

Removal home is the Home addressed in the judicial determinations. If a finalized adoption disrupts and the child returns to out-of-home placement and agency custody, the adoptive family is the removal home and the adoptive family's income and resources shall be considered.

5. Determining the AFDC Group

The AFDC group is the grouping of persons from the removal home whose income and resources must be considered in determining if the child meets the financial need: income and resources criteria for AFDC relatedness.

If the child was removed from the parent's home, the AFDC group would include any of the following individuals residing in the home at the time of removal:

a. Birth or Adoptive parents,

b. Child in custody, and

c. Any minor siblings (birth, adoptive or half) of the child in custody.

If the child was legally removed from the home of a specified relative other than the parent(s), the AFDC group would include any of the following individuals residing in the home at the time of removal:

a. Child in custody, and

b. Any minor siblings (birth, adoptive or half) of the child in custody, who were living in removal home at the time of the child's removal.

Any household members receiving SSI benefits are not counted as a member of the AFDC group, unless the household member is the child in custody. In addition, the SSI benefits and any other income or resources of the SSI recipient are not counted in determining financial need. (Financial need is covered in section 5911.) If the child in custody is in receipt of SSI, count the child in the AFDC group size but the child's income and resources are not counted in determining financial need.

If the child whose eligibility is being determined, is receiving adoption assistance, do not count the child's income and resources when determining financial need; however, count the child as a member in the AFDC group size.

Any adoptive sibling to the child being removed receiving adoption assistance; do not count the sibling's income and resources and do not count the sibling as a member of the AFDC group size.

G. IV-E Basic Eligibility - AFDC Relatedness, Deprivation

Deprivation means that the child is deprived of the support of one or both parents (married or unmarried, if paternity is established). This information may be verified by statements from family members, SRS social worker, or JJA case manager's observation and documented in the case log, or from information obtained from available systems. Deprivation exists for the entire month in which it occurs. For a child to be IV-E basic eligible, the child must be deprived of the support of either one, or both parents in the removal home due to one of the following circumstances:

1. Death
2. Separation:

One of the parents is not living in the same house.

3. Divorce:

One of the parents is not living in the same house.

4. Absent Parent:

One of the parents is continually absence from the home where the child resides.

A deployed parent serving in U.S. Armed Forces is considered a part of the household for consideration of deprivation as required by Title IV-E Foster Care Maintenance requirements. The deployed parent is included in the AFDC group size. Any income received by the residential parent from the deployed parent is considered earned income to the household.

5. Institutionalized/Incarcerated:

One of the parents is in an institution or incarcerated.

6. Incapacitated or Disabled:

The parent must be determined to be disabled or incapacitated for at least 30 days by means of competent medical testimony. If the parent(s) is receiving SSI or SSA (Social Security) payments because of disability or blindness, the incapacitation requirement is met and verification of the SSI or SSA payments shall be included in the record (such as a copy of an award letter, copy of a check, caseworker documentation, etc.). Mental disabilities shall be documented by psychological evaluation and state that the mental disability impacts the person's ability to parent.

7. Parental Rights Terminated:

If there has been a termination of parental rights (PRT, the child is deprived from the month of PRT. However, the existence of a PRT at an IV-E redetermination does not replace the requirement for deprivation at the time the petition is filed which results in the removal of the child.

8. Unemployment/Underemployment:

In order to meet the deprivation factor of underemployment, both parents are living together, only one parent is working and the earned income is below the AFDC needs standard for the group. If both parents in the same household are working, there is no deprivation even if the income is below the AFDC needs standard.

H. IV-E Basic Eligibility - AFDC Relatedness, Financial Need: Resources

Resources are defined as a "resource that a person possesses or owns". A resource is determined by its equity value, which is the current market value minus any debts still owed on the resource. The maximum value of resources the child's AFDC group can own is $10,000 to meet the resource limit for the financial need criteria (per H.R. 3443: Foster Care Independence Act of December 14, 1999). Provided below are listings of what are countable resources and what are exempt (not counted) resources.

1. Countable Resources
    - a. Bonds
    - b. Credit union savings
    - c. Income property
    - d. Real estate, except the home in which the family resides
    - e. Savings accounts
    - f. Checking accounts
    - g. Savings bonds
    - h. Stocks
    - i. Vacation homes
    - j. Vehicles (The first $1500 of equity value is exempt. Vehicles older than seven years have $100.00 value)
2. Exempt Resources

a. Inaccessible trusts (include per capita tribal payments to foster child)

b. Burial plot (one per household member)

c. Home of residence and surrounding acreage

d. Funds for relocation (Uniform Relocation Act)

e. Household furnishings and clothing

f. Personal jewelry

g. Farm/Business inventories/tools used in the course of a business to produce income

I. IV-E Basic Eligibility - AFDC Relatedness, Financial Need: Income

1. Income available to a child must meet AFDC income requirements

This income is calculated utilizing countable earned and unearned income of the AFDC group. (See section 5911 F. 5. for AFDC group). This section will first provide a listing of the types of countable and exempt earned and unearned income that must be included or excluded in determining if the child meets the income limits for the financial need criteria. The end of this section provides the steps in determining if the child passes the 100% AFDC Need Standard tests which is necessary to meet the financial need income criteria for initial IV-E basic eligibility.

In order to determine the correct AFDC Need Standard, an assessment of shared/non-shared living arrangement must be made. The following guidance is consistent with Kansas AFDC plan.

a. AFDC groups with a stepparent present shall always be considered non-shared.

b. Households with adult SSI recipients not included in the AFDC group, use non-shared living if the SSI payment is less than the full payment. This procedure is based on Social Security regulations determining a reduced payment based on non-shared living in the AFDC program in 1996.

c. Households with adult SSI recipients not included in the AFDC group, use shared living if the SSI payment is the full amount. This procedure is based on Social Security regulations determining a full payment based on shared living standards in the AFDC program in 1996.

d. The shared/non-shared living standard is based on adults residing in the removal home when determining IV-E initial eligibility. If the SSI recipient is the child being removed they are counted as a member of the AFDC group size but the income and resources are not counted. A child recipient of SSI is not a factor in determining whether or not to use shared or non-shared living in the context of an IV-E determination.

e. Removal homes of non-parent specified relative, such as grandparent, where only the child s income and resources, and that of their siblings, are

assessed in determining IV-E eligibility, use the shared living AFDC needs standard.

f. Removal homes where a non-relative adult is present, such as a boyfriend, whose income and resources are not considered in determining IV-E eligibility, nor is the adult considered to be a member of the AFDC group size, use the shared living AFDC needs standard.

2. Overview of Income Standards

The countable earned and unearned income available to the child must not exceed specified income limits. The income test is based upon Kansas 100% AFDC Need Standard effective July 1996. Refer to E&P Appendix A, for the applicable income limits for the child's AFDC group size which must not exceed the 100% Income Test. The 100% AFDC Need Standard limits are also based on the county where the removal home resided. Page two (2) of E&P Appendix A provides the County Levels that are to be applied for each county in Kansas.

3. Converting Income to Monthly Amounts

When determining the earned and unearned income amount of the child's AFDC group, the worker will need to convert income payments to a monthly amount for each applicable person:

a. Bi-weekly (paid every other week) income must be multiplied by 2.15;

b. Semi-monthly (paid twice per month) income must be multiplied by 2;

c. Weekly income must be multiplied by 4.3; and

d. Quarterly (paid once every three months) income must be divided by 3.

4. Countable Earned Income

Earned income is income in cash or in-kind for which a person performs a service. Sources of countable earned income include:

a. Bonuses

b. In-kind income for work (e.g. shelter received for work)

c. Longevity pay

d. Wages, salaries, tips (before taxes)

e. Work-study

f. Self-employment/farm income

g. Severance pay

5. Countable Unearned Income

Unearned income is income received by an individual for which no service is performed. Sources of countable unearned income include:

a. Armed forces allotment and receipts from a deployed parent

b. Child support/alimony (minus $50) (E&P Appendix B) Child support arrearage payments are counted as unearned income in the month the payment is received.

c. Disability insurance (sick pay)

d. Dividend payment

e. General Relief

f. Income for continuation payments

g. Income from relatives, income deemed from relatives/stepparents

h. Inheritance pay

i. Interest, money payments

j. Money from churches, charitable organizations, friends, lodges, or unions

k. Retirement or Pension (union, private or government)

l. Social Security Benefits (non-SSI)

m. Striker's Benefits

n. Unemployment Compensation

o. Veteran's Benefits

p. Worker's Compensation

6. Exempt Earned and Unearned Income

Certain types of earned and unearned income are exempt (not counted) in determining if the child meets the financial need requirement for AFDC eligibility. Sources of exempt earned and unearned income include, but are not limited to:

a. Supplemental Security Income (SSI)

b. Food programs, such as, food stamps, WIC, USDA food surplus, etc.

c. Payments for home energy assistance and rental subsidies

d. Loans or grants administered by the U.S. Commissioner of Education

e. Foster Care payments

f. Adoption Assistance payments

g. JTPA earned income of full-time students

h. Students employed less than full-time

i. JTPA unearned income

j. The earned income of a child who is a student

k. Income tax refunds and earned income tax credit (EITC) payments

l. Trust funds not available on demand

m. Cash to pay for shared living expenses (from a person not in the AFDC group)

n. Loans, including reverse equity loans, endorsed for repayment

o. TANF Tribal Allotment

7. Lump Sum Payments

A lump sum payment is a non-recurring or advance payment not earmarked for a specific purpose. Lump sum payments are counted as income in the month received. Examples of lump sum payments are retroactive SSI and SSA benefits, stock dividends, life insurance settlements, etc. CFS uses lump sum payments to recover the foster care and medical expenditure incurred on behalf of a child. Any balance remaining from the lump sum payment shall be placed into a wards account or a trust fund for the child. Dedicated awards or trust funds may not be used to support the cost of care. (See E&P Appendix B for instructions to calculate child support income.)

8. Deeming Step-parent's Income

If a stepparent lives in a parental removal home, the worker has two options. Deem the stepparents gross income where a portion of the stepparent's income is deemed towards the child removed from the home.

Option One:

Deeming means determining the amount of the stepparent's income to be included in the total gross income available to the child.

Option Two:

Include the stepparent and any stepchildren residing in the removal home at the time the child was removed in the AFDC group, and include their full countable income and resources. Use option (2) when the stepparent has little or no income.

To determine the Option one deemed income amount, complete the following steps:

Step 1: Determine the stepparents gross income (earned and unearned)

Step 2: Determine the AFDC group size for the stepparent. The AFDC group size for the stepparent consists of the stepparent and any of the stepparents birth or adoptive children who is a minor living in the home, or out of the home, who are not children (birth or adoptive) of the other spouse in the household. The stepparent is not counted in the AFDC group size for the child removed from the home but the income of the stepparent is deemed to the child.

Step 3: Subtract $90.00 earned income work deduction if the stepparent is working.

Step 4: Subtract the 100% Need Standard amount for the stepparents AFDC group size. Stepparent living environment is always non-shared.

Step 5: Subtract any child support/alimony which the stepparent is paying.

Step 6: The remaining income is the income to be deemed (added) to the child's available income.

9. 100% AFDC Need Standard Income Test

The worker must determine the members of the AFDC group in the removal home and the total income available for support of the child. The AFDC group is explained at 5911 F. The income attributable to the child is explained at

If the child is removed from a parent (birth or adoptive) include the income of the child, parents (birth or adoptive), and the siblings (birth, adoptive and half) residing in the same household (removal home) as the child at the time of removal.

If a stepparent is in the same household, the worker shall determine between Option One or Option Two, whichever one is more likely to result in the child meeting the income limits:

Option One:

The stepparent (and stepchildren) are not included as part of the AFDC group but the stepparents income is deemed (only a portion of the income is counted) as available towards the child, or

Option Two:

Include the stepparent and stepchildren residing in the same household as the child at the time of removal (removal home), as members in the AFDC group. Their full countable income and resources must be included in determining if the child meets the income limits. (Generally, Option Two is better when the stepparent has very little income and resources.)

If the child is removed from a non-parent specified relative include only the income of the child and any siblings (birth, adoptive or half) income residing in the same household (removal home) as the child at the time of removal.

The child's AFDC group must pass the 100% income test, discussed below, for determining if the child meets the 100% AFDC Need Standard for financial need under the AFDC relatedness criteria.

10. Income Calculation for the 100% AFDC Need Standard

The child's AFDC group's countable earned income minus allowable deductions must not exceed the 100 % AFDC Needs Standard chart. The AFDC Needs Standard for the AFDC group size is provided in E&P Appendix A. AFDC relatedness is determined by subtracting allowable deductions from the countable earned income (not less than zero), and adding this adjusted earned income to the countable unearned income and any deemed stepparent income. See Form 4030B for a chart that guides this calculation. Allowable deductions subtracted from earned income include:

a. Work Allowance:

subtract $90.00 work expense allowance from each employed persons earnings in the AFDC group.

b. $30 and 1/3 Disregards:

subtract $30 and subtract 1/3 of the gross adjusted income. (To get 1/3 of the adjusted income, multiply the adjusted income by .333, for example; 1500 x .333 = 499.50, thus 499.50 is 1/3 the amount of the adjusted income that should shall be deducted from the income.)

c. Day Care

If a person in the AFDC group is paying for day care for a child or an adult member of the AFDC group, the day care expense may be deducted. The amount of day care expense that may be deducted includes per child:

i. $175 for children age 2 and over.

ii. $200 for children under age 2.

If the resulting income does not exceed the 100% AFDC Need Standard in E& P Appendix A, the child meets the income requirement for AFDC eligibility.

Form CFS 4030 B: Initial IV-E Eligibility Determination provides step by step directions for the 100% Income Test.

J. Infants of Teen Mothers

In order for the infant of a teen mother placed in foster care to be 'automatically' IV-E basic eligible, the following criteria must be met:

1. The infant is not in SRS or JJA custody
2. The infant is placed together in the same family foster home or group home.
3. The Child Welfare Contract Management Provider is paying for the cost of the infant's care in the placement.

The Child Welfare Contract Management Provider service delivery system does not include providing foster care payments to the provider of the infant's care. JJA service delivery system may encounter the above circumstances.

If an infant comes into state custody and remains placed with the teen mother, IV-E regulations would view the child as not being removed from a parent or specified relative. The EP segment begins at custody and the eligibility is GA.

If the infant comes into state custody and is placed separately from the teen mother, both the infant and the teen mother may be eligible for IV-E in their own right. The infant may be eligible for IV-E following completion of an eligibility determination. The infant's EP segment begins at SRS custody and eligibility is determined for IV-E based on the teen mother's income and resources.

5912 IV-E Payment Eligibility

At the time of the initial determination, if a child met initial IV-E basic eligibility a set of three conditions must be met for a child to meet IV-E payment eligibility. The three payment eligibility criteria at initial determination are:

1. Judicial determination of "reasonable efforts" (Section 5912 A.)
2. Payment eligible placement (5912 B) and
3. Consideration of SSI benefits

If the child met initial IV-E basic eligibility, the eligibility worker will need to determine if the child meets initial IV-E payment eligibility. A child who is initial IV-E basic eligible AND who meets all of the IV-E payment eligible criteria in meets IV-E Payment Eligibility.

IV-E Payment Eligibility Period
Title IV-E payment eligibility may fluctuate from month to month. A child may lose and regain payment eligibility, depending upon the circumstance in the placement, or in obtaining the required judicial language determination while the child remains in State custody. The loss of IV-E payment eligibility does not deprive the child of future IV-E payment eligibility, nor does it affect IV-E basic eligibility.

IV-E Payment Eligibility Effective Date
The IV-E payment eligibility effective date is the first day of the month in which all of the IV-E payment eligibility criteria are met, including having been determined IV-E basic eligible. A child who is IV-E payment eligible during any part of the month is payment eligible for the entire month. The exception to this IV-E regulation is placements which are IV-E payment ineligible for any reason; the child is IV-E payment ineligible on a daily basis when staying in the ineligible placement.

A. Initial IV-E Payment Eligibility - Judicial Determination

There must be a custody court order at the initial removal from the home that contains judicial language to the effect that "reasonable efforts were made to prevent removal of the child" or "the situation precluded (was not possible to provide) reasonable efforts" (per 45 CFR 1355.20).

1. This judicial language requirement for "reasonable efforts" should not be confused with the "contrary to welfare/best interest" judicial language requirement for initial IV-E basic eligibility.

2. Affidavits or nunc pro tunc orders are not accepted for meeting the reasonable effort judicial language requirement (per 45 CFR 1356.21). This requirement is effective March 27, 2000.

3. Court orders referencing the State law are not accepted for meeting the reasonable effort judicial language requirement (per 45 CFR 1356.21). The judicial language must be stated in the court order.

B. Initial IV-E Payment Eligibility - Payment Eligible Placement

1. Eligible payment placements include:

a. KDHE licensed or approved foster home. Relative homes shall be approved by KDHE as meeting licensing standards in order to be considered a IV-E eligible placement.

b. The entire month, in which the placement obtains a full license and provided the child is continuously placed, the child is payment eligible for entire month.

c. A private group home, child care facility, shelter care facility or secure care facility licensed by KDHE and;

d. A publicly operated (by a branch of government) child care group home or child care facility licensed for no more than twenty-five (25) children.

2. Ineligible payment placements include:

a. Medical facilities (including PRTF)

b. Unlicensed Foster Homes

c. Temporary licensed Foster Homes

d. Detention facilities

e. Forestry camps

f. Publicly operated child care group homes with more than twenty-five (25) children

g. Training schools

h. Locked and secured facilities used primarily for detention purposes

i. Specific court ordered placement

j. Adoptive placements upon signing of the Adoption Placement Agreement (APA)

C. IV-E Payment Eligibility - Consideration of SSI Benefits

SRS contracts with Kansas Legal Services (KLS) to carry out the SSI application process for disabled children who enter foster care and do not already receive SSI. The Child Welfare Contract Management Provider refers the child to KLS and sends any background information they may need. While waiting for Social Security to determine if the child is eligible for SSI, SRS is responsible for the child's maintenance cost of care. The child's payment eligibility must be coded AG during this waiting period. If the child is determined SSI eligible a lump sum SSI benefit may be received, and a request can be made to Social Security to apply those back benefits to the cost of care for the application months. (See E&P Appendix D, WARDS User's Handbook, General Instructions, and Item 1 for further details.)

SRS uses the SSI payment to offset the cost of care for children. SSI eligible children remain basic eligible for IV-E. SSI eligible children are IV-E payment ineligible. Notify Social Security Administration when a child is placed in a PRTF acute psychiatric or state hospital. SSI benefits may be reduced during the time a child is placed in these settings. SSA will calculate any reductions.

If SRS is not granted representative payee status while a child is in state custody and placed out of home, and a third party is granted representative payee status, such as a foster parent or relative, the child is IV-E payment ineligible. The third party is responsible for completing the annual Representative Payee report.

SRS may request suspension of SSI benefits for up to one year. An IV-E basic eligible child may resume IV-E payment eligibility only if SSI benefits are suspended. Only the Social Security Administration may suspend the SSI benefits. Should SSI benefits be received by a third party while the child is in state custody and in out of home care, the benefits are not suspended by the SSA.

5913 Cases Pending an IV-E Eligibility Determination

Although an initial determination is required when a child enters out-of-home placement, the information necessary to make an IV-E determination may not always be available at the time of the out-of-home placement. The basic eligibility determination shall be postponed pending receipt of the required information. Any case identified as pending requires a retrospective re-determination of payment eligibility for the months the case was pending. The retrospective re-determination may be completed by updating, initialing and signing the CFS 4030A, B and/or the CFS 4031A, B and updating the FACTS EP segments.

Most often the information needed will be wage data. It is very important that the worker who gathers the data on the CFS 4030A, does a thorough job of collecting income and resource information. If the worker is unable to get this information due to the parents being uncooperative, the person making the determination will have to rely solely on the computerized wage data and/or supporting documentation of the family's situation from conversation with the SRS or JJA case managers. Computerized wage data is not current and is usually one or two quarters behind the current quarter. In these situations the worker will need to briefly delay making an IV-E determination pending the availability of the requisite financial data and/or additional supporting information obtained from conversations with the SRS or JJA case managers. The worker may also need to temporarily pending an IV-E determination for cases in which a copy of the court order has not been received to verify that it contains the necessary contrary to the welfare or reasonable efforts language.

If it becomes necessary for the worker to pend a determination, enter the pending code into KAECSES (PE) Enter GA01N/GAB PEN as the EP segment in FACTS for pending cases. When making a determination on a case that was pending, make the child eligible retroactively beginning with the first date the child meets all the IV-E criteria, not from the date of the determination.

At any time during the episode of care, a case may be corrected if information becomes available to determine the child is IV-E eligible.

5914 Ongoing IV-E Eligibility

Children determined to be IV-E eligible must have a redetermination at least every 12 months to ensure they are eligible for on-going IV-E basic and payment eligibility. The Child Welfare Case Management Provider (CWCMP) or Community Supervision Officer (CSO) shall complete the CFS 4031 A. The CFS eligibility specialist shall complete the CFS 4031 B. The CFS 4031 A and CFS 4031 B are both necessary to evaluate on-going IV-E basic and payment eligibility requirements.

A. Re-determination Basic Eligibility

Upon re-determination, a child continues to be IV-E basic eligible if all of the following criteria are met:

1. The child meets the age requirement for the IV-E program as specified in 5911 D.

2. The child continues to be in the custody of the state; and

3. The child is placed at home less than six months with continued SRS or JJA custody (per 45 CFR 1356.21).

A child is never payment eligible when living in the home of a parent or returned to the removal home of a non-parent specified relative.
For IV-E purposes, when a child returns to the removal home from foster care, whether to a parent or to a non-parent specified relative, the child is no longer in foster care. Children who are returned to a parent or specified relative removal home and identified by the CWCMP as achieving permanency are considered reunified and the payment eligibility (EP Segment) ends in FACTS. CWCMP's stop reporting placements when the child achieves permanency.

Children who are returned to the removal home of a non-parent specified relative and permanency is not achieved, are considered a placement by the CWCMP. Payment eligibility (EP Segment) continues in FACTS until permanency is achieved.
If the child's placement at home lasts longer than six months, with continuous custody to the state agency, the child loses IV-E basic eligibility at the end of the six months. If the child returns to out-of-home care under a new custody order., a new initial IV-E eligibility determination shall be made. The initial custody order does not need to be set aside or dissolved by the court.
Kansas statute provides for obtaining necessary judicial determinations of contrary to the welfare and reasonable efforts when a child is returned home with continuous custody and removed to out of home care following six months or longer.

1. Emergency removal

When a child is in imminent danger and the family is unable to take steps to assure the safety of the child, the child shall be removed and notification shall be sent to the court the next working day of the circumstances which threatened the child's safety and required removal. The notification shall request the court make a new judicial determination reasonable efforts were made or an emergency existed which required the child's removal and it is contrary to the welfare of the child to remain in the home.

2. Non-Emergency Removal

When a removal does not meet the emergency standard a 30 calendar day written advance notice of the intent to remove the child shall be sent to all parties. The written notice shall request the court make a new judicial determination reasonable efforts were made and it is contrary to the welfare of the child to remain in the home.

The court may respond by setting a hearing no later than 14 calendar days from the date of notice or issue the judicial determinations without a hearing. The statute allows the court 45 calendar days from the date of notice to issue the required judicial determinations.

The month in which the notice was provided to the court is the eligibility month for IV-E eligibility determination. A new petition is not required.

If the placement is less than 6 months, the child retains their initial eligibility determination.

B. Re-determination - Ongoing IV-E Payment Eligibility

A child may lose and regain payment eligibility, depending upon changes in, the placement type, or timeliness of a permanency hearing while the child remains in state custody.

Upon re-determination, a child meets IV-E payment eligibility if all of the following criteria are met:

1. Continued IV-E Basic Eligibility

The child must continue to be IV-E basic eligible.

2. Judicial Determination that Reasonable Efforts Have Been Made To Finalize the Permanency Plan (REPP)

A judicial determination of reasonable efforts the state agency has made to finalize the permanency plan must be made at least every twelve (12) months.

IV-E payment eligibility ends at the end of the month that the permanency judicial determination was due and not held. IV-E payment eligibility resumes the first of the month in which the permanency judicial determination is made.

3. Payment Eligible Placement

Once the child enters a payment eligible placement, IV-E payment eligibility may resume if all other criteria are met.

Children placed in an adoptive home, pre finalization, enter the service source code ADH.

4. Consideration of SSI Benefits

The worker must review the monthly cost of out of home care for each case in the WARDS system. SSI benefits may not exceed the cost of out of home care on a month to month basis.

Accumulated balances in the WARDS system whose source is non-SSI benefits, are considered a resource available to the child on an ongoing basis. Non-SSI benefits paid in a lump sum are considered as unearned income to the child in the month they are received. Thereafter, accumulation of the regular SSI benefit is considered a resource available to the child.

Eligibility specialists shall enter SSI when a child is SSI eligible and receiving SSI benefits without regard to the child's foster care maintenance eligibility. In order to make an accurate IV-E administrative claim, the service source code SSI overrides all other eligibility service source codes and EP Action codes. CFS will make the IV-E administrative claim based on the SSI code.

Children who are both SSI eligible and in an ineligible placement, always enter the service source code, SSI. Children are IV-E payment ineligible for multiple reasons, CWCMP will submit codes CF077, CF077.1, or CF077.2 on the Acknowledgment, indicating ineligible placement to assist eligibility specialists in making this determination. CFS eligibility specialists shall select the service source code in order of priority on the CFS 4032.

5915 Desk Review at Case Closure

At the time of closure of a foster care case, complete a desk review of ongoing payment eligibility to assure all the months of eligibility since the previous re-determination are accurate. Document in the case log that all eligibility factors have been reviewed. Factors to be reviewed are age of the child, judicial determination to finalize a permanency plan, eligibility of placement, consideration of the child's income and resources, continued deprivation in the removal home, and consideration of any SSI benefits the child may have received. Documentation of ongoing months of eligibility is required at case closure review. A CFS 4031 A and B are not required if the case closure occurs less than 12 months following the last re-determination. Any past due re-determinations are to be completed using the CFS 4031 A and B at case closure.

5916 Title IV-E Adoption Assistance

If adopted, children with special needs may be eligible to receive payments to support one-time and on-going assistance costs associated with the adoption. These payments are made to facilitate the adoption by assisting the adoptive parents in the costs of the child's care after adoption.

The IV-E review of adoption cases is a two part review.

The first part of the review determines IV-E eligibility at the time the adoption proceedings are initiated, considered to be the date of the adoptive placement agreement.

The second part of the review assures that the child was free for adoption; that the child had special needs which prevented placement without a subsidy; and that the agreement to provide adoption assistance, including necessary assurances by the state, was made prior to finalization of the adoption. When the child is determined to be eligible for IV-E adoption assistance, the eligibility begins on the date of the assistance agreement.

The IV-E Eligibility for Adoption Assistance form (CFS 4019) should be completed as follows. Each requirement is tested in turn. If the response is no to any requirement, the child cannot be IV-E eligible for adoption assistance and the review is finished. Copies of all documents used to fill out this form when determining IV-E eligibility for Adoption Assistance must be attached to the CFS 4019 and placed in a separate adoption assistance folder in both the financial section of the file and in the child's permanent case file.

Establish the date that the adoption proceedings were initiated as the date the adoptive placement agreement was signed.

The child must be free for adoption as a result of either a court ordered termination of parental rights (PRT) or a voluntary relinquishment of rights by parents. A copy of the PRT or voluntary relinquishment agreement will document this criterion.

The purpose of IV-E adoption support is to facilitate the adoption of "hard to place" children. The child must meet at least one special need factor as defined by the state. Documentation is found on the CFS 4024 (Referral for Adoption Assistance). Children who are eligible for SSI in the month the APA is signed are eligible for IV-E adoption assistance.

A. Determine if the child was IV-E basic eligible using the foster care documentation. Determine if the child was IV-E basic eligible in the month the adoptive placement agreement was signed.

B. Place a copy of all documentation required for IV-E eligibility determination of adoption assistance in a separate adoption assistance folder in both the financial section of the file and in the child's permanent case file.

Documents included shall be:

1. the CFS 4019 Eligibility for Adoption Assistance checklist

2. a copy of the adoption petition; the PRT or voluntary relinquishment agreement

3. the CFS 4024 Referral for Adoption Assistance

4. the Adoption Placement Agreement

5. the CFS 4022 Adoption Assistance Agreement

6. the child's social history or case planning documentation related to the determination of the child's special needs

7. the family assessment

8. documentation of attachment to a foster parent, placement with a relative, or individual recruitment plan

9. case planning conference notes related to the reasonable efforts made to place without adoption assistance

10. all foster care IV-E determination documentation

11. documentation of eligibility or receipt of SSI.

In order for a child to meet Title IV-E Adoption Assistance eligibility pursuant to a voluntary relinquishment, the child must have been in the custody of the Secretary and received an IV-E foster care maintenance payment. A judicial determination that return home is contrary to the welfare of the child shall be made within six months of placement in the adoptive home and prior to the finalization of the adoption. A judicial determination of reasonable efforts to prevent removal or reunify a family is not required. If the court order merely sanctions the voluntary relinquishment rather than determining that return home is contrary to the welfare of the child, the child is not IV-E Adoption Assistance eligible.

1. If the adoption was placed through a private licensed child placing agency, IV-E eligibility determination shall also be made using all the required criteria. An IV-E foster care maintenance payment must be made. A judicial determination of contrary to the welfare of the child shall be made within six months of placement in the adoptive home and prior to finalization of the adoption. A judicial determination of reasonable efforts to prevent removal or reunify a family is not required.

2. PRT may only serve as the deprivation factor when determining eligibility for IV-E Adoption Assistance at the time the adoptive petition is filed.

3. The child was eligible for Supplemental Security Income (SSI) prior the finalization of the adoption.

When all criteria are met, the child is IV-E adoption assistance eligible.

Record the dates the placement agreement and assistance agreement was signed.

Eligibility begins on the date the assistance agreement is signed. This date is noted on the agreement.

Sign and date the CFS 4019 - Eligibility for Adoption Assistance form.

Complete the adoption finalization date and adoptive name on the CFS 4019 once the adoption has been finalized.

Once financial eligibility is established for IV-E adoption assistance no financial redetermination is required for IV-E adoption assistance unless the adoption has not been finalized within six months of the initial IV-E adoption assistance determination (see PPM section 6280).

Eligibility for Adoption Assistance in Cases of Dissolved Adoptions
Children with special needs who had been previously eligible for federally subsidized adoption assistance and IV-E, and who again become available for adoption because of the dissolution of their adoption or death of their finalized adoptive parents, continue to be eligible for assistance under IV-E in a future adoption. No additional criteria must be met other than the child remains special needs. This provision applies only to children whose subsequent adoption occurs on or after October 1, 1997.

Eligibility for IV-E in Cases of Set Aside Permanent Guardianship
Children returned to foster care from the home of a permanent guardian shall have IV-E basic eligibility determined for the foster care episode of care. In order to be determined IV-E basic eligible the permanent guardian must be a specified relative. Children returned to foster care from the home of a permanent guardian who is not a specified relative shall be determined to be GA foster care eligible because they do not meet the requirement of being removed from the home of a specified relative.

Children adopted by a permanent guardian may have eligibility determined for IV-E Adoption Assistance based on the criteria in this section. Systems Management of Eligibility Segments

1. Pre-Finalization of Adoption

IV-E foster care payment eligibility status must be maintained in FACTS beginning upon the signing of the adoptive placement agreement until the adoption is finalized. Upon notification that a foster child has been placed with an adoptive placement agreement:

Establish eligibility for adoption assistance, per the adoption assistance agreement, and open the assistance case in KAECSES per the adoptive assistance agreement and Eligibility and Payment Manual Section 4000. The foster care financial case is closed in KAECSES.

Continued receipt of Medicaid must be a part of an adoption assistance agreement. Medicaid and adoption subsidy must be managed as AS in KAECSES. If no adoption assistance agreement is entered, no case is open in KAECSES.

If there is an Adoption Assistance Agreement, determine whether the child will be Federal or State eligible for adoption assistance.

2. If eligible for Federal adoption assistance, a new EP segment is to be entered in FACTS with the EffDate being the date of the Adoption Assistance Agreement and a Service Source code of ADH. (For FACTS entries, see E&P Section 3980.)

3. If eligible for State adoption assistance, no new entry will be required in FACTS at the time the Adoption Placement Agreement is signed.

Managing adoption assistance cases in this manner neutralizes any budgetary impact on SRS and is in the best interest of the child. Children who are eligible for IV-E adoption assistance receive federal participation in their placement through the adoption program. The child's previous IV-E foster care custody episode is maintained should the adoptive placement disrupt prior to finalization. The child's IV-E eligibility for any future foster care episodes is maintained to assure continued IV-E adoption assistance eligibility in future adoptive placements.

Management of Disrupted Adoptive Placements (Not yet Finalized).
Adoptive placements which disrupt prior to finalization:

1. Assess with the social worker or regional Adoption Contract Specialist whether or not the adoption assistance case will be maintained. Per the PPM, in order for the adoption assistance to be maintained the family must engage in a case plan toward reunification. Based on this decision, the assistance case may continue or terminate during the child's episode of foster care. If the decision is to terminate the adoptive assistance case, close the adoptive assistance case in KAECSES and follow the procedures in Section 4300.

2. Open the foster care case in KAECSES for Medicaid. Medicaid must be removed from the AS case.

3. Determine the correct SvcAct and SvrSrc Codes to reflect the child's basic and payment foster care eligibility. The child may regain payment eligibility for IV-E during the episode of foster care. Consider the following:

a. Children who re-enter foster care prior to finalization of an adoption require a judicial determination of reasonable efforts to finalize a permanency plan every 12 months from the date of the last judicial determination of reasonable efforts. Prior to the finalization of an adoption, children remain in continuous custody of the Secretary

b. Children may receive an SSI payment and an IV-E adoptive assistance payment simultaneously. Social Security will reduce the SSI amount by the monthly subsidy payment. Adoptive parents may request to (or continue to) be payee of the SSI benefit for the child between the time the adoption subsidy agreement is signed and the adoption is finalized.

Once the adoption is finalized, the adoptive parents' income is considered when Social Security calculates SSI eligibility, usually making the child no longer eligible for SSI.) Regardless of whom the payee is, when the child is IV-E basic eligible during the foster care episode and eligible for SSI, code the child "AG01N" with a Service Source Code of "SSI". The child is payment ineligible for IV-E foster care regardless of who is the SSI payee. GA basic foster care episodes continue to be coded "GA01N" with a Service Source Code "GAB" or "SSI" if SSI eligible, regardless of who is payee.

1. All payment eligibility issues must be considered but are not based on the circumstances of removal from the adoptive family not yet finalized.

a. No new initial judicial determinations are required (remaining in the home is contrary to the welfare of the child and reasonable efforts have been made to prevent the removal of the child) when the adoptive placement is not yet finalized.

b. No determination is needed of basic IV-E eligibility.

A re-determination of IV-E foster care eligibility must be completed no less than every 12 months from the previous determination/re-determination via the CFS-4031A and CFS-4031B.

Management of Finalized Adoptions.
Upon finalization of adoption the episode of custody, and foster care eligibility ends in FACTS the day prior to finalization.

Children who re-enter foster care following finalization of adoption shall have new eligibility determinations for IV-E foster care. SRS must have custody and remove the child from the adoptive home post finalization in order to begin a new episode of care. Judicial determinations of contrary to the welfare to remain in the home and reasonable efforts to prevent removal must be obtained.

The adoption assistance payment may continue to the adoptive family during the episode of foster care. The receipt or suspension of the adoption subsidy does not impact the IV-E payment eligibility status of the foster care episode.

Placement in foster care is not grounds to unilaterally terminate an Adoption Assistance Agreement. As long as the family is working toward reunification

of the child, assistance can continue. Referrals are not to be made to Child Support Enforcement. (PPM 6264) Assess with the social worker or regional Adoption Contract Specialist whether the adoption assistance case will be maintained. However, the adoption assistance case cannot be closed or the amount of assistance decreased without the mutual agreement of the family (reference PPM 6280 C). If there is to be a decrease in the Adoption Assistance amount, a revised Adoption Assistance Agreement would be required.

The Adoption Assistance Agreement may be terminated early only under two conditions:

1. Documentation that the family is no longer legally responsible for the child (Parental Rights Terminated or Relinquished) or
2. Documentation the family is no longer supporting the child. Reference PPM 6264 and E&P 4300 for further explanation.
3. If the Adoption Assistance Agreement is to terminate, follow the procedures noted in Section 4300.
4. Determine IV-E foster care eligibility based on Section 3200.
5. Open the foster care case for Medicaid. Medicaid must be removed from the AS case.
6. Enter the accurate SvcAct and Service Source Code in FACTS based on the IV-E foster care eligibility determination.

Note: While SRS may apply to be the payee for SSI, depending on the situation, the adoptive family may continue to receive SSI benefits on behalf of the child who enters foster care post finalization of the adoption. Regardless of whom the payee is, if the child is basic IV-E eligible during the foster care episode, code the child "AG01N" with a Service Source Code "SSI". If the child is GA eligible during the foster care episode, code the child "GA01N" with Service Source Code "SSI".

Upon reunification with the adoptive family, the child is considered returned home.

5917 General Assistance Foster Care (GA-FC)

Once all information is available and a child is determined basic ineligible for IV-E, foster care payments shall be made using GA-FC.

All of the following conditions must be met:

Not Eligible for Title IV-E:
The case record must document the reason the child is not eligible for Title IV-E.

Desk Review of GA Foster Care

Every 12 months from the date of the initial determination that a child is GA foster care eligible, a desk review shall be conducted to document the child continues in foster care and in the custody of the state. The date of the desk review shall be entered in KAECSES to document the child remains in SRS custody and in out-of-home placement.

Entering Basic and Payment Eligibility for GA-FC on KAECSES
When a child has been found to have GA-FC eligibility this is to be shown on the FOCA screen in KAECSES. The Funding Type code that should be entered on FOCA and on FCPD is "GA". Reference Section for explanation of the FACTS date entry for basic and payment eligibility.

5918 Medicaid Requirement for Children in Out of Home Care

Children who are in the custody of SRS or JJA and removed from their home are eligible for Foster Care Medical assistance up to the age of 21.

Recipients of foster care maintenance and children receiving adoption support payments are exempt from the Medicaid requirement to verify citizenship and identity in order to receive Medicaid. For children to be IV-E eligible, the child still must meet the citizenship requirements listed in Eligibility and Payment manual section 3224.

To provide a foster care medical card, a Person/program alert must be entered on the KAECSES PRAP screen. This code documents the individual's identity/citizenship verification status.

A. For individuals whose identity/citizenship has been verified, the code is IM (Verification is met by the completion of the EES 3850 and the documents verifying citizenship and identity is attached to the form and is located in the eligibility packet.)

B. For individuals whose identity/citizenship is not verified through the above method, the code is IC

C. If verification is later provided, the code shall be changed from IC to IM

D. Eligibility is based on the fact the child’s custody and removal status makes them a family unit of one.

Notify EES and/or HealthWave
Notify EES and/or HealthWave immediately to close the medical card when a child comes into foster care and is already receiving Medicaid, to enable the child to be eligible for foster care Medicaid.

Children in SRS or JJA custody

Children in state custody who are placed with a non-parent relative shall receive medical card from CFS.

Foster children placed in a State Institution
Foster children placed in a State Institution or State Hospital shall have a medical card issued by CFS.

Medicaid Ineligible Placements
Medicaid ineligible placements include detention centers, juvenile correctional facilities, and jails and sanction houses

5919 Medicaid Eligibility Requirements-Reunification Services

When a child returns to the home of parents, including adoptive parents, they lose their Foster Care Medicaid eligibility. However, they may qualify under an adoption subsidy agreement, a Regional CFS Program Administrator Extension or Director for Children and Family Services Extension. If the child continues to need medical treatment and the parents cannot pay, the following steps are taken:

A. Document Need for Continued Treatment.
SRS staff or JJA Case manager shall document in the case file the need for continued medical treatment indicating the lack of medical coverage may be a barrier to the child's return home.

The parents or relatives should apply for medical coverage for the child through Economic Assistance or HealthWave, if the child is not covered by private medical insurance. The application shall be made on the day the child returns home. If the child has an urgent medical need, it shall be noted on the front page of the application. In order to expedite the eligibility determination, the following documentation must be attached:

1. Proof of Citizenship
2. Proof of Identity
3. Proof of Income
4. Proof of Other Health Insurance (if applicable)

Documents that meet the requirement can be found in KEESM Manual Appendix 12

B. If the Medicaid application is denied
If the Medicaid application is denied by the Economic Assistance Specialist or HealthWave Clearinghouse for a child served by SRS, the social worker shall forward written documentation of the continued need for medical coverage to the

Regional CFS Program Administrator for approval. The approval for the extension along with the documentation shall be forwarded to the CFS eligibility specialist for the eligibility file.

If the Medicaid application is denied by the Economic Assistance Specialist or HealthWave Clearinghouse for a child served by JJA, the Case Manager shall forward written documentation of the continued need for medical coverage to the JJA administrator. The JJA Administrator may approve an extension. The approval for the extension along with the documentation shall be forwarded to the CFS eligibility specialist for the eligibility file.

The Regional CFS Program Administrator or JJA Administrator may approve an extension for up to six months. Permission for extensions beyond six months shall be requested from the Assistant Secretary for Children and Family Services, who may grant such as needed.

5920 Purchase Limitations and Guidelines for Medicaid

Medicaid pays for eligible services furnished by enrolled providers. Specific services covered, prior authorization requirements, and the proper payment rate are established by the Kansas Health Policy Authority. They are reviewed and adjusted periodically.

A. KAN Be Healthy (KBH)
Kansas' name for the federally mandated Early and Periodic Screening, Diagnosis and Treatment (EPSDT) program is Kan Be Healthy (KBH). Kan Be Healthy is a preventive health screening program for Medicaid recipients under age 21. These screenings include vision and dental. If the children have been screened and/or their screenings are up-to-date, they are eligible for expanded medical services.

All children who are eligible for Medicaid and are receiving services through CFS shall be enrolled in the Kan Be Healthy program. These children shall receive timely screens.

Screening dates for the children are available in iC- MMIS.

B. Services Delivered Outside of Kansas
May require a prior authorization. Many services have a limited geographical area in which they may be delivered, in order to qualify for payment, normally border cities. See the Kansas Medical Services Manual for information.

C. Third Party Liability (TPL)
If a child receiving services through SRS has other health insurance, the insurance company name will appear on the child's Medicaid card, based on iC- MMIS data entry by SRS staff. SRS staff is responsible for obtaining the information concerning the

child's third party insurance (via MS-2505). Medical providers must first bill other health insurance before they can bill Medicaid.

D. Payment of Medicaid Services Provided by Non-Medicaid Enrolled Provider
A special payment procedure is utilized when Medicaid reimbursable medical services and/or equipment are provided by a non-Medicaid enrolled provider of that service. This special payment procedure is only authorized for children in the custody of the Secretary in out of home placement or children receiving Adoption Support Payments. Examples of circumstances in which this occurs:

1. child is traveling out of state and experiences a medical emergency
2. child is in-state and experiences a medical emergency which requires them to seek treatment at the nearest provider and that provider is not an enrolled Medicaid provider.

Prior to initiating the special payment procedure, the medical provider shall be contacted to find out if they are willing to become a Kansas provider for the services provided.

If so, the medical provider completes the process to become an enrolled Medicaid provider, and the provider submits the charges to MMIS.

If the provider is not willing to become an enrolled Medicaid provider, SRS staff complete the CFS 4009 (Request for Medical Review or Payment on Behalf of Foster Children and Children Covered by Adoption Support Agreements) and send, along with the required attachments, to the Reintegration/Foster Care Program Manager in Children and Family Services. Once reviewed by this Program Manager, the form and a recommendation in regard to payment shall be sent to Health Policy and Finance staff for final determination.

If approved for payment, the medical provider will be reimbursed the standard amount allowed by Medicaid for the services provided. Services provided which are not included in the Medicaid State Plan shall not be approved for payment through this process. Payment can only be made to medical providers; including doctors, hospitals, pharmacies, and medical equipment companies. Payment cannot be made to an individual to reimburse them for payment of these medical services. Resource families should inquire of the medical provider if they are an approved Medicaid provider for the service/medication/equipment prior to the provision of the service. The Medicaid Liaison in each of the Regional SRS offices can provide information about enrolled providers in the state.

5921 Dependent Children of Minor Mothers

A dependent child is also automatically eligible for Medicaid through EES, while living with his/her Medicaid eligible mother in foster care. The placement in which the mother and child reside must be a Medicaid eligible placement.

When a child in foster care gives birth:
The CFS worker must immediately request that EES staff open the newborn MP using a start date within the newborn's birth month. A Medicaid application is not required for these infants. The newborn of a foster child whose parent receives Medicaid has automatic Medicaid eligibility immediately after birth for at least the birth month. This is true even when the infant's name, address, or SSN is not known. When the infant's name is not known, open the Medicaid case using the mother's last name and Babyboy or Babygirl until this data is known. A denial notice will be received if entered incorrectly.

EES staff will assist CFS staff by approving the infant's Medicaid eligibility. CFS shall not open the infant FC, AM because the infant is not a foster child. For babies who are already a few months old, the MP open date must be back-dated to their birth month.

Newborn Request Notices are generated by Medicaid when CFS fails to have EES open the infant of a foster child MP immediately. This happens when the infant is taken to a medical appointment using the mother's medical card. Medicaid denies the claim because the infant must have his/her own medical card. Federal regulations require that newborn's of children in foster care be given their own Medicaid ID number during their birth month in order to avoid Newborn Request Notices.

When a Newborn Request Notice is received, EES central office staff notifies CFS central office, requesting that the regional CFS

5922 Waiver Information

Medicaid waivers were implemented to provide services beyond what is generally covered by Medicaid. These services are designed to prevent children from being placed in an institution or State Hospital. Children receive services such as Children's Residential Services, Supportive Home Care, Respite Care and Environmental or Adaptive Equipment through a Medicaid Waiver.

A. Home and Community Based Services (HCBS)
The Medicaid waivers are all considered HCBS waivers. The following is a list of HCBS waivers potentially available to youth served by CFS:

1. Physically Disabled - HCBS/PD
2. Mental Retardation or Development Disabilities - HCBS/MRDD
3. Technology Assisted - HCBS/TA
4. Head Injury - HCBS/HI
5. Severely Emotionally Disturbed - HCBS/SED

For more information on waiver eligibility and services contact regional EES staff.

B. Waivers and Child Welfare Contract Management Provider
CFS Child Welfare Contract Management Provider are responsible for referring youth under their case management to the appropriate community resource for a clinical

evaluation if they believe the youth may need to utilize the HCBS waiver program. The Child Welfare Contract Management Provider shall also participate in and support implementation of the waiver plan of care, while coordinating total services to the child.

1. Children placed in Family Foster Homes are potentially eligible for an HCBS Waiver. Children placed in Residential Treatment Facilities, Group Homes, Correctional or Detention centers and State Hospitals or Institutions are not candidates for an HCBS Waiver. When it is anticipated that a child will move in less than 30 days from one of these placements into a family foster home, the child may be considered for waiver approval.
2. The Child Welfare Contract Management Provider shall refer cases to the CMHC to determine eligibility for the SED waiver or to the CDDO to determine eligibility for the MR/DD waiver. For children served by SRS, the SRS social worker shall have these same responsibilities. For children in out of home placement and children receiving adoption support who are determined to be eligible for the SED or MR/DD waiver, the CMHC or CDDO shall inform SRS and the Child Welfare Contract Management Provider about the child's eligibility for the HCBS Waiver by sending an ES-3160 to the regional SRS office. CFS staff are to complete Section II of the ES-3160, sign at the bottom as the EES Specialist/Social Worker, noting their job title, and return a copy to the CMHC or CDDO case manager as soon as possible. Services cannot be provided until the CMHC or CDDO receives the approval from SRS. Regional policy may also require that a copy of the ES-3160 be sent to other individuals in the region.

   If eligibility is approved for the SED or MR/DD waiver, regional CFS staff shall complete the LOTC screen in KAECSES to reflect the child's HCBS waiver status. EES staff handles this task for other waivers and for youth who do not have an open FC or AS case. Correct codes must be on the LOTC screen before the provider can receive payment. Reference E&P Appendix B, Section VIII for LOTC screen processes.
3. When a foster child who receives SED or MR/DD waiver services, leaves SRS custody, or loses foster care Medicaid status, CFS staff shall refer the child to EES to determine continued Medicaid eligibility for the SED or MR/DD waiver.
4. The same shall occur for a child whose adoption support case is being closed due to the child reaching age 18 (or older, if agreed to in adoption support plan). CFS shall also complete an ES-3161 to notify the CMHC or CDDO case manager that the foster care or adoption support medical case is closing.

5923 Medicaid Mental Health Service Delivery

Medicaid mental health/substance abuse services are provided to Medicaid eligible recipients by a Prepaid Ambulatory Health Plan (PAHP) or Prepaid Inpatient Health Plan (PIHP) associate, including a Community Mental Health Center (CMHC) or individual practitioner, who is providing services as a member of the PAHP or PIHP provider network. If a child or youth needs mental health/substance abuse services, the services must be accessed through the PAHP or PIHP.

To access the Kansas Medical Assistance Program Provider Manual access the following website: http://www.khpa.ks.gov/ and click on the Provider link, then the Manuals link. To access the Pre-paid Ambulatory Health Plan for mental health services, Kansas Health Solutions, go to: http://www.kansashealthsolutions.com/
To access the Pre-paid Inpatient Health Plan for substance abuse services, Value Options, go to: http://www.valueoptions.com/members/Members.htm

A. Eligibility

Children and youth receiving Family Services through SRS, Family Preservation services with Child Welfare Contract Management Provider or Foster Care services with Child Welfare Contract Management Provider can be screened for services. There is also a process for children or youth who have no direct involvement with SRS to be screened for these services. The customer must be eligible for Kansas Medicaid; eligibility for HealthWave 21 is not sufficient.

B. Provider Eligibility

Psychiatric Residential Treatment Facility (PRTF) services must be provided by a Medicaid enrolled provider for the specific service they provide. Child Welfare Contract Management Provider may be Medicaid providers for Psychiatric Residential Treatment Facility (PRTF) Services if they meet the qualifications for the service and are an enrolled Kansas Medicaid provider for the specific service.

C. Prior Authorization

PRTF services require a pre-admission screening to be completed by the PAHP/Community Mental Health Consortium. Reference the Kansas Medical Assistance Program Provider Manual: Psychiatric Residential Treatment Facility (PRTF) for specific information on services, length of stay limits and any extensions allowed, absent days payment policy and prior authorization requirements. The manual can be accessed through the following website: https://www.khpa-state-ks.us/. Reference Appendix 3M in the Policy and Procedure Manual.

D. Payment for Psychiatric Residential Treatment Services (PRTF)

Before payment made to a Psychiatric Residential Treatment Facility (PRTF) provider, iC-MMIS (interChange Medicaid Management Information System) must have a way to confirm the amount of patient liability and patient's level of care. This is done through the KAECSES LOTC (Long Term Care) screen. The LOTC screen captures both living arrangement and level of care codes which can be viewed on the Level of Care window in iC-MMIS. The Mental Health Consortium must also enter a Prior Authorization in iC-MMIS before payment is generated.

Dates of service must be included in the prior authorization approved dates. Dates of service billed cannot span two prior authorization periods. This is one possible reason a provider might be denied payment.

CFS is responsible for entering LOTC information for Psychiatric Residential Treatment Facility (PRTF) and Adoption Support (AS) children. Each regional office has established a process between CFS and EES to assure LOTC information is entered into KAECSES for all children who are approved for PRTF services but do not have an open FC or AS case. (See Appendix B, Section VIII for the LOTC processes.)

The Psychiatric Residential Treatment Facility (PRTF) facility submits a MS-2126 to the regional office where the facility is located to document admission and release dates for each youth. These are start and end dates for entry on the LOTC screen. The end date is the day after the day the youth left the facility.

E. Patient Liability for PRTF Services Patient liability is the customer's monthly share of the cost of care for PRTF services. It is based on income, generally, based only on the individual's own income. Any Medicaid payments made to the facility are reduced by the amount of the patient liability. Youth in OOH placement and in the custody of SRS or JJA or with open Adoption Support (AS) case do not have a patient liability. Entry on LOTC screen for foster care and adoption support cases Patient Liability is $0.00.

5924 Children Entering Foster Care with Healthwave Coverage

When a child receiving HealthWave comes into foster care, CFS staff shall notify the HealthWave Clearinghouse to request closure of the child's HealthWave case. The Clearinghouse will close the HealthWave case as soon as allowable under their rules.

To identify that a child is on HealthWave, go to the KAECSES MEBH screen and look for a Medical subtype of 'T5', 'T6', or 'T7' under the MP program.

When a foster child returns home, the caretaker should be informed that the child may be eligible for HealthWave. Coordination between CFS and HealthWave Clearinghouse staff is essential to ensure that the Foster Care case closure coincides with the effective date of HealthWave. CFS staff may extend Medicaid coverage while the application for HealthWave is pending, up to 60 days prior to the effective date of HealthWave coverage.

5925 Child Support Enforcement (CSE)

CSE is charged with the responsibility of seeking child support for children in the custody of the state in an out-of-home placement.

A. Referrals to CSE

Parents of children who are in the custody of the state in an out-of-home placement must be referred to CSE. Referrals are accomplished via the KAECSES system. Each parent shall be listed on the CHSE screen. The narrative section on the CHSE screen shall note the child was removed and the initial type of placement.
Notifications of Changes in Status. Inform CSE of changes in the child and family's status. CFS must notify CSE through KAECSES of the following:

1. Change in Placement.

When children in out-of -home care change placements, CSE is to be notified. This includes moves to a non-parent relative, a correctional or State Hospital placement. It is not necessary to inform CSE regarding moves from foster home to foster home.

2. Return Home.

CSE shall be notified when a child returns home so that they can stop any subsequent child support debt accrual. CSE will continue to contact the parent for any arrearage owed.

3. Change in Legal Status

CSE shall be notified immediately of changes in legal status, especially if parental rights are terminated.

B. Exempt Referrals to CSE

Children who meet both of the following criteria are exempt from referrals to CSE. CSE shall be informed of the exemption on the CHSE screen. (See KCSEM 2520)

1. Adopted through SRS.

The child is coming into foster care from the home of adoptive parents who adopted through SRS.

2. Special Needs

Prior to adoption, the child met the definition of a special needs child and CFS staff believe the events that led to the placement in foster care are attributed to the child's special needs. If the placement in foster care is due to the action(s) or inaction(s) of the adoptive parent(s), the case may be referred to CSE.

3. Good Cause.

In rare instances, CFS may determine that a parent has good cause for refusing to cooperate in establishing paternity and securing support payments. The social worker has the responsibility to determine the validity of good cause and to document the same. CSE shall be informed of the good cause.

5926 TAF Eligibility for Dependent Children

A minor mother cannot apply for TAF for the care of her dependent child. A person having parental control over the minor mother in foster care must apply for the infant's TAF. This may be the foster parent or relative provider. Group facilities cannot apply for TAF on behalf of a child. The Foster Care Child Welfare Contract Management Provider must meet the infant's financial support needs when the mother and child reside in a group facility.

If the mother in foster care and her child live in a placement that is not eligible to receive a Title IV-E payment because the placement is federally funded (i.e., Job Corps, alcohol and drug treatment), the teen mother may apply for the infant's TAF, only if she is 18 years of age or older.

If the child is in an independent living setting, the child can apply on their own behalf.

Eligibility Ceases Upon Separate Placements
If the dependent child is placed in SRS custody or separated from the minor mother in foster care, the dependent child shall have eligibility determined for IV-E and Medicaid. Upon custody and separation removal occurs from the parental home.

5927 Outside Agency Benefits Children in Out of Home Care May Receive

Many youth who come into the custody of the Secretary for placement receive or are eligible for various benefits. These benefits are managed through the WARDS system. See E&P Appendix D, Computer Systems--WARDS for detailed discussions on handling customer benefits.

A. Types of Benefits

1. SSA Social Security income for the child may be generated from a disabled, retired, or deceased parent. Children receive primarily SSA survivor and disabled parent benefits.
2. SSI Supplement Security Income is income received for the child due to being financially needy, blind, or disabled including behavioral and emotional disabilities.
3. VA, Veterans Administration benefits are received by youth when a parent is an eligible veteran receiving a VA benefit.
4. Other benefits include railroad retirement, disability or survivor benefits, private

B. Applying for Benefits/Becoming Payee

CFS or Child Welfare Contract Management Provider staff shall apply for benefits on a child's behalf when it is identified that a foster child on a new or existing case may be

eligible to receive one of the benefits described. When it is determined that a foster child on a new or existing case is receiving benefits as described above, SRS shall request to become payee.

C. Applying For SSI.

Child Welfare Contract Management Provider staff refer the child to Kansas Legal Services (KLS) for SSI consideration by filling out the IS-3122 referral form. Form IS-3122 is located in the forms section of the EES manual. A completed copy of the form is sent to the regional SRS office. When in receipt of a fully executed "Authorization of Release of Information Form" from KLS, all relevant medical information from the child's case file is forwarded to KLS. Kansas Legal Services submits an application to the Social Security Administration and informs CFS staff of the decision. Appeals for denied SSI applications are also managed by Kansas Legal Services. The Regional CFS Program Administrator or designee will reply in writing within 30 days to any KLS written request to discontinue further pursuit of a Disability Determination.

Youth 18-21 years of age who are no longer in custody or foster care, and who are participating in Independent Living Services with SRS, may request CFS staff assistance with the SSI referral process. All referrals for SSI for Independent Living youth 18-21 years of age will be covered under the CFS contract with KLS.

5928 Managing Funds for Children in Out of Home Care Receiving Benefits from Social Security Administration

When SRS is payee of SSI or SSA, regional office staff shall contact Social Security when any of the following occur:

The beneficiary:

1. Dies
2. moves (any placement change)
3. Marries
4. starts or stops working
5. will turn 18 in the next 6 months
6. is imprisoned
7. is adopted (placed or finalized)
8. no longer needs a payee, or
9. is released from SRS custody

A. Changes in Placement.

All placement changes, including moves from one family foster home to another family foster home, and level changes that occur within the same placement, shall be reported

to the SSA. Youth placed in a State Hospital, Institution, or PRTF residential treatment facility receive a reduced SSI payment of $30.00 per month. The $30 is provided for the child's incidental expense for the month. When such a youth leaves the institutional placement and is placed in a foster home, the SSA must be notified.

B. Annual Accounting to the Social Security.

Administration (Representative Payee Report)
When SRS staff completes the SSA Representative Payee Report, they shall use the WARDS system to obtain a listing of benefits received and expenses incurred for each beneficiary. Staff shall also report any conserved funds on the SSA Representative Payee Report. See Section 3233 for instructions relating to children are basic IV-E eligible and receive SSI. See Appendix D for details on the WARDS system.

C. Parents/Relatives as Payee.

Parents or relatives shall be informed to apply to become the payee for benefits when a child in foster care returns home or moves into the relative's home.

D. SRS Request to be Payee.

For children under 18 in SRS custody, SRS shall file an application to be "Representative Payee" for all benefits received by or on behalf of a child in custody and in an out-of-home placement.

E. Youth over 18 who remain in custody can become their own payee.

The youth will be expected to pay for the cost of their care. Such a youth may sign their benefit check over to SRS to be deposited into the WARDS account as recovery of the cost of care. Youth who are not able to manage their own benefit money should not become their own payee. This is a decision to be made by staff at Social Security, the VA, etc.

Children eligible for SSI and Title IV-E Adoption Assistance pre-finalization.
When adoptive parents sign the Adoption Assistance Agreement, it is preferred that they not choose to receive SSI benefits instead of Title IV-E adoption assistance payments as this action may cause the child to become ineligible to receive Title IV-E adoption assistance payments later. Instead of SSI benefits, adoptive parents of eligible children shall be offered adoption assistance payments of $0 to the current Social Security amount. It is preferred that adoptive parents not serve as representative payee for SSI benefits for a child during the time period after the adoption assistance agreement is signed and prior to finalization. A relative who has already been acting as representative payee for the child shall request that SSA suspend the SSI benefit when applying for adoption assistance payments as choosing SSI during this timeframe may make the child ineligible to receive IV-E adoption assistance payments in the future. The maximum amount of subsidy is $500 for children who are not eligible for SSI.

Children eligible for SSI and Title IV-E Adoption Assistance post-finalization.
(Reference Child Welfare Policy Manual, section 8.2B.12) The adoptive parents of a child eligible for title IV-E adoption assistance and SSI benefits may make application for both programs and the child, if eligible, may benefit from both programs simultaneously. In cases where the child is eligible for both SSI and title IV-E and there is concurrent receipt of payments from both programs, the child's SSI payment will be reduced dollar for dollar without application of any exclusion, thus decreasing the SSI benefit by the amount of the title IV-E payment (SSI Program Operations Manual).

Children at age 18 who are eligible for SSI and receiving Title IV-E Adoption Assistance.
Title IV-E adoption assistance ends at age 18; or age 21 if it has been determined that the child has a mental or physical handicap which warrants the continuation of assistance until that time. At the age of 18, a youth as a household of one, is eligible to apply for lifelong SSI benefits. While SSI benefits are long-term benefits, adoption assistance benefits end at age 21. If the youth has physical or mental conditions that indicate the likelihood of eligibility for lifelong benefits, families should be encouraged to apply for SSI benefits on behalf of the youth one year prior to age 18 so that benefits may continue without interruption once he/she reaches age 18.

CFS staff shall encourage relatives with whom a child is placed to become the payee for the SSI or SSA benefits. This will occur when the placement is anticipated to be long term, and the CW/CBS provider is not making any other maintenance payment. The relative would then be responsible for completing the SSA Representative Payee Report.

5929 Benefit Accounts Management

All benefits for which SRS is payee are managed through the WARDS system. The Finance Department of SRS Central Office is assigned the day-to-day processes of the system. CFS staff manage the programming and business rules of the WARDS system.

A. Benefit Processing
All benefits for which SRS is payee are processed through the WARDS systems in central office. See E&P Appendix D for more details on the WARDS system

1. Benefits Based on Parent's Status.

A child may receive SSA benefits, VA or Railroad Retirement benefits based on a parent's disability or retirement (regardless of whether the Social Security Administration or a private insurance company is the payor). CFS processes all benefits for children in the custody of the Secretary through the WARDS system. Child Support Enforcement (CSE) is entitled to receive the lesser of the total amount of the monthly accruing Child Support Order or the amount received from SSA, VA, or Railroad Retirement. These CSE payments are determined and

processed by the WARDS system. CSE is responsible for crediting the parent for the support provided to the child. Any amount left after meeting the CSE requirements shall be used as reimbursement for the cost of care for the child or conserved in the ward's account.

2. Benefits Up to the Cost of Care.

SRS shall be reimbursed for maintenance costs used to support the child. These reimbursements are determined and processed by the WARDS system.

3. Concurrent Receipt of Multiple Benefits.

A child may receive benefits from multiple sources at the same time. For example, children may receive an SSA survivor benefit and an SSI benefit. Any excess benefits left after reimbursement to SRS for the cost of care for the child shall remain in the WARDS account.

4. Benefits Received in Error are to be disapproved through the WARDS system which will authorize central office to return the benefit to the appropriate agency, Social Security, Veterans, etc. CFS staff shall promptly notify the agency providing the benefit when a child returns home. The parent or relative to whom the child returned shall be informed to apply to become payee.

B. Benefit Accounts Management

All benefits for which SRS is payee are managed through the WARDS system. The Finance Department of SRS Central Office is assigned the day-to-day processes of the system. CFS staff manage the programming and business rules of the WARDS system.

C. Establishing SRS as Benefit Payee

When setting up SRS as the payee of a child's benefits, supply the issuer the following information:

1. Social Security Benefits
Make benefits payable to:
Social & Rehabilitation Services for (child's name)
Have direct deposits go to:
Capital City Bank
Regular Acct (for SSA SSI) OR
Dedicated Acct (for SSI lump sums)

Contact SRS Payables, WARDS Clerk, for bank account and routing numbers, if needed.

2. All other benefits

Make benefits payable to:

Social & Rehabilitation Services for (child's name)

Have deposits mailed to:

WARDS Account Clerk
Payables Division
Social & Rehabilitation Services
915 SW. Harrison 11th Floor South
Topeka, KS. 66612

D. Deposits
If benefits are received locally, mail them to:

WARDS Account Clerk
Payables Division
Social & Rehabilitation Services
915 SW. Harrison 11th Floor South
Topeka, KS. 66612

Refer to E&P Appendix D for instructions on balance monitoring, payments from wards accounts, lump sum payments deposited in a wards account, closing a wards account, dedicated accounts for SSI, use of dedicated account funds, closing a dedicated account, resource limits, and irrevocable trusts.

5930 Closing the Foster Care Payment Case

Detailed data entry instructions for closing a foster care case are contained in Appendix C of this manual.

Close the Foster Care case on KAECSES when any of the following occur:

1. Child returns home
2. Child is living independently or has otherwise achieved permanency
3. Adoption Assistance case opens
4. Death of the child
5. Close the Medicaid Case

If the child returns home on or before the 15th of the month, the case shall be closed at the end of that month. If the child returns home after the 15th of the month the case shall close at the end of the following month.

The foster care payment case shall close unless child has returned home, is still in custody, and the Regional CFS Program Administrator has approved extending the

medical card as outlined in section 5919 . Close the Medicaid case for a child on runaway status.

5931 Entering Payment Eligibility in FACTS

See section 5892 for Instructions on entering eligibility into FACTS

5940 Coordination with the Juvenile Justice Authority (JJA)

JJA is the designated State agency for serving juvenile offenders in Kansas who have been placed into the custody of JJA by the courts. CFS Eligibility Specialists are responsible for determining if juvenile offenders (JOs) in JJA custody are eligible for IV-E and Medicaid. Whenever necessary, CFS and JJA staff communicates and coordinate work related to these cases.

Local JJA agency Case Managers are responsible for the day-to-day management of JOs who are in JJA custody. Some of these JOs are in out-of-home placement which makes them part of the State's foster care population. JOs may reside in a Family Foster Home, YRC's, PRTFS, Sanction House, TLP, CIP, Juvenile Detention Center, Juvenile Correctional Facility, Secure Care Facility, Emergency Shelter or with relatives.

5941 Juvenile Offender Eligibility for Foster Care Medicaid and IV-E

When a youth is adjudicated a juvenile offender and committed to JJA custody and placed out of home, JJA Case Managers enters information into CASIMS system in order for the CFS Eligibility Specialist to be obtain the CFS 4030 A from the CASIMS system. CFS Eligibility Specialists will be sent an automatic e-mail to alert them that a youth has entered JJA custody CFS Eligibility Specialists also determines eligibility for juveniles who are directly committed to a Juvenile Correctional Facility.

JJA Case Managers will need to forward the following information to the CFS Eligibility Specialists on the day custody is given to JJA:

1. Complaint
2. Order of Custody

JJA Case Managers will need to forward the following information to the CFS Eligibility Specialists within three business days of the youth entering JJA custody:

1. Copy of Birth Certificate/Verification
2. Copy of Medical Insurance (if applicable)
3. Social Security Card (if available)

4. JJA 0014 JJA Acknowledgment of Parental Obligation
5. CFS 4030 A (if the completed form is not available through CASIMS)

Youth in JJA custody and residing in out of home placements are also eligible for Foster Care Medicaid if they meet the eligibility criteria per Section 5900.

Youth in JJA custody are no longer eligible for Foster Care Medicaid when they reach the age of 21 (last day of the month they turn 21). The CFS Eligibility Specialist shall close the KAECSES case.

5942 Legal Status Code for JJA Cases

Enter a JJA legal status code in the FOCA legal status field. This prompts the interchange-Medicaid Management Information System (iC-MMIS) to reflect a JJA population code for budget purposes. This coding also assures that JJA is charged for Medicaid paid placements by the iC-MMIS system. See E&P Appendix B; FOCA screen explanation for details.
For information about applying templates to topics, press **F1**.

5943 Juvenile Offender Eligibility

A redetermination of IV-E eligibility is required every 12 months. CFS Eligibility Specialist will download the CFS 4031A, IV-E Eligibility Redetermination, from CASIMS. JJA Case Managers will need to supply supporting documentation to the CFS Eligibility Specialist, so that they can correctly determine ongoing eligibility. Supporting documentation may include, but not limited to:

A. Journal Entries showing continuous custody
B. Permanency Hearing
C. Income (earned and unearned)
D. Information regarding ongoing deprivation
E. Resources

CFS Eligibility Specialist redetermine the youth's IV-E eligibility by completing the CFS 4031B. Refer to Section 5900 for juvenile offenders who are GA foster care eligible.

5944 JJA Notification to SRS Regarding Changes Which Impact Eligibility

JJA agencies are responsible for notifying CFS Eligibility Specialist in the regional SRS office when case changes occur which impact eligibility. This is completed by an automatic e-mail being generated to SRS when the JJA Case Manager enters the information into CASIMS. Upon receipt of the notification of the change, the CFS

Eligibility Specialist will access CASIMS, print the information for the file, and forward a copy to the CSE worker. In most circumstances, the information will be contained in the CFS 4016, which will be printed and placed into the eligibility file. CFS Eligibility Specialist will enter the eligibility segments into CASIMS so JJA can submit their quarterly IV-E maintenance claim.

Changes that could impact eligibility for which JJA is responsible to notify SRS when any of the following changes in status occurs:

A. JJA is relieved of custody by the court
B. The youth's placement changes
C. The youth returns home
D. The youth is enrolled in private health insurance

5945 Referrals To Child Support Enforcement (CSE)

When a foster care case is opened for a juvenile offender, regional CFS program staff sends a KAECSES referral to CSE indicating the case is a JJA case.

CFS Eligibility Specialist will forward to CSE the following information:

A. Order of Custody
B. CFS 4030 A
C. CFS 4016 (Change of Placement)
D. JJA 0014 JJA Acknowledgment of Parental Obligation
E. Copy of Birth Certificate/Verification

5946 Medical Card Extension Programs

Youth served by JJA are referred to CFS to determine eligibility for Medicaid. See Section 7000 of this manual for details when the youth has aged out and is released from JJA custody. See Section 5900 for details when the youth is still in JJA custody and has returned home.

5947 Denied Medicaid Claims

Regional eligibility staff refers denied Medicaid claims to JJA. JJA works with the Department of Health Policy and Finance to reinstate Medicaid claims denied by the iC-MMIS system.

5948 JJA Relative Placement Program

JJA staff may choose a relative placement for youth in JJA custody. Relatives may choose to be approved by KDHE or to receive TAF. JJA completes CFS 4016 to notify regional eligibility staff of the placement and the choice of the relative. Relatives choosing medical only receive a foster care medical card.

If the juvenile receives SSI or other benefits, JJA staff will refer the relative to the Social Security Office to become payee for benefits.

5949 Dually Adjudicated Youth Served by JJA

When a youth in the custody of the Secretary is later adjudicated as a juvenile offender and placed into the custody of the JJA Commissioner, JJA is responsible for the care and treatment of the youth. This includes payment responsibility for the placement. JJA's responsibility for placement continues as long as the youth is in the custody of the Commissioner. As long as the Secretary was not relieved of the youth's custody when he/she entered JJA custody, SRS responsibility for care and treatment will resume on the day the youth is released from JJA custody.

When court order transfers custody of a youth from SRS to JJA or from JJA to SRS, the same episode of care continues as long as State custody is continuously maintained.

A. Change the Legal Status code on the FOCA screen. (See E&P Appendix B for details).

B. Notify any agency from which the youth receives benefits (SSA, VA, etc.) that JJA is now the responsible agency and that SRS is no longer responsible for the youth. Provide a copy of this notification to the local JJA agency.

C. When a youth has a Wards Account and the youth is released from SRS custody, the CFS Eligibility Specialist will notify Social Security Administration of the change in custody. The remaining funds will be returned to Social Security Administration. If they youth is dually adjudicated, the CFS Eligibility Specialist will contact Social Security Administration for instructions on how to handle the remaining funds.

5950 Juvenile Offender Independent Living

JJA youth may be eligible for SRS Independent Living services through SRS. PPM Section 7000 for Independent Living policies and procedures.

6000 Permanent Custodianship and Adoption

6110 Establishment of Permanent Custodianship Subsidy (PCS)

In 1999 the legislature established funding for permanent guardianship subsidy (PGS) to assist families willing to assume this responsibility. Additional funding was designated for those guardianships established pursuant to K.S.A. Chapter 38, Article 15 (permanent guardians). Starting January 1, 2007, the CINC Code changed the name to Permanent Custodian.

6111 Eligibility Requirement for Children

A. Children may be considered for the permanent custodianship subsidy if they are age 14 and over, are part of a sibling group that has one child age 14 and over who are being placed together, or have other extenuating circumstances that make adoption not a reasonable option. The Director of Children and Family Services must approve eligibility for children or for whom extenuating circumstances exist that make adoption not a reasonable option.

Permanent custodianship subsidy ends when:

1. a child is 18 unless still in high school, then the PCS may continue until the youth graduates or turns 21, whichever is first,
2. the child becomes emancipated, dies or otherwise ceases to need support,
3. the child no longer resides with the permanent custodian,
4. or the permanent custodian fails to complete and return the annual review.

B. The permanent custodianship subsidy is not an entitlement program and the child must meet all of the following criteria:

1. be in the custody of the Secretary of SRS with or without parental rights terminated at the time permanent custodianship is established;
2. a court order appointing a permanent custodian;
3. not receiving SSI; and
4. the permanent custodian meets eligibility to receive TAF as defined by EES (KEESM 2220 - Living with a Caretaker).

Children who are living with a guardian established through K.S.A. Chapter 59 (probate court) are not eligible for PCS.

C. The custodian may apply for Temporary Assistance to Families (TAF) on behalf of the child. Non-relative custodians (see KEESM 2220 Living with a Caretaker) may apply for TAF. This assistance will supplement the subsidy payment. EES will exempt the subsidy payment in determining the TAF benefit amount. All other applicable income for the child, such as SSDI, SSA, Veteran's Benefits and Railroad Retirement Benefits, will be considered in determining both the subsidy and TAF payment.

6112 Type and Amount of Subsidy

A. Maximum Monthly Subsidy Payment

The maximum monthly subsidy payment cannot exceed $300, for permanent custodianships granted on or after 7-1-06. It may be adjusted lower depending on the income and resources of the child. Children shall not receive subsidy if their countable income exceeds $300 per month. Once the subsidy amount is established it does not change unless there is a change in the child's circumstances.

B. Medical Card

Kan Be Healthy Screens and all Medicaid rules are applicable. The child will continue to receive a foster care medical card, during the period of time a permanent custodianship subsidy payment is made. Refer to Section 6900. The parent's family health insurance is applicable if parental rights are not terminated. Custodians are expected to include the child on their family medical insurance plans, if the coverage is available.

C. Income and Resources of the Child

Disregard $186.00 per month of the child's income when determining eligibility for permanent custodianship subsidy.
Income to consider shall include but is not limited to:

1. Social Security Survivors Benefits (SSA);
2. Social Security Disability Insurance (SSDI);
3. Child Support;
4. Income for the child from a trust or annuity
5. Other benefits, e.g. railroad or veterans benefits.

Permanent custodians are expected to apply to be the payee for benefits on behalf of the child. For PRNT children, parents will need to agree to the transfer of payee. The amount of benefits may affect the amount of subsidy and TAF payment.

6113 Exempt Income and Resources

The following income and resources shall be exempt in determining eligibility for PCS:

A. earned income of the child;

B. inaccessible trusts of the child;

C. income and resources of the permanent custodian and spouse;

D. income and resources of the parent;

E. TAF benefits received for the child.

6114 Eligibility Determination

A limited amount of permanent custodianship funds are available. Prior approval from central office must be obtained before entering into a custodianship subsidy agreement with an individual or family.

A. The Child Welfare Case Management Provider shall:

1. Submit the CFS 4027A Request for Permanent Custody, a letter from the prospective permanent custodian explaining why they want to be the custodian, and a letter from the child (if age 14 or over) confirming they are in agreement with the plan to the CFS Permanent Custodianship Specialist and the Regional SRS Office;

2. After approval is received, complete the CFS 4026, Permanent Custodianship Subsidy Agreement, with the custodian (the custodian signs the agreement and SRS will sign when it is submitted to Children and Family Services);

3. Obtain a copy of the Journal Entry of Permanent Custodianship or Letter of Custodianship from the court;

4. Determine that other applicable requirements are met;

5. Complete CFS 4027, Referral for Payment;

6. Submit all the above to the Regional SRS Office

7. Notify the Regional SRS Office staff if they become aware there is a change in address of a custodian.

B. Regional SRS staff shall:

1. Determine eligibility for medical assistance

2. Send the CFS 4028-Annual Permanent Custodianship Report to the custodians to complete

3. Submit to CFS Permanent Custodianship Specialist the completed Annual Permanent Custodianship Report, CFS 4028;

4. Notify CFS Permanent Custodianship Specialist if they become aware there is a change in address of guardian

6115 Permanent Custodianship Subsidy Agreement

The Permanent Custodianship Subsidy Agreement, CFS 4026, shall be signed by the designated guardian(s) in the presence of a case manager.

A. The case manager shall explain to the family:

1. the purpose of the subsidy, their financial and social responsibilities;
2. the terms of the agreement;
3. the duration of the agreement.
4. that should the family fail to complete and return the review the case shall be closed.
5. that monies will be recouped by CFS if sent in error after subsidy should have terminated.

B. The custodian(s) shall:

1. Apply for other financial benefits for the child, e.g., SSI or veteran's benefits;
2. Notify SRS immediately of any changes in the child's living situation;
3. Advise SRS immediately if the custodianship is set aside or they cease to be legally or financially responsible for the child;
4. Advise SRS when the child reaches 18 and has completed high school;
5. Advise SRS when the child becomes emancipated;
6. Advise SRS if the child dies, or otherwise ceases to need support; and
7. Cooperate fully with SRS in an annual review.

6116 Termination of Permanent Custodianship Subsidy

A. Permanent Custodianship Subsidy shall not continue beyond the month in which:

1. the child reaches 18 (unless the youth is still in high school; then subsidy may continue until the youth graduates or until age 21, whichever is first);
2. the child becomes emancipated, dies or otherwise ceases to need support;
3. the child no longer resides with the custodian;
4. an annual review is due and the custodian fails to complete and return it.

B. The case manager is responsible for forwarding all information that would result in termination to the CFS Permanent Custodianship Specialist and the Regional SRS Office immediately upon receipt of the information.

6120 Annual Report

Permanent Custodianship subsidy does not require an annual eligibility re-determination. An annual report shall be made to determine if any changes in the circumstances of the child exist. The annual report shall coincide with the anniversary date of the beginning of the Permanent Custodianship Subsidy and a copy of that report is due in the CFS office by that date.

SRS staff shall send to the family on an annual basis the CFS 4028 Custodianship Annual Report. This form is to be returned within 30 days to SRS staff, the form shall be reviewed and a copy shall be forwarded immediately to the CFS Permanent Custodianship Specialist, and the original will be placed in the case file.

6131 Monthly Grant Payments

Monthly grant payments are made to the custodian. Children continue to be eligible for the foster care medical card and shall be maintained in the KAECSES foster care system.

A. The PCS payment shall be initiated beginning the first of the month in which the custodianship is granted and shall continue for the duration of the child's subsidy eligibility.

B. The CFS 4027A, Request for Permanent Custodianship Subsidy, shall be sent to CFS to initiate the payment.

C. The CFS 4027A, Request for Permanent Custodianship, is also used by the Regional Office to establish changes in the KAECSES System per Eligibility and Payments Manual Section 8300 Program Type = Foster Care (FC) Legal Status Code = (10) Non-Kansas Custody; Source of Funding (GA) Guardianship.

D. Failure to submit the CFS 4028 Custodianship Annual Report to the case manager in a timely manner may result in automatic stoppage of payment to the custodian

6132 Referral to Child Support Enforcement

Parents whose rights have not been terminated shall be referred to Child Support Enforcement (CSE) for the collection of support. CSE may receive referral from both EES and CFS. The establishment of a permanent custodianship subsidy case shall be noted on the narrative section of the CHSE Screen in KAECSES.

6200 Adoption Assistance

Adoption Assistance is a program designed to remove barriers to the adoption of children with special needs, who otherwise could not be adopted. The intent of the program is to assist the adoptive family in meeting the special and ordinary needs of a child.

A. The adoption assistance program can provide one or more of the following:

1. Kansas Medical Card
2. Monthly cash subsidy,
3. Special one-time payment,
4. Non-recurring expense reimbursement.

B. This program is authorized by state and federal statutes and regulations.

1. Kansas implemented a state adoption assistance program in 1970.
2. The state only adoption assistance program is codified in KSA 38-319 through 38-329.
3. The Title IV-E of the Social Security Act was modified to include federal financial participation in adoption assistance through the Adoption Assistance and Child Welfare Act of 1980, Public Law 96-272.
4. The Tax Reform Act of 1986, Public Law 99-514 amended the Title IV-E adoption assistance program to provide 50 percent matching funds for non-recurring expenses associated with the costs of adopting a child.
5. The Adoption and Safe Family Act of 1997, Public Law 105-89 further modified the requirements for Title IV-E adoption assistance.
6. The Fostering Connections to Success and Increasing Adoptions Act of 2008 (Public Law 110-351) amended the Title IV-E of the Social Security Act.

Both the state and federal programs shall be operated the same. Adoption subsidy and medical assistance shall be provided for eligible children regardless of the funding source.

6210 Eligibility Requirements for Adoption Assistance

Eligibility for adoption assistance is based on the needs of the child, not the income of the family. The family's access to community resources may be considered when determining the type and amount of assistance. The child's eligibility for adoption assistance shall be documented on the CFS 4019, Eligibility for Adoption Assistance.

Children in the custody of the Secretary or a licensed child placing agency, if they otherwise meet the eligibility criteria specified below may be eligible for one or more of the following types of adoption assistance: Title XIX Medicaid, monthly subsidy payment, special subsidy payment, and non-recurring expenses.

Children who are eligible for SSI or who have been in a prior IV-E adoption which dissolved may be eligible for one or more of the above types of adoption assistance.

To be eligible for on-going adoption assistance, the following criteria shall be met:

A. Children Eligible for Adoption Assistance:

1. Establish the Child is Legally Free for Adoption.

SRS shall establish the child is legally free for adoption. Journal Entries documenting the termination of parental rights or copies of the voluntary relinquishments shall be maintained in the case file.

2. Establish the Child Cannot Return Home

There shall be a judicial determination that the child cannot or should not be returned to the home of the parents, it is not in the best interest of the child to be returned to the parents. Case records shall contain documentation stating why the child cannot return to his/her parents.

Case records shall contain documentation stating why the child cannot return to his/her parents.

Documentation is based on the following evidence:

a. Journal entry documenting the termination of parental rights; or

b. Journal entry documenting the child cannot return home.

3. Establish the Special Needs of the Child

The child shall have one or more specific factors or conditions which limits his/her's adoptability without adoption assistance. There shall be a linkage between the specific factor or condition and the type of subsidy needed to enable the adoptive family to meet the needs of the child. SRS staff shall determine eligibility. The Child Welfare Case Management Provider shall provide SRS with documentation of special needs.

The following conditions are factors used to determine if the child has special needs requiring professional treatment on an ongoing basis which

may make it reasonable to conclude the child cannot be placed without cash subsidy or Medicaid services.

a. Physical Disability

The child has a medically diagnosed disability which requires professional treatment, impairs normal functioning, or requires assistance in self-care or the purchase of special equipment. The disability is to be diagnosed by a physician, hospital, clinic or other licensed medical practitioner qualified to make disability determinations.

b. Developmental Disability

The child has significant developmental disabilities and/or delays with demonstrated need for intensive adult supervision beyond chronological age, determined through an evaluation by a licensed psychologist, diagnostic center, special education services, or other qualified professional individual.

c. Behavioral or Emotional Disability

The child is diagnosed as having a psychiatric condition which impairs the child's intellectual, behavioral or social functioning. Diagnosis and prognosis shall be established by a licensed physician, psychologist or clinical social worker.

d. Age of Child

The child is age 12 or older.

e. Guarded Prognosis

Children with guarded prognosis are not currently being treated for a specific disability or condition but there are factors in the child's genetic, health, and/or social background which indicates the child may develop physical, emotional or developmental problems at a later date. The child and parents genetic, social and health history shall be documented in the case record.

f. Membership in a Sibling Group Placed Together

The child is a member of a sibling group of two or more children placed for adoption together. For a sibling group of two, one of the siblings shall have one of the special needs factors or conditions listed above. Sibling groups of three or more placed together do not need to meet any other special needs criteria.

4. Establish Reasonable Efforts Were Made to Place the Child Without Assistance.

A determination shall be made that reasonable but unsuccessful efforts were made to place the child without assistance.

This criterion is not applicable for the child who is adopted by a relative or a foster family with whom a significant relationship has been established.

Efforts shall be made to place the child without assistance and documented in the case file. Reasonable Efforts include the following initiatives:

a. Referral of the child to state and national adoption exchanges;

b. Develop of individual recruitment plans;

c. Special Recruitment initiatives, such as TV or newspaper

It is not the intent of the agency to delay adoption reasonable efforts if an appropriate family is available who requires adoption assistance to adopt the child. It shall be documented in the staffing report why the family is the most appropriate choice for the child.

SRS may determine the child's disability makes it is reasonable to believe any family adopting the child would require adoption assistance. An inquiry shall be made of the family if they need assistance in order to adopt. It is not the intent of the agency to disrupt placement plans if the family indicates they need adoption assistance in order to adopt the child.

5. Documentation of Child's Eligibility

Eligibility is determined while the child is the custody of the Secretary and in out of home placement or licensed child placing agency.

See PPM Section 6210 and PPM 6220 to determine if the child is eligible for state funded or federally funded adoption assistance.

The child's eligibility for adoption assistance shall be documented on the CFS 4019 Eligibility for Adoption Assistance form and all supporting documentation shall be maintained in the adoption assistance financial case file.

Eligibility payment for adoption assistance begins on the date the CFS 4022 Adoption Assistance Agreement form is signed by the Regional Adoption Assistance Expert.

Upon finalization of the adoption, the finalization date of the adoption and adoptive name shall be recorded on the CFS 4019 Eligibility for Adoption Assistance form.

The Adoption Assistance financial case file shall include:

a. CFS 4019 Eligibility for Adoption Assistance

b. Adoption petition; and the PRT Journal Entry or voluntary relinquishment

c. Adoption Decree

d. CFS 4024 Referral for Adoption Assistance

e. Adoption Placement Agreement

f. CFS 4022 Adoption Assistance Agreement

g. child's social history or case planning documentation related to the determination of the child's special needs

h. family assessment of the adoptive family

i. documentation of attachment to a foster parent, placement with a relative, or individual recruitment plan or case planning conference notes related to the reasonable efforts made to place without adoption assistance

j. all foster care eligibility determination documentation

k. documentation of eligibility or receipt of SSI.

l. HCBS waiver information packet, if applicable,

m. Disability documentation from a physician, hospital, clinic or other qualified licensed medical or professional practitioner of the youth's physical or mental disability.

Once determined eligible for Title IV-E adoption assistance, a child is eligible up to age 18. The Secretary may continue to provide Title IV-E assistance up to the age of 21 if the child has a documented mental or physical disability. Prior to the youth's 18th birthday, the family shall submit current documentation from a physician, hospital, clinic or other qualified licensed medical practitioner of the youth's physical or mental disability which warrants continuation of adoption assistance beyond age 18. The documentation shall be placed in the financial file. If the child does not have a documented physical or mental disability, the child is not eligible for Title IV-E adoption assistance beyond the age of 18. The SRS worker shall help the family explore community resources and adult services programs for youth with serious mental or physical disabilities.

If the youth is still in high school, state funded adoption assistance may continue beyond age 18 until graduated from high school or turns 21, as long as the youth continues to be dependent upon his or her parents for support. Title IV-E funded subsidy cases shall be transferred to the state funded program the month following their 18th birthday.

Both state and federally funded Title IV-E Adoption Assistance programs require the adoption assistance agreements shall be signed prior to the finalization of the adoption.

B. Children Who Are Not Eligible for either State or Federally Funded Adoption Assistance:

1. Children who have been placed by the court, adoption brokers, parents and other individuals; even if the child was previously in the custody of the Secretary.

2. Children adopted internationally

3. Children adopted by their birth parent.

6220 Eligibility Requirements for Title IV-E Adoption Assistance

In addition to meeting the special needs criteria, one of the following criteria shall be met in order to establish a child's eligibility for Title IV-E Adoption Assistance:

1. The child's Title IV-E eligibility was established during the foster care episode which is established at the initial removal from the home. Children voluntarily relinquished to SRS or a licensed child placing agency who have had IV-E foster care eligibility established as a result of an episode of foster care are IV-E subsidy eligible. A voluntary relinquishment may be considered a judicial removal if a petition to remove the child from his/her home is filed within six months of the date the child lived with the specified relative from who s/he was removed and there is a subsequent judicial determination that to remain in the home would be contrary to the child's welfare.

2. The child is eligible for Supplemental Security Income (SSI) prior to the finalization of the adoption. This may be met if the agency receives the final notice of SSI eligibility after the adoption is finalized and the SSI eligibility date is prior to the date of the finalization of adoption.
3. The child's parent is a minor and the minor parent's IV-E maintenance payment covers the child's cost of care while in care.
4. The child is eligible for IV-E adoption assistance and becomes available for adoption because of the dissolution of a prior adoption or the death of their adoptive parents. No other criteria must be met other than the child continues to have special needs.
5. The child is 14 years of age or older on or after October 1, 2010. Any siblings of this eligible child, placed in the same adoptive placement, are also eligible for Title IV-E adoption assistance.
6. The child is 14 years of age or older on or after October 1, 2010 and the Adoption Assistance agreement is signed and finalization of the adoption has not occurred.
7. The child was in foster care for 60 consecutive months (5 years) on or after October 1, 2009. Any siblings of this eligible child, placed in the same adoptive placement, are also eligible for Title IV-E adoption assistance.

6230 Establishing Eligibility for Adoption Assistance After the Adoption is Finalized

The State funded and the Federally funded Adoption Assistance programs require the adoption assistance agreements be signed prior to the finalization of the adoption. State and Federal Guidelines allow exceptions to this requirement under certain circumstances.

A. Factors to Consider when Establishing Post-Finalization Eligibility
State and Federal Guidelines allow exceptions to this requirement under certain circumstances:

1. Failure by SRS staff and/or Child Welfare Case Management or Adoption Provider staff involved to advise the adoptive parents of the availability of adoption assistance for a child with special needs.

SRS is not required to notify the parents of children placed by private/agencies and is not liable for a private child placing agency's failure to inform prospective adoptive parents of the child's special needs.

2. Erroneous determination that a child did not meet eligibility requirements.

3. There existed, unknown or undiagnosed, conditions of the child at the time of placement, which if known, would have created eligibility for assistance.

4. Relevant facts regarding the child, or the child's background, were known but were not presented to the adoptive parents prior to the finalization of the adoption.

B. Procedures Related to the Determination of Post- Finalization Eligibility for Title IV-E Eligible Children

SRS staff shall make every effort to establish the child was eligible for basic Title IV-E funding at the time the child came into foster care. This eligibility shall be maintained in the case record.

Federal Adoption Assistance regulations for Title IV-E specify the assistance case shall be opened prior to the finalization of the adoption. When it is not opened prior to finalization federal regulations require denial and a fair hearing to determine through an appeal process that the required circumstances exist to allow post finalization eligibility. If adoption assistance is approved the effective date shall be no earlier than the date the parent(s) requested adoption assistance.

1. Deny the request for adoption assistance because the adoption has been finalized.
2. Provide the family with written notification of the denial and their right to appeal to the Office of Administrative Fair Hearings.
3. Provide the family with the appropriate appeal forms.
4. SRS may request supporting documentation from the family and and/or the agency responsible for placing the child.
5. Prepare a summary of the case with the necessary attachments, including, but not necessarily limited to: medical records, psychological reports, etc., reflecting the agency's position concerning the recommendation.
6. Hold a staffing where all supporting documentation is reviewed and a recommendation prepared for the fair hearing.
7. Provide the Administrative Fair Hearing Officer with a recommendation. If the child would be otherwise IV-E eligible and the agency supports the adoption assistance request, the agency shall recommend adoption assistance to the Administrative Fair Hearing Officer.

C. Procedures Related to the Determination of Post Finalization for State Funded Adoption Assistance.

In those situations where the child is not eligible for Title IV-E Adoption Assistance, SRS has determined when one of the above conditions exists which merits the opening of an adoption assistance case; it is not necessary for the family to request an administrative fair hearing. The following procedures shall be followed:

1. The SRS staff shall conduct a staffing review with supporting documentation to determine if the criteria of one of the factors above exists which would determine the child's eligibility at the time of placement.

2. Submit request to the CFS Adoption Assistance Program Administrator for approval of state funded adoption assistance.

3. State funded assistance shall not be used to circumvent the fair hearing process for potentially eligible Title IV-E children.

4. If the agency denies approval, the family shall be provided with information about their right to request an Administrative Fair Hearing.

6240 The Application and Approval for Adoption Assistance

SRS is responsible for determining eligibility for adoption assistance, for negotiating the amount and type of assistance with the family, and for the execution and signing of all agreements. The family shall have face-to-face contact with the social worker executing the agreements whenever possible. The SRS social worker is responsible for assuring the family understands the services provided by the program and the limits of the program. Adoption assistance is intended to encourage the adoption of special needs children and minimize the financial barriers. It is different from foster care, as it does not reimburse the family for the total costs for caring for the child. Families shall receive this type of information before they make a decision to adopt and before the adoption agreements are signed.

Eligibility is based on the needs of the child and not the resources of the family. The agency shall not use any universal form of a means test or use any type of grid or scale to determine the amount of assistance. However, the family's resources may be taken into consideration when determining the amount and type of assistance. Determination is always based on the individual needs of the child and the family's ability to meet these needs.

A. Responsibilities of the Child Welfare Case Management Provider

The Child Welfare Case Management Provider shall inform the prospective adoptive parents of the availability of adoption assistance, but shall not discuss specifics of the agreement with the family; nor shall they commit SRS to specific services or a certain amount of cash.

The Child Welfare Case Management Provider shall:

1. Provide SRS with information needed by the agency to make an informed decision with the family concerning the type and amount of assistance required by the family to adopt the child;

2. Complete the Referral for Adoption Assistance form, CFS 4024, and submit the form to SRS at least two weeks prior to the date planned to sign the Adoption Placement Agreement;

3. Provide the family with information about the adoption assistance program.

B. Responsibilities of SRS Staff

Based on the information provided by the Child Welfare Case Management Provider, the SRS staff responsible for eligibility determination shall:

1. Review forms CFS 4019 (Eligibility for Adoption Assistance) and CFS 4024 (Referral for Adoption Assistance) and the documentation attached to these forms to make this decision;

2. Determine the funding program (state funded or Title IV-E) assistance or services shall be provided;

3. Determine eligibility for medical assistance, if part of the adoption support plan

C. Negotiating the Agreement

The SRS staff person responsible for negotiating the agreement with the family shall:

1. Verify the child's financial eligibility including special issues such as HCBS eligibility, SSI, etc.

2. Review with the family the special needs of the child to help them understand the scope of the needs of the child and the impact it will have on their family's resources.

3. Discuss with the family the purpose and parameters of the adoption assistance program. Explain the differences between foster care payments and adoption assistance.

4. Review the family budget and information regarding the other resources available to the family. Help determine what portion of the cost, if any, of the child's needs the family can meet. Inquire whether the family will need adoption assistance in order to adopt the child.

5. Discuss the type and negotiate the amount of assistance needed to meet the needs of the child.

6. Families may but are not required to purchase a separate policy on behalf of the child or add the child to their family health insurance. If the child is added to the family's health insurance, obtain the name of the insurance company and policy number. When billing Medicaid, the family's health insurance is always billed first.

7. Educational services in Kansas are to be provided by the public school system. The Kansas Adoption Assistance Program does not pay for private schooling. If the child is eligible for an Individual Education Plan (IEP), a number of services

may be provided to the child. Families are encouraged to explore these resources. Public schools are mandated to provide services for certain eligible children. Adoption Assistance does not pay for privately purchased educational enhancement programs, or services which are normally provided to children who attend public schools.

8. Community services should be explored with the family. Such services may be available through: Public Health Departments, Community Mental Health Agencies, support groups and/or service programs for families with children who have a specific special need, e.g., Muscular Dystrophy, Spinal Bifida, etc. Some of these organizations will provide equipment, counseling, day camps and other such services to the child.

9. Financial resources of the child shall be considered. This includes such things as life insurance and annuities, social security benefits through the birth family's claim, and veterans and railroad benefits. Adoption does not make the child ineligible for such benefits. Adoption does not limit a child's right to inherit from the birth family. Neither does adoption limit the child's eligibility for Social Security benefits from the birth parent's claim. If an adoptive parent elects to draw benefits from a birth parents Social Security claim, they cannot, at a later date, draw benefits for the adopted child from their own claim.

10. Consider the current and future needs of the child when arriving at a specific amount of cash assistance and services the family will need. Some children have very few needs at the point of adoption but the prognosis is that they may have more expensive needs at a later date, e.g., a heart condition that will require surgery at a later date, a sexually abused child who will require additional therapy during adolescence, etc.

It is expected the adoption assistance plan shall reflect these needs. While the agency cannot commit to increasing the subsidy amount at a certain point in time, the agency can commit to renegotiating the amount if the needs of the child and the family's ability to meet these needs change.

If the Region and the family are unable to come to an agreement on the amount of subsidy, the Regional office may contact the Children and Family Services Adoption Assistance Program Manager for assistance in the negotiation. The Regional Office makes the decision about the amount of the subsidy and handles any appeals that may result.

The Adoption Assistance Agreement, CFS 4022, shall be signed after the Adoption Placement Agreement, CFS 2810. Although this may be executed during the same meeting with the family, the details of the subsidy agreement shall be negotiated prior to the signing of the placement agreements

6250 Types of Adoption Assistance

There are four types of adoption assistance: Medical, Monthly Cash Payments; Special Service Payments; Non-recurring Adoption Expenses. The types of assistance the family receives shall be determined by the above referenced negotiation process. It shall not be assumed all families will need all types of assistance.

6251 Medical Services

The Adoption and Safe Families Act requires health care coverage be provided for any special needs child for whom there is an adoption assistance agreement. It is important that the family understand the benefits and limitations of the Kansas Medicaid Program.

Each regional office has a Medicaid liaison who shall be consulted for information regarding Medicaid services. Kansas Health Policy Authority will assist in obtaining information regarding available medical services for specific children. Booklets and brochures are available through that Division for families. Additional information can be found in the Kansas Medical Services Manual.

6252 Monthly Cash Subsidy Payments

The Adoption Assistance Expert shall negotiate a monthly subsidy with the adoptive family based on the child's needs and family's community resources and support services.

Once the family and agency agree to the amount of the amount shall not change unless mutually agreed to by both parties. Adoption subsidy does not automatically increase as the child gets older. The family determines how the monthly cash subsidy payment will be spent. The family may request the subsidy amount be reviewed if the needs of the child change, or if their ability to meet those needs changes.

The family shall be advised to contact their tax preparer regarding the federal and state tax credit for adoption subsidy.

Federal tax credit information can be located at: http://www.irs.gov/taxtopics/tc607.html

Kansas state tax credit information can be located at:
http://www.ksrevenue.org/taxcredits-adoption.htm

A. Monthly Subsidy Rates
The maximum amount of subsidy is $500, unless a child is eligible for SSI prior to adoption finalization. (See section 6252B.) The monthly payments shall be negotiated with the adoptive family and based on the needs of the child and the family's access to community resources.
Factors to consider when negotiating the amount of subsidy include but are not limited to:

1. Cost of medical transportation;
2. Cost of adding the child to private health insurance;
3. Special equipment or other non-medical supplies needed by the child not covered through other resources or Medicaid;
4. Cost of day care.
5. Number of children in the sibling group to be adopted (In certain situations where families are adopting large sibling groups, the added cost of food, clothing, and shelter may be taken into consideration when arriving at a subsidy amount);
6. Costs of special enrichment programs to benefit the child;
7. Other costs unique to the needs of the child;
8. Home improvements required due to the child's special needs.

B. SSI Eligible Children

1. Pre-finalization: Children determined SSI eligible prior to adoption finalization, may receive adoption subsidy at the SSI rate. The current rate is posted on the Social Security Administration web site at: www.socialsecurity.gov An adoptive assistance agreement shall be established whether the adoptive parents receive the SSI payment or a IV-E payment. The most common arrangement is for the agency to make a IV-E payment to the adoptive parents and the Social Security Administration suspends the SSI payment until finalization.

2. Post-finalization: At finalization and release from the Secretary's custody, if the child continues to be SSI eligible, the adoptive family may request to become payee of the child's SSI benefit. However, children eligible for SSI in foster care may not be eligible for SSI post-finalization because the family's resources will be taken into consideration. If the child receives adoption subsidy and SSI payments, the adoptive family shall be advised the Social Security Administration will reduce the SSI payment by the amount of the adoption subsidy payment.

3. Children at age 18 who are eligible for SSI and receiving Title IV-E Adoption Assistance: Assistance may continue past age 18 until age 21, if the child has current documentation of a physical or mental disability which warrants continuation of adoption assistance beyond age 18. Prior to the youth's 18th birthday, the family shall submit current documentation from a physician, hospital, clinic or other qualified licensed medical practitioner of the youth's physical or mental disability which warrants continuation of adoption assistance beyond age 18. The documentation shall be placed in the financial file.

At the age of 18, an adult as a household of one, is eligible to apply for lifelong SSI benefits. If the adult has physical or mental conditions indicating the likelihood of eligibility for lifelong benefits, families shall be advised to apply for SSI benefits on behalf of the youth.

C. Home and Community Based Services (HCBS) Eligible Children

Children receiving in-home services through the Home and Community Based Services (HCBS) Waiver while in foster care continue to be eligible for services after adoption.

6253 Special Service Payments

A special service payment may be authorized on a time-limited or one-time only basis if the child has a specific need which cannot be met through the Medicaid program, the monthly subsidy payment or other resources. The service payment for special purchase of goods or services shall be specified on the Adoption Assistance Agreement, CFS 4022. Specify and document the service and length of time the service shall be purchased, or the goods to be purchased. (See Handbook of Services for details on purchasing special services or goods). If a need is identified at a later date, a new agreement shall be developed and signed.

Payments for goods or services are not covered under the Title IV-E Adoption Assistance program, and shall be purchased from all state funds (non-IV-E adoption support).

A. Time Limited Services

Time limited services may be approved by regional staff for a six month period.
One-Time Only Purchases

B. Unique one-time only purchases are limited to $1000 per child. Purchases may include:

1. Beds and chest of drawers for families who adopt three or more children;
2. Special equipment for children with handicaps or development disabilities not covered by other resources;
3. Home modifications to make the house handicapped accessible, i.e., building ramps or widening doors etc.;
4. Lifts for vans, SRS does not purchase vans;
5. Respite care.

6254 Non-recurring Adoption Expenses

Any family who adopts a Kansas child who meets the definition of special needs is eligible to apply. A Kansas child is a child who is in the custody of the Secretary or a private child placing agency and does not receive adoption subsidy from another state and whose adoption becomes final in Kansas. Families may be reimbursed up to $2,000 for the expenses associated with the placement of each child and finalization of

the adoption. Payments cannot be made until the adoption is finalized. Children adopted internationally or placed by the court, adoption brokers, parents and other individuals are not eligible for reimbursement of non-recurring funds.

A. Allowable Reimbursement

Families may be reimbursed up to $2,000.00 for the finalization of the adoption. Reimbursement is for reasonable and customary for:

1. attorney fees
2. court costs including filing fees
3. other costs associated with the legalization of the adoption
4. transportation for pre-placement visits with the child and reasonable costs of food and lodging to complete the adoption process
5. health and psychological exams
6. the home study fee,

Reimbursement is made to the family based upon the adoption assistance agreement. Reimbursement shall not be made directly to the attorney. Unless the family assigns benefits to the attorney finalizing the adoption, the attorney shall submit the assignment of benefits with the bill for services, court cost, attorney fees, etc., along with the decree of adoption. Payment will be issued in the adoptive parents name and directed to the attorney's address.

B. Adoption Assistance Agreements for Non-recurring Expenses:

Adoption assistance agreements shall be completed prior to the finalization of the adoption.

Form CFS 4019 Eligibility for Adoption Assistance shall be used to document eligibility for adoption assistance.

Form CFS 4020 Non-Recurring Adoption Assistance Agreement shall be completed for families eligible for reimbursement of non-recurring expenses only.

Form CFS 4021 Application for Adoption Assistance Private Agency Placements shall be completed when applicable.

Form CFS 4022 Adoption Assistance Agreement shall be completed for children who receive adoption assistance.

6260 Developing the Adoption Assistance Agreement

Once the family and SRS worker have agreed upon the amount and type of assistance the CFS 4022, Adoption Assistance Agreement, can be signed. It shall be signed by the parent(s) prior to the finalization of the adoption. It may be signed at the same time the adoption agreement is signed.

6261 Terms of the Agreement

Every effort shall be made to assure the family understands the terms of the adoption assistance agreement. The terms of the agreement are legally binding. If the child has specific medical or emotional needs that created the original eligibility for adoption assistance and SRS has agreed to meet those needs, it shall be so noted on the agreement. The agreement shall not be changed without the mutual agreement of SRS and the family. A new agreement is required for all subsequent changes. The SRS staff person negotiating and executing the agreement shall:

A. Explain to the family why the child is eligible for adoption assistance;

B. Review with the family the responsibilities of each party;

C. Specify the type and amount of assistance;

D. Explain the purpose, amount and time limit for special service payments;

E. Specify the duration of the agreement, and terms of the contract;

F. Explain that the terms of the contract will be fulfilled regardless of where the family resides;

G. Explain the limitations of the adoption assistance program, e.g. there are no automatic increases in the payment as the child gets older, Medicaid coverage is not the same in all states;

H. Explain that the family may request that the subsidy amount be reviewed if the needs of the child change or if the parents ability to meet those needs change:

I. Specify the agreement remains in effect regardless of the family's state of residence. (See Section 9600 for additional information.)

6262 Effective Date of the Agreement

A. Initial Adoption Assistance Agreement

The effective date of the initial assistance agreement shall be the date the adoption assistance agreement is signed. A new agreement is required for all subsequent changes. The effective date of a renegotiated assistance agreement shall be the first of the month following the month the agreement is signed.

B. Approval for Subsidy Post Finalization

For those cases where a cash subsidy has been approved after the adoption decree has been granted, the effective date of the agreement is the date the family made their initial request for assistance.

C. Duration of the Agreement

The adoption assistance agreement remains in effect until the child reaches age 18, unless the agreement is time limited based on the needs of the child and circumstances of the adoptive parents. Assistance may continue past age 18 until age 21, if the child has current documentation of the youth's physical or mental disability which warrants continuation beyond age 18. See section 6210 for eligibility requirements

If the youth is still in high school, adoption assistance, under the state funded program, may continue beyond age 18 until the adult graduates from high school as long as the adult continues to be dependent upon his or her parents for support.

Once the child receives IV-E adoption assistance, adoption assistance continues until either the adoptive parents agree to a change or the adoptive parents are no longer legally or financially responsible for the child.

6263 Renegotiating the Terms of the Agreement

The adoptive family or SRS may request a renegotiation of the agreement if there are significant changes in the circumstances of the child. If the child has a special need which cannot be met through the monthly subsidy payment, or family or community resources, the adoption assistance agreement may be renegotiated. The renegotiated amount may be for a time limited period. The renegotiated amount cannot exceed the limits set in PPM sections 6252 A and 6252 B.

The terms of the agreement cannot be terminated, suspended, or changed without the adoptive family's agreement. A new adoption assistance agreement shall be signed by all parties. All agreements and supporting eligibility documentation shall be maintained in the adoption assistance financial section of the child's case file.

6264 Unilateral Termination of the Agreement

The adoption assistance agreement shall be terminated under either of the following conditions:

A. The family is no longer legally responsible for the child.

The adoption assistance agreement shall be terminated if the family is no longer legally responsible for the child, when the family's parental rights are relinquished or terminated by the court.

Placement in foster care does not terminate an agreement. As long as the family is working toward reunification of the child, assistance may continue. Referrals are not to be made to Child Support Enforcement. See Section 6280.

B. The family is no longer supporting the child.

If the young adult does not meet eligibility requirements for extension beyond age 18, and has graduated from high school, has established a home of his or her own, becomes emancipated, married, or has joined the military service, the adoption assistance case shall be closed. The adoption assistance case shall closed upon the death of a child or the adoptive parent(s), but shall remain open if one parent is alive. Adoption assistance shall not continue past the youth's twenty-first (21) birthday. Refer to section 6210 for eligibility and documentation requirements.

If the agency obtains documentation the family no longer legally or financially supports the youth, SRS shall provide the adoptive parents with thirty days written notice to close the adoption assistance case. The written notice shall provide the basis for the decision to close the case, and inform them of their right to request a fair hearing. See Section 0230 for the Fair Hearing process.

6270 Dispute Resolution

A request for an adoption assistance exception may be sent to the CFS Adoption Assistance Program Manager when the family requests over the subsidy rate per PPM section 6252 A and B, or needs goods or services beyond the scope of the program. Per federal requirements the amount of adoption assistance cannot exceed the amount a child receives if he or she had been in a family foster home. The following dispute resolution procedures may be utilized for original subsidy negotiations and renegotiations.

Adoption Assistance Exceptions

Regional SRS staff shall collect, and review all supporting documentation for an adoption assistance exception. The family shall request the exception in writing explaining the current needs of the child and the reason for the request.

For a renegotiation, the family shall describe how the needs of the child or the circumstances of the family have changed. A current family budget or list of the family's resources shall be included.
The adoptive family shall provide current documentation from:

1. Physicians/therapists for a current summary of special needs.
2. The Child Welfare Case Management Provider. If the child is in the custody of the Secretary, SRS shall obtain this information.
3. Other applicable documents such as current school reports.

SRS staff may visit the family in their home to assess the child's needs, request additional documentation from the family if needed, and help the family access services.

SRS staff shall review the documentation to ensure the family is receiving all types of adoption assistance to the fullest extent possible, medical services through Medicaid, services through school, HCBS services, behavioral management services, etc., by:

1. Reviewing the parent's request with the Medicaid liaison to determine if Medicaid will cover needed services. At a minimum, local staff shall explore the following options with Medicaid; prior authorization, pre-determination, if the child is less than 21 years of age and current on the KBH screen, and enrollment of the in state or out-of-state provider as a Medicaid provider.
2. Exploring additional mental health evaluations and or services.

SRS staff shall evaluate and staff the request with the supervisor by considering the following:

1. Documentation to support the request for an increase in subsidy.
2. Prior to treatment or services the family received and the outcome of the treatment or services.

Staff shall summarize the request and forward the recommendation to the CFS Adoption Assistance program manager. The recommendation shall include:

1. The dollar amount determined to be reasonable to meet the family's request.
2. The rationale or justification for the decision.

6280 Annual Review of the Adoption Assistance Case

A. The Purpose of the Review

An annual review shall determine if the family continues to be legally or financially responsible for the child. It is not a re-determination of eligibility for adoption assistance.

B. Procedures Related to the Annual Review of Adoption Assistance

1. Send the family the CFS 4023 Adoption Assistance Review form and advice the family they have thirty (30) days to return the form.

2. If the family fails to return the review within 30 days, provide the family written notification the case may be suspended or closed if the CFS 4023 is not returned within 30 days and it is determined the family is no longer legally or financially responsible for the child. This letter shall inform the adoptive parent(s) procedures are being initiated to determine whether the adoptive parent(s) continue to have legal or financial responsibility for the child.

3. If the family fails to return the review following the written notification, upon mailing the 2nd letter, staff shall take steps to determine whether the parents continue to be legally or financially responsible. Staff shall have attempt to contact the family by telephone; review FACTS to determine if the child has come to the attention of the agency and may need to contact the child's school to determine the child's attendance and welfare.

4. The adoption assistance cannot be reduced or suspended solely because the adoptive parents fail to respond to the annual review. Review documentation and determine next steps consistent with Section 6264: Unilateral Termination of the Agreement.

C. Children Temporarily Out of the Adoptive Home

For children temporarily placed in a Psychiatric Residential Treatment Facility (PRTF) a portion of the cost for treatment will be paid through Medicaid, provided the child meets the eligibility criteria. The portion which is not Medicaid funded shall be the responsibility of the adoptive parents.

When a child is placed in a PRTF for over thirty (30) days, the agency shall renegotiate the terms of the adoption assistance agreement to help pay the cost of the treatment or placement.

The adoption assistance case cannot be closed or the amount of subsidy decreased without agreement of the family, provided they remain financially or legally responsible for the child.

If a special needs child(ren) is in the Secretary's custody, the adoptive family shall not be referred to Child Support Enforcement. See section 6264.

The CFS Program Administrator or designee may make an exception if the family refuses to either contribute to the costs of the child's care or to a reduction in adoption subsidy payments.

SRS shall review the adoption subsidy payment when the child returns home, unless the family agrees to the amount of adoption subsidy received immediately preceding the child's out of home placement. SRS may negotiate a higher amount if the child's needs or the family's ability to meet the child's needs have changed.

6290 Transfer of Files

The social service case and adoption assistance financial file shall be maintained in the office originally responsible for the case. The adoption assistance financial file shall include all eligibility documentation for IV-E or state only funded adoption assistance. Supporting documentation shall include, but is not limited to medical, genetic, social history and psychological reports. The adoptive family assessment and case logs shall be included for reference during possible renegotiations with the adoptive family.

The social service and adoption assistance financial file may be transferred to the region where the family resides if the family asks for services to maintain the child in the home and prevent disruption.

6800 Recording Adoption Subsidy Information in FACTS

Monthly cash subsidy information is recorded on a child's ADOP and RESP screens. Non recurring adoption reimbursement is only recorded on ADOP. If non recurring adoption reimbursement is not known at the time of discharge, leave reimbursement amount blank. Once the monthly subsidy is determined, maintain this activity as a service action on RESP. A child must have a special needs to be eligible to receive an adoption subsidy; therefore, if an adoption subsidy is being entered, a special needs must be entered as outlined in PPM section 5881.

A. Children Who Receive Medical Card Only Subsidy

Enter a service request to secure member grants (SG) with an achievement date eleven months from the date on the CFS 4022 Adoption Assistance Agreement. Enter a service action code of AO05N with service source of subsided adoptive parent (SAP). Enter the name of the adoptive parents in the description field, initiate the status with an effective date that the medical card became effective with this subsidy. Family structure code does not need to be completed.

B. Children Who Receive Both Monthly Cash Subsidy Payments and Medical Card

Enter a service request to secure member grants (SG) with an achievement date eleven months from the date on the CFS 4022 Adoption Assistance Agreement. Enter a service action code of AO05P with service source of subsided adoptive parent (SAP). Enter the name of the adoptive parents in the description field, initiate the status with an effective date the subsidy was effective per CFS 4022. Enter the caseload number of the worker with responsibility for the subsidy case, and the start date that worker began responsibility for that subsidy case. The worker start date cannot be prior to the effective date of the subsidy service action. Family structure code does not need to be completed. Enter an authorized max unit of 1, with a monthly type (M) and unit reflecting the cash amount of monthly support and effective date from the CFS 4022. Co pay

information is not completed. At this time (prior to finalization), link the provider to an family foster parent (FFP) provider number on PROM.

6900 Eligibility and Payment Procedure for Permanent Custodianship and Adoption Assistance

Section 6900 outlines the eligibility requirements and payment procedures for Permanent Custodianship and Adoption Assistance

6901 Determining Eligibility for Permanent Custodianship Subsidy

Sections 6110 - 6132 specifically outlines the eligibility requirements for permanent custodianship subsidy.

6902 Payment Procedures for Permanent Custodianship Subsidy

The custodian subsidy (GS) payments are made through the SCRIPTS system. The KAECSES foster care system shall be used to continue medical coverage for the GS cases.

A. Initiate Payment

The GS payment shall be initiated the first of the month in which the custodian is granted. These payments shall continue monthly as long as the child maintains subsidy eligibility.
Form CFS 4027 ”r;Request for Permanent Custodian Subsidy” shall be used to initiate initial and subsequent subsidy payments. This form confirms the changes have been made in the KAECSES system as required in Section 6903:

B. Forward form CFS 4027 to CFS for payment.

6903 Medical Card Extension Program for FC-GS

For youth who are eligible, the youth’s original foster care case number and client identification number will be used for the Custodian Subsidy medical card. These cases will be identified as being different from a regular foster care case by assigning a program sub-type.

In order for the child to be eligible for continued foster care medical coverage during the time they are receiving permanent custodian subsidy, refer to Section 5918 for process to be followed.

Medical Card Extension Program
KAECSES Sub-Types

FC GS - Foster Care Custodian Subsidy

If CLPR is showing a non-foster care medical case open during the period the customer is eligible for the Custodian Subsidy Program it will be necessary to determine which medical program is of greatest benefit to the customer. If any of the following benefit plans are appearing on the iCMMIS eligibility screen or the CLPR screen of KAECSES for the eligibility period of the Custodian Subsidy Program, do not open a FC-GS medical card for those months.

* Have to remove the check mark from the filtered box to see these benefit plans.

Benefit Plans of Greater Benefit to the customer
iCMMIS

HCHI - HCBS Head Injury
HCPD - HCBS Physically Disabled
HCTA - HCBS Technology Assisted
HCSED - HCBS Severely Emotionally Disturbed
HCDD - HCBS Developmentally Disabled

KAECSES "SI" Program Type on CLPR

SEPA

SETUP PARTICIPATIONS
112003 13:36

CASE
NAME: FOSTER, ANN CASE NUMBER: 00000542
C MONTH: 1203

NAME	REL	MTHR	MOS	PREG PGM	PART	TAF DAY	START PGM	PART	START DAY	START PGM	PART	START DAY
01 ANN	F	PI		AM	IN	1	FC GS	IN	1			

If the FC case is closed, the GS program sub-types can be entered on CLIR at the time of case registration.

1. FOCA:
Placement Type = Relative (3);
Program Type = Foster Care (FC);
SubProgram Type = Guardian Subsidy (GS)

Legal Status code = 3, 5,11 (this should match the most recent prior legal status prior to Guardianship. If the child was previously listed as legal status 1, please change the status to the correct status of 3, 5 or 11)

2. FCPD name and address of permanent custodian;
Source of funding=GA;
Payment = 0 (Zero).
Authorize the screen.

3. Follow established procedures to notify CFS and remove CW/CBS provider from Medicaid card. Medicaid card will continue through foster care system. If third party insurance is noted, do not change for children whose parental rights are not terminated.

Yearly Reviews
The only yearly review is one completed by the custodian (CFS 4028) and sent to the CFS eligibility specialist. The CFS eligibility specialist then sends a copy of the CFS 4028 to the permanent custodian subsidy staff in SRS Central Office.

Termination of Medical Card
Termination of eligibility for this program occurs when one of the following happens:

1. the youth reaches age 18 (unless the youth is still in high school; then eligibility continues until the youth graduates from high school or turns19 years of age (last day of the month in which they turn 19)
2. the youth becomes emancipated, dies, or otherwise ceases to need support
3. the youth no longer resides with the custodian
4. an annual review is due and the custodian fails to complete and return the review document

6920 Eligibility and Payment Procedures for Adoption Assistance

Sections 6200 - 6290 specifically outlines the eligibility requirements for Adoption Assistance

6921 Opening an Adoption Assistance Case

See E&P Appendix B for detailed data entry instructions on opening an adoption assistance case in KAECSES.

1. Adoption Placement Agreement
2. Adoption Assistance Agreement CFS 4022
3. Eligibility for Adoption Assistance CFS 4019

Adoption assistance payments cannot begin earlier than the date on the Adoption Placement Agreement. The first month's Adoption assistance amount shall be prorated.

In order for the child to continue to receive medical assistance as part of the adoption assistance, refer to section 5918 for information on the process to be followed.

Payment Procedures for Adoption Assistance
Payments for adoption subsidy are generated from an open adoption assistance (AS) case on the KAECSES system. (See Section 5916 for details.)

6922 Special Service Payment

A special service payment may be authorized on a time limited or one-time only basis if the child has a specific need which cannot be met through Medicaid, the monthly subsidy payment or another resource. Services are limited to a maximum of six (6) months. Plans totaling $1,000.00 or more, require prior approval from central office. Requests for approval are to be submitted in writing.

The specific service payment must be identified on the adoption assistance agreement. Specify the length of service and the amount to be paid. Specify amount to be paid if payment is one time only.

The child may have a Wards Account or a Dedicated Account which may be used to purchase necessary items.

A. Payment Procedures
   Special Service Payments based on authorization in the adoption assistance agreement are made utilizing open KAECSES case and customer ID numbers. These payments are generated from VenPay, not KAECSES.
B. Required forms and documentation for payments
   An ADM 3465 shall be completed by CFS staff with a copy of the adoption assistance agreement, which authorizes the payment attached. Also attach an itemized bill for the item or service purchased. Use the applicable adoption assistance state-only PCA codes.

6923 Non-Recurring Adoption Expenses

All families who adopt a Kansas child who meets the definition of special needs are eligible for a non-recurring expense payment. Payments cannot be made until the adoption is finalized. Although we have an agreement with the family, no payments shall be made if the adoption disrupts prior to finalization.

A. Definition of a Kansas Child:

A Kansas child is a child who is in the custody of the Secretary or a private child placing agency and is placed for adoption with an adoption assistance agreement. A Kansas

child is also a child in which the adoption petition is filed in Kansas and the child does not receive adoption subsidy from another state.

B. Allowable Reimbursement

Families may be reimbursed up to $2,000.00 for the finalization of the adoption. Reimbursement is for reasonable and customary fees for:

1. attorney fees
2. court costs including filing fees
3. other costs associated with the legalization of the adoption and which are not incurred in violation of State or Federal Law.

C. Families may also be reimbursed for:

1. transportation for pre-placement visits with the child and reasonable costs of food and lodging when necessary to complete the adoption process.
2. health and psychological exams
3. the home study fee (there is no charge for families adopting children placed by the state).

D. Reimbursement to the Family Post Finalization

Reimbursement is made to the family based upon the adoption assistance agreement. Reimbursement may not be made directly to the attorney except under the following circumstance:

Assignment of Benefits:
A family may sign"assignment of benefits" to the attorney representing the finalization of the adoption. The attorney shall submit the assignment of benefits with the bill for services (court cost, attorney fees, etc.) along with the decree of adoption. Payment will be issued in the adoptive parents name and directed to the attorney's address.

E. Adoption Assistance Agreements for Non-recurring Expenses:

Adoption assistance agreements are to be completed prior to the finalization of the adoption.

Form CFS 4022 "Adoption Assistance Agreement" is used for children who receive other types of adoption assistance.

Form CFS 4020 "Non-Recurring Adoption Assistance Agreement" is signed for families eligible for non-recurring only.

Form CFS 4019 will be used to document eligibility for adoption assistance. All supporting documentation used to determine eligibility should be attached to the CFS 4019 (Eligibility for Adoption Assistance) and placed in a separate adoption assistance folder in both the financial file and in the child's permanent case file.

6924 Payment Procedures For Non-Recurring Expenses

Non-recurring expense payments are made according to authorization provided on form CFS 4020 or CFS 4022. Utilize active KAECSES case and customer ID numbers. These payments are generated from VenPay, not KAECSES.

Required Forms and Documentation
An ADM 3465 shall be completed by CFP staff with a copy of CFS 4020 or CFS 4022 attached. Use the "adoption non-recurring expense" PCA codes.

6925 Annual Review of Adoption Assistance

A redetermination of eligibility for adoption assistance is not required. An annual review of open adoption assistance cases is required to determine if the family continues to be legally or financially responsible for the child. A CFS-4023 Adoption Assistance Review will be sent to the family annually. The family must return the form within thirty (30) days. If the family fails to return the review within 30 days, the family is sent written notice that the case may be suspended or closed if the CFS 4023 is not returned within 30 days and it is determined the family is no longer legally or financially responsible for the child.

If the family should request to speak to a social worker for any reason, a copy of the CFS-4023 is forwarded to the case social worker.

See Sections 5916 and 6280 for details for ongoing eligibility.

6930 Finalization of Adoption Assistance Cases

Upon finalization of the adoption, the KAECSES case shall be closed unless there is a adoption assistance agreement in effect. If so, the case remains open only to monitor and maintain the assistance agreement.

7000 Independent Living/Self Sufficiency

7010 Purpose

Every youth at some point in their lives moves toward self-sufficiency. For youth in foster care, this transition often occurs without the support of a family or any identified resource. Without this support, many youth making this transition are less likely to be prepared for self-sufficiency, than youth who have parents or guardians able to provide guidance and support. It is the responsibility of those who work with these youth to better prepare them for making the transition to self-sufficiency by focusing their efforts on achieving the outcomes that are known to lead to greater success for these youth.

The Kansas Chafee Foster Care Independence Program (CFCIP) provides for an array of services and supports to help youth who are likely to remain in foster care and "age out" of the foster care system.

7020 Referral for Services

A Child Welfare Case Management Provider may refer a youth for Independent Living Services to any SRS Service Center. SRS staff shall provide all independent living services to eligible youth no longer in the custody of the Secretary of SRS, including eligible youth no longer in the custody of the Juvenile Justice Authority or Tribal Authority. If a youth is discharged at age 18 from custody of the Secretary of SRS based on a court approved Transition Plan prepared by the Child Welfare Case Management Provider, a copy shall be provided with the referral. The SRS Service Center where the young adult is referred shall establish the self sufficiency case and provide IL services throughout the life of the case, unless the young adult requests to transfer as noted below.

Youth may request services without a referral at any SRS Service Center where they are currently residing up until their 21st birthday. Youth receiving services in one area of the state and choose to move to another area of the state may request to transfer their services to the SRS Service Center where they will be relocating. Youth should coordinate with the SRS IL Regional Coordinators in those regions. SRS IL Coordinators shall use the Transition Plan Form CFS 3059 to coordinate the transfer of services to another region. For those youth who will be served through an HCBS waiver, a copy of the form shall be provided to the SRS Regional Quality Management Specialist.

7021 Referral From Other States

Youth who exit care from other states and move their permanent residence to Kansas may be referred or self refer for services in Kansas. For a youth in foster care, the State with placement and care responsibility is responsible for providing Chafee services, including ETV to the youth. The State in which a former foster youth resides is responsible for providing such an eligible youth with Chafee and ETV services. For youth no longer in foster care, who are already receiving ETV and the youth moves to another State for the sole purpose of attending post secondary education or training, the youth's original State of residence will continue to provide ETV services to the youth for as long as the youth remains eligible for the program.

It is advised the Independent Living Coordinator contact the State Independent Living Coordinator for that respective state if a youth moves from or into Kansas. Information on State's Chafee Programs and Services, including State Independent Living Coordinator's contact information may be obtained from the National Resource Center for Youth Development website under the state pages. http://www.nrcyd.ou.edu/state_pages.html Youth must meet eligibility criteria for specific services as outlined for each state. Determination of foster care/custody status from other states will need to be determined through contact with coordinating state.

7030 Assessment

Youth shall complete the age appropriate Ansell-Casey Life Skills Assessment (ACLSA) within 60 days of completion of the first Self Sufficiency Case Plan. If youth has completed an ACLSA within six months of seeking services from SRS, this ACLSA may be used for the first Self Sufficiency Case Plan. A new ACLSA shall be completed at a minimum of once every twelve months. This tool shall be used to help direct the individual case planning and services provided. Prior to the completion of the ACLSA, youth shall have two tasks identified on the case plan as needs identified by using a previous ACLSA completed by the youth while in placement, or needs identified by the youth and Social Worker at the time of request for services. Any needs identified by the assessment shall be addressed by SRS and the Youth. The ACLSA may be accessed through http://www.caseylifeskills.org See PPM 3000 Case Management for specific procedures on completing assessments.

7031 Assessment-National Youth in Transition Database Survey

A. The National Youth in Transition Database (NYTD) federal initiative requires states to conduct client specific data collection activities on an ongoing basis. The purpose of NYTD is to measure the nature, extent and effectiveness of independent living services provided to young adults who have been released from custody.

B. Data shall be collected from youth who meet the definition of a baseline population:

1. 17 years old or who reach age 17 during a specified federal fiscal year (FFY); and
2. in a foster care placement, including relative, kin and secure care placements; and
3. in custody of the Secretary of SRS or the Commissioner of the Juvenile Justice Authority at any time within forty-five days after their 17th birthday, whether or not they received independent living services or were AWOL.

C. A baseline population excludes youth:

1. in detention facilities, forestry camps, training schools, and facilities primarily for the detention of youth adjudicated as delinquent; or
2. in care of a tribal agency unless the tribe is receiving Title IV-E foster care payments; or
3. at home but in the care of the state agency (trial home visit, at home supervision)

D. Data shall be collected through administration of Appendix 7D, National Youth in Transition Database (NYTD) Survey Questions. The NYTD survey questions shall be administered within forty-five days following the youth's 17th birthday.

E. Beginning October 1, 2010, NYTD survey questions shall be administered to the baseline population of youth who are 17 or turn 17 during October 1, 2010 through September 30, 2011. Child Welfare Case Management Providers shall administer NYTD survey questions to members of the baseline population in the custody of the Secretary of SRS. SRS region staff shall administer NYTD survey questions to baseline population members in the custody of the Commissioner of the Juvenile Justice Authority. Survey questions shall be administered through September 30, 2011. Every three federal fiscal years thereafter a new baseline population will be surveyed.

F. The National Youth in Transition Database Survey questions shall be administered by SRS to youth in each baseline population during the federal fiscal year which the youth reach age 19 and age 21, beginning October 1, 2013.

G. Survey questions shall be made available to all youth required to be surveyed. Methods to administer questions shall include:

1. mail through the US postal service
2. online through an internet web site that may be accessed through other web sites
3. by telephone
4. face-to-face
5. email

6. at youth activities, such as Regional Advisory Council retreats and youth conferences

7040 Case Planning

Youth must be actively involved in the development of their case plan. All case plans for youth receiving SRS Independent Living Services shall be youth driven. Cases opened for independent living services shall be opened as a Self Sufficiency Plan CFS 7000 and incorporate the activities, services and supports in the young adult's Transition Plan. The CFS 7000 shall be completed by SRS staff for ETV or tuition waiver eligible youth served by the Child Welfare Case Management Provider. Youth no longer in the state's custody who receive SRS Independent Living services shall have contact from the assigned SRS staff a minimum of one time per month. See PPM 3000 Case Management for specific procedures on case planning.

All youth receiving Self-Sufficiency/Independent Living services from SRS shall have a CFS 7000 which incorporates the court approved Transition Plan and an open case in FACTS. A new FACTS case is not required at this time for young adults requesting ETV or tuition waiver services who are served by the Child Welfare Case Management Provider.

7100 Eligibility

Specific eligibility requirements apply to all services and supports offered through the Independent Living/Self-Sufficiency Program. Youth in out of home placement through their 18th birthday are eligible for all services and supports, as this youth is considered to have "aged out" of care. Out of home eligible placements, include resource homes, relative and kinship placements, group homes, trial home visits, and independent living settings. Youth on run status from a foster care placement on their 18th birthday and youth placed in Secure Care as a Child in Need of Care are eligible for Independent Living/Self-Sufficiency services and supports. Run status and Secure Care are considered foster care placements for specific eligibility criteria. See individual service and/or support for specific criteria for eligibility. Youth who have a permanent order of guardianship or finalized adoption after their 16th birthday may be eligible for specific services and supports.

A youth's marital status does not impact eligibility for services or supports.

7110 Basic Chafee Eligibility

Youth who were in out of home placement for any length of time on or after their 15th birthday may be eligible for specific independent living/self-sufficiency services through basic Chafee Eligibility

7120 JJA and Tribal Youth Eligibility

Youth in the custody of the Juvenile Justice Authority (JJA) in an out of home placement, with the exception of a correctional facility or any lock down facility, or youth in the custody of tribal jurisdiction are eligible for Independent Living/Self-Sufficiency services through SRS. Youth shall meet the same criteria and requirements for specific services as youth in the custody of the Secretary of Social and Rehabilitation Services.

Youth eligible for the tuition waiver under the Kansas Foster Child Education Assistance Act must have been in the custody of the Secretary of SRS.

7130 Youth in Aftercare Period

Youth under 18 years of age, will be referred back to the Child Welfare Case Management Provider for services or support if they have not completed the 12 month aftercare period following reintegration, guardianship or finalization of adoption

7200 Services and Supports Provided through the Independent Living/Self-Sufficiency Program

Independent Living Services and Supports provided to youth depends upon the individualized needs of the youth and the activities, services and supports identified in the court approved Transition Plan for those young adults released from custody. The following services provided by SRS may be available to youth. Other services and supports may be available to youth as needs indicate.

- Assistance with completion of high school or GED requirements;
- Training in daily living skills (i.e. cooking, household skills, banking);
- Budgeting and money management;
- Locating and maintaining housing;
- Career Planning
- Job Search and Resume;
- Assistance with funds to provide clothing for interviews, uniforms, etc;
- Transportation for education or employment purposes;
- Adult education classes;
- College Classes/Credits prior to completion of secondary education;
- Expenses related to mentors
- IL Subsidy payment for room and board;
- Assistance with post secondary education and/or certified training;
- Medical Card Extension Program;

- Medical Policies, prescriptions and medical services (Not to be used for youth eligible for Medical Card Extension Program)
- SSI referral under Children & Family Services contract with Kansas Legal Services
- Other training or services identified by the youth to help the youth transition to self-sufficiency;
- Youth Leadership training and opportunities
- Referral to HCBS services for eligibility determination

7201 Transportation/Vehicle Repair

transportation costs (public transportation costs and mileage reimbursement for arranged transportation) and vehicle repair as deemed necessary for the sole purpose of helping youth meet the education and training needs identified as part of their case plan. The reimbursement for mileage will be the agency allowable rate for travel reimbursement. Vehicle repair shall be considered only when public transportation is not available or is inadequate to meet the youth's transportation needs as related to the youth's education and/or training goals. All available transportation options must be thoroughly explored prior to authorizing a vehicle repair. Documentation of availability or the inadequacy of public transportation, along with the documented needs relating to the youth's education and/or training goals shall be included in the case file.

Vehicle repairs must be approved by the CFS Program Administrator or designee. A limit of up to $675.00 is allowed for vehicle repairs for the entire service period of the education or training plan.

Prior to authorizing a payment for vehicle repair the following items shall be considered and documented in the case file:

- Is the vehicle registered in the youth's name?
- Is the vehicle currently insured?
- Does the youth have a valid driver's license? (copy of current drivers license in file)
- Is the vehicle the only resource available to meet the youth's transportation needs?
- Documentation from authorized/certified mechanic of repairs and itemized costs

7202 Medical

For those youth not eligible for the Medical Card Extension Program, Chafee funds may be used to purchase medical policies, prescriptions or medical services for youth who have been released from State Custody. Chafee funds may be used to pay premiums for Health Wave eligible youth. Eligibility for all Medicaid programs shall be determined prior to using Chafee funds for medical.

SRS Independent Living Coordinator shall work with youth to determine the best approach to selecting a medical policy or services to fit the needs of the youth in relationship to the youth's post secondary education or training program. Medical policies and services offered through educational institutions shall be explored by the youth and SRS staff, if available.

7203 College Classes/Training Programs

Youth who are in out of home placement, enrolled in high school or GED program, and currently receiving services by the Child Welfare Case Management Providers may be eligible for financial assistance for college classes/training programs. Child Welfare Case Management Provider case managers shall coordinate services for eligible youth in their care through communication with local SRS office

7210 Life Skills Services and Supports

Youth receive Life Skills services provided by Child Welfare Case Management Providers during out of home placement. Young adults no longer in placement may have continued needs after the transition as identified in the young adult's court approved Transition Pan. SRS shall assess and provide identified Life skills services to youth. All Life Skills services and tasks shall be documented on the Self Sufficiency Case Plan CFS 7000. See PPM 3000. Life Skills services may include but are not limited to the following domains:

- Communication
- Daily Living
- Home Life
- Housing & Money Management
- Self Care
- Social Relationships
- Work Life
- Work & Study Skills
- Career Planning

When a youth is already a parent or expecting a child, classes in parenting skills and child care shall be made available and documented. Casey Life Skills supplemental assessments for Parenting Infants and Parenting Young Children may be used as resources in working with young parents.

Youth will be provided information regarding all aspects of health care and information regarding avoidance of unsafe health practices.

- use of tobacco, products, drugs and alcohol;
- sexually transmitted diseases or unplanned pregnancies;
- factual information on how and when to seek medical care;

- basic first aid training;
- discussions on health insurance;
- specific information for any youth who has special medical needs.

7211 Eligibility for Life Skills Services

All youth otherwise eligible for Basic Chafee services are eligible for Life Skills Services through SRS. Basic Chafee eligibility includes all youth who were in State Custody and out of home placement for any length of time on or after their 15th birthday.

7212 Resources for Life Skills Services

Free resources are available through www.caseylifeskills.org related to the nine (9) life skill domains listed above. Additional resources may be used as deemed appropriate to meet the youth's needs

7220 Foster Care Medical Card Extension Program

This program provides medical coverage to young adults who are released from custody at age 18 and meet specific eligibility guidelines. Refer to Section 7910.

Child Welfare Case Management Providers, local JJA agency and/or SRS staff working with youth who will leave care at age 18, shall inform the youth of the Medical Card Extension Program and assist the youth in preparing the application CFS 8595 prior to their release from custody. Documentation of the youth receiving assistance to prepare the CFS 8595 should be made in the youth's case file. A youth's eligibility for the Medical Card does not require the youth to participate in Independent Living services with SRS.

7221 Eligibility for Foster Care Medical Card Extension Program

A. Medical coverage through the Medical Card Extension Program is available for young adults 18 to 21 years of age, who are in the custody of the Secretary of SRS, the Commissioner of the Juvenile Justice Authority, or Tribal Authority and in an eligible out of home foster care placement on the young adult's 18th birthday. Young adults who are in a detention, correctional facility or any lock down facility on their 18th birthday are not eligible for the Medical Card Extension Program. If eligible, the medical card coverage will extend to the last day of the month the young adult turns 21 years of age.

B. An eligible out of home foster care placement for the purpose of this program includes all foster home, group home, KDHE licensed or approved, contractor agency approved and independent living placements. Young adults on run status from a foster care placement, in home trial visit, or placed with a relative on their 18th birthday and

young adults placed in Secure Care as a Child in Need of Care are also eligible for the program.

C. Young adults shall be responsible for any co-pay that is required with the Foster Care Medical Card Extension Program.

D. Young adults shall be recognized as a KAN Be Healthy eligible participant. The last day beneficiaries are eligible to participate in the KAN Be Healthy program is the day before the young adult turns 21 years old. KAN Be Healthy beneficiaries receive additional benefits including, but not limited to prescription medications, over-the-counter prescriptions, Durable Medical Equipment products, Non-Emergency Medical Transportation (with prior approval) services, eye exams and eyeglasses as needed, dental service, and hearing/audiology services.

E. A young adult's marital status does not impact eligibility for the medical card extension program.

7222 Procedures for Eligibility and Annual Review

Children & Family Services will complete the application process and determine eligibility associated with extending medical coverage through the Medical Card for all eligible young adults. Annual reviews for young adults receiving the Medical Card are required. No income or resource testing will be required for eligibility. The young adult will be responsible to keep CFS staff informed of current address and may contact any SRS office to inform of changes required for Medical Card coverage.

Procedures for eligibility for applications received:
CFS eligibility staff or IL Coordinators shall notify all young adults who have not submitted an application and who may be eligible for the Medical Card Extension Program using the CFS 8596 Notice of Action-Eligibility Information and attaching the CFS 8595 Application for Medical Card Extension Program.

See Section 7910 for detailed instructions on processing the application.

The CFS 8596 can be used anytime an eligible young adult comes to the attention of SRS and/or the contractor. The Application for Medical Card Extension Program CFS 8595 must be filled out and signed by the applicant. The Application CFS 8595 can be received by any SRS office and shall be date stamped by that office. Eligibility for coverage will be granted for 3 months prior to application date unless the young adult rejects additional months on application form. CFS eligibility staff shall process and determine eligibility for this program. Once eligibility is determined, CFS eligibility staff shall notify the young adult of Initial Eligibility and document on the CFS 8597.

Procedures for Annual Review:
CFS eligibility staff shall be responsible to document a Yearly Review using the CFS 8598. If the young adult has changes to current address during the year, the young

adult should contact the CFS IL Coordinator or eligibility worker and indicate such changes. To terminate the medical card, for any allowed reason, CFS eligibility staff shall notify the young adult using the CFS 8599. The Notice of Action for Termination shall be sent to the young adult at least ten business days prior to any action.

7230 Independent Living Subsidy and One Time Start Up Costs

Young people may request subsidy from the state and/or a one time start up cost if they need short term assistance to achieve an independent living education or employment goal and are willing to work with the agency to achieve that goal.

Independent living subsidy is a time limited financial plan between a youth leaving foster care and SRS. The financial plan includes expectations from both the youth and the agency. The youth is expected to be working to achieve specified self sufficiency outcomes requiring an education or employment plan and to meet regularly with his or her community advisor/mentor and agency staff. Agency staff are expected to work with the youth to help them locate resources necessary to achieve the outcomes and to provide needed training and encouragement.

Subsidy does not provide full financial support. Youth who receive subsidy are most likely lacking a current support system to adequately provide for their financial needs, struggling financially, unemployed or underemployed but actively searching for employment and have exhausted other resources. It is expected that the youth will assume increasing responsibility for meeting his or her own needs while receiving subsidy.

Subsidy is not a general entitlement program and is based on a youth's identified goal to achieve independence and willingness to enter into a contract and cooperate with the agency to work toward that goal

7231 Eligibility for Subsidy

A. Youth eligible for subsidy and one time start up costs are those youth in the custody of SRS, JJA or Tribal Authority on or after their 18th birthday, who have been released from custody and left foster care because they attained 18 years of age, and who have not yet attained 21 years of age. Youth must have been in an eligible out of home placement when released of custody on or after their 18th birthday to receive subsidy. A youth's marital status does not impact eligibility for subsidy.

B. Subsidy can be provided as long as a youth is living in a setting where they are financially responsible for maintenance and expenses. The youth may be living alone, with a roommate(s), or in a family setting as long as the youth is financially responsible for his or her own maintenance and expenses. If the youth has a roommate(s), documentation of the roommate's share of expenses must be provided prior to the

establishment of the subsidy amount. If the youth is living with the family they were removed from, the Social Worker shall have documentation from the youth showing the youth's financial responsibility for maintenance and expenses.

C. Youth shall be actively working on completion of secondary education or the equivalent, or an employment plan to be eligible for subsidy. Subsidy is based on the youth's needs and the youth's willingness to work with the agency on a time specified goal. Priority for use of these funds will be given to youth who do not have family resources who are able or willing to provide support to the youth. The SRS worker, mentor, and youth will complete the CFS 7000, 7000A, 8591, 8592 and 8594.

D. Youth still under the responsibility of the Child Welfare Case Management Provider are not eligible for SRS IL Subsidy or One Time Start Up Costs.

7232 Education Plan

To be eligible for Independent Living Subsidy or Foster Care Transition Support services, youth shall be working on completion of secondary education, or the equivalent. An education plan that details the completion of the education or equivalent is required for the youth to receive Foster Care Transition Support services or subsidy. Youth with educational plans must attend class on a regular basis, complete assignments and maintain passing grades. The plan shall be formally reevaluated by the youth, and his or her mentor at a minimum of every six months. The youth must be enrolled in the educational program specified in the plan and passing to continue to receive subsidy or Foster Care Transition Support services. Documentation of each reevaluation shall be attached to the plan.

An education plan is a written plan which includes the following:

- Documentation of Enrolled Status in Identified Educational Program;
- Completed housing plan which includes the address of the residence, names of all household members occupying the residence, and copy of signed lease or rental agreement, and landlord's name and telephone number if applicable;
- Completed monthly budget plan CFS 7000A which includes documentation of all resources and projected needs. This budget plan should specify the amount and source (e.g. savings, job) of the youth's income, and projected expenses including first month start-up security deposits (e.g. housing, utility, telephone), and on-going utilities, furniture/ household, transportation, food, and school/work needs;
- Documentation of regular attendance and a copy of grades shall be attached to the plan at the end of each semester of study;
- Documentation of employment or active pursuit of employment ;
- Educational Advocate if appropriate.

The Social Worker and Youth shall review the youth's educational plan at least every six (6) months or more frequently, if indicated.

Youth who have completed secondary education and who are enrolled in post secondary education and/or certified training programs are not eligible for regular subsidy, but may be eligible for Foster Care Transition Support services. Youth participating in post secondary education and/or certified training programs may receive room/board assistance through the Education & Training Voucher program (ETV).

7233 Employment Plan

If the youth is to be eligible for Foster Care Transition Support services or receive subsidy as a part of an employment plan, there must be a reasonable expectation of completion of the plan. Youth with employment plans must be working with the agency on job readiness skills and actively seeking employment. All youth who wish to receive Foster Care Transition Support services on a time limited basis after release of custody or apply for subsidy must have a signed employment plan. Foster Care Transition Support services or subsidy is available to youth who are unemployed or underemployed but actively searching for employment. Documentation is required to verify the youth's efforts at becoming employed and the youth's willingness to accept part time employment while seeking a full time job. Staff and the mentor will verify that the youth is working with employment services and following up on job possibilities. Funds should be used to support the employment search needs of the youth.

An employment plan is a written plan which includes the following:

- Documentation of completed instructional requirements on appropriate dress, interviewing skills, completing an employment application, and money management;
- Resume;
- Completed job search plan which includes the development of a weekly log of not less than 5 employment opportunities where the youth will apply for employment and will document the name of the contact person for the job;.
- Completed monthly budget plan CFS 7000A which includes documentation of all resources and projected needs. This budget plan should specify the amount and source (e.g. savings, job) of the youth's income, and projected expenses including first month start-up security deposits (e.g. housing, utility, telephone), and on-going utilities, furniture/ household, transportation, food, and school/work needs.

The Social Worker and Youth shall review the youth's employment plan at least every six (6) months or more frequently if the youth's circumstances change.

7234 Subsidy Rates

The maximum amount of subsidy for room and board is $300.00 per month. Most plans are less than this as the amount offered will depend on the youth's income and resources. Earnings and social security, or SSI payments are deducted in computing

the amount of subsidy needed. The amount provided in subsidy will be reevaluated whenever the youth's situation changes or at a minimum of every six months. A youth is considered to have attained self-sufficiency if current monthly gross earnings are greater than $1,500. Youth who have attainted this level of earnings will not qualify for room and board subsidy. The subsidy provided for room and board is used to supplement the youth's earnings and to provide a minimum safety net while transitioning the youth to self sufficiency.

Independent Living subsidy shall be provided on a tiered approach to help young people work towards self-sufficiency as they participate in the Independent Living program.

Maximum Step: Months 1-6	100% of subsidy based on need (CFS 7000A)
80% Step: Months 7-12	80% of initial subsidy amount
70% Step: Months 13-18	70% of initial subsidy amount
60% Step: Months 19-24	60% of initial subsidy amount
50% Step: Months 25 up to 36	50 % of initial subsidy amount

Young people receiving IL Subsidy on January 1, 2008, will continue to receive their monthly subsidy per the CFS 7000 Subsidy Agreement until their next six (6) month case plan is due. At the next 6 month case plan review the Youth and SRS Social Worker/IL Coordinator will determine which step the youth's subsidy will be moved to based upon current need, resources and youth's budget. Once the youth's step has been determined, it will follow the reduction according to the above schedule or until youth reaches age 21, whichever occurs first. If a case is closed prior to age 21 after having received subsidy and the young person indicates a need for subsidy to be reopened, the starting step will be determined based upon current need and resources.

A young person's maximum subsidy is determined based on need, and subsequent tiers are derived from the maximum subsidy amount

7235 Subsidy Payment Procedures

(Refer to Section 5400)

The youth, mentor and SRS Independent Living Coordinator will complete the CFS 7000 and 7000A listing the youth's income and expenses. Staff will complete the CFS 8591 form and send it to the SRS Regional pay unit. Subsidy payments will be generated prospectively (i.e. December payments will be paid in early December). Subsidy payments may be sent to the mentor who will be working with the youth on an education or employment plan.

Subsidy payments may also be made directly to the youth if this arrangement is agreed upon by the youth, SRS IL Coordinator and mentor. This arrangement will accommodate youth in making room/board payments in instances when mentors are not located in the same geographic area of the state or in other instances where this

arrangement is more accommodating to the youth. Good judgment must be applied in using this procedure as not all youth may be capable of making good decisions regarding payment of their room/board upon transition to adulthood.

7236 One Time Start Up Costs

Youth who are eligible for Independent Living Subsidy may also be eligible for One Time Start Up Costs.

A. One Time Start Up Costs- not including rent or room and board
Youth who are leaving foster care to live on their own for the first time may need a one time payment for start up expenses, not including rent. These expenses may include utility deposits, necessary furniture, supplies, or other items as deemed appropriate by the youth and worker. A one time maximum payment of $500 is allowed for this purpose. If the youth's budget indicates that he or she can manage without other financial support the case can be closed.

Payments may be made for utility connection, furniture, household supplies, or other items deemed appropriate within the one time maximum payment of $500.00.

B. One Time Start Up Costs - Rent or Room and Board
Youth who are leaving foster care to live on their own for the first time may need assistance with the initial rent/room and board costs, including deposits. Room and board are considered to be lodging and meals, often provided for a set fee. A one time maximum payment of $300.00 is allowed for this purpose. If the youth's budget indicates that he or she can manage without other financial support, the case can be closed. (Note: Rent would be paid directly to the landlord. Room and Board costs could be paid directly to the youth for payment of services to the landlord on their own.)

7240 Mentor

All youth need a positive relationship with an adult who models responsible behaviors and will support the goals of self-sufficiency. The Mentor must be available for the youth to contact for advice, counsel, and support. Youth who do have a positive relationship with an adult who models responsible behaviors, who is willing and able to offer advice and guide the youth have a greater chance of succeeding. This mentor may be a family member, current or former foster parent, minister, teacher, or an adult in the community. All youth should be provided with opportunities to interact and develop relationships with dedicated adults in the community.

If a youth receiving services from SRS is unable to identify an adult who models responsible behaviors and supports the goal of self-sufficiency, SRS will assist the youth in identifying a mentor.

7241 Mentor Qualifications

The qualifications for Mentors include:

- age 25 or older
- ability to pass Child Abuse/Neglect Central Registry clearance;
- ability to pass KBI security clearance;
- ability and willingness to work with adolescents and young adults;
- knowledge of budgeting and money management;
- knowledge of skills necessary to succeed in daily life;
- supports the goal of self-sufficiency;
- models responsible behaviors

7242 Responsibilities of Mentor

The responsibilities for Mentors include the following:

- Sign the Mentor Statement of Understanding (CFS 8594);
- Participate in training/ educational activities regarding the roles and responsibilities of being a mentor as required or offered;
- Maintain regular contacts with the youth as agreed to on the CFS 7000 form;
- Document contact meetings with the youth on the CFS 8592 form

Act as a source of counsel, advice and support to the youth

Mentors who are providing counsel, advice and support to youth who are receiving subsidy must also:

- Sign the CFS 7000 Extended Subsidy Agreement
- Advise the youth on budgeting and money management
- Advise and consult with the youth on details specific to youth's education or employment plan
- Receive and disperse the monthly subsidy check (if this is the arrangement agreed upon by mentor and youth)

7243 Mentor Fees

Mentors who are providing council and support to youth who are receiving IL subsidy from SRS may receive a $50.00 monthly fee. This fee is not included in the amount of subsidy provided to the youth. The intent to provide a mentor fee shall be documented on the case plan. See E&P Section 5500

7250 Special Services and SSI Referrals

Special services will be pursued when a need is identified or suspected. These include:

- An educational advocate
- IEP or USD 504
- Vocational rehabilitation services
- GED or Alternative Diploma
- SSI

SSI referrals for youth 18-21 years of age who are participating in independent living services through SRS, may be referred under the Children & Family Services contract with Kansas Legal Services.

The youth shall be working on completing a high school education, GED or other alternate education plan. A GED can only be explored if a youth:

- has dropped out of school and can not be persuaded to return to school;
- is 18 years old;
- is two or more years behind his or her grade level.

Youth shall be referred for assessment with vocational rehabilitation services if youth has identified needs and if the assessment process has not been completed prior to the youth receiving services from SRS.

7251 Eligibility for Special Services and SSI Referrals

All youth otherwise eligible for Basic Chafee services are eligible for special services and SSI referrals through SRS. Basic Chafee eligibility includes all youth who were in out of home placement for any length of time on or after their 15th birthday.

7260 Education and Training Voucher Program

Education and Training Vouchers are available to eligible youth for assistance based on need with post secondary education and certified training programs. ETV funds may be used for costs associated with Post Secondary Education and/or training only and cannot exceed the total cost of attendance per youth per plan year. ETV shall be provided on a tiered approach to help young people with post secondary education and/or certified training programs.

Year 1 up to $3,500 in total payments per plan
Year 2 up to $2,500 in total payments per plan
Years 3 or more up to $2,000 in total payments per plan

Youth may elect to attend Post Secondary Education and/or Certified Training Programs outside of Kansas and may use Kansas ETV for this purpose. If a youth is receiving ETV and attending Post Secondary Education and/or Certified Training outside of Kansas, all requirements still apply for case planning purposes. The SRS worker and youth may need to use phone or e-mail for regular contacts.

Youth eligible for Chafee Foster Care Independence Program (CFCIP) may be eligible for post secondary education and training opportunities through the ETV program. The Foster Care Tuition Waiver program is included in the ETV program and is utilized through Kansas Board of Regents' Institutions. Other education and certified training opportunities may be available to youth as allowable under the Education and Training Voucher Program. All youth must have an open service case to receive ETV, including the Foster Care Tuition Waiver.

Youth who are moving to another state and establishing permanent residency in that state, for purposes other than attending a Post Secondary Educational Institution or Certified Training Program must apply for ETV funds through the State where they will establish permanent residency.

Youth must reapply for ETV funds on a yearly basis, as it coincides with the youth's education or training plan. All plans shall be for a twelve month period between July 1 and June 30th. If a youth finds themselves unsuccessful in completing their education or training plan, the youth may reapply at any time up until they are no longer eligible for the program. The SRS worker shall use good judgment in working with youth who have received ETV in the past and who have not been successful in continuing in their education or training plan. It is foreseeable and acceptable that youth may make changes in their education or training plans as they move into different stages of their adult lives. These changes should not be used against youth in accessing ETV unless there is a pattern of the youth's inability to work through his/her education or training goals. Assistance should be provided to the youth to keep motivation towards completing their education or training goals.

ETV shall only be used at Post Secondary Educational Institutions or Certified Training programs that meet all three of the following criteria:

- Admits as regular students only persons with a high school diploma or equivalent; or admits as regular students persons who are beyond the age of compulsory school attendance; and
- Public, Private, or Non-Profit; and
- Accredited or pre accredited and is authorized to operate in that state.

Practice Note: Youth who have not completed high school or GED requirements who are beyond the age of compulsory school attendance may be eligible for ETV services and supports at Post Secondary Educational institutions or Certified Training Programs whom accept students under this criteria.

7261 Eligibility for ETV

Youth who meet one of the following criteria may be eligible for ETV funds in Kansas. Foster Care Tuition Waiver Program eligibility requires specific eligibility. See PPM 7262 A

- Youth who graduated from High School or completed their GED while in a foster care placement and in the custody of the State of Kansas, or
- Youth who were in a foster care placement and in the custody of the State of Kansas when they attained the age of 18, or
- Youth with a finalized adoption from foster care after attaining age 16, or
- Youth who have been in a foster care placement and in the custody of the State of Kansas between the ages of 16 and 18, with a permanent order of Guardianship attained after the age of 16.
- Youth who were in an out of home placement for any length of time after their 15th birthday may be eligible for Education and Training Voucher Program (ETV). (Kansas Basic Chafee eligibility)

Youth enrolled in a Post Secondary Education or Certified Training Program on their 21st birthday, are eligible until they turn 23 years of age, as long as they are enrolled in a post secondary education or training program and are making satisfactory progress toward completion of that program (satisfactory progress is defined by individual program guidelines)

Youth who have received acceptance or conditional acceptance notice from a post secondary education or training program and who have or will meet one of the above eligibility requirements for ETV, may receive funding for deposits and expenses as approved. ETV may be used to pay for dorm fees due prior to youth completing secondary education or GED for an ETV eligible youth who is a high school senior with an acceptance notice from a post secondary education institution.

A. Tribal Custody/Jurisdiction
Youth affiliated with the tribes and in custody or jurisdiction of the tribal court meet the same criteria as youth in the custody of the State of Kansas. Tribal youth may be eligible for Education & Training Voucher (ETV) program while still under Tribal Jurisdiction, depending upon the youth's educational status. If a Tribal youth graduates from high school or completes a GED while in foster care and prior to 18th birthday, and is preparing for post secondary education or training, youth may be eligible for ETV program through SRS. Tribal case managers will coordinate services for youth eligible for ETV and still in their custody and care through communication with local SRS office.

B. JJA Custody
Youth in custody of JJA who meet Chafee Eligibility meet the same criteria as youth in the custody of the State of Kansas. JJA youth may be eligible for Education & Training Voucher (ETV) program while still in JJA custody, depending upon the youth's educational status. If a JJA youth graduates from high school or completes a GED while in foster care and prior to 18th birthday, and is preparing for post secondary education or training, youth may be eligible for ETV program through SRS. JJA case managers will coordinate services for youth eligible for ETV and still in their custody and care through communication with local SRS office.

C. Youth with Child Welfare Case Management Providers
Youth who are currently served by Child Welfare Case Management Providers may be eligible for the Education and Training Voucher (ETV), depending upon the youth's educational status. If a youth currently served by a CB/CWP, graduates from high school or completes a GED while in foster care and prior to 18th birthday, and is preparing for post secondary education or training, youth may be eligible for ETV program through SRS. CB/CWP case managers will coordinate services for youth eligible for ETV and still in their care through communication with local SRS office.

7262 ETV Services and Supports

ETV services include services and supports that are necessary for the youth to participate in post secondary education and certified training programs, include but are not limited to the following services. Additional services may be allowable on an individualized basis based on the needs of the youth.

- Foster Care Tuition Waiver Program -applicants approved and enrolled between July 1, 2005 and June 30, 2006, include amount of tuition/fees only on CFS 7000 payment made by central office, not through local offices;
- Tuition and fees for Post Secondary Educational institutions (i.e. Educational institutions and programs not governed by the Kansas Board of Regents);
- Tuition and fees for certified training programs (i.e. computer/technical programs and cosmetology programs);
- Room and Board associated with post secondary education or certified training program;
- Books/materials related to post secondary education or training program;
- Special Fees (i.e. extra fees related to specific education/training programs);
- Child Care
- Technical Equipment (i.e. special calculators, computers or other technical equipment to aid in post secondary education or training program)
- Tutoring (i.e. youth needs special tutoring to complete post secondary education or training program requirements/completion)
- Transportation Costs related to post secondary education and/or training;
- Clothing related to post secondary education and/or training;
- Medical policies, prescription and medical services purchased to assist youth in post secondary education and/or training (cannot be used for youth eligible for Medical Card Extension Program).

A. Foster Care Tuition Waiver Program -applicants approved and enrolled prior to July 1, 2006

The program pays for tuition and fees at Kansas vocational-technical schools, community colleges, Washburn University and Kansas Board of Regents Universities. The waiver covers tuition and fees only, with other school related charges and living expenses the student's responsibility. The waivers are limited to a total of eight (8)

semesters of undergraduate instruction or through the semester the student turns 21 years of age, or the equivalent thereof per each eligible applicant.

The Foster Care Tuition Waiver Program will continue to apply to applicants who have been approved for the tuition waiver and are enrolled in a Kansas educational institution prior to July 1, 2006.

Applicants approved for the Foster Care Tuition Waiver Program and enrolled in a Kansas educational institution between July 1, 2005 and June 30th, 2006, will continue to receive the Foster Care Tuition Waiver through the use of Education and Training Voucher (ETV) funds.

Eligibility for Foster Care Tuition Waiver Program
Students must enroll as a full time undergraduate; be in good academic standing; and work at least an average of 10 hours a week to remain eligible for the program.

SRS Regional IL Coordinator shall contact Educational Institution to obtain documentation of total cost per semester through the Tuition Waiver in order to calculate and determine available ETV funds.

B. Tuition and Fees for Post Secondary Educational Institutions
Tuition and fees associated with allowable post secondary education for youth not eligible or receiving the Foster Care Tuition Waiver. This may include special fees as applicable. The institution shall award a bachelor's degree or at least a two-year program that is acceptable for full credit toward such a degree.

C. Tuition and Fees for Certified Training Programs
Tuition and fees associated with training programs that provide at least a one year training program to prepare students for gainful employment in a recognized occupation.

D. Room/Board
Youth may be eligible for room/board support associated with Post Secondary Education or Training Program through ETV. Youth who are not eligible for regular subsidy generated through the KAECSES system, but who do meet eligibility for ETV funds can be awarded room and board assistance. An example would be a youth who graduates from high school at 17 while in a foster care placement and is released from custody and placement prior to 18th birthday. Room and board costs shall be associated with post secondary education or certified training program. Youth shall not receive room/board through ETV and IL Subsidy. ETV room and board payments are not generated through the KAECSES system, and should be paid using the appropriate ETV PCA and object code for this service.

E. Books/Materials
Books, materials and supplies associated with an allowable Post Secondary Education or Certified Training Program to assist the youth in continuing their education or training

program. This includes supplies associated with specific education or training programs. (i.e. tools, welding boots, art supplies)

F. Special Fees
Any special fees associated with an allowable Post Secondary Education or Certified Training Program. This may include fees associated with specific classes, assignments, or participation in educational or training activities associated with the institution. Fees associated with student loans or insurance premiums on the student loan may be included.

G. Child Care
Young adults participating in the ETV program may be eligible for childcare through EES or by using ETV funds. If a young adult is eligible for childcare through EES this program shall be utilized first. (See EES PPM for policy guidelines) If the young adult is not eligible for EES childcare because the young adult is not looking for employment, but is instead pursuing a post secondary education or training program, the youth may be eligible for childcare using ETV funds. Childcare providers must meet the same requirements as the EES childcare program specifies.

H. Technical Equipment
Funds may be used to purchase equipment associated with Post Secondary Education or Certified Training Program. (i.e. special calculators, computers or other technical equipment to aid in post secondary education or training program) Accommodations related to a youth's disability, such as a personal assistant or specialized equipment that is not paid for by another source.

I. Tutoring
Funds may be used to purchase tutoring for youth in post secondary education or certified training programs to assist youth completing post secondary education or training.

J. Transportation
Funds may be used to help support youth with transportation costs related to post secondary education and/or training program. (i.e. gas, taxi rides, bus tickets, tags and taxes)

K. Clothing
Funds may be used to purchase clothing as required for post secondary education and/or training programs. (i.e. nurse uniforms, special clothing required for class or training program). May not be used to purchase clothing for normal daily use.

L. Medical
Funds may be used to purchase medical policies, prescriptions and medical services to assist youth in their post secondary educational goals or training programs. This service shall not be used for youth eligible for Medical Card Extension Program. Youth shall be encouraged to use policies provided through education institution if available.

7263 Procedures for ETV

A. The SRS Independent Living Coordinator or designee and youth shall complete the Self Sufficiency Plan CFS 7000 and must have an identified education or training plan, along with all required information on the form. All youth participating in Post Secondary Education and Training plans must be actively involved in all stages of the plan.

B. The Self Sufficiency Plan CFS 7000 shall have verification of eligibility for Chafee Foster Care Independence Program (CFCIP) and/or Education and Training Voucher Program (ETV) approved by SRS Independent Living Coordinator.

C. Documentation to support all identified costs associated with Education and/or Training Plan shall be attached to the Self Sufficiency Plan CFS 7000. In addition, documentation of all Federal or State Financial Awards associated with the Education and/or Training Plan must also be attached. (i.e. Pell Grant and Scholarships) All youth applying for ETV funds shall complete a minimum of five (5) scholarship applications with proof of documentation at the time of completing the CFS 7000 ETV Plan. Youth shall complete the Free Application for Federal Student Aid (FAFSA) prior to applying for ETV funds.

D. The Self Sufficiency Plan CFS 7000 shall be signed by the youth, SRS Independent Living Coordinator, SRS Social Worker if different than Coordinator, Case Manager/Social Worker for contractor if youth still served by the contractor.

E. All ETV case plans shall begin July 1 and end June 30 of each year.

F. The SRS Independent Living Coordinator must track all expenses so that the total shall not exceed the maximum allowable funds per year or the total cost of attendance per youth.

G. All youth with current ETV plans shall be notified within thirty (30) days of a change in their ETV plan. SRS Staff shall work with youth receiving ETV to make sure all avenues for funding for post secondary education/certified training options are explored.

H. Services and supports through ETV are available as funding allows.

7264 Kansas Foster Child Education Assistance Act (applicants enrolled after July 1, 2006)

The Kansas Foster Child Educational Assistance Act applies to new applicants who enroll in a Kansas educational institution on or after July 1, 2006.

This program will waive tuition and required fees at Kansas educational institutions to include any vocational school, area vocational-technical school, community college,

Washburn University and state educational institution or technical college. For complete list of individual schools please consult www.kansasregents.org/institutions/index.html

The waiver will cover tuition and required fees only for undergraduate enrollment of eligible youth through the semester the eligible youth attains 23 years of age. Tuition will not be waived for any course repeated or taken in excess of the requirements for completion of educational program in which such eligible youth is enrolled.

A. Eligibility for Kansas Foster Child Educational Assistance Act
Applicant shall enroll in a program leading to the award of a certificate, diploma or degree upon satisfactory completion of course work requirements. Applicant shall meet the following criteria to qualify for the Kansas Foster Child Educational Assistance Act:

- Enrolls in a Kansas educational institution on or after July 1, 2006, and
- Custody of the Secretary of Social and Rehabilitation Services and in a foster care placement on the date such applicant attained 18 years of age; or
- Released from custody of the Secretary prior to attaining 18 years of age, after having graduated from high school or fulfilled the requirements for a GED while in foster care placement and the custody of the Secretary; or
- Adopted from a foster care placement on or after such applicant's 16th birthday; or
- Left a foster care placement subject to a guardianship under chapter 38 or 59 of the Kansas Statutes Annotated on or after such applicant's 16th birthday.

In order to remain eligible for participation in the program, eligible applicant shall remain in good standing at the Kansas educational institution where the eligible applicant is enrolled and shall make satisfactory progress toward completion of the requirements of the educational program in which the eligible applicant is enrolled.

Youth eligible for the Foster Child Educational Assistance Act are also eligible for assistance for other costs of higher education through ETV.

B. Procedures for Kansas Foster Child Educational Assistance Act

Children and Family Services Central Office staff will verify the applicant's eligibility.

The FACTS code ED04N shall be used to record the date of High School Graduation or GED completion to aid in verification of eligibility for the Kansas Foster Child Educational Assistance Act .

If a youth is interested in the Kansas Foster Child Educational Assistance Act Program, applications may be obtained from educational institutions in Kansas or by contacting your local SRS office. See appendix 8A for Application for Enrollment without Charge for Foster Children. All applications are submitted by the student to the Registrar's office at the educational institution. The Registrar's office will fax the application to Children

and Family Services Central Office for verification of eligibility and signature of Statewide Independent Living Coordinator or designee.

Within 30 days of enrollments, all accepted applicants are required to notify their SRS Independent Living Coordinator or Social Worker of their current enrollment status and intended program of study.

SRS Regional Independent Living Coordinators will provide to the State Independent Living Program Manager/Coordinator within 60 days from the start of classes the following information:

- Report of current students receiving the Foster Child Education Assistance Program;
- Current enrollment status for each student;
- Intended program of study for each student;
- Identified ETV and/or Chafee assistance provided for each student enrolled.

7270 Other Available Resources

All staff working with youth to achieve self-sufficiency should utilize other resources available in their communities and throughout the state. In addition to the Casey Life Skills resources, there are several resources available online that may assist the youth in working towards self-sufficiency.

A. Workforce Centers
For information on resources available through Workforce Centers in Kansas see www.workforcenetworkkansas.org/

B. Youth Advisory Councils
Youth 15 to 21 years of age and Chafee eligible may participate in organized Youth Advisory Councils in Kansas. Each Child Welfare Case Management Provider Region has a Regional Youth Advisory Council (RYAC) which is sponsored by an adult representative with the Child Welfare Case Management Provider. SRS Regional IL Coordinators shall serve as an adult advisor to the RYAC in their region. The Kansas Youth Advisory Council (KYAC) is the state youth advisory council, which is made up of youth representatives from each of the RYACs. The KYAC and RYACs are the "Voice of foster youth in Kansas" and provide an excellent opportunity for youth to learn and demonstrate leadership skills. SRS Regional RYAC advisor shall make arrangements to accommodate transportation needs of council members who serve on the RYAC and KYAC. Transportation and/or mileage to scheduled meetings and events for council members served by SRS may be reimbursed using Chafee funds.

7300 Reporting Requirements

SRS Regional Independent Living Coordinator shall submit a monthly report using the electronic reporting format provided to all SRS Regional Independent Living Coordinators. Reports are to be submitted electronically to the SRS Statewide Independent Living Coordinator in central office by the 20th of each month for data collected for the previous month.

7400 Case Closure

The SRS Independent Living services and/or subsidy case shall be closed for the following reasons:

- At the youth's request
- When the youth has resources sufficient to meet his or her basic needs
- When the youth reaches age 21, unless participating in the Education & Training Voucher program
- When the youth has met his or her educational or employment goal
- If the youth does not meet contracted expectations, such as school attendance, applying for and maintaining a job, or paying rent.

A Violation Notice (CFS 8593) is sent to the youth immediately when a contract obligation is not met. Three violation notices will result in the termination of the current subsidy agreement.

Once a case is closed, a notification letter will be sent to the payment unit. A notice will also be sent to the youth and mentor

7800 Entering Independent Living Youth Not in Agency Custody in FACTS

To establish a new case for a youth receiving independent living, use the allegation/presenting situation code of New Case Needed (NCN) on the BEGN screen. Enter a self-sufficiency plan (SS) on a youth who is not in SRS custody, but receives independent living services (See PPM section 3811H on entering a SS plan type). If receiving an independent living subsidy, the service requested is securing a member grant (SG). Enter a Service Action of IN04P for cash only subsidy or medical and cash subsidy with the appropriate service source code for the mentor, such as family member (FAM), friend (FRN), self (SLF), etc. If there is not an appropriate service source use other person (OTP). Initiate (IN) the responsibility status with the date the permanent independent living subsidy agreement is signed. Authorize max units of 1 and indicate a type of monthly (M). Enter the amount of subsidy in the charge unit field for what is initially paid on behalf of the child. Enter the name of the guardian on the PROM screen with a provider type of INL. For medical only, no FACTS case is opened (See PPM 7220).

For youth who have graduated from high school or completed their GED, enter the service action code of ED04N and date of GED completion or date of graduation.

For youth who are receiving independent living services, see PPM section 5840 D. For a complete list of independent living service action codes see the FACTS online user manual, the CFS 3057 form and the CFS 3057A form.

7900 Eligibility and Payment Procedures for the Independent Living Program

Eligibility and payment procedures for the Independent Living Program (IL) are found in section 7910 - 79

7910 Independent Living Medical Card Extension Program Procedures

Children & Family Services will complete the application process and determine eligibility associated with extending foster care medical coverage for all eligible young adults. Annual reviews for young adults receiving the Medical Card are required. No income or resource testing will be required for eligibility. The young adults will be responsible to keep CFS staff informed of current address. Young adults may contact any SRS office to inform of changes required for Medical Card coverage. See sections 7220, 7221, and 7222 for further details.

Following are the procedures for KAECSES data entry:

A. Place Alert on KAECSES:

For any young adult in the custody of SRS, JJA, or tribal authority, when the young adult turns 18 years old the eligibility worker shall place an alert on the CLPR screen of KAECSES. Posting alerts timely is very important. The Clearinghouse, EES, or other CFS staff will be using the alert system to know whether to forward an application to the Medical Card Extension Program eligibility worker. (Refer to Section 7221 for eligibility criteria.)
To add an alert to the FC case in KAECSES-

1. On CLME, enter the case number and the benefit month. In the NEXT field, type PRAP. Hit <Enter>

2. In the Alert Type field by the client's name enter the AO or NA alert code.

   AO = ELIGIBLE FOR FC AGED OUT MEDICAID

NA = NOT ELIGIBLE FOR FC AGED OUT MEDICAID

In the Next field type CAP2. Hit <Enter>.

3. View the alert on CAP2 or the CLPR screen.

B. When a Young Adult is released from custody:

When a young adult is released from SRS, JJA or tribal custody, and the young adult is18 years old or older at the time of the release, if the young adult is eligible for the extended medical card (refer to section 7221 for eligibility requirements) the eligibility worker or IL coordinator shall mail to the young adult a completed form CFS-8596 (Notice of Action, Medical Card Extension Program, Eligibility Information) and an application CFS-8595 (Application for Medical Card Extension Program), keeping a copy for the file.
If an alert has not already been placed on KAECSES, do so now. See Section 7910A for instructions.

C. When an Application for Medical Card Extension Program is received:

Complete form CFS-8597 (Notice of Action, Medical Card Extension Program, Initial Eligibility) to assess eligibility for the program.
For young adults who are eligible, the young adult's original foster care case number and client identification number will be used for the medical card extension. These cases will be identified as being different from a regular foster care case by assigning a program sub-type:

FC AO - Foster Care SRS Aged Out Medical Card
FC AJ - Foster Care JJA Aged Out Medical Card

If CLPR is showing a non-foster care medical case open during the period the young adult is eligible for the Extension Program it will be necessary to determine which medical program is of greatest benefit to the young adult. If any of the following benefit plans are appearing on the iCMMIS eligibility screen* or the CLPR screen of KAECSES for the eligibility period of the Extension Program, do not open a FC-AO or FC-AJ medical card for those months.

*User must remove the check mark from the filtered box to see these benefit plans in iCMMIS.

Benefit Plans of Greater Benefit to the young adult:
iCMMIS
HCHI - HCBS Head Injury
HCPD - HCBS Physically Disabled
HCTA - HCBS Technology Assisted

HCSED - HCBS Severely Emotionally Disturbed
HCDD - HCBS Developmentally Disabled

KAECSES: SI Program Type on CLPR

If the FC case is closed, the AO or AJ program sub-types can be entered on CLIR at the time of case registration.

D. Yearly Reviews

Yearly reviews are tracked through the KAECSES reporting system. Complete form CFS-8598 (Notice of Action, Medical Card Extension Program, Yearly Review) and mail it to the young adult yearly while eligible for the program. Update KAECSES following established procedures for yearly reviews.

A young adult loses eligibility if they are no longer a resident of the state of Kansas or if they are incarcerated. Should they return to Kansas or be released from jail before their 21st birthday, eligibility in the Medical Card Extension Program could resume. The young adult must complete a new application (CFS-8595) to re-initiate eligibility.

If form CFS-8598 for the yearly review is returned undeliverable, do not close the KAECSES case. Attempt to locate the young adult and obtain a current address. The region's Independent Living Coordinator can assist with this task. Continue to leave the case open until it is confirmed that one of the conditions in Section 7910.E are met.

E. Termination of Medical Card

Termination of eligibility for this program occurs when one of the following happens:

1. the young adult turns 21 years of age (last day of the month they turn 21)
2. the young adult is no longer a resident of Kansas
3. the young adult is an inmate in a public institution

Complete form CFS-8599 (Notice of Action, Termination of Medical Card) and close the KAECSES case following established procedures when ending participation in this program. The Notice of Action must be sent to the young adult at least 10 business days prior to the closure of the medical card.

Remove the "AO" or "NA" Alert from KAECSES if the reason for termination is that the young adult turned 21.

7911 One Time Start Up Costs

Youth may be eligible for a one time start up costs up until 21 years of age, based on individual needs.

Youth still under the responsibility of the Child Welfare Case Management Provider are not eligible for One Time Start Up Costs.

A. One time start up costs - not including Rent/Room/Board
Youth who are leaving foster care to live on their own for the first time may need a onetime payment for start up expenses, not including rent. These expenses may include utility deposits, necessary furniture, supplies, or other items as deemed appropriate by the youth and worker. A onetime maximum payment of $500 is allowed for this purpose. If the youth's budget indicates that he or she can manage without other financial support the case can be closed.

Payments shall be generated using the case number from a youth's open KAECSES case. Payments shall be made using the vendor payment process with the ADM-3465 form (See local office rules for completion of process). Payments shall be made using the PCA/SubObj code combination 55520/1822 for payments.

B. One time start up costs - Rent/Room/Board
Youth who are leaving foster care to live on their own for the first time may need assistance with the initial rent/room and board costs, including deposits. A one time maximum payment of $300.00 is allowed for this purpose. If the youth's budget indicates that he or she can manage without other financial support, the case can be closed. (Note: Rent would be paid directly to the landlord. Room and Board costs would be paid directly to the youth for payment of services to the landlord on their own.)

Payments shall be generated using the case number from a youth's open KAECSES case . Payments shall be made using the vendor payment process with the ADM-3465 form (See local office rules for completion of process). Payments shall be made using the PCA code 55520 and SubObj Code 1700 (Rent) or 1811 (Room and Board) for payments.

7912 IL Subsidy Procedures for Room/Board

For program information see Section 7230.

Monthly payments are generated from an open Foster Care KAECSES case. Payments are made prospectively for a month at the beginning of the month. In order to open an independent living payment case the eligibility specialist shall receive a copy of the CFS Independent Living Subsidy Agreement, CFS 8591.

The subsidy amount may increase or decrease monthly and is clearly defined on the CFS 7000 Self Sufficiency Plan. To verify the correct information is entered on FCPD for each month, see CFS 7000 Self Sufficiency Plan.

If the Foster Care case is currently open on KAECSES, the payment is made by updating the SEPA, FOCA and FCPD screens. If the Foster Care case is not currently

open on KAECSES, refer to the steps in E&P Appendix B, Section III, A for opening a new case.

A. On SEPA the following program (PGM) codes shall be used:

1. FC (youth who receive IL subsidy but have their medical card funded from another program); or,
2. FC AO (youth who were in SRS Custody, now receive IL subsidy & a medical card through the Medical Card Extension Program); or
3. FC AJ (youth who were in JJA Custody, now receive IL subsidy & a medical card through the Medical Card Extension Program).

The program should be coded IN for FC, FC AO, or FC AJ as applicable. Medical shall be coded OU when program type is FC; coded IN when program type FC AO or FC AJ.

B. On FOCA the following codes shall be used:

1. Source of Funding: GA
2. Legal Status: keep the most recent prior legal status prior to aging out)
3. DISABLED AGE 18 AND OLDER: Y or N
4. TYPE OF CURRENT PLACEMENT: 8 or 19
5. GOAL: IL

C. On FCPD the following codes shall be used:

1. SOURCE OF FUNDING: GA
2. VENDOR ID: (obtain from SMART)
3. ADDRESS SELECTION: (obtain from SMART)
4. GRANT AMOUNT: Refer to SRS Independent Living Subsidy Agreement, CFS 8590. Not to exceed $300.00 (See NOTE)

The subsidy amount may increase or decrease monthly and is clearly defined on the CFS 7000 Self Sufficiency Plan. To verify the correct information is entered on FCPD for each month, see CFS 7000 Self Sufficiency Plan.

D. Automating the Payment with the FCPD Screen

FC program types pay prospectively so payment screens are a month ahead. If updating or opening the case after the cash monthly issuance date, known as “roll over”, (occurs on the 4th working day before the end of the month), you will see DA in the Benefit Issuance area to generate the payment for the month showing.

Continue to copy details into the next month, completing the FCPD screen for each new month, until you see MO in the Benefit Issuance area. This will ensure that the case is up to date.

Example 1: If opening case for subsidy eligibility starting in February on February 28, on the February FCPD screen, you would need to ensure Benefit Issuance of DA is present in order for the payment to generate for February as payments on the monthly cycle have already been processed. Do the same for the March FCPD screen. The April FCPD screen would be the first screen with a MO Benefit Issuance.

Example 2: If opening a case for subsidy eligibility starting in November on December 5, the benefit issuance indicator for the month of November is DA which is correct. When you copy the case to December, the benefit issuance indicator will be DA. This is also correct. The January FCPD screen would be the first screen with a MO Benefit Issuance.

Example 3: An independent living subsidy case is opened, but not caught up with rollover. The current month for the case is April and the last IL payment made was for April on April 1st. Today is May 27th and you copy details creating May. Since the monthly cycle to pay May's benefits is past, you will see the Benefit Issuance as DA. The case must be copied into June and July to catch the case up with rollover.

E. How to Copy Details to Manually Roll Over a Case

1. Go to the APEM screen and enter "4" and the month/year for the next month. Press ENTER.
2. Go to the next field and enter FCPD; fill in the information on this screen. Press ENTER.

7913 Other Payments for IL Youth

Payments may be made to support IL youth in their educational and training plan as determined by the Case Plan. Payments may also be made to support IL youth in their educational and employment plan, and mentors who receive a $50.00 per month mentor fee, as determined by the Case Plan. For program information about mentors see PPM 7240.

There are some instances where payments for these services and/or goods will be made directly to the youth. When payments are made directly to the youth for services and/or goods, the youth shall provide a receipt of purchase or payment with a copy of the receipt to be kept in the SRS file for documentation.

These payments shall be generated using the case number from a youth's open KAECSES case. Payments shall be made using the ADM-3465 form and the appropriate speedchart number:

1. Speedchart ISD27812 and the services/goods type sub-object code for independent living expenses and mentor fees.
2. Speedchart ISD27821 and the services/goods type sub-object code for expenses under the ETV program.

A sub-object code listing can be found at http://srsnet/commissions/admin/VenPay_03/venpay_information.htm and click on CFP Definitions.

See PPM section 4902.B for details on how to make a payment with the ADM-3465 form.

For ETV, there is a $3,500 all funds limitation per case planning year on expenses. Monthly tracking and reporting of individual youth expenses may be found at the FACTS web site in the financial reporting section. Eligible students may receive ETV funds until 23 years of age.

All youth applying for the Foster Care Tuition Waiver Program shall submit their application directly to the financial aid department of the educational institution. See PPM 7262A for program details.

8000 Quality Assurance

8100 Performance Management

A. Performance Management structure and scope:

Children and Family Services Performance Management staff shall be responsible for providing support and accountability for the structure, methodologies and administration of quality assurance and performance improvement activities in the SRS and Contractor Regions.

SRS Regions shall participate in Quality Assurance and Performance Improvement activities.

SRS Regions shall coordinate Performance Management activities with their Child Welfare Case Management Providers.

Case Reads are conducted by the SRS Regional Offices on an ongoing basis. Program services case reads focus on the timeliness and accuracy of service documentation and AFCARS case reads focus on the accuracy of FACTS data. Additional targeted case reads are conducted as required for policy compliance or performance improvement projects.

Stakeholder meetings are organized at the statewide and community level to involve customers and stakeholders in discussions about the delivery of Child Welfare services.

B. Information systems, data collection and reporting:

The primary systems used for performance management include FACTS, KIDS, SCRIPTS and the Case Read Application.

National Outcomes are tracked by our Federal Partners utilizing AFCARS data and reported to Kansas through the Kansas Child and Family Services Review Data Profile.

Outcomes data collection and reporting is standardized to provide consistency and enable comparison throughout the Agency on a statewide basis, by SRS and Contractor Regions.

C. Method for establishing case read samples:

The case read sample for each program is derived from the respective case population that has been active during the last three months in a twelve month period under review. A “Stratified Random Sample” strategy is utilized to establish the sample size. The statewide population is broken out by SRS Region. The number of cases in the

sample for each Region is proportionate to the number of cases in the total population for each Region. Cases are assigned a random ID number and randomly selected until the correct percentage for each Region is achieved.

The number of cases in the sample is set at a level sufficient to maintain statewide statistical validity. This level is established by consulting a table of recommended sample sizes from the SRS Office of Strategic Performance Management.

D. Analysis of outcomes:

Data are analyzed to determine the performance of existing processes, and to identify opportunities for improvement. Outcomes will be reviewed at the Children and Family Services and Regional levels.

Opportunities for improvement will range from those that are systemic or statewide to those that are specific to SRS Regions, Child Welfare Case Management Providers or individual staff. Systemic opportunities shall be addressed and managed by Children and Family Services Performance Management staff and specific opportunities shall be addressed and managed by the SRS Regions and Child Welfare Case Management Providers.

8200 Child Welfare Case Management Provider's Responsibility for Performance Management

Child Welfare Case Management Providers are responsible for working with the SRS Regions and Children and Family Services Performance Management staff on Performance Management activities. The Child Welfare Case Management Providers shall:

A. Participate in program improvement activities.

B. Participate in Quality Assurance activities.

C. Assure quality enhancement programs are comprehensive and on-going.

D. Submit quarterly management reports.

E. Participate in the Child and Family Services Case Review program and in case reads.

F. Provide access to case files as requested by the Regions for ongoing and targeted case reads.

G. Be available to discuss the results of regional case reads at the time of their completion. Child Welfare Case Management Providers are encouraged to read each case prior to or during the Regional office case read.

8300 Case Read Decisions

During the case read process, if there is disagreement on the scoring of a specific case read question that cannot be resolved, the SRS Regional case reader will send a brief description of the disagreement to CFS with a copy to the Child Welfare Case Management Provider, and Children and Family Services Performance Management staff will facilitate resolution.

8400 Residential/Group Home Monitoring

All Residential/Group Home placement providers shall be licensed through the Kansas Department of Health and Environment and meet the SRS/CFS Placement Standards and requirements in the Child Welfare Handbook of Services in order to obtain a provider agreement with SRS.

Implementing a new facility or modifying a provider agreement for an existing facility requires an onsite review conducted by SRS regional staff. Providers may initiate the process by contacting their SRS regional office.

A. Implementing a New Facility or Renewing/Changing a Provider Agreement:

1. SRS regional staff shall assess the need for the type of service requested for a new facility and/or a change in services listed in an existing provider agreement.
2. SRS regional staff shall provide information to the provider including a copy of the SRS Placement Standards, Child Welfare Handbook of Services and contact information for KDHE.
3. SRS regional staff shall provide technical assistance relative to the SRS Placement Standards and Child Welfare Handbook of Services.
4. SRS regional staff shall collaborate with JJA if the facility wants to serve juvenile offenders and child in need of care youth.
5. SRS regional staff shall conduct an on-site review of the facility to ensure compliance with the Placement Standards and the Child Welfare Handbook of Services The on-site review shall include a tour of the facility, review of policy and procedures, human resource files and staffing patterns using the site review instrument listed below. Ninety days after a new facility opens, or a change in services listed in an existing provider agreement is implemented, SRS regional staff shall return on site to review case records.
6. Each type of facility has a unique site visit review instrument. The types of facilities covered in this section include:
    a. Community Integration Program (CIP) (CFS 8400A)
    b. Emergency Shelter (CFS 8400B)
    c. Residential Maternity (CFS 8400C)
    d. Secure Care (CFS 8400D)
    e. Transitional Living Program (TLP) (CFS 8400E)

f. Youth Residential I (YRC I) (CFS 8400F)

g. Youth Residential II (YRC II) (CFS 8400G)

7. SRS regional staff shall provide technical assistance for compliance issues related to the Placement Standards and the Child Welfare Handbook of Services and provide a written site visit report of findings to the Provider.

8. The placement provider and SRS regional staff shall address any concerns prior to establishing a provider agreement. Program improvement activities for securing compliance shall be completed within 30 days.

9. The site visit report shall be maintained by SRS Regional Office who maintains the provider agreement and forwarded to the Provider.

B. On-going Monitoring:

The Child Welfare contractors for Family Preservation and Foster Care complete reviews annually. The purpose of the reviews is to maintain compliance with the SRS Placement Standards and Child Welfare Handbook of Services. The contractors shall provide reports containing the results of their on-site reviews to SRS upon request.

8500 Administrative Reviews of Child Placing Agencies

In collaboration with KDHE SRS/CFS program staff monitor Child Placing Agencies through annual Administrative Site Visits with the Family Preservation and Foster Care contractors.

A. Requirements and documents to be reviewed are detailed in the review instruments for each type of site visit:

1. Administrative Review RE, FC, ADPT (CFS 8500A)
2. Administrative Review FP (CFS 8500B)
3. Administrative Case Level Review FC, ADPT Home (CFS 8500C)
4. Administrative Case Level Review OOH (CFS 8500D)

B. Methodology of file samples: Two weeks prior to an annual site visit the Provider shall send CFS program staff a list of employees by category and a list of the foster/adoptive homes sponsored by the Provider. CFS will randomly select 15 employees and 15 resource homes for review. Five of the 15 resource homes will be homes approved for adoption. Specific information regarding each child placed with the foster family during the period under review shall be included in the file. (See CFS 8500D.) One week prior to the site visit the three samples to be reviewed will be sent to the Provider.

C. The SRS review team is comprised of CFS program staff and SRS regional staff.

D. On the day of the site visit the Provider shall make the file samples and documents required and referenced above available to the SRS review team.

E. The Provider is encouraged to identify a private workspace that can accommodate the SRS review team and provide confidentiality for the files and documents being reviewed. As scheduling permits the provider is also encouraged to have staff on stand-by to assist in locating documentation and answer questions.

F. CFS program staff shall provide technical assistance for compliance issues related to the family preservation and/or foster care contracts and provide a written report. Program improvement activities for securing compliance shall be completed within 30 days.

The site visit report shall be maintained by program staff in CFS, forwarded to the Provider, KDHE and the SRS Regional Office who maintains the provider agreement.

9000 Interstate Compact

9000 Interstate Compact

A compact is a legal agreement among persons, nations, or states. An interstate compact creates a contract among states. Each state legislature must adopt, verbatim, the compact language. This uniformity assures that the compact's provisions are the same in every state that has enacted it.

9010 Interstate Compact of the Placement of Children (ICPC)

All 50 states, the U.S., Virgin Islands, and the District of Columbia are members of the compact. Kansas joined the compact in 1976. It is the policy of this state to cooperate fully with other states in complying so no children are sent or brought into any other party state, unless the sending agency complies with each and every requirement.

A. Purpose of the Compact:

1. The primary purpose of the compact is to protect children and to assure their safety by establishing prior to placement of the child that a certain minimal level of care and protection is afforded a child.
2. It provides a mechanism whereby the proposed placement or facility receives information about the child prior to placement and enables them to make an informed decision as to whether the child would fit well into their family or facility.
3. It provides a certain amount of protection to the sending state by minimizing the risk that the placements are unsuitable or that they will deteriorate after placement.
4. It enables the receiving state to refuse placement in those situations where the safety and well being of the child is questionable.

B. Articles of the Compact

Summary of Articles: The Articles of the Compact are found in KSA 38-1201 et seq. The legislative intent is as follows:

1. Each child requiring placement shall receive the maximum opportunity to be placed in a suitable environment and with persons or institutions having appropriate qualifications and facilities to provide a necessary and desirable degree and type of care.
2. The appropriate authorities in a state where a child is to be placed may have full opportunity to ascertain the circumstances of the proposed placement, thereby

promoting full compliance with applicable requirements for the protection of the child.
3. The proper authorities of the state from which the placement is made may obtain the most complete information on the basis of which to evaluate a projected placement before it is made.
4. Appropriate jurisdictional arrangements for the care of children will be promoted.

9101 Regulation 1

A. The Compact applies when a child residing in a parent, relative, foster or adoptive home, moves with the family to another state prior to permanency being achieved.
B. For the placement initially intrastate, the investigation pursuant to Article III shall only be for the purpose of determining whether any special needs which the child may have cannot reasonably be met in the community or area where the interstate placement is to be made. Nothing prevents the receiving state from monitoring the placement and notifying the sending agency of any change in circumstances and conditions of the placement which affect or may affect its suitability.
C. A person or agency making the placement should inform the person or persons with whom the placement is made that moving to another state will convert that placement to an interstate placement and the Compact will apply.

9102 Regulation 2

A. This regulation clarifies the responsibilities of Programs of public or private agencies in which children are placed in family homes as an incident to their attendance at schools in communities in other state or foster care placements within the meaning of the compact. The homes provide child care and supervision during the time when the child is not in attendance in school. These homes do not fall within the educational exception in Article II (d).
B. The regulation further clarifies the responsibilities and procedures related to licensure and interaction with the Compact.

9103 Regulation 3

A. "Placement" as defined in Article II (d) included the arrangement for the care in the home of their parent, other relative, or non-agency guardian in a receiving state when the sending agency is an entity other than a parent, relative, or non-agency guardian making the arrangement for a case as a plan under Article VIII (a) of the Compact.
B. "Conditions for placement" apply to any placement as defined in Article II(d) and Regulations.
C. Article VIII (a) applies only to the sending or bringing of a child into a receiving state to a parent or other specified individual by a parent or other specified

individual whose full legal right to plan for the child has been established by law at the time prior to initiation of the placement arrangement, and has not been voluntarily terminated, or diminished by the action of any Court.

9104 Regulation 4

Regulation 4 further clarifies those various classes of institutions in Article II (d).

A. "Primary educational institution" operates programs where the primary purpose of accepting children is to meet their education needs and which; (1) does not meet responsibility for the entire year; (2) does not provide child care constituting nurture sufficient to substitute for parental supervision and control of foster care; (3) does not provide any other services except for customarily regarded as extracurricular school activities.
B. "Hospital" means an institution for the acutely ill which discharges its patients when they are no longer ill. A hospital's primary purpose is for treating an acute medical problem.
C. "Institution for the mentally ill or mentally defective" provides medical care and treatment, psychiatric care and treatment, corrective, therapeutic or rehabilitative treatment for mentally ill or developmentally challenged persons.

The type of license held by an institution is evidence of its character, but applicability of the Compact is to be determined by the services it actually provides or offers to provide.

9105 Regulation 5

This regulation established the responsibility of each state to establish a procedure by which all Compact referrals from and to the state shall be made through a central Compact Office. The Compact office shall also be a resource for inquiries into requirements for placement into the state for children who come under of this Compact.

9106 Regulation 6

The approval to place is valid during a period of six (6) months commencing on the date when the receiving state compact administer signs the ICPC 100A. Once the placement is made, it may continue until one of the events listed in Article (a) causes its termination.

9107 Regulation 7

A. ICPC Priority Placement Request

ICPC Regulation 7 establishes ICPC procedures for priority out-of-state placement of children. To establish a Priority Placement Request, the court, upon request, or on its own motion, determines that a proposed priority placement of a child from one state to another is required.

The court order is not valid unless it contains a specific finding that the following circumstances apply AND sets the facts on which the court based its finding.

Requirements For Priority Placement (Relative Care Only)

There are two conditions in which you may use to request an expedited home study. To request a priority placement under Condition I, request is usually the initial (first) home study referral sent to the Kansas ICPC, and must be a parent, grandparent, adult brother, adult sister, aunt or uncle. One of the following must apply and be noted in the court order:

Condition I

1. The child is less than two years of age; or
2. The child is in an emergency shelter; or
3. The child has spent a substantial amount of time in the home of the proposed recipient. (It must be documented in the court order how the judge reached this determination.)

Or you may use:

Condition II

1. If you have already submitted a home study request to Kansas ICPC, the receiving state has 30 working days (60 calendar days) to assign and complete the home study and forward a decision on to the Kansas ICPC office.
2. If the Kansas ICPC office has not received a decision and home study from the receiving state within the mandated time frame, you may petition your court to sign a Regulation 7 court order. It must be documented in the order the reason for the expedited home study request using Condition II.
3. Before petitioning the court for this Regulation 7 order, please verify with the Kansas ICPC office that this information has not been received or that explanation of delay has not been received and placed in the file.

The court, upon request, or on its own motion, determines whether a proposed Priority Placement of a child from one state to another is required.

B. Procedures for Regulation 7

1. The sending state shall determine if the case meets the criteria for Regulation 7. The same procedures and documentation are required, that are required for all other ICPC referrals.
2. The social worker completing the referral for the sending agency shall:

- Note in the cover letter accompanying the ICPC referral that it is a Regulation 7 referral;
- Explain the conditions which require a priority placement;
- Send three (3) copies of the court order ordering a priority placement under Regulation 7;
- Complete the ICPC 101(Sending State Placement Request) for Referral and route to the Kansas ICPC Compact Specialist.

C. Time Frames for Regulation 7

The following time frames are applicable to the sending state for all Regulation 7 priority placements:

1. The court has two (2) working days to forward the Regulation 7 court order to the local sending office.
2. The local sending office has three (3) calendar days to complete the required forms and documentation and forward to the sending state's ICPC compact administrator.
3. The sending state's ICPC specialist has two (2) working days to process the material and send it to the receiving State's compact administer.
4. On the day the placement decision is received from the receiving state, the sending state ICPC compact specialist shall forward the placement decision by fax to the local sending agency.
5. If the placement is approved by the receiving state the local social worker may proceed with placement planning the SAME working day.
6. If Kansas is the receiving state, the state has twenty (20) working days to assess the family and approve or deny the placement.
7. The receiving state's compact specialist has two (2) working days to forward the request to the local office for service.
8. The social has eighteen (18) working to complete the family assessment and forward it to the compact specialist in their state. (See Appendix 9C for suggested family assessment guideline).
9. The social worker in the receiving state shall inform their compact specialist in writing or by e-mail, within two (2) working days that the prescribed time frames cannot be met, the reasons for the delay and projected time frames for when the assessment will be completed.
10. The compact specialist has one (1) working day to forward the ICPC 100A, along with the completed family assessment, if approved, to the sending states compact administer.

D. Failure of Receiving State to Comply with a Regulation 7 Request

If the receiving state compact specialist fails to complete actions in the established time frames,
the court which issued the court order, may inform the appropriate court in the receiving state, provide them with the relevant documentation and request their assistance.

Within its jurisdiction and authority in the receiving state, the court may render such assistance and issue appropriate orders requiring compliance to Regulation 7.

9108 Regulation 8 Change of Placement Purpose

This regulation authorizes the use of the 100B to be prepared and sent with accompanying instructions to show a change in an existing placement, e.g. from foster care to pre-adoption even though the placement recipient remains the same. If however, the receiving state requests a new ICPC 100A, it should be provided by the sending agency and transmitted in accordance with usual procedures for processing.

9109 Regulation 9 Definition of a Visit

A. Interstate Compact on Placement of Children distinguishes visits and placement on the basis of purpose, duration, and the intention of the person or agency responsible for planning for the child.
B. The purpose of a visit is to provide the child with a social or cultural experience of short duration, such as a stay in a camp or with a friend or relative who has not assumed legal responsibility for placement.
C. It is understood that a visit for twenty-four (24) hours or longer will necessarily involve the provision of some services in the nature of child care by the persons with whom the child is staying. The provision of these services will not, of itself, alter the character of the stay as a visit.
D. If a child's stay is intended to be for no longer than thirty (30) days and if the purpose is as described in the above paragraph, it will be presumed that the circumstances constitute a visit rather than a placement.
E. A stay or proposed stay of longer than thirty (30) calendar days is a placement or proposed placement, except that a stay of longer duration may be considered a visit if it begin and ends within the period of a child's vacation from school as ascertained from the academic calendar of the school. A visit may not be extended or renewed in a manner which causes or will cause it to exceed thirty (30) calendar days or the school vacation period, as the case may be. If a visit does not have a determined termination date or if the duration of the visit is questionable because of the circumstances, it shall be considered a placement or proposed placement and not a visit.
F. A request for a home study or supervision made by the person or agency which sends or proposes to send a child on a visit will conclusively establish that the intent of the stay or proposed stay is not a visit but a placement. A visit as defined in this regulation is not subject to the Interstate Compact on the Placement of Children.
G. Words and phrases used in this regulation have the same meanings as in the Compact, unless the context clearly requires another meaning.

(This regulation was first adopted April 26, 1983, by resolution of the Association of Administrators of the Interstate Compact on the Placement of Children by action of the Association of Administrators of the Interstate Compact on the Placement of Children at its annual meeting of April, 1999.)

9110 Regulation 10 Guardian

A. Definition of Guardian:

As defined in the Interstate Compact on the Placement of Children (ICPC) and in this Regulation:

1. Guardian means, a public or private agency, organization, or institution which holds a valid and effective appointment from a court of competent jurisdiction to have custody and control of a child, or plan for the child, and to do all other things for or on behalf of a child which a parent would have authority and responsibility for doing by virtue of an unrestricted parent-child relationship. Guardian also means an individual who is non-agency guardian as defined in subparagraph B, here of.
2. Non-agency guardian means, an individual holding a currently valid appointment from the court of competent jurisdiction to have all the authority and responsibility of a guardian as in paragraph A., hereof.
3. An individual with whom a child is placed as preliminary to a prospective adoption, cannot be considered a non-agency guardian of the child, for the purpose of determining applicability of ICPC to the placement, unless the individual would qualify as a lawful recipient of a placement of the child without having to comply with ICPC as provided in Article VIII (a) hereof.

B. Effect of Guardianship on ICPC Placements

1. An interstate placement of a child with a non-agency guardian, whose appointment to the guardianship existed prior to consideration of the making of the placement, is not subject to ICPC if the sending agency is the child's parent, stepparent, grandparent, adult brother or sister, or uncle or aunt.
2. An appropriate court of the sending agency's state must continue its jurisdiction over a non-exempt placement until applicability of ICPC to the placement is terminated in accordance with Article V(a) of ICPC.

C. Permanency Status of Guardianship:

1. A state agency may pursue a guardianship to achieve a permanent placement for a child in the child welfare system, as required by federal or state law. In the case of a child who is already placed in a receiving state in compliance with ICPC, appointment of the placement recipient as guardian by the sending state court is grounds to terminate the applicability of the ICPC when the sending and receiving state compact administrators concur on the termination pursuant to Article V (a). In such an instance, the court which appointed the guardian may continue its jurisdiction if it is maintainable under another applicable law.

2. If, subsequent to the making of an interstate placement pursuant to ICPC, a court of the receiving appoints a non-agency and the receiving state concur in the discontinuance of the application of ICPC to the placement. Upon concurrence of the sending and receiving states, the sending agency and an appropriate court of the sending state shall close the ICPC aspects of the case can the jurisdiction of the sending agency pursuant to Article V(a) of the ICPC shall be dismissed.

D. Guardian Appointed by Parent

If the statutes of a jurisdiction so provide, a parent who is chronically ill or near death may appoint a guardian for his or her children, which guardianship shall take effect on the death or mental incapacitation of the parent. A non-agency guardian so appointed shall be deemed a non-agency guardian as that term is used in Article VIII (a) of ICPC, provided that such non-agency guardian has all of the powers and responsibilities that a parent would have by virtue of an unrestricted parent-child relationship. A placement with a non-agency guardian as described in this paragraph shall be effective for the purposes of ICPC without court appointment or confirmation unless the statute pursuant to which it is made otherwise provides and if there is compliance with procedures required by the statute. However, the parent must be physically present in the jurisdiction having the statute at the time he or she makes the appointment or expressly submits to the jurisdiction of the appointing court.

E. Other Definitions of Guardianship Unaffected

The definitions of guardian and non-agency guardian contained in this regulation shall be construed to affect the meaning or applicability of any other definitions of guardianship or non-agency when for purposes or to circumstances not having a bearing on placements proposed to be made or made pursuant to ICPC.
Words or phrases used in this regulation have the same meaning as in the Compact, unless the context clearly requires another meaning. This regulation is adopted pursuant to Article VII of Interstate Compact on the Placement of Children at its annual meeting of April 1999.

For additional information regarding ICPC regulations
http://icpc.aphsa.org/document.asp

9111 Regulation 11

This regulation establishes the responsibility of states to supervise children in placement. Supervision shall begin when the receiving state has received a 100B from the sending state indicating the date of placement. Supervision can and should begin prior to receipt of this form 100B if the receiving state has been informed by other means that the child has been placed pursuant to an approved ICPC placement.

Supervision shall include face-to-face visits with the child at least once each month, beginning no later than 30 days from the date on which the child is placed, or 30 days from the date on which the receiving state is notified of the placement if notification

occurs after placement. A majority of the visits shall occur in the child's home. The purpose of face-to-face visits is to help ensure the on-going safety and well being of the child and to gather relevant information which will be submitted in written reports to the sending state.

9120 Placements Subject to ICPC

The following placements require prior approval by the receiving state before a child can be placed:

A. Reunification with the birth parent(s) when the court has jurisdiction over the child to be placed. This will provide information to the court and will allow the receiving state to provide services upon placement.
B. Placement with relatives whenever the court has jurisdiction of the child to be placed.
C. Placement with a child with a non-related person (foster care). This provision is applicable whether or not there is a court jurisdiction. If there is no court involved, there's no foster care.
D. Placement in a residential treatment facility. All facilities shall be licensed by the state in which they are located.
E. Placement with an adoptive family.

9130 Placements Not Subject to ICPC

Under the following circumstances the ICPC is not required:

A. Birth parent to birth parent when there is no court jurisdiction over the child to be placed.

B. Birth parent to relative when there is no court jurisdiction. The following relatives may place or receive a child across state lines without ICPC approval:

- parents(s)
- step-parent
- grandparent
- adult sibling
- adult aunt or uncle
- legal guardian

C. Relative to relative when there is no court jurisdiction over the child. The same relatives as noted above have such authority.

D. Placement of a child by parents or relatives into boarding schools.

E. Placement of a child in a public or private hospital, psychiatric hospital or medical facility; providing the hospital is not licensed as a residential treatment center. (If that is the situation, approval through ICPC is required.)

F. Divorce and/or custody investigations or family assessments related to divorce.

G. International Adoptions when the Office of Immigration and Naturalization Services (INS has issued an IR-E visa for the child.

H. The child is being adopted in his/her country of residence.

I. The consent to adopt has been issued by the child's country of residence or foreign agency having custody and guardianship and no state side agency has custody.

J. Services requested through International Social Services or any branch of its overseas offices.

K. Youth in Job Corps.

L. Youth in the military.

M. Placements by a Native American Nation or Tribe within a territory controlled by a Native American Nation or Tribe.

9200 ICPC referrals from Kansas to other states (Kansas as the sending state)

Referrals of children in SRS custody served by a Child Welfare Case Management Provider shall be completed by the child welfare case management agency and forwarded to the Kansas ICPC office.

9210 The Referral Packet

A comprehensive referral packet is required. An incomplete referral packet results in a delay in the ICPC process. Complete information allows the receiving state to assess the prospective placement family's ability to care for the child's (children's) specific needs. Likewise, this information will aid the family in making an informed decision regarding their ability to care for the child.

The Kansas compact administrator (acting as either the sending state or the receiving state) may request additional information on the child. Any information sent to the Kansas ICPC office, shall be sent in triplicate. The Kansas ICPC office, retains one copy for their file, and sends two copies on to the other state.

The referral packet for parent, relative, foster care, and residential placements shall include the following:

1. The ICPC 100A (CFS-4013) Interstate Compact request form shall be completed for each child. This form has six duplicate pages. The Child Welfare Case Management Provider retains the last copy, and the other five are attached to the referral. This form is used to request and approve all placements from Kansas.

   Three copies of each of the following shall be enclosed in the referral packet.

2. A comprehensive cover letter explaining the child's situation and the reasons for requesting placement with a family in another state. Special needs or specific issues that need to be addressed with the family shall be noted.
3. Social history to include child's current functioning, special needs, the reason the child entered SRS custody and as much information on the birth parents and siblings as possible. (See Appendix 3A for suggested social history outline.)
4. Journal Entry/Court Order signed by the judge granting custody to SRS. (If these documents are not signed, they will be returned to the Child Welfare Case Management Provider for the judge's signature.) Include a copy of the initial custody order and a copy of the most recent court order (within the past year) showing continued custody.
5. Case plans, the initial and most current.
6. CFS 4018, Financial/Medical plan form, shall be completed by the SRS worker or the Child Welfare Case Management Provider with the assistance of the SRS worker.
7. Copy of birth certificate. If birth certificate is not available, include copy of birth certificate application and forward copy of original birth certificate, upon receipt.
8. Copy of social security card or written verification of social security number from Social Security Administration. If child does not have a social security card, attach a copy of the application verifying that a social security card has been requested. Forward copy of original social security card, upon request.
9. If available, include child's medical history, including immunization records, psychological reports, school records.
10. Referrals for public adoptions shall include the documentation required in above section 9210.1 thru 9210.9 and the following:

    a. Background information, YA 2300 Part I, II, and III forms shall be completed by the birth parents. However, if the birth parents are unavailable, the Child Welfare Case Management Provider may complete and sign these forms and send an affidavit explaining that birth parents were unavailable to complete the forms.

b. Voluntary relinquishment signed by birth parents and accepted by SRS or a journal entry terminating parental rights signed by the judge.
c. Journal Entry documentation reflecting compliance with the Indian Child Welfare Act.
d. If applicable, adoptive resource home study completed prior to the ICPC adoption request. Requests will be forwarded to the receiving state requesting an updated case specific adoption home study.

If a pre-approved adoptive family is moving out-of-state, include the previous adoptive home study in the referral.
Should the child become free for adoption after ICPC has already been initiated, a new 100-A shall be completed requesting an adoptive home study. Attach three copies of the new case plan and legal documentation indicated above and forward to Kansas ICPC.

9220 Visits

A worker may send a child on a visit to another state prior to ICPC being involved, but consideration for the safety of the child is first and foremost, and risk is high if there has not been checks, a walk through, or home study completed by the receiving state prior to the visit.

If a worker plans to send a child on a visit with a resource presently being assessed for placement through ICPC, notify CFS/Central Office, ICPC Specialists, through the workers regional ICPC liaison two weeks in advance, if possible. CFS Central ICPC specialist will notify the receiving state as a courtesy and ask for a response. Should the receiving state not approve a visit, CFS/Central Office will notify the worker's regional liaison upon receipt.

Visits shall have a beginning and ending date and last no longer than 30 days.

9230 Child Welfare Case Management Provider Responsibilities as the Sending State

The Child Welfare Case Management Provider assumes all financial responsibility including the following:

- Foster care payments
- SSI, social security, or any benefits paid to the state on behalf of the child

- Services not covered by the medical card in the receiving state

Other Child Welfare Case Management Provider responsibilities include:

- Case management
- Preparation of reports to the court
- Reintegration services
- Travel arrangements and costs for disrupted out-of-state placements returning to Kansas

A foster or relative family may elect not to receive financial reimbursement for the child, but the Child Welfare Case Management Provider shall offer such payments to the family when they are being considered as a placement resource.

Some states allow relative families to apply for temporary assistance to families in their state of residence.
Check with Kansas ICPC for specific state information.

SRS is responsible for paying adoption assistance

9231 Appointed Child Welfare Case Management Provider Liaison Responsibilities

The Child Welfare Case Management Provider ICPC liaison staff shall monitor all time-lines regarding the ICPC process and cases assigned to their case manager staff to assure that all required services are being provided.

A. The Child Welfare Case Management Provider liaison staff shall:

1. Ensure that all placements made in other states are in compliance with the Compact procedure.
2. If a staff person learns of a placement of a child in another state which was made in violation of the compact, the Child Welfare Case Management Provider liaison staff shall notify the appropriate Kansas ICPC specialist for resolution. If issues are not resolved, the Kansas Deputy Compact Administer (DCA) may be contacted.
3. Ensure that all case managers assist the court in adhering to ICPC requirements. The Guardian Ad Litem or Child Welfare Case Management Provider attorney or CFS regional attorney or prosecutor may be helpful if kept informed.
4. Ensure ICPC approval from the receiving state is received prior to allowing the child to be placed in another state and prior to requesting consent to adopt. The approved 100A (CFS 4013), Interstate Compact Placement Request from shall be received by the liaison in order to be in compliance. The 100A is a legal binding contract between both states while services are provided.

5. Notify the appropriate Kansas ICPC specialist and Child Welfare Case Management Provider attorney immediately per local procedures if the court orders placement of a child into another state without prior ICPC approval.
6. When the placement of a child in another state has been made, the liaison shall complete the 100B form to confirm the date of placement and then forward it to the Kansas Interstate Compact office within 3 days of placement. The Receiving state will not provide supervision or services until they have received a completed 100B form that confirms the placement has occurred.
7. Neither the Child Welfare Case Management Provider ICPC liaison, SRS, or Child Welfare Case Management Provider staff are to contact the Compact Administrator in the receiving state. If it is warranted the responsible individual shall request the Kansas ICPC specialist to negotiate and resolve issues. The Deputy Compact Administrator (DCA) will be contacted by the ICPC specialist should further assistance is required.

B. Child Welfare Case Management Provider Case Manager or designee shall:

1. Prepare the ICPC referral packet.
2. Forward referral packet to regional Child Welfare Case Management Provider ICPC liaison for review and signature.
3. The Child Welfare Case Management Provider liaison will then forward the packet to the Kansas ICPC office.
4. Provide ongoing planning for the child and return the child if necessary.
5. Maintain financial responsibility.
6. Make travel arrangements to place the child (and return the child if necessary).
7. Complete the 100B form showing the date placement was made or change in placement status, and forward it to the Child Welfare Case Management Provider ICPC liaison. This is required for the receiving state to begin supervision.
8. Ensure receipt of progress reports as requested on the 100A.
9. Request status report of home study or progress report by email to their ICPC liaison. The liaison will forward it to the Kansas ICPC office for follow up with the receiving state.
10. Coordinate with SRS for verifications needed for financial planning (IV-E eligibility) and referrals for the Interstate Compact on Adoption and Medical Assistance (ICAMA) when the child is placed for adoption and has a signed adoption assistance agreement.
11. When permanency is achieved, send 100B and the three (3) copies of the Decree of Adoption or appropriate court order to the ICPC liaison, who shall forward it to the Kansas ICPC office.
12. Any travel expense for sending or returning of the child shall be the financial responsibility of the Child Welfare Case Management Provider.

9240 SRS Regional Responsibilities

A. If the child is placed out-of-state provide the Child Welfare Case Management Provider with documented verification of IV-E by completing the CFS 4018, Interstate Compact Financial/Medical Plan.

B. SRS CFS regional attorney and/or Central Office shall assist the Kansas ICPC office with legal issues pertaining to the ICPC and the court.

9250 Retention of Court Jurisdiction

A. The court may not discharge jurisdiction based solely on the fact that child has moved to another state. This jurisdiction shall remain in effect until the child is: legally adopted, reaches the age of majority in the receiving state or permanent guardianship/custodianship granted by the court, and the receiving state is in agreement.

B. The court also has the power to order the return of the child back to the sending state or transfers the child to another location or custody.

9300 ICPC Referrals From Other States to Kansas (Kansas as the Receiving State)

SRS or designee is responsible for providing services for children who are in the custody of another state, or jurisdiction of a court. All requests for services are routed by the sending states compact office to the Kansas compact office. A review of the packet will be completed to ascertain if the request is in compliance with the compact. The Kansas compact specialist approves or denies all placements coming into Kansas.

9310 Regional SRS Staff Responsibilities

A. Upon receipt of the ICPC referral, the SRS regional liaison shall assign a worker within one (1) calendar day.
B. The SRS regional worker or designee shall complete the family assessment using the ICPC Home Study Guideline in Appendix 9 C. The assessment should include a clear recommendation for placement. The worker shall forward three (3) copies of the report to the Kansas ICPC office. Refer to Section 9400 for timeframes for processing and completing home studies.
C. Obtain KBI and Central Registry checks on all individuals over the age of 10. Due to Adam Walsh legislation, FBI fingerprint checks are required of all adult household members age 18 years and over when completing foster and adoptive home studies. Central Registry checks shall be completed for all states in which the family has lived within the past five years.

D. If the family is being approved for relative foster care or non-relative foster care, the worker shall assist the family in completing the licensing packet which would have been included in the referral packet.
E. If a request is received to complete a relative home study and the family assessed is an appropriate resource placement, but would require foster care payments due to their present income, make this very clear in the recommendation. The family will need to agree to be licensed before this recommendation can be made. Alert the Kansas ICPC office immediately so the sending state can complete a new 100A. Upon receipt of the home study and recommendation for placement, the Kansas ICPC specialist shall make a placement decision and forward the signed 100A and home study to the sending state.
F. Upon receipt of the 100B or other written notification confirming placement, contact the family within 3 calendar days to arrange supervision and to provide services for the child and the family.
Specialized services shall be purchased and paid for by the sending agency.
G. Provide written progress reports at least quarterly, using the ICPC Supervision Report, Appendix 10.
H. Provide three (3) copies of the progress reports as requested on the CFS 4013 (100 A) form. All reports shall be sent to the Kansas ICPC office for forwarding to the sending state's ICPC office.

9400 Safe and Timely Interstate Placement of Foster Children Act of 2006 (P.L. 109-239)

Time Frames for Processing and Completing Home Studies:

A. All home study requests (parent, relative, foster care or adoption) shall be completed and reported to the ICPC office via email within 60 calendar days from the date the request is received by the Kansas ICPC office. The due date is indicated on the notification sent with the packet.
B. If the family cannot pass the requirements FBI, KBI and CANIS background checks or the family is not interested in placement, complete a report and send it to the Kansas ICPC office by the due date.
C. Foster care or adoption home studies under the federal law are not the same as the full home study requirements of Kansas. In order to meet the established time frames and to be in compliance with the federal law, the home study is a report of the home environment (using the home study outline) including FBI/KBI/CANIS checks. Full approval and recommendation for placement will occur once the family completes all requirements.
D. Upon completion of all requirements including PS-MAPP, the home study, supporting documents, and a placement recommendation, shall be submitted to the Kansas ICPC Specialist for approval.
E. The Kansas ICPC Specialist will notify the sending state of pending home study approvals and/or delays.

F. Conditional approvals will not recommend placement unless all the requirements have been met. Full approval and recommendation for placement will be submitted upon completion of all home study requirements.
G. Placements shall be made within six (6) months from the date the ICPC 100A, Interstate Compact Placement Request is approved and signed by the compact administrator in the receiving state.
H. The SRS worker shall notify the Kansas ICPC office when placement has not been made within six (6) months. Upon notification, Kansas ICPC shall close the case.
I. Assessments completed for a foster family may be accepted within the time frame reflected on the foster home license, if the family remains in the same home.
J. If the family moves to another location in the same state, the home needs to be reassessed to assure it meets licensing standards.
K. At anytime the family's composition changes or a significant event occurs, for example: new individuals are added to the family or family member leaves the household, the loss of a job or illness, the family assessment must be updated.

Either the Kansas compact administrator or the compact administrator in the sending state may request additional information before approving or denying the placement.

9450 Runaways/Interstate Compact on Juveniles

The Interstate Compact on Juveniles (ICJ) is under the jurisdiction of the Juvenile Justice Authority (JJA).

ICJ shall be the contact for the following:

a. A Kansas child in the custody of the Secretary or under court jurisdiction and reported as a runaway, fled out of state and apprehended by law enforcement. If the case involves ICPC, the ICPC Office shall be notified for information purposes.
b. A child from another state apprehended in Kansas by law enforcement and reported to be a runaway. If the case involves ICPC, the ICPC Office shall be notified for informational purposes.
c. Other states regarding any Kansas child reported as a runaway found in another state, regardless of custody status or SRS involvement.

To contact the Kansas ICJ, call 785-296-4213, or email: KansasICJ@jja.ks.gov

9500 Border State Agreement

Kansas has entered into a border state agreement with the state of Missouri to facilitate the timely completion of family assessments. Contact the Kansas ICPC Office for more information about the border state agreement.

9600 Interstate Compact on Adoption and Medical Assistance (ICAMA)

The Interstate on Adoption and Medical Assistance allows for the uniform provision of Medicaid for children with federally funded adoption subsidy agreements who move from one state to another. The majority of states are willing to also provide Medicaid coverage to children approved for state-only subsidy. See the website below for participating states. States also reciprocate for Title IV-E eligible foster children.

New states continue to be added to the compact. Contact the ICAMA administrator at Children and Family Services to ascertain if a specific state not listed is a member of the compact or the website at www.aphsa.org/AAICAMA

9610 Procedures for Kansas Children Moving to Another State

Upon notification that a Kansas Child with a Kansas Adoption Assistance Agreement is moving to another state, the SRS regional worker shall compile a ICAMA referral packet consisting of the following forms:

1. A completed 6.01(CFS 4010)-Notice of Medical Eligibility/Case Activation, form .
2. A completed 6.02-Notice of Action, form.
3. A copy of the completed and signed Adoption Assistance Agreement (YA -9304).
4. Compile the 6.01, 6.02, & 4022 in triplicate and send the packet to CFS Central Office ICAMA administrator. The packet upon receipt and review shall be forwarded to the family's residing state. Incomplete forms will be returned to the SRS regional worker.

5. Send the parents a copy of the 6.01 & 6.02 to inform them that the necessary steps have been taken to facilitate approval of Medicaid in the new state of residence and the issuance of a medical card.
6. The new residing state will forward the first residing state a 6.03 form confirming that Medicaid services have been approved. When the first residing state receives confirmation (6.03) that the child has been approved for Medicaid

services in the family's new residing state, the SRS regional worker will close the Kansas Medicaid case.

9620 Requirements of Foster or Adoptive Parents

1. Notify their SRS social worker responsible for their subsidy case that they are moving to another state.
2. Contact the local public welfare office in their new state of residence and advise them of the need for Medicaid services in behalf of the child. (Parents should take a copy of the adoption subsidy agreement and the 6.02 and proof of the child's American citizenship). The child cannot receive Medicaid services from more than one state.

3. Advise the Kansas SRS regional worker if they are experiencing difficulties with their new state of residence in getting a Medicaid card issued for their child.
4. The SRS regional worker shall contact the Kansas CFS ICAMA administrator and request their assistance in resolving any problems with the other state.

Note: If SRS agreed to provide specific medical services on the adoption agreement, and these services are not covered by the new state of residence Medicaid plan, Kansas shall continue to be liable for payment of these services. Kansas also continues to be responsible for the case subsidy as per the subsidy agreement.

9630 Procedures for Out-of-State Children Moving to Kansas

A. The Kansas ICAMA administrator shall upon receiving an ICAMA referral from another state indicating that a child is moving to Kansas, forward the ICAMA referral to the SRS regional office where the family resides.
B. The SRS regional worker shall facilitate the Medicaid approval and the issuance of a Medicaid card for the child. The subsidy agreement signed in the other state is the basis for eligibility and no other determination is required.
C. When the Kansas Medicaid card has been opened, the SRS regional worker shall forward the ICAMA 6.03 form to the CFS ICAMA administrator to confirm that the Kansas Medicaid card has been issued.
D. The CFS ICAMA administrator shall forward a copy of the Kansas ICAMA 6.03 form to the original state's compact office to confirm that the Kansas medical card has been issued and the original state can close their Medicaid case.

9800 Recording Intake Action for ICPC Requests

ICPC requests from other states are recorded on BEGN, ROLE, and SORT with codes for requesting services (Y) and "ICP" as the report type. All individuals are coded on ROLE as family (FAM). Individuals to include on ROLE and EVRL are:

A. Adults listed on the ICPC 100A, Compact Placement Request Form, (this is the CFS-4013 form) for which the home study is being completed, and;
B. Child(ren) involved in the request, even if they are not yet living with the relative.

9810 Case Opening

After the ICPC event is screened in, a FACTS case establishing household members and children involved in the request is opened. Relationships for all family members shall be established on RELS.

9820 Recording Assessment Tools

Record on MAAS that a home study (HMS) was a tool engaged with this case. The presenting situation is ICP. The Work Start Date and Time is when the worker first attempted to contact family; per letter or log note. The Initial End Date is the date the home study was sent to the Kansas ICPC Administrator in Central Office.

9830 Recording Case Findings

No maltreatment findings are recorded on FIND in FACTS for ICPC referrals. Decisions regarding whether or not to provide services to the family are recorded on the top half of the FIND screen.

Placement of Child(ren) in Kansas

Upon receipt of ICPC 100A from Kansas Compact Administrator to approve or deny the permission to place the child, FIND is entered in the following manner:

1. Case Conference Date: Date ICPC 100A is received from ICPC Central Office
2. Presenting Situation: ICPC
3. Service Decision Type: DS (denied services) if outcome is not to place, or PS (provide services) if decision is permission to place the child.

9840 Entering Kansas ICPC Referrals to Other States in FACTS

ICPC referrals to other states are documented in FACTS as tasks on the RESP screen. Enter the service request as custody of a member (CM); service action code of case management (FUO1N); and service source of ICP. Service status is referred (RE) when

the request is sent to the Kansas ICPC administrator. Once the receiving state has initiated their home study and concurs with placement of that child in their state, update the status to "IN". If the other state does not approve the placement, the status is updated with a source decision (SD).

9850 Recording Intake Action

ICPC courtesy supervision requests from other states are first recorded in KIPS and then the information is transferred to FACTS on the BEGN, ROLE, and SORT screens with codes for requesting services (Y) and "ICP" as the report type. Report Date and Time is the date the letter is received in Kansas indicating placement, and 12:00 am. Occurrence Date and Time is the date on ICPC 100B or letter received advising of the placement, and 12:00 am or time on the facsimile transmittal. The Presenting Problem is ICP. All individuals are coded in KIPS as family (FAM). Individuals to include in KIPS and on the EVRL screen in FACTS are:

A. Adults listed on the ICPC 100A (CFS-4013) for which the home study is being completed, and;

B. Child(ren) involved in the placement

9860 Case Opening

If necessary, reopen the case with the date of first contact with family subsequent to placement. If any child on CASE screen from the previous home study is not placed, remove them from the case by entering an "X" on ROLE type on the CASE screen for the child(ren). On MACL, enter the Reason Left as "LAF" (living with other family). Update any relationships (RELS) as needed.

9870 Recording Plans

Establish a family plan (FP) type for each child(ren) placed from the other state. The Plan and Goal Start Date is the date the agency first made contact with the family after the children were placed in Kansas. The goal type for each member is maintain within family (MFM).

9880 Recording Services

At least one service responsibility shall be initiated (IN) for each child. The plan type is FP. The service requested is voluntary placement (VP) with an achievement date 180 days from the effective date. The service action is Courtesy Supervision (OT06N), with a Service Source of Primary Social Worker (PSW). Initiate (IN) the status with an Effective Date of the date of first contact after placement.

9885 Other Involvement

Court involvement for children under Kansas ICPC courtesy supervision is not recorded. The case is closed upon receipt of notice form Compact Administrator.

9890 Requests for Courtesy Supervision of ICPC by Sending State

A new event is recorded to document the request for courtesy supervision if the case was closed in between the request for home study and the request for placement. If the case was closed waiting for ICPC approval, the status is changed to open. Case plans and corresponding responsibilities and client specific information are maintained in FACTS.

9900 Eligibility and Payment Procedures for Interstate Compact Cases

Resource parents are not required to live in the state through which their foster or adopted child came to live with them. Foster and adopted children from Kansas may move with their families to another state. Children from other states may come to live in Kansas. This section explains how to manage services for Kansas children who have moved out of state and children who have been placed in Kansas by another state.

Kansas, as the sending state, remains financially and ultimately responsible for children our department places out-of-state. Any state placing a child in Kansas remains responsible for a child in their legal custody.

9910 The Interstate Compact on the Placement of Children (ICPC)

The ICPC is a contractual agreement among all 50 states, the District of Columbia and the Virgin Islands. It is a legal and binding contract. The intent of ICPC is to provide an interstate placement and supervision mechanism for children placed across state lines. ICPC is based on the belief that each child requiring placement out of state will receive the maximum opportunity to be in a safe, suitable environment with persons or institutions having appropriate qualifications, facilities, and commitment to care.

ICPC applies to any child being referred out-of-state under court jurisdiction. These placements must receive prior approval of the receiving state. Social work details regarding ICPC are contained in section 9000.

The Interstate Compact does not apply when a child is visiting in another state. If an ICPC request has been initiated on that resource, then overnight visits may not occur.

A visit has a beginning date and an ending date. The child knows where he or she is returning to upon completion of the visit. A visit is intended to be for no longer than thirty days. A longer stay may be considered if it begins within the period of a child's vacation from school.

9920 The Interstate Compact on Adoption and Medical Assistance (ICAMA)

ICAMA is an agreement between specific states that allows for the transfer of Medicaid coverage for Title IV-E eligible children receiving foster care or adoption subsidy, if they move to a state included in this agreement. The roster of states included in the Compact will vary from time to time. It is important to contact the ICAMA administrator in CFS central office to ascertain which states are currently members of the compact.

In order to be eligible for Medicaid through ICAMA, a child must meet the following criteria:

1. Have a Foster or Adoption Subsidy Agreement through a state participating in ICAMA.
2. Be currently living in or intending to move to a state participating in ICAMA.

9930 Transferring Benefits for Eligible Children Who Are Leaving Kansas

SRS maintains a policy of retaining benefits received on behalf of foster children to recover the SRS foster care expenditures. Children who are placed out-of-state with a relative, the relative is encouraged to become the payee for the child's benefits.

A. SSI and SSA are interstate programs transferrable from one state to another. SSI and SSA recipients, who move with either their foster or adoptive parent to another state, continue to be eligible for these benefits. CFS staff shall notify the local Social Security office of the planned move. The family needs to contact the Social Security office in their new location to become the payee.
B. Veterans, Railroad or other benefits received on behalf of the child are also transferrable to the out of state placements with a relative.

9940 Adoption Subsidy Payments

Kansas as the sending state, is financially responsible for youth placed out of state by the SRS social worker and the CFS Child Welfare Case Management Provider. This means that monthly adoption subsidy payments to adoptive parents continue to be generated from KAECSES in accordance with the Adoption Subsidy Agreement for the case.

9950 CW/CBS Provider Responsibilities

Children placed out of state by SRS and a CFS Child Welfare Case Management Provider are still the Child Welfare Case Management Provider's responsibility. Foster care maintenance payments shall be directed by the Child Welfare Case Management Provider to the Foster Parent's home, Group Home, or other residential provider in the receiving state.

For children placed with a relative out-of-state, the CFS Child Welfare Case Management Provider shall ensure that maintenance is provided for the child through Child Welfare Case Management Provider payments, social security benefits, TAF from the receiving state, or an appropriate support option.

9960 Requirements of Foster or Adoptive Parents

In order for the ICAMA process to work smoothly, the parents should take an active role making sure that the appropriate parties in the sending and receiving state are aware of their plans.

A. Notify Local Worker in Sending State The parents must, as soon as they are able, notify the local worker in the sending state of their new address and departure date from the sending state.
B. Contact Appropriate Staff in Receiving State
   The parents should contact the Social Service office in the new state in order to assure the state is aware of their need for a medical card.
C. Cancel the Medicaid Card
   The parents may not use the old Medical card after issuance of a new card by the receiving state. The old card should be surrendered to the receiving state at the time the new card is issued and forwarded to the Medicaid office in that state for cancellation.

9970 Eligibility for Medicaid Services Through ICAMA

Medicaid Services delivered by providers in the receiving state through ICAMA, are dictated by the prevailing Medicaid regulations in that state, with one important exception, if a child has a valid adoption subsidy agreement in the sending state specifying services not covered under Medicaid in the receiving state, the sending state remains responsible for payment of these services.

When a bill is received for services not covered by the receiving state's Medicaid program and these services are indicated on the adoption subsidy agreement, CFS staff shall pay the bill, as Kansas is the sending state. In order for the bills to be paid, a GS 3465 shall be completed with a copy of the adoption subsidy agreement and the bill attached. Use the applicable adoption subsidy PCA codes.

9980 Procedures for Out-of-state Children to Be Placed in Kansas

Upon receiving an ICAMA referral from another state indicating that a child is moving to Kansas, the ICAMA administrator will forward the referral to the SRS office where the adoptive family, foster family or relative resides.

Upon receipt of the ICAMA referral in the SRS office, the CFS worker will facilitate the issuance of a medical card based on the documentation provided. Notification of the effective date of Kansas Medicaid will be sent to the ICAMA administrator to be forwarded to the sending state.

Close coordination should be made between the two different states to ensure continued Medicaid coverage. The Kansas ICAMA administrator can assist in identifying which office will process Medicaid in the new state. This varies from state to state.

9990 Closing an Interstate Compact Case

SRS maintains custody of the child until both states agree to close the case because permanency has been established or the child ages out of the foster care system. Post-placement supervision, by an appropriate agency or person in the receiving state, is provided until both states agree to close the case.

CFS eligibility staff shall wait for the SRS social worker to provide documentation authorizing closure of an interstate case.