

ARKANSAS DEPARTMENT OF HUMAN SERVICES

**DIVISION
OF
CHILDREN AND FAMILY
SERVICES**

**FAMILY SERVICES POLICY AND
PROCEDURE MANUAL**

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I. GENERAL PROVISIONS AND DIVISION OVERVIEW

POLICY (I-A): PHILOSOPHY AND MISSION STATEMENT FOR THE DIVISION OF CHILDREN AND FAMILY SERVICES

The Division of Children and Family Services (DCFS) is committed to child protection and family preservation. Every child is entitled to grow up in a permanent family. The primary and preferred way of achieving this goal is to provide families experiencing turmoil with services to prevent the need to place children outside their homes. The Division recognizes that there are a limited number of situations when children can not safely remain at home and must be separated from their family. The Division strives to preserve and strengthen the child's family ties when it is in the best interest of the child, and to protect the child by considering the child's health and safety as the paramount concern in determining whether or not to remove the child from the home. When a child must be separated from the family, DCFS will provide a healthy and safe environment and will make appropriate and timely efforts to provide services to reunite the family. DCFS will provide appropriate homes for children who can not be reunited with their families.

Our mission is to:

- protect children;
- maintain families, if this is appropriate, with the child's health and safety always considered paramount;
- provide quality services within available resources which enable families to maximize their potential and increase their abilities;
- preserve and enhance human dignity and worth;
- prevent or reduce the need for services.

POLICY (I-B): FAMILY SERVICE DELIVERY SYSTEM

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

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

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

Civil Rights Act: Titles 6, 7, 9

Rehabilitation Act: Sections 503, 504

Americans With Disabilities Act: Title II

Social Security Act Titles:

IV-B Child Welfare Services

IV-E Foster Care and Adoptions Assistance

XIX Medical Services

XX Social Services Block Grant

Public Laws: 93-207 Child Abuse and Neglect

94-142 Handicapped Children's Act

96-272 Adoption Assistance and Child Welfare Act of 1980

105-89 Adoptions and Safe Families Act of 1997

POLICY (I-C): DIVISION'S ORGANIZATIONAL STRUCTURE

The Director of DCFS has management and administrative responsibilities for the Division and has an interactive role with the Child Welfare Agency Review Board and the Child Placement Advisory Committee. The Division has four major offices, each with an Assistant Director: Office of Community Services, Office of Community Support, Office of Finance and Administrative Support, and Office of Legislative Analysis, Research and Planning.

Office of Community Services

The Office of Community Services is responsible for the direct and purchased service delivery of child welfare services throughout the state and is administered by the Assistant Director, Office of Community Services. The Division has ten DCFS areas:

AREA I: Benton, Carroll, Madison, Washington

AREA II: Crawford, Franklin, Johnson, Logan, Scott, Sebastian, Yell

AREA III: Clark, Garland, Hot Springs, Howard, Montgomery, Perry, Pike, Polk, Saline

AREA IV: Columbia, Hempstead, Lafayette, Little River, Miller, Nevada, Ouachita, Sevier, Union

AREA V: Baxter, Boone, Conway, Faulkner, Marion, Newton, Pope, Searcy, Van Buren

AREA VI: Pulaski

AREA VII: Bradley, Calhoun, Cleveland, Dallas, Grant, Jefferson, Lincoln, Lonoke, Prairie

AREA VIII: Clay, Craighead, Fulton, Greene, Izard, Lawrence, Mississippi, Randolph, Sharp

AREA IX: Cleburne, Crittenden, Cross, Independence, Jackson, Poinsett, Stone, White, Woodruff

AREA X: Arkansas, Ashley, Chicot, Desha, Drew, Lee, Monroe, Phillips, St. Francis

Each area has an Area Manager and county-based staff. Minimum county office staffing includes at least one Family Service Worker, a supervisor and an aide.

The Office of Community Services includes the following units: Area Managers and County Office Operations.

Office of Community Support

The Office of Community Support is responsible for the provision of administrative and programmatic support for the state's network of children and family services and is administered by the Assistant Director, Office of Community Support.

The Office of Community Support is comprised of two sections: Program Support In-Home Services (Intensive Family Services (IFS), Family Support, Central Registry, and Interstate Compact), and Program Support Out-of-Home Services (Foster Care, Adoptions, Independent Living, Behavioral Treatment Unit, and Promoting Safe and Stable Families Services).

Office of Finance and Administrative Support

The Office of Finance and Administrative Support provides administrative and management support to DCFS through personnel administration, budget monitoring, resource control, and contract administration.

The Office of Finance and Administrative Support includes the following units: Personnel, Contracts, and Financial Resources. In addition, the Foster Care/Medicaid Eligibility Unit determines the eligibility for federal funding under Title IV-E (Foster Care and Adoption) and Title XIX (Medicaid) of all children in the care of the Department who are placed in Out-of-Home Placement or subsidized adoption.

Office of Legislative Analysis, Research and Planning

The Office of Legislative Analysis, Research and Planning is responsible for statewide DCFS policy development, comprehensive short-term and long-term planning initiatives for the delivery of child welfare services, professional development, child welfare agency licensing, and quality assurance monitoring.

The Office of Legislative Analysis, Research and Planning consists of the following units: Policy, Planning, Professional Development, Child Welfare Agency Licensing, and Quality Assurance.

POLICY (I-D): OFFICIAL RECORD KEEPING

The official record of child welfare information for DCFS is maintained through the Child Reporting Information System (CHRIS). The CHRIS Unit is a part of the Division of Administrative Services, Office of Technology, which is responsible for the enhancement of the CHRIS Application, data monitoring, Help Desk function and some specialized training. CHRIS is fully automated and is a worker based child-welfare information system. The Family Services Policy and Procedure Manual (FSPF) includes the data input instructions for the CHRIS Application.

A hard copy file of case information will be maintained for data not in CHRIS. Hard copy files will be created, if necessary for case review.

POLICY (I-E): COMPLIANCE WITH THE MULTIETHNIC PLACEMENT ACT (MEPA)

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

The Multiethnic Placement Act prohibits delaying or denying the placement of a child for adoption or foster care on the basis of race, color or national origin of the adoptive or foster parent or the child involved.

Consideration of race, color, or national origin is permissible only when an individual determination is made that the facts and circumstances of a particular case require the consideration of race, color, or national origin in order to advance the best interests of the child in need of placement.

POLICY(I-F): CONFIDENTIALITY

The purpose of this policy is to assist employees in determining what information is confidential, to whom confidential information can be released, and the consequences of wrongful release of the information.

The Division of Children and Family Services is committed to best practice in relation to respecting client confidentiality. All employees of the Division shall maintain the confidentiality of children and

families served by DCFS. Confidentiality applies to verbal, written and/or electronic transmittal of information.

- Reports, correspondence, memoranda, case histories, or other materials compiled or received by a licensee or a state agency engaged in placing a child, including both foster care and protective services records, shall be confidential and shall not be released or otherwise made available, except to the extent permitted by federal law and only:
 - (A) To the director as required by regulation;
 - (B) For adoptive placements, as provided by the Revised Uniform Adoption Act, § 9-9-201 et seq.;
 - (C) To multidisciplinary teams under § 12-12-502(b);
 - (D) To the child's parent, guardian, or custodian
 - (E) However, the licensee or state agency may redact information from the record such as the name or address of foster parents or providers when it is in the best interest of the child;
 - (F) To the child;
 - (G) To health care providers to assist in the care and treatment of the child at the discretion of the licensee or state agency and if deemed to be in the best interest of the child. Health care providers include doctors, nurses, emergency medical technicians, counselors, therapists, mental health professionals, and dentists;
 - (H) To school personnel and day care centers caring for the child at the discretion of the licensee or state agency and if deemed to be in the best interest of the child;
 - (I) To foster parents, the foster care record for foster children currently placed in their home. However, information about the parents or guardians and any siblings not in the foster home shall not be released (See Policy VII-B: Providing Information to Foster Parents);
 - (J) To the Child Welfare Agency Review Board. However, at any board meeting no information which identifies by name or address any protective services recipient or foster care child shall be orally disclosed or released in written form to the general public;
 - (K) To the Division of Youth Services, including child welfare agency licensing specialists;
 - (L) For any audit or similar activity conducted in connection with the administration of any such plan or program by any governmental agency which is authorized by law to conduct such audit or activity;
 - (M) Upon presentation of an order of appointment, to a court-appointed special advocate;
 - (N) To the attorney ad litem for the child;
 - (O) For law enforcement or the prosecuting attorney at the discretion of the licensee or state agency and if deemed to be in the best interest of the child;
 - (P) To juvenile courts, as provided for in the Arkansas Juvenile Code of 1989, § 9-27-301 et seq.;
 - (Q) In a criminal or civil proceeding conducted in connection with the administration of any such plan or program;

- (R) For purposes directly connected with the administration of any of the state plans as outlined at 42 U.S.C. 671(a)(8), as in effect January 1, 2001;
- (S) For the administration of any other federal or federally assisted program which provides assistance, in cash or in kind, or services, directly to individuals on the basis of need; or
- (T) To individual federal and state representatives and senators with no redisclosure of information
- (U) No disclosure shall be made to any committee or legislative body of any information which identifies by name or address any recipient of services.
- (V) Foster home and adoptive home records are confidential and shall not be released except:
- (A) To the foster parents or adoptive parents;
- B) For purposes of review or audit, by the appropriate federal or state agency;
- C) Upon allegations of child maltreatment in the foster home or adoptive home, to the investigating agency;
- (D) To the Child Welfare Agency Review Board;
- E) To the Division of Youth Services, including child welfare agency licensing specialists;
or
- (F) To law enforcement or the prosecuting attorney, upon request.
- (W) Any person or agency to whom disclosure is made shall not disclose to any other person reports or other information obtained pursuant to this subsection.
- (X) Any person disclosing information in violation of this subsection shall be guilty of a Class C misdemeanor.
- Information is confidential if it is not intended to be disclosed to persons other than those to whom disclosure is allowed under the statute.
 - The Family Service Worker may by law sign for releases of information for children in DHS custody. The Family Service Worker must present a copy of the custody order to receive medical and school records. The DHS-81 must be signed by the parent to receive copies of parent's records, however, the parent's signature is not necessary for obtaining records for the child.
 - An attorney ad litem shall be provided access to all records relevant to the child's case, including, but not limited to, school records, medical records, juvenile court records and Department of Human Services records to the extent permitted by federal law.

FOSTER CHILD CONFIDENTIALITY

When a release of information regarding a child is requested, the FSW shall take the necessary steps to guard the confidentiality of personal information. The steps include: (1) assuring that no identifying or potentially harmful information on a child is released, and (2) the consent shall be reviewed and approved by OCC. Court orders that direct the release of specific information to specified offices, agencies or people shall be construed as proper consent for release of information. No other consent is necessary, however OCC should be informed whenever such a release of information is being made.

Requests for media releases includes requesting permission to release photographs, voice reproductions, slides, video tapes, movie films, promotional pamphlets, news releases, etc. The FSW shall review the contents of such release along with OCC and make any necessary modifications. Consideration should be given to the protection of the child's identity and assurances that the contents of the material released will present the child in a light that would not be distasteful or negative to the child. The Director of the Division of Children and Family Services or designee shall be consulted in matters that may reflect on the Division. In cases of consents for coverage by news media, consultation should also be sought from the Director of Communications. This consent must be signed by the Assistant Director of Community Support. The foster parents shall be informed of these policies.

The Adoption Specialist must receive documented consent from a child ten (10) years of age or older, to show photographs for recruitment of an adoptive family.

CONFIDENTIALITY OF ADOPTION RECORDS

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

INVESTIGATIVE REPORTS

Child Maltreatment investigative reports are confidential. There are two types of child maltreatment investigative determinations: Unsubstantiated and Substantiated.

Unsubstantiated child maltreatment reports can only be released to:

- The SUBJECT of the report;
- The Prosecutor for the purpose of prosecuting false reports; and
- The Court if it is necessary for determination of an issue before the Court.

Substantiated or True child maltreatment reports can only be released to:

- The SUBJECT of the report; and
- The appropriate law enforcement agency and prosecuting attorney in cases of severe maltreatment.
- See A.C.A. 12-12-512; A.C.A. 12-12-514.

The Department may disclose the investigative determination of any offender when the offender is engaged in child-related activities or employment, and the Department has determined that children under the care of the offender are at risk of maltreatment by the offender.

A Court Appointed Special Advocate (CASA) and Attorney Ad Litem (AAL) can obtain a copy of a true report from the Central Registry on a child they are representing.

Information contained in the Central Registry is confidential. It can only be released to:

- The administration of the adoption, foster care, children's protective services programs, or child care licensing programs OF ANY STATE;
- Federal, state, or local government entities, or any agent of such entities, that needs to know the information to carry out its responsibilities to protect children from abuse or neglect;

- The SUBJECT of a true of report. The subject of a report includes: the offender, the victim child and the parents, guardians or legal custodians of the victim child. A non-custodial parent is still a parent and gets the report;
- A civil court or administrative proceeding when it is necessary to determine an issue before the court or administrative agency;
- The administration of a federally assisted program which provides assistance to individuals on the basis of need;
- An audit by a governmental agency authorized by law to conduct the audit;
- A bona fide research project but without identifying information, such as names. You will know if it is a bona fide research project because the Director of the Department must give written approval;
- A multi-disciplinary team;
- The Division of Child Care and Early Childhood Education and the child care facility owner or operator for the limited purpose of providing a Central Registry background check on employees and shall include a true finding only;
- Child abuse citizen panels;
- Child fatality review panels;
- The general public, the findings about the case of child abuse which has resulted in a child fatality or near fatality; but the central registry may redact any information concerning siblings, attorney-client communications and other confidential communications.
- A grand jury or court when it is necessary to determine an issue;
- The CURRENT foster parents of a child who is a subject of a report;
- The prosecuting attorney or law enforcement officers on request; and
- The employer of any offender when the offender is engaged in child related activities.
- See A.C.A. 12-12-506.
- True reports may be disclosed to individual federal and state senators and representatives who agree not to allow any redisclosure of information, provided that no disclosure shall be made to any committee or legislative body of any information which identifies any recipient of services by name or address.

- True reports that have been administratively appealed pursuant to the Child Maltreatment Act and which have been stayed because of criminal proceedings shall not be disclosed other than for administration of adoption, foster care, or children's protective services programs.
- A relative or friend of the subject of the report can not get the information. This is true even if the relative or friend is calling on behalf of the subject of the report. The stepparent does not get the information unless the stepparent is the subject of the report. See A.C. A. 12-12-506. When the non-custodial parent has a child in the custodial parent's home, but that child is not the subject of the report, the non-custodial parent does not get the report.

If you wrongfully disclose confidential information, you are guilty of a Class C or Class A misdemeanor and you can lose your job. For a Class C misdemeanor, the sentence shall not exceed 30 days in the county jail and a \$100 fine. For a Class A misdemeanor, the sentence shall not exceed

one year in the county jail and a \$1,000 fine. The difference in the two sentences depends on which statute is used. See A.C.A. 12-12-504 or A.C.A. 12-12-506.

PROVISIONAL INFORMATION

The following receive child maltreatment reports determined to be substantiated or unsubstantiated and the services offered and provided:

- A mandated reporter;
- The school counselor; and
- A person or agency that is providing professional services to the victim child.

See A.C.A. 12-12-515.

THE NAME AND ANY IDENTIFYING INFORMATION OF THE REPORTER IS ALWAYS CONFIDENTIAL. The Court may order you to reveal the name of the reporter. Then, and only then, may you reveal the name. A.C.A. 12-12-506.

FREEDOM OF INFORMATION ACT

The general public can discover some information about you. Your personnel record can be disclosed, unless to do so would clearly be an unwarranted invasion of privacy. Therefore, the Department can not release your Social Security Number, your school transcripts, your PPES information unless you are suspended or terminated as a result of your PPES score, or any grievance information. Grievance information becomes public record after the grievance process is completed if a grievance is appealed to the State Grievance Review Committee. If the grievance is not appealed to the state level, the discipline does not become public record. See A.C.A 25-19-105.

See these policy sections for more information on confidentiality: Policy (II-D): Child Maltreatment Central Registry; Procedure (II-D1): Requests for Central Registry Information; Procedure (II-D2) Requests for Information from Agencies Providing Protective Services; Policy (VII-B): Providing Information to Foster Parents; Procedure (VII-B1): Providing Information to Foster Parents.

II. SERVICES TO ASSESS FAMILY STRENGTHS AND NEEDS

POLICY (II-A): COMMUNITY AND SELF REFERRALS FOR SERVICES

The Division shall accept referrals for services for children and families who need assistance in a wide range of problems based on family need. Families who need assistance may accept services on a voluntary basis.

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

PROCEDURE (II-A1): Community and Self Referrals for Services

The **Family Service Worker** will:

- Accept referrals from families, community agencies, or other DHS Divisions via the “Information and Referral” form, (DHS-3300).
- Begin an assessment of the family’s strengths and needs.
- Refer to other divisions/agencies as appropriate via the (DHS-3300).

POLICY (II-B): ASSESSING FAMILIES IN RELATION TO STRENGTHS AND NEEDS

The assessment of the family’s strengths, needs, and resources is the basis for developing individualized goals and service delivery to meet the family’s unique goals. The family shall be the primary source of information for the assessment with emphasis on the partnership with the family and a holistic view of their circumstances. The Family Strengths and Needs Assessment (CFS-6009) will be completed to document the assessment. (See procedure V-A for instructions).

In assessing the family’s strengths and needs, a structured decision-making process will be utilized. A series of assessment tools will be employed to make assessments and structure the agency’s response to assessment results. These tools are the Health and Safety Assessment and the Risk Assessment. The Health and Safety Assessment will be utilized to assess issues posing an immediate danger to a child. The Risk Assessment will be utilized to determine the likelihood of future abuse to a child. The Health and Safety Assessment and the Risk Assessment are considered as tools in a structured decision-making process and their use does not replace professional judgement. The Family Strengths and Needs Assessment will be used for all cases. The Health and Safety Assessment and the Risk Assessment will not be used in voluntary supportive services cases.

PROCEDURE (II-B1): Assessing Families in Relation to Strengths and Needs

The Family Service Worker will:

- Open a Protective Services or Supportive Services case, as appropriate, with procedures given in “Services Case Opening”, Procedures (III-A1) and (III-A2).

Open a protective services case if there is a true report of child maltreatment or if there is a court order for protective services. Open a supportive services case if the family is in need of services offered by the Division and the family is willing to accept the services voluntarily. Neither service is time-limited, and clients in either category should have access to the full array of available, appropriate services.

The Child Maltreatment Assessment is not necessary for a supportive services case.

- Begin to collect and assess information about the strengths and needs of the family.
- Complete the “Case Connect” screen in “Referral/Investigation” section, if an investigation is connected to a new or existing case number. Go to “Workload”, “Case” in CHRIS and complete the automated “Family Strengths and Needs Assessment” found within the “Case Plan”, “Assessment”, section of CHRIS on the “Family” and “Child” screens. Take this action within thirty (30) days from the “Open Date” established by the Case Connection. This report will be printed from CHRIS and may be the result of several family sessions.

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

Pursuant to Act 1240 of 1997, the Department of Human Services and the Arkansas State Police (ASP) entered into a contractual agreement for the Arkansas State Police Crimes Against Children Division to assume responsibility for the administration of the Child Abuse Hotline and the assumption of investigative responsibility as identified in Procedure (II-E11). The Crimes Against Children Division (CACD) is composed of three sections: 1) the Child Abuse Hotline, 2) civilian employees who assess child maltreatment reports, and 3) a law enforcement unit which conducts criminal child maltreatment investigations.

All child maltreatment allegations are to be reported to the Child Abuse Hotline. No privilege shall prevent anyone from reporting child maltreatment when the information is obtained from a child.

Privileged communication shall not prevent anyone, except between a client and his lawyer or minister or Christian Scientist practitioner from testifying concerning child maltreatment when the information is obtained from a child.

No privileged communication, except between a client and his lawyer or minister or Christian Scientist practitioner, shall prevent anyone from reporting or testifying concerning child maltreatment when the information is obtained from an adult.

The Arkansas Child Maltreatment Hotline must accept reports of alleged maltreatment when either the child or his family is present in Arkansas or the incident occurred in Arkansas.

If the alleged maltreatment occurred in another state, the Hotline shall: (1) screen out the report, (2) forward it to the other state's hotline for investigation and (3) send a copy of the report to the appropriate investigating agency in Arkansas to initiate courtesy interviews. The Arkansas agency should contact the other state and advise them of our willingness to assist their investigation (e.g. courtesy interviews).

If the alleged maltreatment occurred in Arkansas, but the victim, his parents and/or the alleged offender no longer reside here, the Hotline will accept the report. The Arkansas investigating agency (DCFS or CACD) will contact the other state and request courtesy interviews with the out-of-state subjects of the report.

The Crimes Against Children Division maintains an around the clock statewide intake process (the Child Abuse Hotline) for accepting reports of alleged child maltreatment. A uniform protocol is used for screening and prioritizing all allegations of child maltreatment. The investigating agency shall notify local law enforcement immediately of all reports of severe maltreatment. The investigating agency will initiate an investigation in cooperation with law enforcement and the prosecuting attorney within 24 hours.

PROCEDURE (II-C1): Child Abuse Hotline

The Child Abuse Hotline Worker will:

- Receive and record all child maltreatment allegations.
- Attempt to secure all information requested in each screen within the Referral Section of CHRIS. Also, elicit all information requested on the "Referral" and "Narrative" screens, such as the following:
 - reasons the reporter suspects child maltreatment and how the reporter acquired the information,

- current risk of harm to the child,
 - mental and physical condition of alleged offender,
 - potential danger to staff assessing the report,
 - identity and location of possible witnesses or persons knowledgeable about the alleged child maltreatment, and
- Take a snapshot of the report using the Referral “Snapshot” icon on the CHRIS toolbar. Prioritize the report by keying the “Ref. Accept” screen. (Note: Central Registry Search results is a mandatory field on this screen.) Use the Child Maltreatment Assessment Protocol (PUB-357) as a guide.
 - Inform the caller if the report does not constitute a report of child maltreatment and make appropriate referrals.
 - Prioritize the report according to the protocol and transmit to the County Office, or Crimes Against Children Division (CACD) for assessment along with any pertinent Central Registry information.
 - Telephone County Office, on-call Family Service Worker or CACD Worker immediately to tell of the need for Priority I handling.

The **Child Abuse Hotline** Supervisor will:

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

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

The **County Supervisor** or designee will:

- Take the information on child maltreatment as directed in Procedure II-C1 if a reporter contacts the county office and refuses to call or has been unable to contact the Child Abuse Hotline.
- Determine whether the report is a valid report of maltreatment by using the Child Maltreatment Assessment Protocol (PUB-357).
- Tell the reporter if the report is not an allegation of child maltreatment.
- Call the CHILD ABUSE HOTLINE if the report is accepted. The CHILD ABUSE HOTLINE will prioritize the report and refer for assessment by entering the report into the “Referral” section of CHRIS.

Once a report is entered in CHRIS, workers with proper security, will have access to referral, investigative and case information.

NOTE: County Office staff are strictly prohibited from entering reports into CHRIS. Any unauthorized use or altering of this information is also strictly prohibited. Please see DHS Policy 1085, “Minimum Conduct Standards” No. 5 on information related offenses.

- Check the computer at least once in the A.M. and once in the P.M. for child maltreatment report transmissions.

- Acknowledge receipt of Priority I transmissions within two (2) working hours, and Receipt of Priority II transmissions within three (3) working hours.
- Advise the Child Abuse Hotline promptly of after-hours on-call Family Service Workers' names by entering information into the "Organization" screens in CHRIS.
- Establish procedures to ensure the security and confidentiality of reports at the local level and the Child Maltreatment Assessment files when not in use.
- Notify Prosecuting Attorney by letter of any failure by a mandated reporter to report suspected child maltreatment.
- Notify Prosecuting Attorney by letter when a reporter makes a report without good cause.

PROCEDURE (II-C3): County Office Request for Clearance of a Report

The **County Supervisor** will:

- Contact a CHILD ABUSE HOTLINE Supervisor if there is reason to believe a registered report is inappropriate for assessment before the report is initiated.
- Cite at least one of the following reasons:
 - the allegations would not constitute child maltreatment as defined in "The Child Maltreatment Reporting Act", or
 - the same incident involving identical alleged offenders and victims has already been assessed.

The **CHILD ABUSE HOTLINE Supervisor** and appropriate **Hotline Staff** will:

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

POLICY (II-D): CHILD MALTREATMENT CENTRAL REGISTRY

The Division of Children and Family Services maintains a statewide Central Registry for the collection of child maltreatment investigative reports. Reports made to the Department are confidential and may be disclosed only as provided by Ark. Code Ann. § 12-12-505-506. True reports shall be retained. Information included in the automated data system shall be retained indefinitely to assist the department in assessing future risk and safety. Hard copy records of unsubstantiated reports shall be destroyed at the end of the month in which the determination is made. There can be no disclosure of unsubstantiated reports except for release to the prosecutor, to a subject of the report and to the court, if the information in the record is necessary for a determination of an issue before the court. Any records of screened-out reports of child maltreatment shall not be disclosed and may only be used within the department for purposes of administration of the program.

The Department shall identify the types of child maltreatment for which the offender is eligible for automatic removal of his name from the Central Registry under certain conditions. Types of child maltreatment are defined in the Pub-357(Child Maltreatment Assessment Protocol). (See Policy IX-D Removal of An Offenders Name from Central Registry).

If a person's name has been entered into the Central Registry as an offender for these named types of child maltreatment, the offender's name shall be removed when the offender has not had a subsequent true report of this type for one (1) year, and more than one (1) year has lapsed since the closure of any protective services or foster care case opened as a result of this report.

The Department will also identify types of child maltreatment for which an offender can request the Department to remove his name from the Central Registry if there has not been a subsequent true report for this type for five (5) years, and more than five (5) years have lapsed since the closure of any protective services or foster care case opened as a result of this report. (See Policy IX-D Removal of An Offenders Name from Central Registry).

If an offender is criminally convicted of a crime, an element of which is child maltreatment, as defined by Arkansas law, the offender's name shall always remain in the Central Registry.

True reports may be disclosed to individual federal and state senators and representatives who agree not to allow any re-disclosure of information, provided that no disclosure shall be made to any committee or legislative body of any information which identifies any recipient of services by name or address.

True reports that have been administratively appealed pursuant to the Child Maltreatment Act and which have been stayed because of criminal proceedings shall not be disclosed other than for administration of adoption, foster care, or children's protective services programs.

PROCEDURE (II-D1): Requests for Central Registry Information

The Family Service Worker or DCFS Supervisor will

- Refer immediately by telephone or fax to Central Registry all requests.
- Send requested information to the Central Registry.

PROCEDURE (II-D2): Requests for Information from Agencies Providing Protective Services

The **County Supervisor** or designee will:

- Verify inquirer's identity and authorization to receive Central Registry information.
- Search county office Referral log in CHRIS for requested information.
- Release only true child maltreatment assessment determinations to professionals offering services or providing treatment for the victim.
- Call the OCC attorney if there are any questions.

POLICY (II-E): COUNTY OFFICE ASSESSMENT OF CHILD MALTREATMENT REPORTS

The Arkansas State Police Crimes Against Children Division (CACD) has the responsibility to assess most Priority I allegations of child maltreatment. Whenever the investigation of a sexual abuse allegation determines that the offender is not the victim's caretaker, the case will remain open with DHS or be transferred to the CACD as an active investigation. DCFS is responsible for ensuring the health and safety of the children even if the primary responsibility for the investigation belongs to CACD. DCFS will assess all situations of voluntary delivery of a child, as well as many Priority II and the following Priority I cases:

- Abandonment
- Failure to protect
- Medical neglect of disabled infants
- Failure to thrive
- Malnutrition

During the assessment of an allegation of child maltreatment, DCFS staff in the county office shall seek to ascertain the existence, cause, nature and extent of child maltreatment, the existence and extent of previous injuries, and the names and conditions of other children in the home. The assessment also seeks to ascertain the identity of the person responsible for the maltreatment, the relationship of the children with the parents or caretakers and their circumstances, the child's environment and all other pertinent data. The assessment shall begin within the time frame prescribed by law.

The Division will ensure reasonable efforts are made to preserve the family and to prevent the need to remove the child from the home; with the health and safety of the child being of paramount concern. Reasonable efforts to reunify the family shall not be required in all cases. See Policy VI-A for exceptions.

The Family Service Worker conducting the child maltreatment assessment shall have the right to enter into the home, school, or other place for the purpose of conducting an interview or completing the assessment. The Department, CACD and law enforcement shall be allowed access to the child's public and private school records during the course of the child maltreatment investigation. The worker will have the discretion, in the child's best interest, to limit the persons allowed to be present when a child is being interviewed concerning an allegation of child maltreatment. The worker will determine when a child or any other children residing in the home should be referred to a physician, psychologist, or psychiatrist for a medical or psychological examination.

This fact-finding phase of the child maltreatment assessment allows the Family Service Worker to determine:

- if services are necessary to assist the family and allow the child to remain safely at home,
- if separation of the child from the family is necessary to protect the health and safety of the child, and
- whether there is a preponderance of the evidence (see glossary) to support the report.

In cases where domestic abuse is involved (see glossary for definition of domestic abuse) a family/household member may file a petition for an order of protection. The Family Service Worker may also facilitate the process to file a petition on behalf of a minor child(ren). The worker should thoroughly review the Health and Safety Assessment and the Risk Assessment and ensure that a

safety plan is in place for a child before leaving a child in a home when an order for protection is filed.

An order of protection issued by a court of competent jurisdiction in any county of this state is enforceable in every county of this state by any court or law enforcement officer.

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

PROCEDURE (II-E1): County Office Response to the Child Abuse Hotline for those assessments that remain the responsibility of the Department

The **County Supervisor** or designee will:

- Assign the report to a Family Service Worker(s) or a Unit Group who will conduct the assessment when a report is received in the CHRIS county in-box.
- Make entries on the “Inv. Notes” as the assessment is conducted.
- Consult with and advise the Family Service Worker as the assessment is conducted.

The **Family Service Worker** will:

- Begin Child Maltreatment Assessment immediately but no later than 24 hours after receipt of report by the Hotline, if severe maltreatment (**Priority I**) is indicated.
- Begin all other Child Maltreatment Assessments within 72 hours of the report (**Priority II reports**).
- Make immediate telephone notification to the Prosecuting Attorney and law enforcement on Priority I reports, unless the prosecuting attorney has provided written notice to the department, that the department need not send notification of the initial maltreatment report to the prosecuting attorney’s office.
- Consider the assessment initiated by interviewing or observing, when appropriate, the victim child outside the presence of the alleged offender. If the worker is unable to interview or examine the child, the assessment will be considered initiated after the Family Service Worker has made and documented all reasonable diligence to obtain an interview or examination.

Examples of reasonable diligence should include all of the following actions:

- Making an unannounced visit to the child’s home at least three times at different times of the day or on different days in an attempt to interview the child.
- Contacting the reporter again if the reporter is known, if attempts to locate the child have failed.
- Visiting the child’s school or day care or all other places where the child is said to be located.
- Sending a certified letter to the location given by the reporter, if attempts to locate the child have failed.

- Contacting appropriate local Division of County Operations staff and requesting research of the ACES system and other files to ascertain another address, if attempts to locate the child have failed.

After all these efforts have been made, the worker shall submit the record to the supervisor for approval of reasonable diligence to locate and interview the child.

- Complete, print, and route the “Notice of Child Maltreatment Allegation” (CFS-310) on Priority I reports then document this action on the “Document Tracking” screen of CHRIS. If the alleged maltreatment concerns a foster child see Procedure VII-C1.
- Begin keying “Child Maltreatment Assessment” into the “Investigation” section of CHRIS.
- Send a confirmation letter, “Referral for Investigation” (CFS-321), to law enforcement when law enforcement accepts responsibility for investigating the report. Key “Document Tracking” screen in CHRIS.

PROCEDURE (II-E2): Child Maltreatment Report Assessment Interviews

The **Family Service Worker** will:

- Observe, if not age appropriate for interview, or interview all children outside the presence of the alleged offender or the offender’s attorney. (Exceptions must be approved by a supervisor. See NOTE below.)

NOTE: In conducting investigations where the offender is out of the home, it is not necessary to interview siblings of victims in these cases, unless they may have collateral information or have been within the access of the offender. Children residing in the home of the offender must be interviewed.

- Physically inspect children as appropriate.
- Complete “Physical Documentation--Body Diagram” (CFS-327a) when applicable.
 - Photograph visible injuries; label and date photos.
- Interview both parents, including the non-custodial parent, and inform them of DCFS responsibility to assess.
- Conduct a separate interview with the victim.
- Give the family “Child Protective Services: A Caretaker’s Guide” (PUB-052) during the first contact and explain, as appropriate, to help the family understand its contents.
- Interview alleged offender. Give PUB-052 and discuss contents then document on the “Document Tracking” screen in CHRIS.
- Make a home visit to assess the environment where the child resides and determine the names and conditions of other children in the home.
- Check with collateral sources, as appropriate, including teachers, neighbors, witnesses and the person making the report.
- Contact the DHS attorney to petition the court for an ex parte order of investigation to allow access if the parents, caretakers, or others deny access to any place where the child may be.

- Coordinate the conducting of interviews when primary (where the child resides) and secondary counties are involved.
- Reinitiate the investigation in the second county within 24-72 hours, according to the Child Maltreatment Assessment Protocol (PUB-357) when an investigation is transferred from one county to another and the victim or any other children believed to reside in the home where the report originated have not been seen.

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

The Primary County Supervisor will:

- Take the lead in coordinating the interview process when multiple counties are involved and
- Ensure that counties communicate and complete the investigation within 30 days.

PROCEDURE (II-E3): Health and Safety Assessment

The Health and Safety Assessment (CFS-6025) will be completed in conjunction with the child maltreatment assessment, and is designed:

- To identify factors in the home which affect the child's immediate safety.
- To guide the Family Service Worker in determining whether or not to leave the child in the home.
- For use as a structured decision-making tool. For example, information collected on the Health and Safety Assessment can be used to document reasonable efforts or aggravated circumstances. It can also be used to assist in completing the court report, and at important case decision points, or when there are major changes in case circumstances.
- To assess the child's health and safety at placement changes.

Information to complete the Health and Safety Assessment Checklist (CFS-6025) will be gathered during the child maltreatment interviews.

The Family Service Worker will:

- Complete the "Health and Safety Checklist" screen in CHRIS.
- Complete the Health and Safety Assessment for each child in the family. Children ages 0-6, developmentally disabled or those repeatedly victimized shall be considered especially vulnerable.
- Identify the presence or absence of any safety factors by checking "yes" or "no", respectively, on the "Health and Safety Checklist" screen (CFS-6025).
- Provide narrative documentation on the "Health and Safety Checklist" for each safety factor identified.
- Complete the "Safety Response" screen (CFS-6027) if any safety factors have been identified. Documentation of the safety response should match the safety issue.
- Protecting interventions may be necessary before completion of the assessment.
- Document protecting interventions considered or acted upon, for all safety factors with a "yes" response, in the "Safety Response" screen. A protecting intervention service is any action taken by the FSW to ensure a child's health and safety. Documentation describing the actual use or consideration of using protecting interventions establishes reasonable efforts to prevent removal of the child from the home.

- Make a Safety Decision based on the presence or absence of factors, and the protecting interventions used, if a safety factor was identified. The Safety Decision on the “Safety Response” screen will be:
 - “Safe”- There are no children likely to be in immediate danger of serious harm. (Note – This is the default decision on the Safety Response screen when all statements on the Health and Safety Checklist screen are selected “No”, therefore, the FSW will not have to complete the Safety Response screen).
 - “Conditionally Safe” – Protecting Safety Interventions have been received, and those interventions have resolved the unsafe situation for the present time. (Note – After completing the Safety Response, this selection will be available).
 - Documentation of follow-up services must be provided.
 - The Supervisor must approve if no follow-up services are needed.
 - “Unsafe” – Removal is the only protecting intervention for the child(ren). Without it, the child(ren) is likely to be in danger of immediate or serious harm. (Note – After completing the Safety Response, this selection will be available).
- Seek supervisory approval if the report is unsubstantiated, but there is a “yes” on one of the Safety Assessment factors; and offer supportive services if appropriate. Supervisory approval will be obtained before completing all assessments.
- Make the appropriate child protecting decisions if the child’s immediate safety is in danger.
- Identify the injury suffered by any child in the case, and check and document the appropriate section of the “Health and Safety Checklist” screen.
- Complete the Health and Safety Assessment within 30 days of the receipt of the child maltreatment report. The child maltreatment assessment cannot be closed until the Health and Safety Assessment is completed.
- The Family Service Worker will complete the “Safety Response” screen if the Crimes Against Children Division (CACD) is conducting the investigation.

The Crimes Against Children Division (CACD) will:

- Identify any safety factors that may contribute to immediate or threatened harm or re-injury to the child.
- Contact the Family Service Worker immediately if the child’s immediate safety is in question.
- Coordinate case management with the FSW for completion of the “Safety Response” screen.
- Complete the “Health and Safety Assessment Checklist” screen in CHRIS within 30 days of the receipt of the child maltreatment report. The child maltreatment assessment cannot be closed until the Health and Safety Assessment is completed.

PROCEDURE (II-E4): Medical/Psychological Evaluation Required During Assessment

The **Family Service Worker** will:

- Confer with the County Supervisor/Assessment Team Coordinator concerning a complete examination/evaluation by a mental health professional if a child has one of the following:
 - Impairment of the intellectual, emotional or psychological development as evidenced by observable and substantial reduction in the child's ability to function within a normal range of performance and behavior.
 - Suffered a substantial impairment in the ability to function as a result of a specific, non-accidental action or interaction committed by a parent or caretaker.
- Refer for a medical examination or consultation with a physician in the following cases unless the Area Manager allows an exception:
 - burns, fractures or dislocations in children under three years of age;
 - burns, fractures or dislocations in children of any age if unexplained or implausibly explained;
 - burns, bruises, or fractures in non-ambulatory children;
 - reasonable suspicion that vaginal or oral penetration has occurred;
 - cases involving sexually transmitted diseases in prepubescent children;
 - cases of malnutrition and failure to thrive;
 - cases of serious medical neglect;
 - cases of alleged head and abdominal injuries;
 - reports in which the child has an observable injury, the caretaker admits responsibility for the injury and there is reason to believe that there are internal injuries or other injuries which have occurred in the past.
- Conduct a cursory physical examination of a child. If the child is under the age of five, conduct the exam with the assistance of the parent/caretaker.

NOTE: A cursory physical examination is the observation of a child's external, physical condition which may require that the child's clothing be removed or rearranged.

- Involve the parent, legal guardian or legal custodian of the child whenever possible, if during the protective assessment, a medical examination is needed to determine the existence of abuse or neglect.
- Verify that the parent, legal guardian or legal custodian has exhausted all other resources before requesting DHS funds for payment.
- Consider the following in all cases in which a medical examination is required:
 - The first choice is to have the child examined by the child's Primary Care Physician (PCP).

- The second choice is a pediatrician if the PCP is unavailable. The protective services worker must advise the pediatrician whether the PCP, although not physically available, is available by telephone for consultation.
- The third choice is to take the child to the emergency room of the nearest hospital.

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

PROCEDURE (II-E5): Other Child Maltreatment Assessment Actions

The **Family Service Worker** will:

- Obtain X-rays, photographs, radiology procedures, medical records, other pertinent records e.g., school records, or videos from mandated reporters.
- Make a determination (regarding the truth of the report, See Procedure II-E6) within thirty (30) days in conference with the supervisor.
- Key all screens in the “Investigate” section of CHRIS including screens listed under the “Interview” and “Client” sections. Skip screens only when the information for that screen is unavailable. Complete and print “Report to Prosecuting Attorney” (CFS-6003) within thirty (30) days of the initial report of severe maltreatment (Priority I reports) and send to Prosecuting Attorney and law enforcement.
- Open a Protective Services case on all true reports of sexual abuse or exploitation unless a written exception is approved by the Area Manager.
- Open an appropriate service case or make referrals for all other true reports and for unsubstantiated reports if the family needs and agrees to services.
- Release all information as requested on true reports, except the name of the reporter, to multi-disciplinary teams.
- When the subject of a report appeals the determination, refer to Policy IX-A for procedures to follow.

PROCEDURE (II-E6): Child Maltreatment Assessment Determination

A Child Maltreatment Assessment will be determined to be true, unsubstantiated, exempted from finding due to religious exemption or inactive based on the criteria in the “Child Maltreatment Assessment Protocol” (PUB-357).

A Child Maltreatment Assessment will be determined TRUE in the event of:

- an admission of the fact of maltreatment by persons responsible;
- an adjudication of dependency-neglect;
- a determination of the existence of maltreatment by Division staff, based on a preponderance of the evidence;

- a medical diagnosis of failure to thrive. The Family Service Worker should, however, complete the Child Maltreatment Assessment in accordance with the procedures included to determine the identity of the caretaker and to conduct an assessment of the family for the purposes of determining appropriate service delivery;
- any other medical or legal form of confirmation deemed valid by the Division.

A Child Maltreatment Assessment will be determined UNSUBSTANTIATED in the event that:

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

A Child Maltreatment Assessment will be determined to be EXEMPTED FROM FINDING DUE TO RELIGIOUS EXEMPTION in the event that:

- The Family Service Worker determines that the parent's decision to withhold medical treatment was based solely upon a religious belief, choosing instead to furnish the child with prayer and spiritual treatment in accordance with a recognized religious method of healing by an accredited practitioner.

NOTE: A Family Service Worker will take a child, who is in immediate danger of severe maltreatment, into DHS custody regardless of the beliefs of the parent(s). The religious exemption does not preclude the Family Service Worker's right and responsibility to take appropriate action, including petitions to the court, to obtain necessary medical services.

A Child Maltreatment Assessment will have an individual finding of EXEMPTED FROM FINDING (UNDERAGE JUVENILE AGGRESSOR) if there is an overall true finding of sexual behavior by a child under the age of ten (10).

- Select the "Alleged Juvenile Aggressor – Under Age Ten" in the Role In Referral Select box on the Abuse/Neglect Screen in Referral or Investigation in CHRIS.
- Select "Exempted From Finding (Underage Juvenile Aggressor)" as the individual finding in the Investigation Findings screen in CHRIS.
- When "Exempted From Finding" (Underage Juvenile Aggressor)" appears in the individual finding, the overall finding for the investigation will be True.

Regardless of whether the child maltreatment investigation is conducted by DCFS, CACD or local law enforcement, the investigative determination shall be made within thirty (30) days.

A Child Maltreatment Assessment will be determined INACTIVE in the event that the investigation cannot be completed. A case may go into an inactive status if a family was located initially but later moved and may be located later; or, the assessment was started but enough information was not gathered to finish it, etc. Failure to complete the assessment within the required 30 days is NOT a reason to place a case on inactive status. The report MUST document why the assessment could not be completed. A case will remain on inactive status for one (1) year, at which time it will be expunged.

PROCEDURE (II-E7): Risk Assessment

The Risk Assessment (CFS-6026) is designed:

- To identify the factors and circumstances that indicate the child may be at risk of future abuse or neglect.
- To indicate the necessary level of involvement to assure the child's well being.
- As a structured decision-making tool in case planning. For example, the Risk Assessment may be used to assist the Family Service Worker in determining whether or not to open a case.

The Risk Assessment (CFS-6026) will be completed on all cases with a child maltreatment determination of "True", unless it is an out-of-home abuse case, in which case, a waiver may be granted at the supervisor's discretion. For example, if a child is abused in a day care center and is removed by the parents. The Risk Assessment may be used with the non-custodial parent, if services will be recommended or provided by the agency. (Note – The Risk Assessment can not be completed, if the Health and Safety Assessment has not been completed in CHRIS

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

The discretionary policy override options are listed below and require the supervisor to upgrade the risk level to Intensive at the initial assessment, regardless of the risk scale score.

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

Policy overrides must be reassessed when the Case Plan is updated.

The Family Service Worker will:

- Complete both the abuse and neglect scale of the "Risk Assessment" screen in CHRIS for all "True" child maltreatment findings; regardless of whether a case is subsequently opened or not.
- Consult with supervisor for an out-of-home abuse case with a "true" finding, (The supervisor will determine if the Risk Assessment must be completed or if a waiver is warranted. If the waiver is granted, it must be documented in the "Case Review" screen in CHRIS.)
- Establish the level of risk. Levels of risk are classified as intensive, high, moderate, and low. The higher the score, the higher the risk of future harm.
- Complete the Family Needs Assessment, according to Procedure V-AI, and provide necessary services.
- Make face-to-face contact with the family based on the established risk level.

Low family risk level:

- Visits to the child and family shall be no less than weekly.
- At a minimum, one face-to-face contact by the FSW per month, if a contact waiver is granted (see Policy V-B), and
- Open Protective Services case, if appropriate.

- Use Risk Assessment results to help develop case plan objectives and tasks.
- Conduct a staffing at 60 days of Protective Services case opening to assess if case should be closed. All staffings shall be held to comply with Procedure IV-B1.

Moderate family risk level:

- Visits to the child and family shall be no less than weekly.
- At a minimum, two face-to-face contacts by the FSW per month, if a contact waiver is granted (see Policy V-B), and
- Use Risk Assessment results to help develop case plan objectives and tasks.
- Conduct a staffing at 60 days of Protective Services case opening to assess if case should be closed. All staffings shall be held to comply with Procedure IV-B1.

High family risk level:

- Visits to the child and family shall be no less than weekly.
- Four face-to-face contacts by the FSW per month. (No contact waiver granted), and
- Use Risk Assessment results to help develop case plan objectives and tasks.
- Use results of the Risk Assessment to develop resources to address the family's needs if the child is placed out-of-home,
- Staff case with OCC and the Area Manager if there is no court involvement.
- Re-assess family for risk at a minimum of every six months.

Intensive family risk level:

- Visits to the child and family shall be no less than weekly.
- Four face-to-face contacts by the FSW per month. (No contact waiver granted), and
- Staff case with OCC and the Area Manager if there is no court involvement.
- Use Risk Assessment results to help develop case plan objectives and tasks.
- Use the results of the Risk Assessment to develop resources to address the family's needs if the child is placed out-of-home.
- Re-assess family for risk at a minimum of every six months.
- Complete the Risk Assessment (CFS-6026) in CHRIS within 30 days of case opening and prior to case closure.
- Complete the Risk Assessment before there is a major change in the case plan, placement or any change in case circumstances.
- Complete the Risk Assessment in conjunction with the "Strengths and Needs Assessment" (CFS-6009) to provide necessary services to the family and child.

PROCEDURE (II-E8): Follow-up with Mandated and Other Reporters

The Family Service Worker will:

- Complete, print and route “Follow-up with Child Maltreatment Reporter” (CFS-307) within ten (10) working days of determination.
- Complete, print and route “Child Maltreatment Determination Notification” (CFS-312) within ten (10) working days after supervisor signs off on the “Report to Prosecuting Attorney” (CFS-6003). Send separate copies to the following people:
 - The alleged offender.
 - The victim child’s parent(s).
 - The victim child if age ten (10) years or older.
 - If the offender is a juvenile, the juvenile offender’s parent(s).
 - If the juvenile offender is in foster care, the juvenile offender’s Attorney Ad Litem.
 - The Public Defender, if one is appointed.
 - The Juvenile Division of the Circuit Court if there is a true finding of sexual abuse perpetrated by a child under the jurisdiction of the court.
- If the allegation is true, ensure the CFS-312 is delivered by either a process server or certified mail with restricted delivery. This applies to each separate recipient.
- Provide information regarding the investigative determination and the services offered/provided to the:
 - Mandated reporter who provided the initial report of suspected child abuse.
 - School counselor where the maltreated child attends school.
 - People and agencies that provide services, upon their request.
- Complete, print and route “Child Maltreatment Determination Notification” (CFS-312) within ten (10) working days after supervisor signs off on the “Report to Prosecuting Attorney” (CFS-6003).
- Complete, print and route “Notice to Local Education Agency (LEA) of Child Maltreatment” (CFS-311) if the determination is true on a school-aged child. The notice to the school on all true reports of child maltreatment shall identify the name and relationship of the offender to the victim. DHS shall also provide the local school counselor a report indicating all true reports on juveniles named as offenders, and the services offered or provided by the department to the juvenile.

PROCEDURE (II-E9): Situations Involving Non-Caretaker, Domestic Violence, Family Moving, Multi-County Assessments, and Unlicensed Baby-sitters

The County Supervisor will:

- Inform the non-offending caretaker of the right to file a petition in accordance with the “Domestic Abuse Act,” Ark. Code Ann. § 9-15-101 et seq. in Circuit Court to have the offender removed from the home.
- Notify other state or county Child Protective Services if the family moves before the assessment is complete.
- Notify Division of Child Care and Early Childhood Education if the alleged offender is an unlicensed baby-sitter who is keeping more than five children, including the baby-sitter’s own pre-school children.

When more than one county assesses a report:

The Family Service Worker of the primary county (where the child resides) will interview and complete the "Investigation" portion of CHRIS.

PROCEDURE (II-E10): Protective Custody of Child in Immediate Danger

The Family Service Worker will:

- Take the child into Protective Custody for up to 72 hours if the circumstances of the child present an immediate danger of severe maltreatment. The child's health and safety will be of paramount concern.

A 72 hour hold can be exercised on any child who is dependent as defined by the Arkansas Juvenile Code. (See Glossary for definition of "Dependent".)

In cases where domestic abuse is involved (see glossary for definition of Domestic Abuse) a family/household member may file a petition for an order of protection. The Family Service Worker may also facilitate the process to file a petition on behalf of a minor child(ren). The worker should thoroughly review the Health and Safety Assessment, Risk Assessment and ensure that a safety plan is in place for a child before leaving a child in a home when an order for protection is filed.

An order of protection issued by a court of competent jurisdiction in any county of this state is enforceable in every county of this state by any court or law enforcement officer.

- Notify the OCC attorney immediately that Protective Custody was exercised and request an ex parte emergency order from the court.
- Make a determination whether to recommend to the court that reunification services should not be provided to reunite the child with his family (see Policy VI-A). If the court determines that reunification services shall not be provided, a permanency planning hearing will be held within thirty (30) days after the determination.
- Determine whether the grandparents have the right to notice and an opportunity to be heard. In a child custody or dependency-neglect case. They have this right if all the following conditions are present:
 - The grandchild resided with the grandparent for at least 6 consecutive months prior to the child's first birthday or lived with the grandparent for at least one continuous year regardless of age;
 - The grandparent was the primary financial caregiver during the time the child resided with the grandparent; and
 - The continuous custody occurred within one year of the initiation of the custody proceeding.

Note: "Grandparent" does not mean a parent of a putative father of a child for the purpose of this determination.

- Provide the OCC attorney with the name and address of any grandparent who is entitled to notice based on the above conditions.
- Prepare an affidavit immediately and give it to the OCC attorney.
- Have the child thoroughly examined by a physician within 24 hours of removal. The Family Service Worker may consent for medical and dental services during Protective Custody.
- Place the child in an appropriate licensed or approved placement. If the most appropriate placement is with a relative, the placement must meet the standards for approval of a foster home. (See "Standards for Approval of Family Foster Homes"[PUB-022]). The children, if age appropriate, should also be interviewed about the placement. Until the relative has been approved as a Kinship Foster Care Home, the child must remain in a licensed/approved foster home or residential care facility. The kinship foster parent (See Glossary for definition of "Kinship Foster Parent") agrees to provide 24 hours per day care for the children who are related to them. Non-relative placements, other than approved foster

homes or residential care facilities, are not permissible until opened as a regular approved foster home or unless the court gives custody after a written home evaluation is completed. (See Procedure VI-A1 "Out-of-Home Placement Criteria" and Policy VII-A "Foster Parent Training, Approval and Re-evaluation.")

- Notify Intake Officer of Circuit Court, Juvenile Division.
- Complete and route "Protective Custody/Parental Notification" (CFS-323).
- Open an Out-of-Home Placement case.
- Return the child to the legal custodian if the emergency necessitating Protective Custody passes or if the judge does not grant custody to the Department. Protective Custody cannot be extended. Complete the "Expiration of Protective Custody/Parental Notification" (CFS-336) and provide to the parent. If the parent refuses to accept custody of the child, an emergency petition should be filed.
- Notify the OCC attorney immediately if the child returns home.
- Close the Out-of-Home Placement case.
- Determine whether to open a non-court involved Protective Services case or initiate a petition for dependency/neglect.

All hearings involving allegations and reports of child maltreatment, and all hearings involving cases of children in Out-of-Home placements shall be closed.

PROCEDURE (II-E11): Crimes Against Children Division (CACD) Investigations of Child Maltreatment Reports

The Arkansas State Police Crimes Against Children Division will conduct Child Maltreatment Investigations for the following:

- Any placement managed, approved or licensed by DHS for the care of children including:
 - Day care homes,
 - DHS foster homes,
 - Residential facilities, and
 - Pre-Adoptive homes.
- Allegations of maltreatment involving DHS employees
- Allegations of child maltreatment in school settings
- Allegations of child maltreatment in placement resources

NOTE: In conducting investigations where the offender is out of the home, it is not necessary to interview siblings of victims in these cases, unless they may have collateral information or have been within the access of the offender. Children residing in the home of the offender must be interviewed.

- Child Maltreatment allegations on the following Priority I reports:
 - Abuse with a deadly weapon,
 - Bone fractures,
 - Brain damage/skull fracture,

- Burns, scalding,
- Cuts/bruises/welts if the victim is under age three (3) and the report comes from the medical community or law enforcement.
- Death,
- Failure to protect, only if it is the initial investigation of a new allegation that the offender failed to protect the child from sexual abuse.
- Immersion/suffocation,
- Indecent exposure.
- Permitting, encouraging, or forcing a child to watch pornography or live sexual performances.
- Internal injuries,
- Oral sex,
- Poison/ noxious substances,
- Sexual contact,
- Sexual exploitation,
- Sexual penetration, and
- Subdural hematoma.

The Crimes Against Children Division will complete the Health and Safety Assessment (CFS-6025) in accordance with Procedure II-E3. The contract between DHS and the Arkansas State Police requires that the Crimes Against Children Division (CACD) must comply with all applicable state and federal laws, and the Angela R. Settlement Agreement.

POLICY (II-F): MEDICAL NEGLECT OF A DISABLED INFANT

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

PROCEDURE (II-F1): Medical Neglect of a Disabled Infant

The Family Service Worker will:

- Make telephone inquiry to the health care facility immediately upon receipt of an allegation of suspected medical neglect of a disabled infant to determine if:
 - the infant has a life threatening condition,
 - the parents have refused to consent to treatment,
 - the treating physician recommended treatment, and
 - the facility's infant care review committee has analyzed the child's health and family circumstances.
- Contact the Child Protective Services Field Assistance Unit immediately to arrange an assessment by the contracted physician.
- Contact OCC if a parent will not sign a release to allow DCFS to examine medical records or obtain an independent medical examination of the infant.

POLICY (II-G) RETENTION OF ASSESSMENT FILES

Central Registry will indefinitely retain all child maltreatment assessment files included in the automated data system (true and unsubstantiated). DCFS county offices are permitted to retain a hard copy of all true child maltreatment reports. The Department is permitted to keep information on unsubstantiated reports in its automated casework files for the purpose of ascertaining future risk and safety. Hard copy records of unsubstantiated reports shall be destroyed at the end of the month in which the determination is made.

Information from unsubstantiated reports may not be disseminated outside of the Department, except for release to the prosecutor, to a subject of a report or to the court if the information in the record is necessary for a determination of an issue before the court. Screened out reports of child maltreatment will be treated as if they are unsubstantiated and will not be released to anyone external to DCFS.

PROCEDURE (II-G1): Retention of Assessment Files

The County Supervisor or Team Coordinator will:

- Ensure that all assessments with a true disposition will be securely stored in the county office.
- Verify and respond to all valid requests for information from a Prosecuting Attorney who is prosecuting a case of malicious reporting.

POLICY (II-H) COMMUNITY NOTIFICATION OF SEX OFFENDERS

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

No child may be home schooled if any person residing in the home with the child is required to register as a sex offender. Upon petition to the sentencing court from the child's parent or guardian, the sentencing court may

enter a written order specifically waiving this restriction. This restriction shall not apply if the child to be home schooled is the person registered as the offender.

PROCEDURE (II-H1): NOTIFICATION OF SEX OFFENDERS

Upon notification, the **Family Service Worker** will:

- Notify foster parents or families on whom we have active cases that an offender has moved into their neighborhood.
- Document in the case record that notification has been provided either by giving the foster parent or family on whom we have an active case a copy of the flyer provided by law enforcement, or by verbally providing the information contained in the flyer that an offender has moved into their neighborhood.
- Make a report to the Child Abuse Hotline of substantial possibility of severe maltreatment if it is alleged that the offender is living in the home with children or otherwise being allowed unsupervised access. In such instances, confirmation must be obtained from law enforcement that this person is indeed a registered sexual offender against children before the report will be considered valid.

Lack of supervision reports will not be handled any differently due to the presence of an offender in the neighborhood.

- File a twenty (20) day petition to bring the matter to the attention of the court if it is confirmed that the offender is living in a home with children or otherwise has unsupervised access to them, unless the parent agrees to steps outlined by DCFS to protect the children, regardless of whether a disclosure of sexual abuse is obtained. Some examples of steps outlined to protect the children would be to remove the children from the home, request that the offender leave the home or cease allowing the sexual offender access to the children.
- Notify the offender's probation or parole officer that the offender is living in a home with children or has unsupervised access to them.
- Document in court-ordered and Interstate Compact home studies, the presence of a sex offender in the neighborhood, along with a statement that the family is aware of the offender's presence and is fully informed regarding any possible risks to children in the community.

III. SERVICES CASE OPENING

POLICY (III-A): SERVICES CASE OPENING AND RE-EVALUATION

The Division of Children and Family Services will open cases to ensure safety and promote the best interest of the child and to provide services to strengthen, reunify, and assist families. This will be accomplished through the delivery of Supportive, Protective, Adoptive (See Section VIII for Adoptive Services) or Out-of-Home Placement Services as deemed appropriate by assessment. The Division will ensure a determination of Title IV-E/Medicaid eligibility is obtained for each child placed in an out-of-home setting or subsidized adoption. A child of a parent who is under the age of eighteen (18) years, and is in DHS custody, is also considered a dependent-neglected juvenile.

The purpose of services shall be to provide the child with a continuous and stable living environment, promote family autonomy, strengthen family life where possible and promote the reunification of the child with the parent, guardian or custodian, when applicable.

Families have a right to appeal the decision of the Division regarding service delivery, eligibility for services, Protective Services, or Adoptive services.

PROCEDURE (III-A1): Protective/Supportive Services Case Opening

The Family Service Worker will:

- Complete the "Application for Emergency Services" (CFS-6013) by keying the fields in the "Summary" screen. In the "Client" section, complete the "Gen. Info" and "Relations" screens; and in the "Finances" section, complete the "Eligibility" and "Income" screens based on the information gathered for the "Strengths and Needs Assessment" (CFS-6009). This information is located in the "Case Plan/Needs Assessment" section on the "Family Screen".
- Sign the CFS-6013 for families needing Protective Services if they are not willing to sign the completed form.

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

The Family Service Worker will:

- Complete the CFS-6013 using appropriate CHRIS screens as indicated in Procedure III-A1.
- Complete the "Case Connect" Screen in the Investigation to open a case.
- Key the appropriate information in the open case on the "Removal" screen in the "Removal" section of CHRIS. *Note: Do not complete "Removal" and "Placement" screens while on the Investigation tool bar in the CHRIS system.
- Key the appropriate information in the "Placement" section of CHRIS and within the "Place" section on "Recommend", "Diff. Care", and "Enter/Exit" screens.

- Key the appropriate information on the “Gen. Info” and “Status” screens. Key the appropriate information on the “Employ” and “Education” screens under the “Emp/Educ” heading in the “Client” section.
- Key the appropriate information on the screens under the “Medical” heading in the “Client” section.
- Print the “Client, Medical, and Psychological Information Report” (CFS-6012) upon completion of keying the above information.
- Issue an initial clothing order, if needed, using the “DHS Requisition” (DHS-1914).
- Initiate a request for Medicaid within one (1) working day of the date the child enters DHS custody:
 - Send the “DCO/DCFS/Referral/Information Transmittal” (DHS-91) to the DCO County Supervisor to determine if the child is a member of an active TEA/TANF or Medicaid case or is a member of pending applications for either.
 - Receive notice of closure of TEA/TANF or Medicaid case before proceeding.
 - Complete “Request for Unique Pseudo-SSN” (EMS-22) if the SSN is not available.
 - Complete as much of the “Application for Title IV-E Payments/Medicaid” (CFS-487) as possible with the information available.
 - Complete the “ACES Single Member Data Sheet” (EMS-57).
 - Route the CFS-487, EMS-57 and the signed court order to Family Support Specialist.
- Apply for Title IV-E Payments/Medicaid:
 - Complete the “Application for Social Security Card” (SS-5) if the child does not already have a Social Security Number or the number is not known:
 - Sign the SS-5 as the DCFS representative for the case.
 - Route the SS-5 to the Social Security Administration and copy to the Family Support Specialist.
 - Update questions on income and resources, as appropriate, to reflect information obtained since the CFS-487 was initially routed to the Family Support Specialist.
 - Sign and date the CFS-487. The month/year in which court proceedings were begun must be shown.
- Route the completed CFS-487 to the Family Support Specialist within seven (7) working days of the out-of-home placement. Other information needed to establish Title IV-E/Medicaid eligibility, e.g., birth certificate, Social Security Number, removal order, petition that led to removal, etc., should also be sent with the CFS-487 if available at that time. If the CFS-487 is incomplete or unsigned, it will be returned to the worker.
- File a copy of the CFS-487 in the case record.

- Obtain any additional requested information and forward it to the Family Support Specialist within ten (10) working days.
- Within ten (10) working days of any delay, notify the Family Support Specialist of the information which cannot be obtained and the reason.
- Continue the “Strengths and Needs Assessment” (CFS-6009) with family participation.
- Notify the Foster Care/Medicaid Eligibility Unit via the CFS-495 (Notification of Change) within 10 days of changes in placement. (See Policy VII-D and Procedure VII-D1).

PROCEDURE (III-A3): Case Re-evaluation

The **Family Service Worker** will:

- Receive the printout of cases due for re-evaluation from the Foster Care/Medicaid Eligibility Unit.
- Mail a “Notice to Applicants for and Recipients of Title XX Services” (DHS-160) at least ten (10) days prior to the change in service, if the family signed the application and service is to be reduced or terminated.
- Complete the “Application for Emergency Family Services” (CFS-6013) taking the appropriate action as directed in Procedure III-A1.

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

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

- Notify (telephone, fax, or email) the FSW supervisor in the resident county office prior to moving the child(ren).
- Within 24 hours following the above notification, assign the resident county as secondary on the Assign/Transfer screen in CHRIS.

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

- Continue providing casework services (e.g. visits) to the birth/legal parents as determined by the case plan.
- Maintain a case file including such non-CHRIS (hard copy) items as legal and medical documents.
- Provide the resident county FSW a copy of the case file with non-CHRIS items.
- Key data (e.g. case plan changes) into the CHRIS file as appropriate.
- Develop and process any needed purchase orders (DHS 1914) for the child.
- Request Medicaid determinations/re-evaluations by the Medicaid Eligibility Unit and submit needed documentation.
- Develop the initial case plan and subsequent changes as per Policy IV-A.
- Arrange staffings as needed and maintain a current case plan.
- Ensure provision of services to facilitate reunification or other permanency arrangements as appropriate.

- Arrange and help provide transportation for parent/child visits.
- Notify the resident county FSW immediately of any changes in plans for care of the child.

The Family Services Worker (secondary) in the resident county will:

- Participate in staffings and case plan development.
- Assist the foster home or facility on implementing case plan goals.
- Keep the initiating county FSW informed of all progress, problems and child experiences.
- Obtain a progress report from facility staff every month following a child's placement in a facility and forward a copy to the initiating county FSW.
- Notify the initiating county FSW immediately of any change in the plans for care of the child.
- Notify the initiating county by telephone within 24 hours, and make all other necessary notifications (e.g. foster parents) if an emergency change in placement is necessary.
- Make regular foster home/facility visits to the child/children as per the case plan.
- Assist the initiating county in arranging for the parent/child/sibling visits.
- Complete any necessary incident reports (e.g. disruption) and provide the initiating county a copy.

**POLICY (III-B) COORDINATION WITH THE OFFICE OF
CHILD SUPPORT ENFORCEMENT**

The Division of Children and Family Services (DCFS) will coordinate with the Office of Child Support Enforcement (OCSE) to ensure that foster care cases involving orders of child support are identified so that the support can be paid to the Department of Human Services (DHS) while the child remains in DHS custody. Foster care cases in which paternity is an issue will also be identified and referred.

The IV-E/Medicaid Eligibility Unit will refer foster care cases to OCSE by sending copies of all emergency and/or custody orders to OCSE upon receipt from the Office of Chief Counsel. The IV-E/Medicaid Eligibility Unit will attach a sheet to each order with family identifying information. The Family Service Worker will provide referral information as needed and coordinate with OCSE after an OCSE (IV-D) case is opened. Once an OCSE case is opened, OCSE has responsibility to coordinate with the support payer and for arranging and paying for paternity testing.

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

PROCEDURE (III-B1) DCFS COORDINATION WITH OSCE:

The Family Service Worker will:

- Fill out the CFS-408 (Federal Parent Locator System Information) and submit it to the IV-E/Medicaid Eligibility Unit to refer a foster care case to OCSE as early as possible.
- Be the contact person with authority to advise OCSE on the status of the family and case as casework progresses.
- Receive and act on notices, e.g. requests for information (CFS-408) sent by OCSE.
- Notify OCSE when parental rights have been terminated so the child support case can be closed.
- Advise OCSE when custody changes and the child leaves foster care.
- Provide OCSE with the following information when custody changes:
 - Where the child is placed.
 - Where child support payments are to be sent.

NOTE:

Child support payers will remit their child support to DHS P. O. Box 8181, Little Rock, AR 72203.

IV. SERVICES CASE PLAN AND STAFFING

POLICY (IV-A): SERVICES CASE PLAN

A case plan is a written document between the family and the Division of Children and Family Services that outlines a plan of services. It addresses the family's needs, building on the family's strengths, and outlines the roles and responsibilities of all involved parties.

Case plans will be developed after a thorough assessment of a family's strengths and needs. The family shall be the primary source of information. The case plan shall be developed with the involvement of family, the age-appropriate children, the foster parents and the Attorney ad litem (if there is court involvement), the Family Service Worker and any other involved parties.

Consideration of the health and safety of a child must be included in case planning and case reviews for children in out-of-home placement.

No child in Out-of-Home Placement shall have a case plan goal of reunification for longer than twelve (12) months, unless otherwise ordered by the court.

PROCEDURE (IV-A1): Case Plan

The **Family Service Worker** will:

- Complete an initial "Case Plan" (CFS-6010) within thirty (30) days of opening a service case or a child entering an Out-of-Home Placement, whichever comes first.
- Complete the "Treatment" portion of the "Case Plan" section of CHRIS based on the assessment in the "Assess" portion of the "Case Plan" section of CHRIS.

The **Case Plan** will:

- Include a description of the out-of-home placement with regard to the health and safety of the child.
- Include a plan for assuring a child receives safe and proper care.
- Include a plan for assuring services are provided to the child and parent to improve conditions in the parent's home and facilitate return of the child or the permanent placement of the child.
- Include a plan for assuring services are provided to the child and foster parents to address the needs of the child while in out-of-home placement.
- Include the visitation rights and obligations of the parents, guardian or custodian and the Division during the period the child is in an out-of-home placement.
- Identify and address specific independent living skill needs, as appropriate. (See Policy VIII-A)
- Include documentation of the steps taken to (a) find an adoptive family or other permanent living arrangement for the child, (b) place the child with an adoptive family, a fit and willing relative, a legal guardian, or in another planned permanent living arrangement, and (c) finalize the adoption or legal guardianship. At a minimum, documentation shall include child specific recruitment efforts such as the use of state, regional, and national adoption exchanges including electronic exchange systems. This

applies in the case of a child for whom the permanency plan is adoption or placement in another permanent home.

- Print the “Case Plan” (CFS-6010) out of CHRIS under “Reports”.
- File the CFS-6010 with the court no later than thirty (30) days after the date the petition was filed or the child was first placed out-of-home, whichever is sooner.
- Review the CFS-6010 and update as needed. The CFS-6010 should be updated at the second staffing held ninety (90) days from the case opening and at subsequent staffing(s) held at a minimum of every three (3) months for out-of-home placement.
- Notify all parties of any substantive changes to the CFS-6010. This includes placement of child, visitation rights of any party or the goal of the plan.
- Ensure that the health and safety of the child is considered during the planning process.
- Document service actions and contacts in the “Services” section of CHRIS on the “Service Log” or “Contacts” screen.
- Document service needs, goals, and their status on the “Needs/Svc” screen in the “Treatment” portion of the “Case Plan” section of CHRIS.
- Inform the Area Manager when eleven (11) months have been exceeded with a goal of reunification.
- Inform OCC Attorney when eleven (11) months have been exceeded with a goal of reunification.

The **Area Manager** will:

- Review any CFS-6010 with a goal of reunification which has been in effect for at least eleven (11) months.
- Approve or disapprove the plan.
- Notify Family Service Worker of approval or disapproval.

POLICY (IV-B): CASE STAFFINGS

A Services Case Staffing is a meeting of all involved parties for the purpose of assessing the current status of the family situation and developing or updating the case plan.

A Services Staffing may be held for various reasons based on the needs of the child and family. Situations which require a staffing include but are not limited to:

- **developing the initial “Case Plan” (CFS-6010);**
- **reviewing progress or making changes in the “Case Plan” (CFS-6010);**
- **reviewing situations where a child has been in three or more out-of-home placements within a twelve (12) month period;**
- **reviewing and implementing an Independent Living Plan for a child in out-of-home placement;**
- **addressing problems that bring a child or family into a state of crisis;**
- **determining the need for on-going services; and**
- **reviewing the need for case closure before a case is closed.**

Services Case Staffings shall address all appropriate issues relevant to the needs of the family.

PROCEDURE (IV-B1): Case Staffings

The **Family Service Worker** will:

- Invite supervisors, parents, or guardian, and if there is court involvement, Court-Appointed Special Advocate (CASA), all parties’ attorneys, foster parents, caretaker, age-appropriate child, and any other involved party in the case plan.
- Inform families of their right to have their attorney present.
- Furnish written notice to the child, if of appropriate age (10 years or older).
- Furnish written notice of the staffing “Invitation to Family-Centered Meeting” (CFS-590) (complete with date, time and location) to all participants at least two (2) weeks prior to the staffing.
- File copies of the CFS-590 in the case record. Include documentation of the reason, if the child was not able to attend.
- Document on the CFS-6010 any parent’s unwillingness to participate and provide this written documentation to the parent if available.
- Conduct the initial case staffing within thirty (30) days of opening the case or a child’s entering an Out-of-Home Placement. The second staffing should occur ninety (90) days from the case opening or a child’s entering an Out-of-Home Placement. After the second staffing, subsequent staffings will be held at a minimum of every three (3) months for out-of-home placement.
- Complete the original CFS-6010 at the initial staffing and update the CFS-6010 as needed after subsequent staffings.
- Review the CFS-6010 for compliance by the participants and update as necessary to reflect progress made, new factual circumstances, and new goals.

- Conduct a permanency planning staffing at the 11th month of case opening. Invite the adoption specialist and all other parties involved in the case.
- Conduct a staffing before closing a case to review progress and determine that closure is appropriate.

The **Area Manager** will:

- Hold a special case staffing within two (2) weeks of the third (3rd) move, whenever a child has been in three or more out-of-home placements within a twelve (12) month period.
 - Address the reasons for the frequent moves.
 - Determine what steps shall be taken to prevent future placement disruptions.
 - Include the Family Service Worker, supervisor, foster parents, and age-appropriate child.
- Conduct a staffing to review the status of a child placed in long-term, out-of-home care.

Some persons will attend the entire staffing, while others will attend only the portion of the staffing relating to the area in which they are involved. Confidentiality prevents sharing information with unauthorized individuals. Information can be shared with treatment providers, Attorneys ad litem and foster parents.

V. SERVICES TO PRESERVE FAMILIES IN THEIR HOMES

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

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

Services available to children and families are provided through Title IV-B, sub-part II funding under the Promoting Safe and Stable Families Programs. The four categories of services under the Promoting Safe and Stable Families Programs are: (1) Family Preservation Services (2) Family Support Services (3) Time Limited Family Reunification Services and (4) Adoption Promotion and Support Services. The child's health and safety will be a priority in the provision of services.

- (1) Family Preservation Services means services to children and families designed to help families, including adoptive and extended families, at risk or in crisis. Family Preservation Services include: (A) Service programs designed to help children, where appropriate, return to families from which they have been removed; be placed for adoption; be placed with a legal guardian; and if adoption or legal guardianship is determined not to be safe and appropriate for a child, in some other planned, permanent living arrangement. (B) Pre-placement preventive services programs, such as intensive family preservation programs, designed to help children at risk of foster care placement remain safely with their families. (C) Service programs designed to provide follow-up care to families to whom a child has been returned after a foster care placement. (D) Respite care of children to provide temporary relief for parents and other caregivers, including foster parents. (E) Services designed to improve parenting skills by reinforcing parents' confidence in their strengths, and helping them to identify where improvement is needed and to obtain assistance in improving those skills with respect to matters such as child development, family budgeting, coping with stress and health and nutrition.
- (2) Family Support Services are community-based services that promote the well-being of children and families and are designed to: (1) Increase the strength and stability of families (including adoptive, foster and extended families). (2) Increase parents' confidence and competence in their parenting abilities. (3) Afford children a stable and supportive family environment, and otherwise to enhance child development. Services include: respite care, early developmental screening of children, mentoring, tutoring, health education for youth, parenting skills, counseling, home visiting activities, and a range of center-based activities.
- (3) Time-limited Reunification Services are services and activities that are provided to a child that is removed from the child's home and placed in a foster family home or a child care institution, and to the parents or primary caregiver of such a child, in order to facilitate the reunification of the child safely and appropriately within a timely fashion, but only during the 15-month period that begins on the date the child enters foster care. Services include: counseling, substance abuse treatment services, mental health services, assistance to address domestic abuse, temporary child care, and transportation to services/activities.
- (4) Adoption Promotion and Support Services are services and activities designed to encourage more adoptions out of the foster care system, when adoptions promote the best interest of children, including such activities as pre- and post- adoptive services and activities designed to expedite the adoption process and support adoptive families.

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

The Family Service Worker will:

- Go to “Workload”, “Case” in CHRIS and complete the automated “Family Strengths and Needs Assessment” found within the “Case Plan”, “Assessment”, section of CHRIS on the “Family” and “Child” screens within thirty (30) days from the “Open Date” established by the Case Connection. This report will be printed from CHRIS and may be the result of several family sessions.
- Consider resources for the family within DCFS, other DHS Divisions, state agencies, and in the community.
- Make a referral to another Division or community resource, if appropriate.
- Open a case in accordance to Procedure III-A1/III-A2 (Services Case Opening).
- Hold staffings, as needed, in accordance with Procedure IV-B1 (Case Staffings).
- Arrange for other services as needed.
- Deliver services as identified in the “Case Plan” (CFS 6010).
- Conduct staffing to discuss closure.
- Close non-court involved case when both the Family Service Worker and the family agree that services are no longer needed or that the needs of the family will best be met by one or more referrals to other service providers.

POLICY (V-B): FAMILY SERVICE WORKER CONTACTS

The Division shall maintain a level of contact with the family adequate to protect the health and safety of the child, to protect the child from further child maltreatment and to provide family support. When a report of child maltreatment is true and it is determined that the child shall remain in the home, the appropriate frequency for visits to the child and family shall be no less than weekly. Less frequent contact shall be dictated by the needs of the child and family and must have prior approval by the supervisor. **The supervisor must review the Health and Safety Assessment and Risk Assessment before granting a waiver. (See Procedure II-E3 and II- E7)**

PROCEDURE (V-B1): Family Service Worker Contacts

The Family Service Worker will:

- Visit the child and family in the home to address their assessed needs. If there is a reason why the visit did not occur in the home, document the reason in the case record. **Make weekly face-to-face contacts with the family.**

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

- **Engage family members in meaningful activities as dictated by the case plan.**
- **Document weekly visit contacts in the CHRIS client information screen by clicking on services/contacts and selecting new for each new client contact. Include the proposed visitation schedule in the case record documentation.**

- **Weekly contacts must be maintained for cases within “High and Intensive Risk levels and for families where the child’s or family’s situation raises protective concerns and where weekly contact is necessary to monitor the family situation and assure child safety. In addition, the worker should maintain weekly visits if the child is experiencing a period of crisis in the home, school, or community and contact with the worker can be of assistance to the child in coping with the crisis.**
- **If weekly contact is no longer appropriate (e.g., the family does not need weekly contact and could benefit from less than weekly contact, the perpetrator is no longer in the home, or the parent/child relationships are improving):**
 - Document the reasons for less than weekly contact with the child and family **in the comments field and select the appropriate selection in the purpose field.**
 - Obtain Supervisor’s approval for visits, which are less than weekly. **For High and Intensive Risk Levels, waivers cannot be granted until another Risk Assessment is completed resulting in a lower risk level for the child.**

The County Supervisor will:

- **Click on the Reviewed check box after reviewing the worker’s contact.**
- Click on the Weekly Contacts Waiver check box and key in the mandatory explanation field to include documentation that the **Health and Safety Assessment and Risk Assessment** has been reviewed in order for less than Weekly Contacts to be approved. **(See Procedure II-E3 and II-E7)**

Under no circumstances can a waiver be granted for less than weekly contacts based on staff shortages without other appropriate justification.

POLICY (V-C): FAMILY SUPPORT FUND

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

- To prevent children from entering or remaining in Out-of-Home Placement due to the parents’ financial inability to meet the children’s basic needs
- To pay for Out-of-Home Placement incidental items that are outside of the contracting process and are not covered by board payments. Examples are:

School field trips	Camping dues	Dance Supplies
Musical instruments	Registration	Registration fees
School supplies	Sport fees or equipment	Club fees (social)
Summer programs	Art supplies	School pictures

PROCEDURE (V-C1): Cash Assistance

The Family Service Worker will:

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

The **County Supervisor** will:

- Review and approve/deny requests.
- Maintain a log of approved requests, “Income Assistance Request Log” (CFS-332).
- Determine the payment mechanism either through the county local cash account or DHS Requisition (DHS-1914). Payment will only be made to service providers.
- Ensure completion of process to access the county local account or development of the purchase order.
- Monitor activities to ensure payment to service providers and management of county funds.

PROCEDURE (V-C2): Foster Care Incidentals

The **Family Service Worker** will:

- Assess and determine the needs of the child receiving Out-of-Home Placement Services and the appropriateness of using the fund to meet the assessed need.
- Request the use of the fund from the DCFS County Supervisor/Designee.
- Complete any additional paper work required by the method of payment chosen by the DCFS County Supervisor.
- Provide receipts or bills to the County Administrator/Designee within the appropriate time frame.

The **DCFS County Supervisor/Designee** will:

- Approve or deny the request.
- For approved requests, the Supervisor will access the Family Support Fund in one of the following ways:

1) Trust Accounts - if available and ample for purchase,

Fill out the “Foster Care Authorization for Billing” (CFS-334) for amount of purchase and submit to finance.

2) Process (Purchase Order),

Follow guidelines in Purchase Order manual.

3) Local Bank Account.

Follow guidelines in “Local Cash Account Guidelines” (PUB-384) , Section IV.

POLICY (V-D): DAY CARE FOR CHILDREN

Day Care for Children may be provided as a purchased service for those families needing child care as a part of a Protective Services, Out-of-Home-Placement Services or Supportive Services Cases. Day Care may also be purchased due to the employment, training, or educational needs of the parents or caretaker based on eligibility. The goal is to strengthen family functioning and/or to promote self-sufficiency. The Division of Child Care and Early Childhood Education (DCC) is responsible for processing and issuing payment authorization for day care services.

PROCEDURE (V-D1): Day Care for Children

For Protective Services, Out-of-Home Placement Services or Supportive Services cases, the **Family Service Worker** will initiate the following:

- Complete the “Request for Day Care Services” (DCC-537) prior to the date services are to begin. Services are to be authorized for a maximum of three months. Copies of the DCC-537 can be obtained from the County Supervisor or by contacting the Division of Child Care and Early Childhood Education.
- Make verbal requests to the County Supervisor for approval in an emergency, followed by a completed DCC-537 within five (5) working days.
- Locate a provider on the list available through the DCC Family Support Unit.
- Request that the provider complete the bottom section of the DCC-537 indicating that they have space for the child, the daily rates, and other licensing information.
- Obtain approval and signature of the DCFS County Supervisor and fax (501-682-2317) to the DCC Family Support Unit.
- Initiate renewals no later than the first day of the last month of the eligibility period.
- Notify DCC Family Support Unit and the day care center if the child is no longer attending.

The **County Supervisor** will:

- Maintain a log of obligated funds for both Out-of-Home Placement and Protective Services (Authorization/Voucher System). DCC maintains and monitors Supportive Services Daycare funds.
- Approve Out-of-Home Placement and Protective Services Day Care requests within the County’s allocation for day care.
- Contact the Area Manager to determine if additional funds are available in the event the county’s allocation is depleted.

The **DCC Family Support Unit** will:

- Process and issue payment authorization.

- Provide the county with a copy of each authorization which documents obligations against the county funds.

POLICY (V-E): INTENSIVE FAMILY SERVICES

The Division seeks to ensure the health and safety of children and to preserve families through the provision of Intensive Family Services (IFS). The goals are either to prevent unnecessary out-of-home placements of children or to promote reunification of families with children in Out-of-Home Placement. Intensive Family Services is a mix of counseling and support services aimed at ensuring the safety of all family members while helping the family learn how to stay together successfully. Intensive Family Services may be provided by Division staff or by contractors.

PROCEDURE (V-E1): Screening

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

- Open a services case by completing mandatory fields on the “Summary“ screen (Summary button on the “Workload” focus toolbar). In the “Client” section, complete the “Gen. Info” and “Relations” screens; and in the “Finance” section, complete the “Eligibility” and “Income” screens based on the information gathered for Assessment found in the “Case Plan” section of CHRIS.
- Complete the “Strength and Needs Assessment“ (CFS-6009) by keying the “Assessment” portion of the “Case Plan” section of CHRIS. Indicate whether IFS is considered to be an appropriate service.
- Complete a case staffing and “Case Plan” (CFS-6010) by keying the “Treatment” portion of the “Case Plan” section of CHRIS. Indicate whether IFS is considered to be an appropriate service.
- Refer the family to the County Supervisor for a final determination of referral need.

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

- Update the CFS-6009 and the CFS-6010. Indicate whether IFS is considered to be an appropriate service.
- Refer the family to the County Supervisor for a final determination of referral need.

The **County Supervisor** will:

- Determine if the family’s children are at imminent risk of Out-of Home Placement or the family’s children have recently experienced an Out-of-Home Placement and reunification is planned.
- Decide if the family is appropriate for a referral for IFS.

PROCEDURE (V-E2): Referral

The Family Service Worker will:

- Refer families to the IFS Practitioner on the “Intensive Family Services Referral Form” (CFS-345).
- Accompany the IFS Practitioner to a joint introductory session with the family.
- Provide the IFS Practitioner with a copy of the completed “Strengths and Needs Assessment” (CFS-6009) and other pertinent information about the family as appropriate.

The **IFS Practitioner** will:

- Within 24 hours of receipt of the referral, hold a joint introductory session with the family and the Family Service Worker.
- Within 72 hours of receipt of the referral complete an assessment of the family to determine if IFS is appropriate and the short-term crisis intervention services can be of benefit to the family.
- Within 72 hours of receipt of the referral, recommend to the County Supervisor if the family is appropriate for IFS on the “Intensive Family Services Referral Form” (CFS-345).

Assessment for IFS will focus on:

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

PROCEDURE (V-E3): Service Provision

If IFS is appropriate:

The **County Supervisor** will:

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

The **IFS Practitioner** will:

- Provide services in accordance with the IFS Program Description.
- Provide services on a frequent, often daily, basis within the family’s home.
- Be available to the family 24 hours a day, 7 days a week by beeper or telephone.

- Provide services at times convenient to the family.
- Provide services to only 2 to 4 families at a time.
- Provide a mixture of counseling and support services, as appropriate to the family's needs.
- Provide IFS for a maximum of 6 to 12 weeks, as appropriate to the family's needs.
- Devote 75% of work time to direct contact with the family.
- Document the services provided to the family. Documentation includes:
- A completed "Intensive Family Services Referral Form" (CFS-345) and assessment of the family within 72 hours of receipt of the referral from the County Supervisor;
 - A completed individualized Family Action Plan within 2 weeks of initiation of IFS;
 - Dated narratives on the types of services provided and the family's progress;
 - Completed "IFS Family Counselor's Time Record" (CFS-347);
 - A Transition Plan describing the family's continued needs after IFS and the linkages established to meet those needs 2 weeks prior to the termination of IFS;
 - A final report on the family's progress and continued needs within one week of termination of IFS;
 - Any additional reports requested by the Division.
- Provide follow-up services once a month for three months after termination of IFS, and again at six months after termination of IFS; provide brief reports to the County Supervisor on the status of the family.
- Maintain confidentiality in accordance with the "Arkansas Child Maltreatment Act" (Ark. Code Ann. 12-12-501 et.seq.), and the specific privileged communications standard, i.e., the health and safety of the child shall be paramount. Any privileged communications between husband and wife or between any professional person, except lawyer/client and between a minister, including a Christian Science Practitioner, and any person confessing to or being counseled by a minister, shall not constitute grounds for excluding evidence at any proceeding regarding child abuse, sexual abuse, or neglect of a child.

No privilege shall prevent anyone from reporting child maltreatment when the information is obtained from a child.

No privilege shall prevent anyone, except between a client and his lawyer or minister or Christian Scientist Practitioner, from testifying concerning child maltreatment when the information is obtained from a child.

No privilege, except between a client and his lawyer or minister or Christian Scientist Practitioner, shall prevent anyone from reporting or testifying concerning child maltreatment when the information is obtained from an adult.

VI. SERVICES TO REUNIFY FAMILIES

POLICY (VI-A): OUT-OF-HOME PLACEMENT CRITERIA

When a child is in the custody of the Department of Human Services, DCFS shall ensure that the out-of-home placement is in the best interest of the child, is the least restrictive possible and is matched to the child's physical and therapeutic needs. A child of a parent who is under the age of eighteen (18) years and is in DHS custody is considered a dependent juvenile. No child shall be placed in the home of a foster parent where a records check reveals a felony conviction for child abuse or neglect, for spousal abuse, for a crime against children (including child pornography), or a crime involving violence, including rape, sexual assault or homicide. No child shall be placed in the home of a foster parent if the record check reveals a criminal conviction for physical assault, battery, or a drug related offense, if the offense was committed within the past five years. The placement decision shall be based on an individual assessment of the child's needs. All efforts to place a child within Arkansas shall be thoroughly explored and documented before consideration is given to out-of-state placement. Relatives shall be considered for placement first. Placement shall be chosen:

- To ensure the health and safety of a child;
- To ensure that caretakers have the skills and training sufficient to deal with the child's special needs and any disabling condition; and
- To keep the child in close proximity to the family, if possible, to maintain enrollment in the school the child attended before placement.

After a child is placed out of the home, reasonable efforts will be made to reunify a family, to make it possible for the child to safely return home. Reasonable efforts to place a child for adoption or with a legal guardian or permanent custodian may be made concurrently with reasonable efforts to reunite a child with his family. Reasonable efforts shall also be made to obtain permanency for a child who has been in an out-of-home placement for more than twelve (12) months, or for fifteen (15) of the previous twenty-two (22) months. Reasonable efforts to reunite a child with his parent(s) shall not be required in all cases. The court shall conduct and complete a hearing on a "no reunification services" request within fifty (50) days of the date of written notice to the defendants and shall enter an order determining whether or not reunification services shall be provided. Reunification shall not be required if a court of competent jurisdiction, including the juvenile division of circuit court, has determined that the parent has:

- (1) Subjected the child to aggravated circumstances; (See Glossary for the definition of aggravated circumstances.)
- (2) Committed murder of any child;
- (3) Committed voluntary manslaughter of any child;
- (4) Aided or abetted, attempted, conspired, or solicited to commit such a murder or such a voluntary manslaughter;
- (5) Committed a felony, battery, or assault that results in serious bodily injury to any child; or
- (6) Had the parental rights involuntarily terminated as to a sibling of the child; or
- (7) Abandoned an infant (not the same as "Voluntary Delivery of an Infant", see Procedure VIII-E2).

If reasonable efforts to reunify are determined by a court to be unnecessary, a permanency hearing must be held within 30 days after the court's determination. If the court determines no reunification services will be provided due to aggravating circumstances or upon recommendation from the Division or Attorney ad litem at adjudication, the Family Service Worker will have case management responsibility until the child is placed in a adoptive home.

If the court recommends that reunification services should not be provided to reunite a child with his family, DHS, the attorney ad litem or the court shall provide written notice to the defendants. When DHS is the agency requesting that no reunification services be provided, it will send the written notice to the defendants in coordination with OCC. The notice shall be provided to the parties at least fourteen (14) calendar days before the no-reunification hearing and the notice shall identify, in sufficient detail to put the family on notice, the grounds for recommending "no reunification services".

The burden of presenting the case shall be on the requesting party. The court shall conduct and complete a hearing on "no reunification services" request within fifty (50) days of the date of written notice to the defendants.

Within 30 days of a child being placed in DHS custody, the Division will provide the parents with literature, verbal information, and referrals to programs for parenting, child abuse, substance abuse, sexual abuse and family planning.

PROCEDURE (VI-A1): Out-of-Home Placement Criteria

- The Family Service Worker will:
- Consider placement with appropriate relatives in a Kinship Family Foster Home. (See Policy VII-A.)
- Select the Out-of-Home Placement that best fits the needs of the child. A child who has been identified as an EXEMPTED FROM FINDING UNDER AGE JUVENILE AGGRESSOR OR SEXUAL OFFENDER must not be placed in a foster home with other children, unless the child's therapist feels that the child is no longer a danger to other children. Proper documentation of this will be contained in the child's hard copy file. If the recommended placement is a facility, the facility must receive information regarding the allegations. This must be documented in the Recommend Placement screen.
- Document placement selection on the "Case Plan" (CFS-6010) by keying the "Plan Goals" and the "Needs/Svc" screens in the "Treatment" portion of the "Case Plan" section of CHRIS.
- Arrange at least one (1) pre-placement visit for the child before the initial placement and before any subsequent changes in placement if possible and appropriate. Contact the OCC Attorney immediately if child is being moved from one Out-of-Home Placement to another. See Procedure VII-D1.
- Contact the OCC Attorney immediately if there is any indication that the child is a member of an Indian tribe.

PROCEDURE (VI-A2): CONCURRENT PLANNING

The Division will ensure timely permanency for children entering Out-of-Home Placement. Concurrent planning includes working towards the goal of returning the child to the parents while concurrently working on alternative permanent placements. Concurrent planning will be done for all out-of-home placement cases except for those cases where the court determines no reasonable efforts to provide reunification services. The

level and degree of concurrent planning will be on a case by case basis. The DCFS worker will immediately develop and implement a realistic concurrent plan.

The concurrent planning process will include:

1. The Family Service Worker informing the family of the concurrent planning process. The Family Service Worker must emphasize the importance of family involvement and partnerships in establishing permanency for children in out-of-home placements.
2. The Family Service Worker requesting parental input in identifying relatives and significant others who may be appropriate caregivers and initiate contact and Home Studies. Information on the putative father or any absent parent should be obtained and submitted on the CFS-408 (Federal Parent Locator System Information) to the local OCC Attorney. In considering placements, foster parents should be viewed as a resource.
3. Initiating the completion of the Life Story Book for all children in out-of-home care.
4. The Family Service Worker will complete the initial Case Plan (CFS 6010) within 30 days and document all concurrent planning activities in the appropriate section of the case plan. (See Procedure IV-A1). The CFS-6010 should document tasks that support reunification as well as permanency activities.
5. The Family Service Worker will complete the "Birth Family Background Information" (CFS-456) within 60 days of case opening.
6. At the second staffing (90 days) the Family Service Worker will invite the Adoption Specialist if the court determines reunification services are not required, or the Division is recommending termination of parental rights. The CFS-6010 developed from this staffing should assign tasks and responsibilities to the Family Service Worker and Adoption Specialist.
7. The Adoption Specialist will be invited and participate in the sixth (6th) month, ninth (9th) month and eleventh (11th) month staffing if it appears likely that the child will not return home or if the goal for the child is adoption. The CFS-6010 will assign tasks and responsibilities to the Family Service Worker and Adoption Specialist.

PROCEDURE (VI-A3): PLACEMENT OF INFANTS BORN TO INCARCERATED MOTHERS

The Division of Children and Family Services will accept referrals from the Arkansas Department of Correction (ADC) social worker seeking to find appropriate placements for infants born to incarcerated mothers. If the infant has a legal father, DCFS will not take any action unless the legal father refuses to assume responsibility for the child. The ADC social worker will refer the case to DCFS if the female inmate is unable to identify anyone who meets specific ADC guidelines for the assumption of care for the infant.

After referral by the ADC social worker, the DCFS Family Service Worker will:

- Visit with the mother and discuss possible placements for the child. Options include placement with a family member, a non-family member, or custody placed with DHS.
- If the mother wants to place the infant with a family member the Family Service Worker will discuss whether she wants (1) full custody given to the family member or (2) custody placed with DHS, with the family opened as a relative foster home.
- If the mother wants to place the infant with a non-family member, the Family Service Worker will discuss whether she wants (1) full custody given to the non-family member or (2) custody placed with DHS, with the family opened as a regular foster home.

- Conduct a home study on the requested placements where consideration for custody is with a family or non-family member, but not with DHS.
 - If the home study is unfavorable, the Family Service Worker will work with the mother to identify other possible placements, or will petition for custody of the child upon birth.
 - If the home study is favorable, when the child is born, DCFS will petition the court for custody to be given to the relative or other person identified by the mother.
- Inform the mother of DCFS licensing requirements if placement consideration is with a family or non-family member with custody placed with DHS. Any placement with a family or non-family member, wherein DHS is the custodian, must meet the same child welfare licensing requirements as a regular foster home prior to the child being placed in the home. (See PUB-022 Standards for Approval of Family Foster Homes).
 - When the child is born, DCFS will petition the court for custody to be given to DHS for placement in the relative foster home or the person's regular foster home.

The court will assess each case individually and will have a range of options for disposition. One option is to place permanent custody with, or grant guardianship to, a relative or other person and close the case with no DHS involvement. The other end of the spectrum would be for the court to grant custody to DHS and recommend immediate termination of parental rights. If termination of parental rights is granted, the Family Service Worker will follow Policy VIII-C.

- Follow DCFS policy for case opening, placement, and provision of services to the child.
- Contact the ADC social worker to arrange visitation between the child placed in an out-of-home setting and his incarcerated mother as stated in policy VI-B, unless such visitation is prohibited by the court, physician, etc.

POLICY (VI-B): MAINTAINING FAMILY TIES IN OUT-OF-HOME PLACEMENT

Families and children shall have reasonable opportunities for personal visits, communication by telephone, and involvement in life events such as teacher conferences, school and community events. A plan for visitation shall be developed between a child in out-of-home placement and the family and siblings, whether or not the siblings are in out-of-home placement. The preferred location for the visits is the parents' home or, if that is not possible, in the most homelike setting possible. Office visits are a last resort.

Siblings shall live together in the same foster home. Siblings may be placed separately only upon a written determination by the Administrator designated by the Director that placement of the siblings together would be detrimental to their best interests or is otherwise not possible at the time of initial placement. The Division shall ensure that the reasons for the separation of siblings into different foster homes are regularly reassessed and targeted recruitment efforts continue to reunite the siblings.

PROCEDURE (VI-B1): Maintaining Family Ties in Out-of-Home Placement

The **Family Service Worker** will:

- Develop a plan for visitation within five (5) working days of placement.
- Arrange for parental visits to occur no less than weekly with the frequency increasing as the family is prepared for reunification.
- Obtain approval from the County Supervisor for any deviations from required frequency of visitation.
- Request that deviations due to staff shortages be approved by the Area Manager.
- Place siblings together in the same foster home. Separate siblings by placement only upon written determination by a Mental Health Professional that placement of the siblings together would be detrimental to their best interest or is otherwise not possible at the time of initial placement.
- Arrange for sibling visitation to occur no less than every two weeks, when siblings are placed separately.
- Document efforts to reunify siblings placed separately.

The Director's designated Administrator will:

- Receive requests to place siblings separately.
- Approve/disapprove requests.

POLICY (VI-C): INITIAL HEALTH SERVICES FOR CHILDREN RECEIVING OUT-OF-HOME PLACEMENT SERVICES

The Division of Children and Family Services shall ensure that all necessary medical services are provided to children receiving out-of-home placement services. Foster parents will play an integral role in meeting the child's health needs.

An initial health screening will be held. If the initial screening indicates that treatment or further evaluation is needed, DCFS shall ensure that such treatment or evaluation is promptly provided.

A Medical Passport will be completed for each child in an out-of-home placement. The Medical Passport is a brief, readable, and current summary of the child's health history and current health status for use by present and future caretakers of the child.

PROCEDURE (VI-C1): Initial Health Screening for Children Receiving Out-of-Home Placement Services

The **Family Service Worker** or **Health Services Specialist** will:

- Ensure that each child who enters the custody of DHS shall receive an initial health screening, not more than 24 hours after removal from home, if the reason for removal is an allegation of severe child maltreatment under Ark. Code Ann. § 12-12-503 (10), or there is evidence of acute illness or injury.
- Ensure that all other children who enter the custody of DHS receive an initial health screening no more than 72 hours after removal from home.
- Complete the "Medical Passport/Medi-Alert to Substitute Care Provider" (CFS-362) from information obtained from the child's parents.
- Use information obtained from the CFS-362 to complete the "Placement Plan-Placement Provider Information Report" (CFS-6007), by keying the "Gen.Info" screen in the "Client section" of CHRIS and all "Shots" screens in the "Medical" section of CHRIS.
- Complete the "Client Medical and Psychological Information Report" (CFS -6012) by keying all screens found in the "Medical" section of CHRIS from information obtained from the child's parents and the CFS-362.
- Schedule appointments as indicated by the initial screening.
- Ask the Medical Provider to complete the "Health Screening" (CFS-366).

PROCEDURE (VI-C2): Foster Parent Involvement in Health Care for Children Receiving Out-of-Home Placement Services

The **Foster Parents** will:

- Accompany the child to all medical appointments.
- Inform the Division of any scheduled medical visits or medical problems for the child.

The **Family Service Worker** or **Health Services Specialist** will:

- Provide necessary support services to enable foster parents to accompany the child to any medical appointment.

PROCEDURE (VI-C3): Gathering and Maintaining Health Records for Children Receiving Out-of-Home Placement Services

The **Family Service Worker or Health Services Specialist** will:

- Gather each child's health care history from health care providers who have evaluated or treated the child, the child's family, previous caretakers, and from school reports.
- Provide the child's health care history to the physician conducting the Comprehensive Health Assessment.
- Request medical records on the child and document requests on the "Requested Medical Records Log" (CFS-353).
- Record the date of each medical visit, the condition or problem addressed, the diagnosis and treatment (or periodic screening and the results of the screening), and the health care provider's name and telephone number in the "Medical Visits" screen in CHRIS.
- Place all information gathered as to the child's health history, and all records of health screening, assessment and treatment during placement, in the child's case record. This includes the "Medical, Dental, Vision, Hearing and Psychological Episodic" (CFS-352), "Requested Medical Records Log" (CFS-353), "Medical Passport/Medi-Alert to Substitute Provider" (CFS-362), "Health Screening" (CFS-366), "Child's Health Services Plan" (CFS-368), "Placement Plan-Placement Provider Information" (CFS-6007) and the "Client Medical and Psychological Information" (CFS-6012).

PROCEDURE (VI-C4): Medical Passport for Children Receiving Out-of-Home Placement Services

The **Family Service Worker or Health Services Specialist** will:

- Develop and maintain the Medical Passport. The Medical Passport will consist of the CFS-352, CFS-353, CFS-362, CFS-365, CFS-366, CFS-368, CFS-6007 and CFS-6012.
- Provide the CFS-365 (Receipt for Medical Passport of a Foster Child) to the out-of-home placement provider for completion to verify receipt of the medical passport.
- Provide a copy of the Medical Passport to:
 - The out-of-home placement provider and to the child's new caretaker if the child is moved.
 - The child (if the child is in an Independent Living Program).
 - The child when he or she reaches the age of majority.
 - The parents, if the child returns home.

POLICY (VI-D): COMPREHENSIVE HEALTH ASSESSMENT AND HEALTH PLAN FOR CHILDREN RECEIVING OUT-OF-HOME PLACEMENT SERVICES

A comprehensive health assessment of each child shall be completed. The assessment shall be conducted under the supervision of a physician and a qualified mental health practitioner. Whenever possible, the Family Service Worker, Health Services Specialist, family, and foster parents shall be involved in the assessment to ensure as much information about the child as possible is available to the examining professionals.

A written plan specifying any conditions requiring treatment, the recommended treatment, the schedule for treatment, the names of health care providers responsible for treatment, and the results of treatment as it occurs shall be completed and updated periodically. This plan shall be provided to the child's birth parents and foster parents. The birth parents shall be informed about any medical treatment scheduled for their child and shall be involved in and informed about their child's health care.

PROCEDURE (VI-D1): Comprehensive Health Assessment and Health Plan for Children Receiving Out-of-Home Placement Services

The **Family Service Worker or Health Services Specialist** will:

- Arrange to have the Comprehensive Health Assessment completed within sixty (60) calendar days of removal from home.
- Complete the "Client, Medical and Psychological Information Report" (CFS-6012) within seven (7) calendar days after completion of the Comprehensive Health Assessment.
- Schedule needed medical appointments for the child as indicated in the "Client, Medical and Psychological Information Report" (CFS-6012) after this form is received from University of Arkansas Medical Sciences.
- Complete the "Child's Health Services Plan" (CFS-368) within fourteen (14) calendar days after completion of the Comprehensive Health Assessment.
- Inform parents of any medical treatment and involve them as appropriate.
- Update the CFS-368 at least every six (6) months.
- Provide copies of updates of the CFS-368 to the child's parents and the out-of-home placement provider.
- Ask the Medical Provider to complete the "Health Screening" (CFS-366).

POLICY (VI-E): PERIODIC HEALTH REASSESSMENT OF CHILDREN RECEIVING OUT-OF-HOME PLACEMENT SERVICES

Following the initial screening and comprehensive health assessment, the Division shall ensure that periodic medical, dental, mental health, vision, and hearing evaluations are

conducted by qualified providers, according to the periodicity schedules adopted by the Arkansas Department of Health.

PROCEDURE (VI-E1): Periodic Health Reassessment of Children Receiving Out-of-Home Placement Services

The Family Service Worker or Health Services Specialist will:

- Refer all children receiving Out-of-Home Placement Services for the Early and Periodic Screening, Diagnosis, and Treatment Program (EPSDT) via the EMS-694 "EPSDT" form to the Health Department, or other EPSDT providers after the initial screening and the Comprehensive Health Assessment.

NOTE: If it is the first time the child has seen a health care provider while in the out-of-home placement, a primary care provider must be selected.

- Make an appointment with the Health Department, or other EPSDT providers for the EPSDT screening.
- File a copy of the examination report upon receipt from provider.
- Schedule all subsequent screenings according to established periodicity schedules. (See Appendix III.)
- Ensure all essential treatment is provided and documented in CHRIS in a timely manner.
- Ask the Medical Provider to complete the "Medical, Dental, Vision, Hearing and Psychological Episodic" (CFS-352) at each subsequent examination.

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

The status of each child in out-of-home placement, including children placed out-of-state, shall be reviewed no less than every six months by a judicial review. During each six-month review the court shall make determinations based upon the best interest of the child. The best interest of the child shall be paramount at every stage of the judicial process. Each child in an out-of-home placement including children placed out-of-state, shall have a Permanency Planning Hearing no later than 12 months from the date of entering out-of-home care, or after a child has been in an out-of-home placement for fifteen (15) of the previous twenty-two (22) months excluding trial placements and on runaway status, or no later than thirty (30) days after the court files an order that no reunification services shall be made to reunite the juvenile with his family, the court shall hold a permanency planning hearing in order to enter a new disposition in the case to determine the child's future status. A child shall be considered to have entered foster care on the date the child enters an out-of-home placement.

If a child remains in an out-of-home placement after the initial permanency planning hearing, an annual permanency planning hearing shall be held to reassess the permanency goal selected for the child.

The Permanency Planning Hearing shall determine the permanency goal for the child that includes, listed in order of preference,:

(1) Returning the child home at the permanency planning hearing if it is in the best interest of the child and the child's health and safety can be adequately safeguarded if returned home,

(2) Termination of parental rights so the child can be adopted, unless:

- the child is being cared for by a relative and termination of parental rights is not in the best interest of the child;
- the Division has documented in the case plan a compelling reason why filing a termination petition would not be in the best interest of the child and the court approves the compelling reason as documented in the case plan; or
- the Division has not provided services, consistent with the case plan, necessary for the safe return of the child to his home.

At any time during the course of a case, DHS, the Attorney Ad Litem or the court can request a hearing on whether or not reunification services should be terminated. The requesting party shall provide notice to the parties at least fourteen (14) calendar days before the hearing. The notice shall identify the grounds for recommending termination of reunification services in sufficient detail to put the family on notice. The court shall determine whether or not reunification services shall be terminated. The burden of presenting the case shall be on the requesting party. The court shall conduct and complete a hearing on a "no reunification services" request within fifty (50) days of the date of written notice to the defendants. The court shall enter an order determining whether or not reunification services shall be provided. If the court determines that reunification services shall be terminated, the court shall hold a permanency planning hearing within thirty (30) days after the determination. If the court determines the permanency goal to be termination of parental rights, the Department shall file a petition to terminate parental rights within thirty (30) days from the date of the entry of the order establishing such goal. The court shall conduct and complete a termination of parental rights hearing within ninety (90) days from the date the petition for termination of parental rights is filed, unless continued for good cause. After an order of termination of parental rights is filed, the court shall review the case at least every three (3) months when the goal is adoption, and in other cases, every six (6) months until permanency is achieved for the child. (Refer to Policy VIII-C.) The court reviews continue, even if a case is on appeal.

(3) Legal guardianship,

(4) Permanent custody,

If the court grants legal guardianship or permanent custody no further services or periodic reviews are required.

(5) Continue the goal of reunification only when the parent is complying with the established case plan, and orders of the court making significant measurable progress towards achieving the goals established in the case plan, and diligently working toward reunification. Reunification must be expected to occur within a time frame that is consistent with the child's developmental needs.

(6) Independence (see definition of Independence in Glossary).

Independence shall be selected only if the child cannot be reunited with the child's family; another permanent plan is not available; and a compelling reason exists why termination of parental rights is not in the child's best interest or the child is being cared for by a relative and termination of parental rights is not in the best interest of the child.

At any hearing in which the Department of Human Services is ordered by the court to provide services for a family, the court shall provide the Department with the opportunity to be heard. When DHS is not a party to the case, failure by the court to provide at least five (5) working days' notice to DHS renders any part of the order pertaining to DHS void.

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

The **Family Service Worker** will:

- Receive the confirmed court date from the OCC attorney.
- Provide the OCC attorney with the name and address of any grandparent who is entitled to notice based on the conditions listed in Procedure (II-E10).
- Provide notice to the parties at least fourteen (14) calendar days before the hearing, if DHS is the requesting party.
- Complete a court report for all review hearings.
- Complete an "Attorney Report" (CFS-393) for all review hearings.
- Submit the CFS-393 and "Court Report" (CFS-6011) to the OCC Attorney within fifteen (15) working days prior to the hearing.
- Submit the CFS-393 and the "Permanency Planning Hearing Court Report" (CFS-6024) to OCC, CASA and all parties no later than seven (7) days before the scheduled Permanency Planning Hearing.
- Invite the out-of-home placement provider to all hearings.
- Attend all hearings and be prepared to provide testimony regarding services offered or provided, progress and recommendations to the court.
- Bring case files to all hearings.
- Discuss orders of the court with the family.

POLICY (VI-G): INTERSTATE COMPACT ON PLACEMENT OF CHILDREN (ICPC)

The Interstate Compact on the Placement of Children (ICPC) is used to move children in need of placement, treatment or adoption across state lines. When a child requires placement outside the resident state, DCFS shall use the ICPC process. The ICPC process ensures:

- **Proper extensions of authority into the receiving state.**
- **Maximum opportunity for each child to be suitably placed.**
- **Proper information to authorities in the receiving state.**

PROCEDURE (VI-G1): Types of Placement Covered by ICPC

Children placed out-of-state are to go through ICPC when one of the following placements occur:

- out-of-home placement provider,
- adoptive placements,
- residential treatment programs, group homes, and institutions,
- placements with parent/relatives and non-agency guardians except for a facility for the mentally ill or educational facility or a situation in which a child is placed by a parent or close relative with another parent or close relative in another state.

If in doubt, request clarification from the Arkansas Interstate Compact Unit, P.O. Box 1437, Slot S567 Little Rock, Arkansas, 72203-1437. (phone: (501) 682-8556)

PROCEDURE (VI-G2): Responsibilities of the Sending State

The **sending party** will:

- provide proper notice of the intent to place and receive authorization from the receiving state prior to the placement.
- retain jurisdiction over the child until the child no longer comes under the jurisdiction of ICPC.
- retain planning and financial responsibility for the duration of the placement.

NOTE: The one exception comes under the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA) requiring that children under Title IV-E adoption assistance agreements and those receiving Title IV-E foster care payments will be granted Medicaid coverage in their current resident state. (See Medical Services Manual, Section 6600 to 6673.)

- Return the child to the sending state at the request of the receiving state.

PROCEDURE (VI-G3): Responsibilities of the Receiving State

The **receiving state** will:

- assess the proposed placement resources.
- notify the sending state in writing if proposed placement is in the best interest of the child.
- supervise placement and provide or arrange for necessary services.
- submit reports to sending party as requested.
- honor and enforce orders of the court of jurisdiction of the sending state.

PROCEDURE (VI-G4): Placing Arkansas Children in Another State and Requesting Out-of-State Home Studies

The following are procedures to use when requesting an out-of-state home study for an Arkansas child, including placement into residential treatment facilities. Always use the child's name on the correspondence.

The **sending party** (county office, etc.) will compile an Interstate Compact Placement Packet consisting of:

- Cover letter or memo to the Arkansas Interstate Compact Office explaining placement plans as follows:
 - Request an evaluation of the proposed placement, home or facility.
 - Clarify legal status and court/Division plans.
 - Clarify financial planning (foster care payments are to be made, Medicaid coverage, etc.).
 - Financial / Medical Plan – ICPC (CFS-592).
- Specify special needs of the child (medical, educational, etc.).
- “Interstate Compact Placement Request” (ICPC-100A). (Retain one copy and include five copies with the packet.)
- “Case Plan” (CFS-6010),
- Court order (most recent) showing that DHS has custody or the court has jurisdiction of the child,
- Complete a thorough Social Summary including background information on the child and family. Include the following additional information if applicable:
 - psychological testing reports,
 - school reports,
 - medical reports,
 - other appropriate reports/documents.
- Send packet to Deputy Administrator, Interstate Compact Unit, P.O. Box 1437, Slot S567, Little Rock, Arkansas 72203-1437.

The **Arkansas ICPC Office** will:

- Send packet to receiving state's compact office.
- Notify sending party of disposition.
- Coordinate the travel plans with the Family Service Worker if placement is approved.

The **Family Service Worker** will:

- Complete and route the “Interstate Compact Report on Placement Status of Child” (ICPC-100B) to the ICPC office if the out-of-state placement is approved. Show the date of the placement or of the withdrawal of the request.
- Code the “Application for Emergency Services” (CFS-6013) to show ICPC service using the child’s name.
- Key the case type in CHRIS as “ICPC” for the child placed by the Division in another state.
- Notify the Adoption Services Unit of a proposed adoptive placement, if appropriate.

NOTE: Communication between states regarding approval of placements, progress reports, case closures and disruptions must go through the ICPC office.

PROCEDURE (VI-G5): Children Entering Arkansas for Placement

Requests for placement include child placement, supervision of a child already in placement, or a request for a home study in Arkansas. All such requests and related phone calls must go through the ICPC office.

- Requests from sending state should include the same information described as the Interstate Placement Packet and outlined in Procedure VI-G4.
- Contact the Arkansas ICPC Deputy Administrator if additional information is needed from the sending state.

Exclusions to these procedures include the following:

- Protective Services referrals from another state.
- Requests for information only.
- Placements into certain hospitals, parental/relative placements, placements made through another Compact and divorce/custody cases.

The disposition of requests is as follows:

- Requests for home studies of parents, relatives, or foster homes received in the ICPC office will be forwarded to the appropriate County Office for a reply.
- Requests for home studies regarding adoptive placements from state agencies will be forwarded to the appropriate Area Manager for forwarding to the Adoption Specialist.

PROCEDURE (VI-G6): Completion of a Home Study

The **Family Service Worker** will:

- Complete a thorough home study, excluding the results of the criminal record check, with a definite recommendation for or against placement within thirty (30) working days of a request. If the criminal record checks have not been received, a copy of the application/request must be included in the packet.
- Notify the ICPC office if there is to be a delay.
- Include “Request for CPS Central Registry” (CFS-316) and “State Adoptions Criminal Record Check” (CFS-342B). The results of the criminal records check shall be provided to the court as soon as they are received.
- No foster child in the custody of another state agency who is placed in Arkansas shall be placed in any home if the criminal record check reveals a felony conviction of an adult in the home for:
 - (1) Child abuse or neglect;
 - (2) Spousal abuse;
 - (3) A crime against children, including child pornography; or
 - (4) A crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery.

If the criminal record check reveals a felony conviction of any adult in the home for physical assault, battery, or a drug-related offense and the offense was committed within the past five (5) years, the child shall not be placed in the home.
- Send the home study to the Arkansas Deputy Administrator, Interstate Compact Unit, not directly to the other state.

PROCEDURE (VI-G7): Routing of a Home Study

The **Arkansas ICPC Unit** will:

- Review the home study and route the home study and “Interstate Compact Placement Request” (ICPC-100A) approving/disapproving placement to the sending state requesting home study and approval.

If approved, the **sending state** will:

- Proceed with placement plans.
- Complete an “Interstate Compact Report on Child’s Placement Status” (ICPC-100B) stating their placement plans and route the placement plan to the Arkansas ICPC Unit.

The **Arkansas ICPC Unit** will:

- Notify the appropriate Arkansas Family Service Worker of the placement of a child into that specific county.

PROCEDURE (VI-G8): Follow-up, Routing, and Monitoring

The **Family Service Worker in Arkansas** will:

- Provide monthly supervision of the child and send quarterly progress reports to the Arkansas ICPC Unit or as requested on the ICPC-100A.

- Notify the Arkansas Deputy Administrator ICPC office, immediately, if problems or changes with placement occur.
- Key the case type in CHRIS as “ICPC” for the child placed in Arkansas from another state.

PROCEDURE (VI-G9): Travel Procedures for Children Receiving Out-of-Home Placement Services

When a foster child has been approved to move into or out of Arkansas, the **Family Service Worker** will:

- Submit request for travel to ICPC office with “Application for Out-of-State Travel” (DHS-1010) two (2) weeks in advance. (The ICPC office will be responsible for obtaining approvals for the travel.)
- Make necessary travel arrangements through a travel agency approved by DHS.
- Submit ICPC-100B to the ICPC office for forwarding to the receiving state when arrangements are completed and approved.

When an escort (state employee or non-state employee) is needed to assist with transporting an Arkansas foster child to or from an out-of-state placement, the **Family Service Worker** will:

- Submit the same information as stated above for foster children travel.

PROCEDURE (VI-G10): Other Travel (Non-ICPC and Non-DCFS Children)

For Non-ICPC travel, the **Family Service Worker** will:

- Request prior approval, using the DHS-1010 for a child and for an escort. (Ex. to attend a funeral.)
- Direct requests and questions to the Foster Care Unit.

Exception: For children placed out-of-state by their parent, Arkansas court, or an Arkansas treatment facility, the **sending party** is responsible for:

- Arranging transportation and notifying the ICPC office of travel arrangements.
- Submitting an ICPC-100B to the ICPC Unit.

PROCEDURE (VI-G11): Progress Reports

The **receiving state** must:

- Send progress reports every three months unless otherwise stated on the ICPC-100A.
- Mail progress reports to ICPC office for forwarding to the sending state.
- File progress reports in the child’s case record.

PROCEDURE (VI-G12): Out-of-State Visits

When an Arkansas foster child is going for an out-of-state visit of more than thirty (30) days:

The **Family Service Worker** will:

- Send an Interstate Compact referral requesting approval for a visit of over thirty (30) calendar days to the Arkansas ICPC Unit. (See Procedure VI-G4.)
- Receive approval from the Interstate Compact office for the proposed visit.
- Arrange travel as specified within the previous procedures.

When an Arkansas foster child is going for an out-of-state visit of less than thirty (30) days, the Arkansas ICPC Unit is not involved.

PROCEDURE (VI-G13): Termination of ICPC Cases

An Interstate Compact Placement can only be terminated for the following reasons:

- Adoption is finalized.
- Child reaches age of majority.
- Child is emancipated.
- Child is returned to the sending state.
- Custody is returned to the parent or placed with a relative with the approval of both the sending and receiving states.

The **Family Service Worker** will:

- Complete ICPC-100B indicating termination reason and route it to the ICPC office for forwarding to the receiving state.

The **Arkansas ICPC Unit** will:

- Send the ICPC-100B to the sending or receiving state to notify them of the closure of the ICPC case.

PROCEDURE (VI-G14): Exceptions to Policy

Items and services not specified in this policy must have prior approval of the Interstate Compact Deputy Administrator.

The **Family Service Worker**, with the approval of the Area Manager, will:

- Write a memo to the Interstate Compact Deputy Administrator to fully explain the situation.
- Request that exceptions to policy be made.

The **ICPC Deputy Administrator** will:

- Review the request.
- Inform the Family Service Worker of the decision.

PROCEDURE (VI-G15): Juvenile, Mental Health, and Adoption and Medical Assistance Compacts

In addition to the ICPC, three other Interstate Compacts were enacted to coordinate the interstate placements of children and juveniles as follows:

- Interstate Compact on Juveniles -- This compact is designed to serve those children needing an out-of-state placement who have been adjudicated delinquent and who have been placed on probation or parole. This compact also provides for the return of non-delinquent runaways, escapees, and absconders. The Interstate Compact on Juveniles is administered by the Division of Youth Services.
- Interstate Compact on Mental Health -- This compact is designed to facilitate the transfer of resident patients (both children and adults) from a state-operated mental health facility in one state to a similar state-operated facility in another state. The Mental Health Compact is administered by the Division of Mental Health.
- Interstate Compact on Adoption and Medical Assistance -- This compact is for adoption assistance for IV-E eligible children who are under an adoption subsidy agreement. The adoption worker should notify the Adoption Subsidy Coordinator as soon as it is known that an adoptive family/child is moving out of state or has moved. The Adoption Subsidy Coordinator will send information to the new state of residence and also to the adoptive parents advising them to contact the local Medicaid office in their new state of residence. This contact will be for the purpose of getting medical benefits for their child in the new state of residence.

POLICY (VI-H): INTERFERENCE WITH CUSTODY

The Division will provide a representative upon request to accompany the officer arresting an individual for Interference with Custody.

PROCEDURE (VI-H1): Interference with Custody

The **Family Service Worker** will:

- Accompany the officer arresting an individual for interference with custody. Take the minor into temporary DHS custody pending further proceedings from a court of competent jurisdiction.
- Contact OCC Attorney immediately.

POLICY (VI-I) FOSTER CHILD TRUST ACCOUNTS

The Department of Human Services (DHS) maintains Trust Accounts for children in foster care who receive Supplemental Security Insurance (SSI), Social Security (SSA), Child Support, Veterans Benefits (VA), Railroad Benefits (RR) or any type of income. These benefits will automatically be used to pay for the child's foster care expenses, which includes the monthly board payment. DHS will become the payee for all benefits collected.

DCFS must ensure that changes in payee are made when a child receiving benefits initially enters foster care. The IV-E/Medicaid Eligibility Unit will screen all DCFS clients for potential SSI eligibility according to SSA disability criteria and make applications for those who meet minimum requirements.

The child's trust fund account must not exceed \$2,000 to maintain state Medicaid eligibility, not exceed \$2,000 to maintain Social Security benefits, and not exceed \$10,000 to maintain Title IV-E eligibility. DCFS will coordinate the monitoring of Trust Fund accounts with the Office of Fiscal Management - General Operations Section, IV-E/Medicaid Eligibility Unit and other pertinent agencies to ensure the timely and efficient management of these accounts.

Authorized uses of different funds vary according to their sources. However, any expenditure from a foster child's trust account must be for the direct care and/or needs of the child in receipt of the income. Funds cannot be used for siblings, parents, or other individuals in the initial removal home. Authorized uses are as follows:

- SSI Income in a Regular Account has no restrictions; spending must be appropriately prioritized according to the child's needs and disability.
- SSI Income in a Dedicated Account may be used for the following with approval from the Social Security Administration:
 - (1) medical treatment, education or job skills training or
 - (2) if they pertain to an impairment –
 - (a) personal needs assistance
 - (b) housing modifications
 - (c) special equipment
 - (d) therapy or rehabilitation or
 - (e) other items / services if approved by the SSA.
- SSA Income and Child Support Income have no spending restrictions.

PROCEDURE (VI-I-1) OPENING A TRUST ACCOUNT

When the child enters foster care and is already receiving income, the Family Service Worker will:

- List the income source, amount and frequency on the application for Medicaid.
- Have the birth/legal parent(s) or guardian execute a CFS-491 (Consent for Use of Funds and Resources) and explain that without consent authorization, the child may accumulate excess funds which would make him ineligible for Medicaid. If permission is not given, obtain permission from the court to use conserved funds.
- Submit the change of payee forms to the appropriate agency(s) once the child is court ordered into foster care.
- Forward the CFS-376 (Authorization for Billing and Trust Account Action) and a memo containing the following information to the Trust Fund Coordinator:
 - Child's name, social security number, date of birth, race, and gender
 - Type of benefit
 - County
 - Date of request and begin date of income
 - Award amount
 - Back pay (optional)
 - CHRIS Case & Identification Number
 - Signature and telephone number of person submitting request

PROCEDURE (VI-I-2) CLOSING A TRUST ACCOUNT

To close a Trust Account when a child returns home, is emancipated, or adopted, the Family Service Worker will:

- Submit a the CFS-376 along with the CFS-334 (Foster Care Services – Authorization for Billing) requesting closure to the Trust Fund Coordinator containing the following information:
 - Child’s Name, SSN, CHRIS case and identification number.
 - Name, telephone and signature of person submitting the request.
 - Name and address of the child’s custodian/legal guardian, the relationship to the child.
 - Notation to return funds to the following once all outstanding bills are paid:
 - **Child-** if emancipated and the balance does not exceed \$2,000 in SSI/SSA funds.
 - **Social Security Administration** – if the balance of the account exceeds \$2000 in SSA funds, the account is a Dedicated Account, and anytime the funds are SSI funds.
 - **Parent/Legal Guardian** – for SSA account balances under \$2000 and child support income of any amount.
- Immediately request all outstanding bills from providers and forward to the Trust Fund Coordinator with appropriate documentation as soon as possible.
- Submit a change of payee request to the Social Security Administration or Office of Child Support Enforcement (OCSE) indicating the new payee/parent/guardian.

PROCEDURE (VI-I-3) CHANGE OF PAYEE REQUESTS

When a Family Service Worker becomes aware that a child entering care is **already receiving benefits** from SSA, SSI, VA, RR Benefits, Child Support or other income, the worker will:

- Notify the appropriate office that DHS/DCFS is the new payee: ** (see below)
 - For **Social Security** benefits – Submit a copy of the court order placing the child in foster care and the original of Form SSA 11 to the district SSA office. Obtain the form from the IV-E/Medicaid Eligibility Unit or the Social Security Administration office directly.
 - For **VA** benefits – Telephone or Fax the VA office with the primary recipient’s benefit number and advise them that DHS/DCFS is the new payee.
 - For **RR** benefits – Contact the Benefits Department of the specific, individual railroad company to advise them DHS/DCFS is the new payee.
 - For **Child Support** – Submit a copy of the court order placing the child in foster care and an OCSE Referral Form to the Office of Child Support Enforcement.
- Submit a change of payee request to the appropriate agency(s), designating DHS/DCFS as the new payee.
- Designate the payee as follows: DHS Fiscal Administration for Foster Care
PO Box 8181, Slot W405
Little Rock, AR 72203-8181
- Send a copy of the completed “Change of Payee” request to the IV-E/Medicaid Eligibility Unit to include in the child’s record.
- If a contract facility (rather than DHS) is designated the payee for a child’s income, that facility must submit a monthly report CFS-377 (Facility Trust Account Reporting) to the DCFS Foster Care Unit to include the following information:

- Child's name and social security number
- Beginning of the month balance
- Deposits and expenses
- End of the month balance

**** Under current policy, the only facilities authorized to become representative payee for Arkansas foster children are Arkansas Human Development Centers and Millcreek. Until policy is revised to state otherwise, no other facilities are to be made the payee for the income of children in Arkansas foster care.**

PROCEDURE (VI-I-4) REQUESTS FOR TRUST ACCOUNT FUNDS

To request trust account funds the **Family Service Worker** will:

- Complete the appropriate sections of CFS-334 indicating the amount and purpose for the funds being requested.
- Attach the original invoice or billing statement from the provider along with an original provider signature.
- Have the CFS-334 reviewed, approved and signed by the County Supervisor and/or Area Manager.
- Forward the **original** CFS-334 and **originals** of any required attachments to the Trust Fund Coordinator at Slot S571 within 7 days of the service or purchase date.
- In the event that the original invoice/receipt is lost, or a provider issues carbon copies of invoices as the client's original receipt, an agency generated Trust Account Invoice (CFS-380) must be utilized on a case by case basis.
- There is currently no mechanism in place to reimburse contract payments from trust accounts in the same manner currently utilized to reimburse board payments. Contract reimbursements will continue to be submitted on the CFS-334.

To request that trust account funds be held or conserved, the **Family Service Worker** will:

- Requests to hold/conservate trust account funds must be submitted to the Trust Fund Coordinator within 5 business days of the initial purchase on CFS-376 (Authorization for Billing and Trust Account Action) via fax, email or standard mail.
- A completed CSF-334 along with appropriate attachments must be forwarded to the Trust Fund Coordinator within 15 business days of the request to hold/conservate funds.
- Funds will not be held more than 30 business days of the initial request to hold/conservate funds. After 30 days, the held funds will be released for other account uses.

PROCEDURE (VI-I-5) REPORTING INFORMATION CHANGES TO THE TRUST FUND COORDINATOR

Status changes that affect a foster child's trust account will be coordinated between the IV-E/Medicaid Eligibility Unit and The Office of Fiscal Management- General Operations Section.

Status changes that affect a foster child's trust account must be submitted electronically or in writing and signed by the appropriate DCFS staff on CFS-376 (Authorization for Billing and Trust Account Action).

The Family Service Worker will report appropriate information to the Trust Fund Coordinator within 5 days of any of the following occurrences, which may effect the child's monthly benefit amount and/or SSI income payments:

- Placement changes to or from a detention or long-term care facility, Human Development Center, Mill Creek or run-away status.
 - When the child is placed in a contract or long-term care facility the FSW must ensure that the child receives his/her personal need funds.
 - To reinstate benefits, the FSW must make notification of return to DHS custody from the above placements.
- The foster child is adopted, reaches the age of maturity or is deceased.
- Errors are found on the Trust Report or on the Assets screen in CHRIS.

PROCEDURE (VI-I-6) MONITORING TRUST ACCOUNTS FOR ACCURACY AND COMPLIANCE WITH STATE AND FEDERAL REGULATIONS

County Supervisors will:

- Supervise the trust account related work carried out by the Family Service Workers.
- Review and sign each approved CFS-334.
- Monitor trust account balances to ensure they do not exceed resource limits.
- Carry out any trust account related responsibilities delegated by their Area Managers.

Area Managers will:

- Monitor monthly Trust Reports for their DCFS service area, ensuring:
 - Compliance with state and federal resource limits
 - Accuracy of basic information (county placement, duplicate accounts, etc.)
 - Necessary actions by Family Service Workers
 - Reimbursement of board payments
- Monitor CFS-334's for duplicate, repeat or unusual purchases prior to submission to the Office of Fiscal Management – General Operations Section.
- Monitor reports of trust funds being held or conserved for action by county staff.
- Distribute monthly Trust Reports to all County Supervisors via email until electronic transmission is available.

The Foster Care Unit will:

- Distribute monthly Trust Reports upon receipt from the Office of Fiscal Management - General Operations Section or any contract facilities to Area Managers and the IV-E/Medicaid Eligibility Unit via email, until electronic transmission of these reports is available.
- Distribute reports of funds held/conserved upon receipt to Area Managers and the Trust Fund Coordinator via email until electronic transmission of this report is available.
- Forward copies of all overpayment requests received to the Trust Fund Coordinator within two business days of receipt.

The DCFS Assistant Director of Community Support will:

- Designate a team to conduct an annual internal audit of DCFS Trust Account activities.
- Audit results and/or actions will be drafted and presented to DCFS Executive Staff, the IV-E/Medicaid Eligibility Unit and the Foster Care Unit.

PROCEDURE (VI-I-7) DHS OFFICE OF FISCAL MANAGEMENT - GENERAL OPERATIONS SECTION TRUST ACCOUNT RESPONSIBILITIES

The DHS Office of Fiscal Management - General Operations Section will:

- Complete trust account deposits, withdrawals, holds, and closures within 10 business days of request by DCFS staff and/or Trust Fund Coordinator.
- Forward each CFS-334 needing correction or additional information to the Trust Fund Coordinator for corrective action. Any CFS-334 that is rejected due to incomplete documentation, lack of funds, or any other reason will be handled in the following manner:
 - If the form is returned due to insufficient funds in the trust account, the Trust Fund Coordinator will notify the appropriate county supervisor and forward the returned invoice to the DCFS Fiscal Officer further processing/instruction.
 - If the form is returned due to missing signatures, original/agency-generated Trust Account Invoice (CFS-380), insufficient documentation or the invoice was previously paid, the Trust Fund Coordinator will forward the form(s) to the appropriate county supervisor(s) for correction.
- Distribute the monthly Trust Reports (General, Dedicated, County, Balances at \$1,500, and Funds Held/Conserved) to the DCFS Office of Finance and Administrative Support Section, Foster Care Unit Manager and Trust Fund Coordinator by the 10th business day of each month. These reports will be distributed via email until electronic transmission is available.
- Forward requests to close trust accounts, appropriate documentation and a net refund check (minus outstanding obligations) to the Social Security Administration within 10 business days of receipt of request.
- Make corrections to the Trust Report information as directed by the Foster Care Unit Manager, Trust Fund Coordinator, or DCFS Personnel within 10 business days of receipt of request. This includes: merging duplicate accounts, correcting names and/or social security numbers, county codes, etc.
- In order to ensure continuing Medicaid eligibility, DCFS will provide Office of Fiscal Management (OFM) with a monthly report of SSI accounts exceeding \$2,000 along with a CFS-334 for payment of excess funds back to SSA.
- Process SSA Overpayment Requests and Trust Account Closeout Requests. These requests will be submitted to OFM on the CFS-379 (Closeout/Overpayment Notification). The DCFS Fiscal Officer or designees within that division will initial each form.
- Upon completion, OFM will forward copies of the CFS-379 (Closeout/Overpayment Notification) to the Trust Fund Coordinator. (When OFM transactions become available in CHRIS, this action will no longer be necessary.)

PROCEDURE (VI-I-8) CHRIS TEAM TRUST ACCOUNT RESPONSIBILITIES

The CHRIS Team will:

- Update CHRIS Asset screen information with monthly Trust Report data.
- Provide OFM with an electronic mechanism to review and approve prior to reimbursement for board payment from the trust account.
- Make corrections to CHRIS asset screens upon notification.
- Reimburse contract payments from trust accounts in the same manner currently used to reimburse board payments.

PROCEDURE (VI-I-9) IV-E/MEDICAID ELIGIBILITY UNIT / TRUST FUND COORDINATOR RESPONSIBILITIES**The Trust Fund Coordinator will:**

- Assist DCFS staff with trust account related problems as needed.
- Assist DCFS with training its staff on new/revised trust account policies and procedures.

- Monitor Trust Report balances for compliance with state and federal resource limits.
- Monitor Trust Reports for accuracy (is the child still in care, duplicate accounts, incorrect Social Security Numbers, etc.).
- Monitor the monthly report of trust account funds being held or conserved pending action by the Family Service Worker.
- Forward requests for corrections on CHRIS Asset screens to CHRIS personnel for correction.
- Report the findings of its monthly monitoring of the Trust Reports to the Foster Care Unit, contract monitor, and appropriate DCFS personnel.
- Notify the Social Security Administration of changes in their recipient's status (excluding a request to close accounts) and also notify the IV-E/Medicaid Eligibility Unit.
 - In accordance with page 5 of the Social Security Administration's form SSA-8202-F6, status changes must be reported within 10 days after the month in which they occur.
 - Changes may be reported by –
 - Calling the Social Security Administration, toll free, at 1-800-772-1213.
 - Calling, writing or visiting the local Social Security Office.
- Review and forward each completed CFS-334 to the Office of Fiscal Management- General Operations Section within 5 business days of receipt.
- Review each CFS-334 returned by OFM for needed additional information/errors/etc., and coordinate with DCFS staff for corrected re-submission of the form(s) to OFM for processing.
- Review and forward requests to open, close, hold/release or update trust accounts/funds to the Office of Fiscal Management-General Operations Section electronically within 5 business days of receipt. Requests may also be submitted in writing with appropriate DCFS staff signature(s).
- Process Overpayment Requests received from social security. Overpayment requests and requests to close trust accounts will be submitted to OFM on the CFS-379 (Closeout/Overpayment Notification) with appropriate documentation.

VII. SERVICES TO SUPPORT FOSTER PARENTS

POLICY (VII-A): FOSTER PARENT TRAINING, APPROVAL, AND RE-EVALUATION

A family foster home is a private residence of one (1) or more family members that receives from a child welfare agency any minor child who is unattended by a parent or guardian in order to provide care, training, education, custody or supervision on a twenty-four (24) hour basis, not to include adoptive homes. The home must meet family foster home standards and the individual child's needs for the duration of the placement. Foster care is a team effort involving DCFS, the family foster parents, the foster child, and the birth/legal parents. When all those directly involved in the situation understand their own and each others' roles and cooperate as team members in a team effort, the quality of the experience for all is increased, and the effect on the child's future well-being is greatly influenced. (See "Family Foster Parent Handbook" (PUB-30) for responsibilities of the Foster Care Team.) The Division shall place children in approved foster homes where the foster parents have satisfactorily completed the Division's pre-service training curriculum, have been cleared through the Central Registry and through a criminal records check. A FBI criminal records check shall be conducted on persons who have not resided in Arkansas continuously for the past five (5) years. An Individualized Training Plan for in-service training shall be developed for each foster parent. The plan shall take into consideration the age and characteristics of children for whom the foster parent is caring and the expressed preferences of the foster parent.

The approval process shall concurrently educate foster parents on the characteristics of children in out-of-home placement and assess their capability to meet those needs and their compliance with the DCFS standards for approval of foster homes. The Division will not approve a foster home where any adult member living in the home is homosexual.

DCFS shall re-evaluate each foster home's ability to care for children at least annually and whenever there is a major life change in the lives of foster families. Foster parents who do not meet the in-service training requirement will be placed on probation for sixty (60) days. No new children receiving out-of-home placement services may be placed during the probation period. Foster parents shall complete their annual in-service training requirements before they receive any additional children receiving out-of-home placement services unless an exception is granted.

There are three types of DCFS foster homes referenced in the CHRIS System: Foster Family Home (Non-Relative), Relative Foster Home (Kinship Only), and Relative Foster Home (Fostering and Kinship).

Kinship foster homes are homes in which adult relatives within the first, second, or third degree of consanguinity to the parent or stepparent are recruited by the Family Service Worker to provide 24 hours per day care for children who are related through blood or marriage. These homes must meet all of the minimum licensing requirements for a family foster home. Relatives who are approved for placement of children in their home may choose to be a kinship foster home or a regular foster home. Kinship foster homes will be approved only for placement of relative children. If the relatives choose to be a regular foster home, they will have the responsibility of caring for relative and non-relative foster children.

There will be no distinction in licensing requirements between kinship foster homes and all other approved foster homes in Arkansas.

Once permanency is achieved for the relative children placed in a kinship family foster home, relatives may choose to become a regular Family Foster Home if they remain in compliance with licensing standards. This will be a decision made by both the relatives and DCFS based on the best interest of the relative children.

Relative foster homes (both “Kinship Only” and “Fostering and Kinship”) are homes in which adult relatives are recruited by the Family Service Worker to provide 24 hours per day care for children who are related to them. These homes must meet all of the minimum licensing requirements for family foster homes. Relatives who are approved for placement of children in their home may choose to be a kinship foster home or a regular foster home. However, the relative foster home (Kinship Only) will be approved only for placement of relative children. The relative foster home (Fostering and Kinship) are those relatives who have decided to be a kinship foster home and a regular foster home, accepting non-relative foster children.

There will be no distinction in licensing requirements between kinship foster homes and all other approved foster homes in Arkansas.

Once permanency is achieved for the relative children placed in a relative foster home (Kinship Only), relatives may choose to become a foster family home (Non-Relative) if they remain in compliance with licensing standards.

DCFS employees are not permitted to be agency approved foster family homes. However, in situations where Division staff are relatives to children placed in DHS custody, and it is in the best interest of the child to be placed with the relative, the DCFS Director may grant approval on a case by case basis.

ROCEDURE (VII-A1): Foster Parent Training

The foster family home (Non-Relative), relative foster home (Kinship Only) and relative foster home (Fostering and Kinship) will:

- Complete the CFS-450 (Foster Home Study/Application) prior to training. Submit the CFS-450 on the first day of training.
- Complete CPR and First Aid Training and receive certification in both areas prior to approval to become a foster parent.
- Complete a minimum of thirty (30) hours of Division-sponsored or Division-approved pre-service training prior to placement of a child.
- Participate in a training needs assessment process to develop a plan for needed training and support at the completion of pre-service training.
- Complete a minimum of fifteen (15) hours of Division-sponsored or Division-approved in-service training annually after the first year of service.

The **Family Service Worker** will:

- Refer to PUB-022 (Standards for Approval of Family Foster Homes) for training requirements.
- Maintain an “Individual Training Record Report” (CFS-6058) for each foster parent.
- Enter the foster parents’ hours of in-service training on the “Evaluation” screen in the “Resource” section of CHRIS. Enter the “Directory” section and find the foster parents’ file in the “Homes” section of their file then enter their hours of in-service training on the “Evaluation” screen.

PROCEDURE (VII-A2): Approval of Foster Home

The **Foster Home Evaluator** will:

- Complete a home study on the family. The home study must address and describe the families' compliance to the standards listed in PUB-022 (Standards for Approval of Family Foster Homes).
- Complete the approval process based upon the Division's "Standards for Approval of Family Foster Homes" (PUB-022).
- Complete the "Foster Care Criminal Record Check" (CFS-342A), and route it to the Division of Children and Family Services Foster Care Unit. The CFS-342A must be completed for each household member age fourteen (14) years and older. The Criminal Record Check will be repeated every five (5) years.
- Request a FBI criminal record check for families who have not resided in Arkansas continuously for the past five (5) years. The state criminal record check must be completed prior to requesting the FBI criminal record check. Forward the FBI print card, with the results of the state criminal record check attached, to the Foster Care Unit for processing.
- Complete the "Request for Child Protective Services Central Registry Check" (CFS-316), and route it to the Division of Children and Family Services Child Protective Services Unit. The CFS-316 must be completed on each household member age ten (10) years and older. The Central Registry Check will be repeated every two (2) years.
- Submit the information to the County Supervisor for review, with a recommendation for approval/denial.

The **County Supervisor** will:

- Enter a disposition as to the approval/denial of the foster home.

The **Family Service Worker** will:

- Enter the approved foster family into CHRIS by identifying them as a Foster Family in the Resource Category field and as one of the following three Resource Types on the General Information screen in the "Resource" section:
 - Foster Family Home (Non-Relative)
 - Relative Foster Home (Kinship Only)
 - Relative Foster Home (Fostering and Kinship)
- Continue completing the following CHRIS "Resource" screens for the new approved foster family home:
 - General Information Screen
 - Assign/Transfer Screen
 - Status (Availability and Home Study sections)
 - Homes:
 - Inquiry
 - Household Members

- Household Composition
- Contact Persons
- Services Admission Criteria

- Monitor the foster home on a quarterly basis for compliance with Division standards, if approved.

- Develop and maintain a record for each foster family home that contains all information and documentation required by PUB-004 (Minimum Licensing Standards for Child Welfare Agencies). The case record order shall reflect the order in Appendix VI.

PROCEDURE (VII-A3): Re-evaluation of the Foster Home

The **Foster Home Evaluator** will:

- Complete the “Family Foster Parent Re-evaluation” (CFS-451).
- Re-evaluate the foster home annually.
- Re-evaluate the foster home whenever there is a major life change in the life of the foster family such as:
 - death or serious illness among the members of the foster family
 - separation or divorce
 - loss of or change in employment
 - change in residence
 - suspected child maltreatment of any child in the foster home
 - the addition of family members
 - foster parents’ annual in-service training requirements are more than sixty (60) calendar days overdue.
- Document in the foster home record that the foster parent(s) maintained current certification in both CPR and First Aid.
- Request an exception for any foster parent whose annual in-service training hours are sixty (60) calendar days overdue, if appropriate.

The **County Supervisor** will:

- Review the CFS-451.
- Enter a disposition as to the continued approval of the home.

The **Area Manager** will:

- Receive the request for exception to in-service training requirements.
- Review the quality of care provided by foster families and the reasons for overdue training.

- Determine whether to grant an exception to the in-service training requirement for up to sixty (60) calendar days.

POLICY (VII-B): PROVIDING INFORMATION TO FOSTER PARENTS

Foster parents shall be considered as team members working with other child welfare professionals for the family. Complete information, such as a child's health, reasons for entering care, siblings, and probable length of placement, shall be provided to foster parents at the time of placement. The child's social security number may be given to the foster parents, only if the foster parent must have the number to obtain services, care or treatment for the child. Some examples would be to enroll the child in school or to obtain medical treatment for a child who is not Medicaid eligible, when treatment is needed. The foster parent must keep the child's social security number confidential and use the social security number only for an allowable purpose. Additional information shall be shared promptly with the foster parents.

The court shall allow foster parents an opportunity to be heard in any review or hearing held with respect to a child in their care. Foster parents shall not be made a party to such review or hearing solely on the basis that such persons are entitled to notice and the opportunity to be heard.

Foster parents are allowed to receive a copy of substantiated child maltreatment report for the child in their care.

PROCEDURE (VII-B1): Providing Information to Foster Parents

The **Family Service Worker** will:

- Provide foster parents with copies of the "Case Plan" (CFS-6010), "Health Services Plan" (CFS-368) and "Placement Plan-Placement Plan Provider Information Report" (CFS-6007) within five (5) calendar days of completion or revision.
- Provide the foster parent with the child's social security number, when it is required, to obtain services, care, or treatment for the child.
- Provide any additional information as it becomes available.
- Submit the "Notification of Court Appearance" (CFS-343) to foster parents within ten (10) calendar days of any review hearing to be held with respect to a child in their care. Send the CFS-343 through certified mail for all Permanency Planning Hearings.
- Provide the foster parent with a copy of a substantiated child maltreatment report on the child in their care, if requested.

The **Foster Parents** will:

- Maintain the information shared as confidential.

POLICY (VII-C): SUPERVISION OF CHILDREN IN OUT-OF-HOME PLACEMENT

Children in out-of-home placement will be visited regularly and such visits will take place no less than weekly. The purpose of these visits shall be:

- to keep open communication with the age-appropriate child;
- to assess the quality of the care being provided;

- to determine the extent to which the child's developmental, medical, intellectual, and emotional needs are being met; and
- to assess the child's adjustment to the out-of-home placement, foster parents, other persons in the home, and school.

Weekly visits will occur in the foster home and include a private conversation with the age-appropriate child to assess the quality of care being provided.

The Division shall notify the child's family, the OCC Attorney, Child Abuse Hotline and the Attorney ad litem if the child is the subject of an allegation of child maltreatment. If the alleged child maltreatment occurred in the out-of-home placement, the Attorneys ad litem for all other children placed in the home shall be notified. The information obtained during the investigation /interview will determine whether the involved children or other children in the out-of-home placement will be removed pending a final outcome of the investigation. If the alleged child maltreatment occurred and the foster family can correct the problem which resulted in the child maltreatment, a corrective action plan may be established with the foster family. However, the safety of the children will be the first consideration and the Division may close a foster home with a true determination of child maltreatment without a corrective action plan.

PROCEDURE(VII-C1): Supervision of Children in Out-of-Home Placement

The Family Service Worker will:

- Visit with the child at least once a week in the out-of-home placement.
- Document deviation for less frequent visits and obtain supervisory approval.
- Obtain approval of the Area Manager when the deviation is due to staff shortages.
- Notify the child's parents, the OCC Attorney and Attorney ad litem immediately if the child is the subject of an allegation of child maltreatment. Report to the Child Abuse Hotline immediately.
- Follow up immediate notification by forwarding a copy of the CFS-310 (Notice of Child Maltreatment Allegation) to the child's parent (s) and Attorney ad litem whenever the child is the victim or offender named in an allegation of child maltreatment.
- Notify Attorneys ad litem, via the CFS-310, for all other children placed in the out-of-home placement if the allegation is in connection with the foster home.
- If there is an allegation of sexual abuse perpetrated by a foster child, a public defender will be assigned to the child. The investigating agency (CACD) will provide notice of the investigative determination to the juvenile, the juvenile's parents and the public defender who represented the child during the investigation via the CFS-312 (Child Maltreatment Assessment Determination). The CFS-312 must be forwarded to the Juvenile Division of the Circuit Court if there is a true finding of sexual abuse perpetrated by a child under the jurisdiction of the court.

POLICY (VII-D): CHANGES IN OUT-OF-HOME PLACEMENT

The Division recognizes the importance of providing a stable placement for children in out-of-home placement. Family preservation services shall be utilized if necessary to address problems in the out-of-home placement in order to prevent disruption.

Changes in placement shall be made only after notification to the age-appropriate child, foster parent, the court, the OCC Attorney, Attorney ad litem, and the child's family. Notices shall be sent in writing two (2) weeks prior to the proposed change. The notice shall:

- specify reasons for the proposed change,
- provide to the Attorney ad litem the address of the proposed new out-of-home placement, and

- provide to the child the name and telephone number of the Attorney ad litem.

The age-appropriate child will be notified of the right to appeal the change and to request assistance from the Attorney ad litem. Pre-placement visits shall be conducted when possible before a change in placement. Exceptions to the advance notice requirement shall be made if the child's health or safety would be endangered by delaying a change in placement.

The Medicaid Eligibility Unit will be notified concerning changes in the child's out-of-home placement. This includes situations wherein the child remains in foster care but is moved from one out-of-home placement to another; has returned home; been placed at a DYS facility, placed with a relative (non-kinship care), on runaway status, or on a trial home visit, etc. The child's IV-E Medicaid eligibility will continue as long as the child is IV-E eligible, this includes maintaining Medicaid eligibility while the child is on a trial home visit. The child's Medicaid case will close the date the child's foster care case is closed.

At the closure of all out-of-home placement cases discharge planning must be conducted to ensure the health and safety of the child at case closure. The health and safety assessment and risk assessment are tools to be used in determining case closure. Discharge planning must be done at the staffing to close the case. Minimum licensing standards require that a discharge summary be completed on each child and a copy given to the child's parents if the Division has not been granted TPR (Termination of Parental Rights) by the court. A copy of the discharge must become a part of the child's case file.

PROCEDURE (VII-D1): Changes in Out-of-Home Placement

The Family Service Worker will:

- Provide written notice to the age-appropriate child, the foster parents, OCC, the court, the Attorney ad litem, and the child's family of any changes in placement two (2) weeks prior to the change.
- Select the Out-of-Home Placement that best fits the needs of the child. A child who has been identified as an EXEMPTED FROM FINDING UNDER AGE JUVENILE AGGRESSOR OR SEXUAL OFFENDER must not be placed in a foster home with other children, unless the child's therapist feels that the child is no longer a danger to other children. Proper documentation of this will be contained in the child's hard copy file. If the recommended
- placement is a facility, the facility must receive information regarding the allegations. This must be documented in the Recommend Placement screen.
- Arrange for a pre-placement visit.
- Provide new address to Attorney ad litem.
- Inform age-appropriate child of the right to appeal a change in placement.
- Request an exception to advance notice if an emergency exists.
- Notify the Attorney ad litem, the OCC Attorney, the court, the foster parent and the child's family within twenty-four (24) hours in the event of emergency removal.
- Submit the "Notification of Change" (CFS-495) to the Foster Care/Medicaid Eligibility Unit within 10 days of change in placement.
- Update child placement information in CHRIS.

POLICY (VII-E): FINANCIAL SUPPORT TO FOSTER PARENTS

The Division shall provide foster parents with a monthly board payment for each child receiving out-of-home placement services to aid in the basic expenses of room and board, clothing, school and personal needs. When foster parents are caring for a child with special needs and the child’s needs can not be met with the regular board payment, the Division may provide the foster parents with an additional payment to cover the extra expenses incurred. The amount of these higher, special board rates will be based on the nature and extent of the child’s special needs. The amount of this additional monthly payment will not exceed \$460.00 above the standard board rate for the child’s age group. A special board rate is approved for a specific placement and need and will be periodically reviewed and adjusted. A change in placement will require a new request and review.

PROCEDURE (VII-E1): Financial Support to Foster Parents

Foster parents shall receive a monthly board rate according to the following chart:

Birth through 5 years	\$400.00 Monthly
Board and Care	345.00
Clothing	40.00
Personal Needs	15.00
6 through 11 years	\$425.00 Monthly
Board and Care	355.00
Clothing	45.00
School and Personal Needs	25.00
12 through 14 years	\$450.00 Monthly
Board and Care	365.00
Clothing	55.00
School and Personal Needs	30.00
15 through 17 years	\$475.00 Monthly
Board and Care	375.00
Clothing	65.00
School and Personal Needs	35.00

PROCEDURE (VII-E2): Requesting a Special Board Rate

The Family Service Worker will:

- Check documentation of the child’s special need(s) and the additional activities required of the foster parents to meet the need(s).
- Complete the “Justification For Special Board Rate” (CFS-304) by determining the level of care needed in each of the three need categories, and adding the three levels.
- Submit the request for a special board rate with documentation attached to the County Supervisor for review and recommendation.

- Once approved, review the continuing need for the request on a quarterly basis and, if appropriate, resubmit for re-evaluation by the County Supervisor and the Area Manager.

The County Supervisor will :

- Review the request for completeness and appropriateness and recommend approval or disapproval within 3 working days of receipt.
- If approved, forward the request to the Area Manager for review and approval or disapproval.
- If disapproved, forward the request with a recommendation for disapproval to the Area Manager for review and action as appropriate.
- Once approved, review the continuing need for the request and, if appropriate, resubmit the request on a quarterly basis for re-evaluation by the Area Manager.
- Inform the foster parent in writing of the ultimate approval or disapproval of the request and the reason for that decision, noting that approval is only for 90 days and the documentation of continuing need must be reviewed quarterly.

The Area Manager will :

- Receive requests from the County Supervisor.
- Review the request for completeness and appropriateness, consider the County Supervisor's recommendation and either approve or disapprove the request within three (3) working days.
- Refer the request to the Foster Care Unit Manager for a second-party review if the Area Manager can not decide on approval or disapproval.
- Inform the requesting County Supervisor of the request's disposition and reasons for approval, disapproval, or referral to the Foster Care Unit Manager.
- Once approved, assure that the special board rate is reevaluated on a quarterly basis for continued appropriateness.
- Maintain a file for each approved special board rate. The file should contain the requesting memo, supporting documentation, Justification of Special Board Rate (CFS-304), Notification of approval memo, and a printout of the computer entry of the special board rate.
- Maintain a log of special board rate approvals including the following column headings: Child's Name, Case Number, County, Effective Date, Termination Date, Rate, and Reason.

The Foster Care Unit Manager will :

- Review any request referred by an Area Manager, and either approve or disapprove it.
- Return the request to the Area Manager for action as appropriate.

If the special board rate is approved, the following CHRIS procedures will be taken by the Family Service Worker and Area Manager:

The Family Service Worker will:

- Request a special board rate (e.g., Level 4) on the Difficulty of Care screen and will write a brief justification in the comment field.

- Key the date the special board rate is to begin and the amount above the standard board rate into the amount field.
- Make the request by pressing the add button, which will make approval available.
- Press “Request” and click “OK”, which sends the request to the Area Manager’s inbox for approval.

The Area Manager will click approval.

POLICY (VII-F): DAY CARE FOR CHILDREN IN OUT-OF- HOME PLACEMENT

Day care for children may be provided as a part of an out-of-home placement case to provide assistance to foster parents when circumstances exist for child care, e.g., training, transporting a foster child for medical purposes, etc., or if both foster parents work.

PROCEDURE (VII-F1): Day Care for Children in Out-of-Home Placement

The **Family Service Worker** will:

- Assist foster parents to obtain child care when such help is needed, for instance, when the foster parents are required to obtain training, or for the foster parents’ children when transporting the child in out-of-home placement to services is reimbursable. This transportation is payable via DHS-1914. All other requests must receive prior approval from the Area Manager.
- See Procedure (V-D1): Day Care for Children. Notify the Division of Child Care and Early childhood Education (DCCECE) and the child care facility of changes in child care, when payment is through DCC.

VIII. SERVICES TO PROVIDE OTHER PERMANENT LIVING SITUATIONS

POLICY (VIII-A): PREPARING THE CHILD IN OUT-OF-HOME PLACEMENT FOR INDEPENDENCE

Each child in DHS custody, age fourteen or older, for whom the goal is not reunification shall be provided with instruction for development of basic life skills.

Each child, age sixteen or older, shall be assessed every six (6) months to determine the progress in acquiring basic life skills. DCFS shall provide those services identified in the assessment that are necessary to help the child achieve independence, either directly or through contract.

Each foster parent caring for, or interested in caring for, a child age fourteen or older, and each Family Service Worker responsible for any children, age fourteen or older, shall receive training in helping children acquire basic life skills.

PROCEDURE (VIII-A1): Preparing the Child in Out-Of-Home Placement for Independence

The Family Service Worker will:

- Arrange for instruction to each child in out-of-home placement, age fourteen or older, for whom the goal is not reunification, in the development of basic life skills.
- Include instructions in at least the following topics:
 - health care
 - securing and maintaining housing
 - purchasing and preparing food
 - purchasing and caring for clothing
 - securing transportation
 - managing money
 - obtaining and maintaining employment
 - accessing community resources
- Assess each child in out-of-home placement, age sixteen or older, to determine the level of basic life skills every six (6) months, and complete the Independent Living "IL" screen in the "Case Plan" section of CHRIS.
- Update the child's CHRIS file for Independent Living Information and life-skills training sessions.

- Inform each child in out-of-home placement, age sixteen or older, of the Independent Living Grant Program.
- Discuss with the child the reasons the child is in Out-of-Home Placement and the child's plan for leaving Out-of-Home Placement and for maintaining relationships with family and social support systems.

**POLICY (VIII-B): INDEPENDENT LIVING PROGRAM (ILP)
FOR CHILDREN RECEIVING OUT-OF-HOME PLACEMENT
SERVICES**

The Division of Children and Family Services administers the Independent Living Program (ILP). If approved, a youth participating in the Independent Living Grant Program may request to move into the child's own place of residence.

**PROCEDURE (VIII-B1): Independent Living Program for Children
Receiving Out -of-Home Placement Services**

Youth considered for participation in the Independent Living Grant Program must meet the following requirements:

- In DCFS Out-of-Home Placement.
- Have a case goal of independence.
- At least sixteen years of age but not yet eighteen. Eligibility may be extended through age twenty if a participating youth is engaged in a course of study which is to be completed within that time.
- Volunteer to participate in the IL Program and sign an agreement to do so.
- Engaged in an educational program (public or private school, pursuit of GED, vocational-technical school, rehabilitative training, Job Corps, etc.).

The **Family Service Worker** will:

- Approve and refer eligible youth for participation in the Independent Living Grant Program. The youth must acknowledge and sign the referral.
- Schedule training sessions based on the youth's needs and transition plan. Specific areas of training may include:
 - money management
 - vocational and career planning
 - legal rights and responsibilities
 - sex education and family planning
 - alcohol and drug abuse prevention

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- homemaking skills
 - family counseling
 - Initiate requests for funding approval for Independent Living Program funds on the DHS Requisition form (DHS -1914) and send to the area ILP coordinator for approval and forwarding to the Central Office.
 - Prepare a concise report of all the services provided to a youth while in the Independent Living Program. Route the report to the Independent Living Unit within ninety (90) days after a youth leaves the program. Place a copy in the permanent case file.
 - Participation in the Independent Living Grant Program will end when the youth has:
 - Left Out-of-Home Placement.
 - Reached the 21st birthday.
 - Achieved independence to the extent that financial support and social services are no longer needed.
 - Made a voluntary decision to no longer participate in the program, or
 - Demonstrated unwillingness or inability to meet the requirements of the program and the terms of the agreement established in the case plan.

PROCEDURE (VIII-B2): Establishing Independent Living Residence for Children Receiving Out-of-Home Placement Services

Examples of independent living residences include boarding houses, apartments or residences for men and women operated by church or civic groups. Expenses for the residence cannot be paid with Independent Living Grant Program funds.

The **Youth** will:

- Choose a sponsor, subject to DCFS approval, who may be the youth's out-of-home provider, Attorney ad litem, apartment manager/owner or a volunteer from the community.

The **Family Service Worker** will:

- Schedule a staffing to review ILP youth's request to establish an independent living residence. Staffing participants will include youth, IL Coordinator, FSW, foster parent, sponsor and DCFS supervisor.
- Approve the sponsor chosen by the youth.
- Revise the youth's participation agreement to include IL residence requirements.
- Determine who will serve as the payee for the youth.
- Request funding approval for the youth to participate in the Independent Living Residence Program on the Requisition form (DHS-1914) and submit the DHS-1914 to the Independent Living Unit.

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- Determine and document on the “Independent Youth’s Residence Checklist” (CFS-370) that the independent living residence selected meets minimum requirements.
 - Initiate the youth’s monthly board payments when in an independent living residence. Board payment for youth in college/higher education may be raised to a maximum of \$630 per month based on documented need.
 - Develop a monthly budget with the youth.
 - Visit, or authorize the Family Support Specialist to visit, the youth at least twice monthly, or
 - Obtain approval for less than twice-monthly visits from the County Supervisor.
 - Maintain monthly contacts with the ILP sponsor. Contacts may be by telephone.

The **Youth’s sponsor** will:

- Attend all staffings.
- Assist the youth in selecting the independent living residence.
- Visit the youth at least twice monthly.
- Notify the Family Service Worker of any problems detected during the visit.

POLICY (VIII-C): TERMINATION OF PARENTAL RIGHTS

All children have a right to a safe, permanent family. The Division of Children and Family Services shall develop and implement permanency plans for children. One option is to

terminate parental rights to free a child for adoptive placement, when it has been determined that reunification with the family is not a viable option.

The court shall authorize DHS to file a petition to terminate parental rights unless the: (a) The child is being cared for by a relative and termination of parental rights is not in the best interest of the child; (b) DHS has documented in the case plan a compelling reason why filing such a petition is not in the best interest of the child and the court approves the compelling reason as documented in the case plan; or (c) DHS has not provided to the family of the child, consistent with the time period in the case plan, such services as DHS deemed necessary for the safe return of the child to the child's home if reunification services were required to be made to the family.

The Division will file a petition to terminate parental rights in the following circumstances:

- A child (of any age) has been in an out-of-home placement for 15 of the most recent 22 months; A hearing shall be held to determine whether or not DHS shall file a petition to terminate parental rights before the end of the fifteenth (15th) month if:
 - (a) The child has been in out-of-of-home placement for fifteen (15) continuous months; and
 - (b) At the permanency planning hearing, the court continued the goal of reunification or entered a goal of independence. Trial visits with the parents and time spent on runaway status shall not count in adding up fifteen (15) months.
- If the court determines no reunification services are required refer to Policy VI-A. If a juvenile is the subject of an open case filed under the Arkansas Juvenile Code, OCC will file all subsequent petitions (i.e., termination of parental rights, adoption, guardianship) in that same juvenile court and case.

If the court adopts the goal of termination of parental rights, the Department shall file a petition to terminate parental rights within thirty (30) days from the date of the entry of the order establishing such goal.

If the court finds that the child should remain in an out-of-home placement, either long-term or otherwise, the child's case shall be reviewed every six (6) months, with an annual permanency planning hearing.

Additionally, if the child has been in an out-of-home placement 15 of the last 22 months, and a termination petition has been filed by another party, the Division will seek to join the petition. Concurrent with the filing of a termination petition, the Division will identify, recruit, process and approve a qualified family for adoption.

PROCEDURE (VIII-C1): DCFS Initiates Termination of Parental Rights

The Family Service Worker will:

- Consult the OCC Attorney to determine if legal grounds exist for disposition recommendation of termination of parental rights. See Appendix IV, Ark. Code Ann. § 9-27-341 (b).
- Schedule and conduct a permanency planning staffing prior to the permanency planning hearing to determine if continuing contact with the birth/legal parent(s) or putative parent could cause harm to the child and to determine the likelihood that the child will be adopted if the termination petition is granted. Those invited to participate in the staffing are the birth/legal parent, attorney for the parent, age-appropriate child, OCC Attorney, County Supervisor, Adoption Specialist, Attorney ad litem, and foster parents.
- Obtain written consent of the Area Manager, if applicable.

- Prepare a Permanency Planning Court Report (CFS-6024) and submit it to the OCC Attorney at least seven (7) working days before the Permanency Planning Hearing.
- Work with the OCC Attorney to file a petition to terminate parental rights.
- Work with the OCC Attorney to prepare for termination of parental rights hearing within thirty (30) days from the date of the entry of the court order.
- Provide the OCC Attorney with information on the CFS-408 (Federal Parent Locator System Information) regarding the birth/legal parent(s) or putative parent so that notice of the termination petition can be provided.
- Provide the OCC Attorney with the name and address of any grandparent who is entitled to notice based on the conditions listed in Procedure II-E10.
- Refer to Policy VIII-F or VIII-G if termination of parental rights with power to consent to adoption is granted.

The **Adoption Specialist** will:

- Participate in the staffing if adoption is to be considered as a permanent plan for a child.
- Work with the OCC Attorney to prepare for the termination of parental rights hearing.
- Refer to Policy VIII-F or VIII-G if termination of parental rights with power to consent to adoption is granted.

PROCEDURE (VIII-C2): Court Initiates Termination of Parental Rights

Sometimes the court will determine that the goal should be termination of parental rights when it is not the recommendation of DHS. In these instances the following procedures will apply.

The **Family Service Worker** will:

- Work with the OCC Attorney to file a petition to terminate parental rights within thirty (30) days from the date of the entry of the court order.
- Notify the Area Manager in writing with a copy of the order attached.
- Consult the County Supervisor and OCC Attorney immediately if the order should be appealed or if a rehearing is appropriate.
- Work with OCC Attorney to prepare for termination of parental rights hearing.
- Schedule and conduct a staffing, if applicable, to determine if continuing contact with the birth/legal parent(s) or putative parent could cause harm to the child and to determine the likelihood that the child will be adopted if the termination petition is granted. Those invited to participate in the staffing are the birth/legal parent, attorney for the parent, age-appropriate child, OCC Attorney, County Supervisor, Adoption Specialist, Attorney ad litem and foster parents.
- Provide the OCC Attorney with the name and address of any grandparent who is entitled to notice based on the conditions listed in Procedure II-E10.

- Provide the OCC Attorney with the name and last known address of a birth/legal parent(s) or putative parent(s) so that notice of the termination petition can be provided.
- Refer to Policy VIII-F or VIII-G if termination of parental rights with power to consent to adoption is granted.

PROCEDURE (VIII-C3): Birth/Legal Parent Requests Termination of Parental Rights

When parents want to relinquish custody to DHS and free a child for a permanent placement (refer to Policy VIII-E), the Family Service Worker or the Adoption Specialist (for unborn or newborn infants only) will:

- Discuss service options and offer services to maintain the family unit.
- Read to the parent the section of the consent form that explains the right to withdraw consent to termination of parental rights form.
 - The consent to terminate parental rights shall state the person has the right to withdraw consent, within ten (10) calendar days from the signature date, by filing an affidavit with the clerk of the juvenile court in the county designated by the consent as the county in which the termination of parental rights will be filed, and providing the address of the juvenile court clerk of the county in which the termination of parental rights will be filed.
 - The Family Service Worker will assist the parent in filing the affidavit to withdraw parental consent.
 - If the ten-day period ends on a weekend or legal holiday, the parent may file the affidavit the next working day. No fee shall be charged for the filing of the affidavit.
- Notify OCC Attorney.

If the parents still wish to relinquish custody to DHS (refer to Policy VIII-E) after efforts to preserve the family have been offered, the Family Service Worker or the Adoption Specialist (for unborn or newborn infants only), will:

- Present a “Waiver and Consent to the Appointment of a Guardian” (CFS-410) to the parents and explain the form.
- Notify County Supervisor in writing if parents sign CFS-410, with a copy attached.
- Notify OCC Attorney in writing with the original CFS-410 attached.
- Schedule and conduct a staffing, if applicable, to determine if continuing contact with the birth/legal parent(s) or putative parent could cause harm to the child and to determine the likelihood that the child will be adopted if the termination petition is granted. Those invited to participate in the staffing are the birth/legal parent, attorney for the parent, age-appropriate child, OCC Attorney, County Supervisor, Adoption Specialist, Attorney ad litem and foster parents.
- Obtain written consent of the Area Manager, if applicable.
- Work with the OCC Attorney to prepare for termination of parental rights hearing.

- Provide the OCC Attorney with the name and last known address of a birth/legal parent(s) or putative parent(s) so that notice of the termination petition can be provided.
- Refer to Policy VIII-F or VIII-G if termination of parental rights with power to consent to adoption is granted.

POLICY (VIII-D): DECISIONS INVOLVING CHILDREN IN DHS CUSTODY WITH PARENTAL RIGHTS TERMINATED

The Department of Human Services has designated the County Supervisor, (or the Adoption Supervisor if the child has been placed with an adoptive family), as having the authority to give consent for major decisions for children whose parental rights have been terminated.

PROCEDURE (VIII-D1): Decisions Involving Children in DHS Custody with Parental Rights Terminated

The **County Supervisor**, or the **Adoption Supervisor** if the child has been placed with an adoptive family, must:

- Give written consents in the following decisions involving children in DHS custody with parental rights terminated:
 - Goal Changes in the “Case Plan” (CFS-6010)
 - Marriage, if appropriate
 - Driver’s license issuance
 - Entry into the Armed Forces
 - Travel inside or outside the United States
 - Retention of child in school grade
 - Expenditure of child’s funds
 - Birth control
 - Media release
 - Major medical consents

The Manager, Adoption Services Unit, will give written consent to all adoptions.

PROCEDURE (VIII-D2): Financial Benefits

The **Family Service Worker**, or the **Adoption Specialist**, (if the child has been placed with an adoptive family), will:

- Work with appropriate DHS financial staff if the Department is to be made the payee of proceeds or if payee changes.

PROCEDURE (VIII-D3): Incidents/Accidents

The **Family Service Worker**, or the **Adoption Specialist**, (if a child has been placed with an adoptive family) , will:

- Complete and route to the Supervisor an “Incident Report” (DHS-1910), when appropriate, for incidents/events involving a child in DHS custody with parental rights terminated.
- Complete DFA form “Safety Responsibility” (SR-1) when the child is involved in a motor vehicle accident. Send a copy of the SR-1 to the OCC Attorney.

PROCEDURE (VIII-D4): Travel

The **Family Service Worker**, or the **Adoption Specialist**, (if child has been placed with an adoptive family), will:

- Provide written consent from the Supervisor to the adult with whom the child is traveling.
- Provide information on how to reach the Family Service Worker or Adoption Specialist in an emergency.

PROCEDURE (VIII-D5): Arrest of Child

The **Family Service Worker**, or the **Adoption Specialist**, (if the child has been placed with an adoptive family), will:

- Notify the Supervisor and the OCC Attorney when a child is arrested.
- Learn where the child is being held, the place and time of hearings, and inform the Area Manager, Manager of Adoption Services Unit, if the child is placed for adoption, OCC Attorney, and the Attorney ad litem immediately of the information.
- Assist in obtaining legal counsel for the child if applicable.
- Determine that the child understands his or her legal rights.
- If appropriate, attempt to have the child released on bond or to the foster parents, adoptive parents, or a therapeutic environment consistent with the child’s needs.
- Attend all hearings with the child.
- Visit the child weekly while incarcerated to ascertain the child’s well being.
- Provide adequate personal care items.
- Prepare and route an “Incident Report” (DHS-1910).
- Submit the “Notification of Change” (CFS-495) to the Foster Care/Medicaid Eligibility Unit within 10 days of arrest.

PROCEDURE (VIII-D6): Education

The **Family Service Worker**, or the **Adoption Specialist**, (if the child has been placed with an adoptive family), will:

- Notify the school principal in writing to request that a surrogate parent be appointed for a child who receives special education if one has not been previously appointed.
- Contact the Education Liaison, Community Services, State Office, prior to placement of a child out-of-state, if the child receives special education, to assure appropriate compliance to procedures and law.
- Notify the Supervisor of problems identified at school conferences.
- Notify the Supervisor when a child is expelled or suspended and if the needs of a child receiving special education are not being met to determine if a due process hearing should be requested.
- Participate in Individual Education Plan (IEP) conferences.
- Consult with the Education Liaison, Community Services, State Office, about a child who receives special education services if problems or questions arise.

PROCEDURE (VIII-D7): Stand-by Guardianship

Stand-by Guardianship is a legal mechanism which allows a parent who is chronically ill or near death to appoint a guardian for the parent's minor children. The guardianship will prevent children from coming into Out-of-Home Placement at a later date when the parent becomes unable to care for the children.

The **guardian's** authority will take effect:

- Upon the death of the parent;
- Upon the mental incapacity of the parent; or
- Upon the physical debilitation of the parent with the parent's consent.

Referrals should be made to legal services for the preparation of a guardianship. This is NOT a function of the OCC.

PROCEDURE (VIII-D8): Disabled Children Approaching Adulthood in Need of a Guardian

The **Family Service Worker** will:

- **Find** a responsible person who will accept guardianship by contacting contracted agencies whose purpose is to find a guardian.
- Contact the OCC Attorney for specific procedures to establish guardianship.

PROCEDURE (VIII-D9): Discharge of Guardianship for Children Placed in Guardianship of DHS

The **Family Service Worker**, or the **Adoption Specialist** (if the child has been placed with an adoptive family), will:

- Schedule and conduct a staffing.
- Notify OCC Attorney to take action to discharge guardianship.

POLICY (VIII-E): BIRTH PARENTS RELINQUISHING INFANTS FOR ADOPTION

The Division shall provide services to birth/legal parents who are planning to relinquish infants for adoption or who have relinquished their infant to a medical provider or law enforcement agency under the provisions of the Safe Haven Act.

The Safe Haven Act allows a parent of a child who is 30 days old or younger to voluntarily leave or deliver the child to a medical provider or law enforcement agency. Although the statute does not require a court order, DHS will petition the court for an order of emergency custody. The parent must not express any intent to return for the child. DHS takes custody of the child.

PROCEDURE (VIII-E1): Birth Parents Relinquishing Infants for Adoption

The **Family Service Worker** will:

- Refer birth/legal parents planning to relinquish an expected infant for adoption to the Adoption Specialist.

The **Adoption Specialist** will:

- Complete an Intake Study and the “Biological Family Background Information” (CFS-456) through one or more face-to-face interviews with parents within two (2) weeks of referral. If the parent is under 18 years of age and so desires, involve a relative or concerned advocate in the intake interview. Document the Intake Study if the parent is unavailable, uncooperative, etc.

The Intake Study will include the following information on the birth mother, legal father, and/or putative father:

- Personal information (names, birth dates, sex, race, marital status and religion of each parent and their parents, siblings, other children of either parent, social security numbers and address of each parent).
- Specific problems and needs.
- Assessment of the family’s strengths and relationships and relevant social, economic and cultural circumstances pertinent to placement.
- Reasons for placement of the child and attitudes of parents toward relinquishment.

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- Available physical, developmental, educational and occupational history of parents and other members of the family.
 - Available medical and psychological history of each member of the family.
 - Assessment of alternatives to adoptive placement and description of services which have been provided to the family and child in order to preserve and strengthen the family.
 - Assessment of the effect of placement on the parents and other family members.
 - Parents' short and long range goals of the placement.
 - Summary of contacts between parents and DCFS to include date, location, purpose, and results of contact.
 - Help parents understand their retained legal rights and obligations and those designated to DCFS by the court. Provide this information to parents in clear, simple writing. Document these actions in the Intake Study and how the information is understood by the parents.
 - Obtain an affidavit of paternity. Advise the putative father of the Putative Father's Registry at the Department of Health. Document in the Intake Study.
 - Comply with the Indian Child Welfare Act if there is Indian ancestry in either parent's family.
 - Develop a "Case Plan" (CFS-6010) with the birth/legal parents, preferably prior to the infant's birth, which will address:
 - counseling services;
 - health services;
 - post-placement services;
 - Give "Adoption Information Registry Guide" (PUB-113) and "Choices-Adoption is an Option" (PUB-043) to all parents receiving adoption services. Document in the Intake Study.
 - Assist mother in applying for Medicaid for her medical expenses. If ineligible for Medicaid, refer the mother to the private licensed adoption agencies.
 - Apply for Medicaid for the infant as soon as possible after birth.
 - Advise medical providers not to bill the parents for the infant's medical expenses if the parent relinquishes parental rights. Give provider a copy of the custody order.
 - Notify medical providers of the infant's Medicaid number when approved.
 - Give parents a blank "Waiver and Consent to the Appointment of a Guardian" (CFS-410) before birth.
 - Contact OCC Attorney to make arrangements for the appointment of an Attorney ad litem for a minor birth mother and the minor father if he is the legal father of the infant.

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- Wait at least twenty-four (24) hours after the infant's birth, and until the mother is lucid, to present CFS-410 for signature. Explain her right to withdraw her consent within ten (10) calendar days for the signature date.
 - Obtain legal father's signature on the CFS-410/2. Explain his right to withdraw consent within ten (10) calendar days from the signature date.
 - Obtain signature of minor birth mother's Attorney ad litem on the CFS-410 if in agreement with the adoption. Obtain signature of minor birth father's Attorney ad litem on the CFS-410 if the minor is the legal father.
 - Advise OCC Attorney if the minor mother's parents do not agree with the adoption.
 - Route the signed, notarized CFS-410s to the OCC Attorney to start termination of parental rights proceedings.
 - Notify OCC Attorney immediately if the birth mother or legal father revokes her/his consent during the days allowed by law.
 - Name the infant if the mother does not and advise the hospital of the infant's name.
 - Advise the hospital staff of parents' wishes concerning contact with the infant.
 - Prepare an adoption packet about the infant (See Appendix II-A, II-B, Policy VIII-G7).
 - Contact parents at least once during ten (10) day revocation period.
 - Contact parents monthly for at least six (6) months.
 - Maintain a record of parents who request to relinquish an infant for adoption to include:
 - personal information including medical history;
 - social history;
 - copy of the Intake Study;
 - strengths and needs of the parents and the services required;
 - Adoption Specialist's assessment and initial case plan;
 - signed documents between DCFS and the parents;
 - summary of dates of contact and progress toward goals;
 - case review reports;
 - discharge summary;
 - Select an adoptive family (Policy VIII-G).
 - Maintain a record of denials of application for services and reasons for denial.

PROCEDURE (VIII-E2): Voluntary Delivery of an Infant under the Provisions of the Safe Haven Act

Any medical provider or law enforcement agency shall, without a court order,

- Take possession (72 hour hold) of a child who is:
 - Thirty (30) days old or younger, and
 - Left with or voluntarily delivered to them by the child's parent, who does not express an intent to return for the child.
- Perform any act necessary to protect the physical health and safety of the child.
- Immediately notify the Division of Children and Family Services.

The Family Service Worker will:

- Notify OCC immediately upon taking possession of such a child.
- Refer the birth/legal parents of the relinquished infant for adoption to the Adoption Specialist.

The Adoption Specialist will:

- Carry out the same actions as those listed for the Adoption Specialist in Procedure VIII-E1.

POLICY (VIII-F): FOSTER PARENT, KINSHIP FOSTER PARENT, AND RELATIVE ADOPTION

The Division supports adoption by a foster parent or kinship foster parent, who has a well established relationship with the child in their care and who expresses an interest in adoption, without regard to any racial or ethnic differences if such a placement is in the best interest of the child. The Division also supports adoption by a relative, who is not presently caring for the child and who expresses an interest in adoption if such a placement is in the best interest of the child.

The Division shall provide to foster parents and pre-adoptive parents of a child in Department custody, notice of any review or hearing to be held with respect to the child. Relative caregivers shall be provided notice by the original petitioner in the juvenile matter. The Court shall allow foster parents, pre-adoptive parents and relative caregivers an opportunity to be heard in any review or hearing held with respect to a child in their care. Foster parents, adoptive parents, and relative caregivers shall not be made a party to such review or hearing solely on the basis that such persons are entitled to notice and the opportunity to be heard. Families are identified as pre-adoptive once a child is placed in the home and prior to the finalization of the adoption.

PROCEDURE (VIII-F1): Staffing and Recommendations

The Family Service Worker will:

- Notify the Adoption Specialist in writing within two (2) working days of the court hearing that termination of parental rights with power to consent to adoption has been granted.
- Determine if the foster parent, kinship foster parent, or a relative is interested in adopting the child if parental rights have been terminated.
- Submit the “Notification of Court Appearance” (CFS-343) to all parties entitled to notice within ten (10) calendar days of any review hearing to be held with respect to a child in their care. Send the CFS-343 through certified mail for all Permanency Planning Hearings.
- Present a “Request for Consideration to Adopt” (CFS-489) to the foster parent, kinship foster parent or relative if interested in adopting the child.
- Consider the health and safety of the child.
- Schedule and conduct a staffing within ten (10) working days from the court hearing that terminates parental rights, being sure to include the Adoption Specialist, foster parent, kinship foster parent, relative, age-appropriate child, and County Supervisor. The staffing is to determine if this type of adoption is an appropriate referral for an adoptive family assessment. The following foster parent/relative placement criteria shall be considered during the staffing:

Jurisdiction:

- DCFS will participate in the adoption of a minor only if either the person seeking to adopt the child, or the child, is currently a resident of Arkansas.

Residency Requirements for Adoption in Arkansas:

- The family planning to adopt may live in Arkansas or reside out-of-state and have an approved adoption assessment from a licensed adoption agency in their state. The family’s adoption assessment must be on file in the Adoption Services Unit.

Residency to determine jurisdiction over an adoption may be established in accordance with one of the three following sets of criteria:

- A child under the age of six (6) months is a resident of Arkansas if :
 - The biological mother resided in Arkansas for more than 4 months prior to the child’s birth, and

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- The child was born in Arkansas or in any city which adjoins the state line or is separated only by a navigable river from an Arkansas city which adjoins the state line, and
 - The child remains in this state until the interlocutory decree has been entered.
 - A child over the age of six (6) months is a resident of Arkansas if that child:
 - Has resided in this state for at least six (6) months, and
 - Currently resides in Arkansas, and
 - Is present in this state when the petition for adoption is filed and heard by a court of competent jurisdiction.
 - A person seeking to adopt is a resident of Arkansas if that person :
 - Occupies a dwelling within the state, and
 - Has a present intent to remain within the state for a period of time, and
 - Manifests the genuineness of that intent through an ongoing physical presence within the state together with indications that the person's presence is not merely transitory in nature.

Age:

Applicant is:

- Between the age of twenty-one (21) and fifty-five (55) years.
- Between the age of twenty-one (21) and forty (40) years for an infant (up to one year old).
- A primary caregiver who is at an age so that it can be anticipated that the caregiver can parent the child into adulthood.

Marital Status:

- Married (verification required) a minimum of three (3) years at the time of the application date and living together.
- Divorced (verification required) at least one (1) year from the divorce order.
- Single.

General Physical and Mental Health:

- Members of the household do not have a communicable disease, specific illness, or disability which would interfere with the family's ability to parent the child.

Housing:

- Space is adequate to promote health and safety.

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- Children of opposite sexes will have their own separate bedrooms except for infants (up to one year old).
 - Water is provided by public water system or approved by the Department of Health.

Criminal Background Check:

- Members of the household fourteen (14) years of age or older must agree to a local police check and a State Police check and must have no history of arrests or convictions of a felony offense.
- In addition adult applicant must agree to a FBI criminal record check if he or she has been a resident of the state for less than six (6) years.

Central Registry Check:

- Members of the household ten (10) years of age or older must agree to a Child Maltreatment Central Registry check in his state of residence and any state of residence in which the person has lived for the past six (6) years, and in the person's state of employment, if different. The person must have no history of true abuse and/or neglect.
- Per Act 1041 of 1997, a person required to have the Child Maltreatment Central Registry Check shall repeat the check every two (2) years. However, adoptive parents and each member of the household age ten (10) years old or older, shall repeat the check every year until the adoption decree has been issued. Adoptive parents, and each member of the household age ten (10) years or older, residing out of state shall have a Child Maltreatment Central Registry Check, if available, in their state.

Birth Family:

- Family will meet the child's needs to have continuity with the birth family if applicable.
- Family can deal appropriately with interference from the birth family.
- Geographic location will not present risks for the child to be harmed by birth family.

Foster Family Care:

- Family will continue to be able to meet this child's specific needs if they continue as foster parents. The child's health and safety are paramount.

Pre-Service Training:

- Applicant is willing to complete pre-service training if they have not been approved as a foster parent or kinship foster parent.
- Applicant is willing to complete any further training in order to meet a child's specific needs.

When exceptions to the criteria are requested, the County Supervisor will request it within the written summary of the staffing and forward it to the Area Manager or designated Adoption Supervisor within five (5) working days of the staffing. The Area Manager or designated Adoption Supervisor will make a decision and notify the County Supervisor in writing within five (5) working days of receiving the summary. A copy of the written notification is forwarded to the Adoption Specialist and Family Service Worker. The Area Manager or

designated Adoption Supervisor will forward a written notification to the family if the exception is not approved and will explain the internal review procedure. A copy will be forwarded to the Family Service Worker, County Supervisor, and Adoption Specialist.

The **Adoption Specialist** will:

- Participate in the staffing.

The **County Supervisor** will (if staffing supports referral for an adoptive family assessment):

- Forward the following to the Adoption Specialist within five (5) working days of the staffing:
 - Written summary which provides the date of the staffing, names/titles of persons participating, findings on compliance to the placement criteria and recommendation.
 - Completed "Request for Consideration to Adopt" (CFS-489) on a foster parent or kinship foster parent.
 - Completed "Family Foster Home Study/Application and Attachments" (CFS-450) on a foster parent.
 - Initial family assessment/home study on a foster parent or kinship foster parent.
 - Most recent "Family Foster Parent Re-evaluation" (CFS-451) and all re-evaluation assessments/studies on a foster parent.
- Forward a copy of the written summary to the Area Manager or designated Adoption Supervisor within five (5) working days of the staffing.

The **County Supervisor** will (if staffing supports referral for an adoptive family assessment):

- Forward the following to the Area Manager or designated Adoption Supervisor within five (5) working days of the staffing:
 - Written summary which provides the date of the staffing, names/titles of persons participating, findings on compliance to the placement criteria and recommendation.
 - Completed "Request for Consideration to Adopt" (CFS-489) on a foster parent or kinship foster parent.
 - Completed "Family Foster Home Study/Application and Attachments" (CFS-450) on a foster parent.
 - Initial family assessment/home study on a foster parent or kinship foster parent.
 - Most recent re-evaluation assessment/home study on a foster parent.
 - Most recent "Family Foster Parent Re-evaluation" (CFS-451) and all re-evaluation assessments/studies on a foster parent.

Refer the foster parent, kinship foster parent, or relative to the Adoption Specialist in writing within five (5) working days of receiving written notification if the Area Manager or designated Adoption Supervisor disagrees with the recommendation and directs that an adoptive family assessment be completed.

The **Area Manager** or **designated Adoption Supervisor** will (if the staffing does not support referral for an adoptive family assessment):

- Assess the recommendation and request any additional information.
- Notify the foster parent, kinship foster parent or relative in writing within ten (10) working days of the decision and state the reason(s) for the decision and internal review procedures.
- Send a copy of this written notification to the Family Service Worker, County Supervisor, Adoption Specialist and Manager, Adoption Services Unit.
- Send a memorandum to the County Supervisor within ten (10) working days with reasons this adoptive placement should be assessed if in disagreement with the recommendation.
- Send a copy of this memorandum to the Family Service Worker, Adoption Specialist, and Manager, Adoption Services Unit.

PROCEDURE (VIII-F2): Assessment and Preparation

The **Family Service Worker** will:

- Assure prior to the permanency planning staffing, that the child's out-of-home placement record is up to date and that all attachments which are required for an adoption packet (see FSPP Appendix II-B) are in the child's record, and are copied and forwarded to the Adoption Specialist within three (3) working days of the permanency planning hearing.
- Send additional attachments to the Adoption Specialist once the initial adoption packet is completed in order to maintain current information until a decision is made.
- Document in the child's out-of-home placement record, and in CHRIS, the efforts to secure needed attachments and the reason for an attachment not being available.
- Provide information requested by the Adoption Specialist in the preparation of the child's adoption summary.
- Assist in preparing the child and foster parent, kinship foster parent, or relative for adoption.
- Assure compliance to Indian Child Welfare Act, if applicable.

The **Adoption Specialist** will:

- Prepare the child's adoption packet [adoption summary and attachments -- see FSPP Appendix II-A, II-B, and "Minimum Licensing Standards for Child Welfare Agencies" (PUB-004)] within thirty (30) days from the permanency planning hearing.
- Send a copy of the adoption summary to the Family Service Worker.
- Provide the following forms to the foster parent, kinship foster parent or relative immediately after the staffing that is conducted within ten (10) working days from the hearing that terminates parental rights (if the staffing supports foster parent adoption):
 - "Adoption Application" (CFS-400);
 - "Adoption Questionnaire" (CFS-409);

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- “General Medical Form-Adoptions” (CFS-404) for each member in the household;
 - “State Adoptions Criminal Record Check” (CFS-342B) and release for local law enforcement check for each member of the household who is fourteen (14) years of age or older and FBI criminal record check on each adult applicant who has not resided in the state for at least six (6) years;
 - “Request for Child Abuse/Neglect Central Registry Check” (CFS-316) for members of the household who are fourteen (14) years of age or older;
 - “Request/Consent for Health Department Services” (CFS-455) if applicable;
 - “Application for Adoption Subsidy” (CFS-425) if applicable;
 - “Statement of Income and Resources for Adoption Subsidy” (CFS-426) if applicable.
- Complete the assessment and preparation process with the foster parent, kinship foster parent or relative and send the adoption assessment, recommendations, completed forms, reference letters, child’s adoption packet and “Change of Status” (CFS-414) to the Area Manager or designated Adoption Supervisor within four (4) months of the court hearing that terminates parental rights.
 - Provide pre-service training for a relative who has not been approved as a foster parent or kinship foster parent. Complete the assessment and preparation process with this relative and send the adoption assessment, recommendation, completed forms, reference letters, child’s adoption packet, and CFS-414 to the Area Manager or designated Adoption Supervisor within four (4) to six (6) months of the court hearing that terminates parental rights.
 - Prepare and present to the foster parent, kinship foster parent, or relative one non-identifying copy of the child’s adoption packet and a complete disclosure form during the assessment and preparation process.
 - Review and discuss the adoption packet with the foster parent, kinship foster parent, or relative.
 - Secure signatures on the disclosure form and assure a copy is provided.
 - Assist in preparing the child and foster parent, kinship foster parent, or relative for adoption.
 - Notify the foster parent, kinship foster parent or relative in writing if the assessment cannot be completed within sixty (60) days of the final home visit and explain the reason.
 - Send a copy of this notification to the Area Manager or designated Adoption Supervisor and Family Service Worker.
 - Discuss any delays in completing the assessment and preparation process with the Area Manager or designated Adoption Supervisor and document reasons.
 - Complete the packet to determine eligibility for adoption subsidy, if applicable, during the adoption assessment and preparation process and forward to the Adoption Subsidy Coordinator, Adoption Unit.

**PROCEDURE (VIII-F3): Foster Parent, Kinship Foster Parent, or
Relative Adoption Decision**

The **Area Manager** or **designated Adoption Supervisor** will:

- Make a decision to approve or deny the foster parent, kinship foster parent, or relative's application to adopt within ten (10) working days of receiving the completed adoption assessment and send a written notification to the foster parent, kinship foster parent or relative.
- Send a copy of the approval or denial notification to the Manager, Adoption Services Unit, Adoption Specialist, Family Service Worker, County Supervisor, and OCC Attorney.
- Explain in the written notification the reason(s) for denial and the internal review procedures.
- Send a written notification to the foster parent, kinship foster parent, or relative if a decision to approve or deny the application cannot be made within sixty (60) days of the final home visit and explain the reason(s)
- Send a copy of this written notification to the Adoption Specialist and Family Service Worker.

The **Family Service Worker** will:

- Update and transfer the out-of-home placement case record (paper record and CHRIS) to the Adoption Specialist within five (5) working days of receiving the written notification of the approval for foster parent, kinship foster parent, or relative adoption.

The **Adoption Specialist** will:

- Forward a "Change of Status" (CFS-414) to the Placement Systems Coordinator, Adoption Services Unit, within five (5) working days of receiving notification of approval to report approval of the placement.
- Assume primary case management once written notification of approval has been received.

**PROCEDURE (VIII-F4): When a Foster Parent, Kinship Foster
Parent or Relative Files a Petition to Adopt Without Prior
Knowledge or Consent of DCFS**

The **County Supervisor** or **Adoption Specialist** when learning about the petition will:

- Notify immediately the Area Manager or designated Adoption Supervisor and OCC Attorney and follow-up with written notification.

The **County Supervisor** will:

- Arrange a staffing to determine if adoptive placement is appropriate to consider.
- Submit the results and recommendations from the staffing to the Area Manager.
- Direct staff to follow procedures outlined above.

- Work with the OCC Attorney in regard to pending litigation if it appears the foster parent, kinship foster parent or relative would not be a suitable adoptive parents for the child.
- Notify the Adoption Specialist if information regarding other prospective adoptive families for the child is needed.

PROCEDURE (VIII-F5): Post-Placement Services

The **Adoption Specialist** will:

- Provide casework counseling, support and referral to needed resources and services until the adoption is finalized.
- Visit (no less than twice a month in the home) and make contacts as needed with the family until the adoption is finalized.
- Document in narrative the reasons an adoption has not been legally finalized within two (2) months of the adoption placement date and set a time frame for finalization.
- Document in narrative place and dates of post-placement contacts, activities, progress, concerns, etc.
- Send copies of the documentation to the Family Service Worker, Area Manager or designated Adoption Supervisor.
- Develop a “Case Plan” (CFS-6010) within thirty (30) calendar days of written notification to the foster parent, kinship foster parent, or relative approving the application for adoption.
- Notify the foster parent, kinship foster parent, or relative of the date for a judicial review.
- Recommend initiation of procedures to finalize the adoption upon receipt of approval of the adoption by the designated Adoption Supervisor and approval of adoption subsidy, if applicable if the child has resided with the foster parent, kinship foster parent or relative for at least six (6) months.

PROCEDURE (VIII-F6): Disruption of Foster Parent, Kinship Foster Parent or Relative Adoption

If disruption of an adoptive placement is imminent, the **Adoption Specialist** will:

- Provide appropriate services to preserve the family and prevent disruption.

If these services do not prove successful, the **Adoption Specialist** will:

- Notify the Area Manager or designated Adoption Supervisor and the initiating County Supervisor.
- Schedule a staffing.
- Return case management responsibility to the Family Service Worker of the initiating county and transfer primary worker in CHRIS back to FSW if it is not the plan to arrange for a different adoptive placement.

- Prepare the adoptive family for the disruption and provide casework counseling and referrals for needed services.
- Refer to Policy VIII-G.

PROCEDURE (VIII-F7): Finalization of an Adoption

The **Adoption Specialist** will forward the following to the Area Manager or designated Adoption Supervisor when submitting the recommendation to finalize the adoption:

- checklist for recommending finalization;
- “Change of Status” (CFS-414);
- “Adoption Application” (CFS-400);
- initial adoption assessment of the adoptive family and all updates;
- adoption summary of the child and all updates;
- signed disclosure form;
- post-placement narrative;
- court order terminating parental rights;
- certified birth certificate of child;
- FBI criminal record check if applicable;
- “Adoption Assistance” (CFS-428) if applicable.

The **Adoption Specialist** will:

- Inform the family of post-adoptive finalization services.
- Document in case record narrative the plan of action to resolve barrier to finalizing the adoption (if the Area Manager or designated Adoption Supervisor does not agree with the recommendation). Inform the family of the recommendation.
- Monitor and document the implementation of the plan of action and progress toward achieving the plan.
- Assist OCC Attorney in completing adoption coupon and paying the fee for a new birth certificate.
- Forward the child and adoptive family records to the Adoption Services Unit when the adoption is finalized.

The **Area Manager** or **designated Adoption Supervisor** will:

- Assess within five (5) working days the information and recommendation, which has been forwarded by the Adoption Specialist.
- Sign the “Change of Status” (CFS-414), if it is agreed that procedures to finalize the adoption should be initiated.
- Send a copy of the signed CFS-414 to the Adoption Specialist.
- Notify the Adoption Specialist in writing to explain, if there is disagreement to initiating the procedures to finalize the adoption.

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- Formulate with the Adoption Specialist a plan of action to resolve the barriers to finalizing the adoption.

The **Area Manager** or **designated Adoption Supervisor** will:

- Forward within five (5) working days a packet of information to the OCC Attorney or an out-of-state attorney if the adoption is finalized out-of-state. This packet will include:
 - the Area Manager's signed consent to the adoption;
 - certified birth certificate of child;
 - termination of parental rights court order;
- assessment of the adoptive family;
- child's adoption summary;
- "Adoption Application" (CFS-400);
- "Adoption Assistance" (CFS-428) if applicable;
- FBI criminal record check if applicable;
- Post-placement narrative.

PROCEDURE (VIII-F8): Post-Adoption Finalization Services

After an adoption has been finalized, the following services may be offered to help preserve adoptive families:

- adoption subsidy;
- referral to the Mutual Consent Voluntary Adoption Registry;
- casework counseling;
- referral to service providers;
- referral to respite care;
- referral to on-going training;
- referral to adoptive parent support groups;
- Intensive Family Services and Family Support Funds.

The **Adoption Specialist** will:

- Provide these services upon request from the adoptive family.

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- Assist the adoptive family in completing forms and in following procedures.
 - Document contacts, activities, progress, concerns, etc.
 - Provide parenting, child abuse, sexual abuse, and family planning information to the adoptive parents within 30 days of the child being placed in their homes.

**POLICY (VIII-G): DEVELOPMENT OF ADOPTIVE
PLACEMENT**

The Division provides adoption services to recruit, retain, assess, and prepare adoptive families. The services focus on finding families for children rather than finding children for families. Assessment and preparation of prospective adoptive families are completed according to the need for homes for children. The Division also provides pre-placement services to move children into adoptive families in a timely manner and post-placement services to help the family adjust. The child's health and safety shall be of paramount concern in the development of the adoptive placement. The placement of a child for adoption will not be denied or delayed when an approved family is available outside the jurisdiction responsible for handling the child's case. A fair hearing will be granted to any individual who alleges denial of adoption approval as a result of residing outside the jurisdiction responsible for placing the child.

PROCEDURE (VIII-G1): Recruitment and Retention of Adoptive Applicants

The **Adoption Specialist** will:

- Publicize the need for adoptive families.
- Recruit for placement for specific children when necessary.
- Respond within three (3) working days to families wanting to adopt.
- Provide adoption brochures.
- Support the prospective adoptive parents during inquiry, application, preparation/assessment, approval, waiting for placement, selection, placement and finalization of adoption.
- Explain and discuss the adoption process.
- Complete the adoption preparation/assessment within four (4) to six (6) months (includes pre-service training).

PROCEDURE (VIII-G2): Criteria for Adoption

The following criteria will be considered in determining the appropriateness of adoptive applicants:

Jurisdiction:

- DCFS will participate in the adoption of a minor only if either the person seeking to adopt the child, or the child, is currently a resident of Arkansas.

Residency Requirements for Adoption in Arkansas:

- See Procedure VIII-F1 for Arkansas residency requirements for adoption.

Age

Applicant is:

- between the age of twenty-one (21) and fifty-five (55) years; or
- between the age of twenty-one (21) and thirty-nine (39) years for an infant (up to one year old); and
- a primary caregiver who is at an age so that it can be anticipated that he/she can parent the child into adulthood.

Marital Status:

- married (verification required) a minimum of three (3) years at the time of the application date and living together; or
- divorced (verification required) at least one (1) year from the divorce order; or

- single.

General Physical and Mental Health:

- Members of the household do not have a communicable disease, specific illness, or disability which would interfere with the family's ability to parent the child.

Housing:

- Space is adequate to promote health and safety.
- Children of opposite sexes will have their own separate bedrooms except for infants (up to one year old).
- Water is provided by public water system or approved by the Department of Health.

Criminal Background Check:

- Local police check and State Police check are required on members of the household fourteen (14) years of age or older. There must be no history of arrests or convictions of a felony offense.
- FBI criminal record check is required on each adult applicant with no history or arrests or convictions of a felony offense. FBI check is not required if applicant has resided in the state for six (6) years or longer.

Central Registry Check:

- Completion of child abuse and neglect registry check is required on members of the household ten (10) years of age or older. There must be no history of true abuse and/or neglect.

Resources:

- Sufficient resources to meet the financial, medical, physical, educational, emotional and shelter needs of the child. Adoption subsidy may be a resource for a child who meets the eligibility criteria.

Pre-Service Training:

- Completion of adoption pre-service training.

When exception to the eligibility criteria are requested, the **Adoption Specialist** will:

- Request exception to the eligibility criteria in writing to the Area Manager or designated Adoption Supervisor who decides and notifies the Adoption Specialist in writing of the decision.
- Discuss the decision with the applicant.

PROCEDURE (VIII-G3): Application for Adoption

The **Adoption Specialist** will:

- Assess and prepare the adoptive applicants for adoption.
- Refer applications from friends, relatives, and DHS employees to the Area Manager or designated Adoption Supervisor.
- Provide an interview with a prospective adoptive applicant or a meeting with a group of prospective adoptive applicants within thirty (30) working days of initial contact.
- Notify Area Manager or designated Adoption Supervisor if this time frame cannot be met.

The **Area Manager** or **designated Adoption Supervisor** will:

- Decide who will assess and prepare an adoptive applicant if there is a conflict of interest.

The **Adoption Specialist** will share the following information during the adoption inquiry interview or meeting:

- The adoption program is child focused and the family who will best meet the child's individual needs will be selected.
- Application approval does not guarantee placement.
- A child's health and safety are paramount in the development of an adoptive family for a child.
- The completed adoption assessment on the family is the basis for selection.
- Priority is given to completing an adoption assessment on families for children with special needs who are waiting for placement.
- Adoption Specialist's role and responsibilities;
- adoption process;
- assessment and preparation process and time frames;
- reasons children enter Out-of-Home Placement and are legally freed for adoption;
- explanation of children with special needs;
- eligibility criteria for adoption;
- adoption subsidy;
- discussion of children currently awaiting placement (have photo-listing available);
- legal procedures;
- adoption registry and "Adoption Information Registry Guide" (PUB-113).

The **Adoption Specialist** may provide the following forms during the interview or group meeting:

- “Adoption Application” (CFS-400);
- “Adoption Questionnaire” (CFS-409);
- “Adoption Fact Sheet” (CFS-401);
- “Family Assessment Information (CFS-405);
- “Request for Criminal Background Check” (CFS-306) and release for local law enforcement check for each member of the household who is fourteen (14) years of age or older and FBI criminal record check on each adult applicant who has not resided in the state for at least six (6) years;
- “Request for CFS Registry Check” (CFS-316) for members of the household who are fourteen (14) years of age or older;
- “Request for Health Department Services” (CFS-455) if applicable;
- “General Medical Form - Adoption” (CFS-404) on each member in the household and completed within six (6) months of the study.

PROCEDURE (VIII-G4): Assessment and Preparation of Adoptive Applicants

The **Adoption Specialist** will:

- Set up pre-service training for the applicants.
- Make at least two visits with the adoptive applicant with at least one visit in the home.
- Interview each family member separately.
- Ask the adoptive applicant to complete a photograph album.
- Provide information about the following to the adoptive applicant::
 - parenting children with special needs;
 - the importance of a child’s birth family and out-of-home placement history;
 - child maltreatment;
 - separation and attachment;
 - child development;
 - disabilities;
 - support systems;
 - resources to meet a child’s special needs;
 - disruption of an adoption;
 - adoption related issues.

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- Require a professional assessment of an applicant's ability to parent, if needed. It may be necessary for the adoptive applicant to pay for that assessment.

PROCEDURE (VIII-G5): Narrative Summary of Assessment and Preparation

Upon completion of assessment and preparation, the **Adoption Specialist** will prepare a narrative summary [refer to desk guide and "Minimum Licensing Standards for Child Welfare Agencies" (PUB-004)] about the adoptive applicants.

The **Adoption Specialist** will:

- Submit the narrative summary and written recommendation, all required forms and references to the Area Manager or designated Adoption Supervisor within forty-five (45) days of the final home visit.
- Notify the applicant in writing if this packet cannot be completed within sixty (60) days of the final home visit and explain the reason.
- Send a copy of this notification to the Area Manager or designated Adoption Supervisor.
- Evaluate with Area Manager or designated Adoption Supervisor to determine whether to proceed with approving the applicant if there are any concerns.
- Explain the reasons for denial in a personal interview and refer for professional services if indicated.
- Send a copy of this narrative summary, written notification of approval, all required forms, reference letters, and photograph album to the Adoption Coordinator, Adoption Services Unit when an application is approved.

The **Area Manager** or **designated Adoption Supervisor** will:

- Determine the approval or denial of the adoptive applicant.
- Notify the adoptive applicant in writing of the approval or denial within fifteen (15) days of receiving the narrative summary and related information from the Adoption Specialist.
- Explain in writing the reason for a denial and the internal review procedures.
- Notify the adoptive applicant in writing if a decision cannot be made within sixty (60) days of the final home visit and explain the reason. Send a copy of the notification to the Adoption Specialist.
- Return the narrative summary and entire record to the Adoption Specialist with a copy of the written approval or denial notification.

PROCEDURE (VIII-G6): Re-evaluation of Approved Adoptive Applicant's Record

If an approved applicant has not had a child placed within one (1) year, the **Adoption Specialist** will:

- Visit in the home and ascertain changes in the situation and assess the family's continued interest in adoption.
- Update the narrative summary and record annually from the date in the approval letter until a child is placed.
- Submit within forty-five (45) days from the home visit a packet to the Area Manager or designated Adoption Supervisor to include:
 - Narrative summary with recommendation;
 - "Adoption Questionnaire" (CFS-409);
 - "General Medical Form-Adoption" (CFS-404s) on each member of the household;
 - "Request for Criminal Record Check" (CFS-306s) and releases for local police checks signed by household members who are fourteen (14) years of age or older;
 - "Request for CPS Central Registry Check" (CFS-316s) signed by household members who are fourteen (14) years of age or older;
 - "Request/Consent for Health Department Service" (CFS-455) if applicable;
 - "Change of Status" (CFS-414).
- Send a copy of the narrative summary, all required forms and written notification of approval to the Adoption Coordinator, Adoption Services Unit when a re-evaluation is approved.

The **Area Manager** or **designated Adoption Supervisor** will:

- Refer to Procedure VIII-G5.

PROCEDURE (VIII-G7): Selection of an Adoptive Family

The **Family Service Worker** will:

- Notify Adoption Specialist of staffings that address permanency plan of adoption.
- Notify the Adoption Specialist within two (2) working days of the court hearing that termination of parental rights with power to consent to adoption has been granted.
- Assure prior to the permanency planning staffing that the child's out-of-home placement record is up to date and that all attachments (including photographs) which are required for an adoption packet (Appendix II-B) are in the child's record. These will be copied and forwarded to the Adoption Specialist within three (3) working days after the permanency planning hearing.
- Send additional attachments to the Adoption Specialist once the initial adoption packet is completed in order to maintain current information until a child is placed with an adoptive family.
- Document in the child's out-of-home placement record and in CHRIS the efforts to secure needed attachments and the reason for an attachment not being available.
- Provide information requested by the Adoption Specialist in the preparation of the child's adoption summary and in the selection of an adoptive family.

The **Adoption Specialist** will:

- Determine prior to the ninety (90) day, six (6) months, and eleven (11) months staffings if there is a resource of approved adoptive applicants to consider for a child who may have a permanent plan of adoption (enter characteristics of child into the computer matching system to obtain listing of approved adoptive applicants). If there is not an adequate resource of approved adoptive applicants, the Adoption Specialist will initiate generalized recruitment for an adoptive family who may be interested in adopting a child with similar characteristics.
- Prepare the child's adoption packet (adoption summary and attachments -- see Appendix II-A and II-B) within thirty (30) days from the permanency planning hearing.
- Enter characteristics of the child into the computer matching system within five (5) working days from the court hearing that terminated parental rights obtain a listing of approved adoptive applicants.
- Contact the Adoption Coordinator, Adoption Services Unit to request adoption assessments on the approved adoptive applicants.
- Decide within ten (10) working days from receiving the listing and adoption assessments if recruitment of an adoptive family is needed.
- Complete and maintain a written recruitment plan if an appropriate adoptive family is not available.

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- Send the following to the Adoption Coordinator if a photo-listing registration of the child is needed: twenty-five (25) color photographs, adoption summary, special evaluations if applicable, and the child's written consent if ten (10) years or older.
 - Notify the Adoption Coordinator in writing if registrations are needed on available, national adoption exchanges.
 - Monitor and document recruitment activities.
 - Enter characteristics of the child into the computer matching system on a consistent basis if the initial listing did not result in the selection of an appropriate adoptive family.
 - Update the child's adoption summary every six (6) months until an appropriate adoptive family is selected and assure that attachments are updated. Send a copy of the updated adoption summary and special evaluations to the Adoption Coordinator if the child has a photo-listing and/or adoption exchange registration. Send a copy of the updated summary to the child's Family Service Worker.
 - Send twenty-five (25) color photographs every twelve (12) months to the Adoption Coordinator to update a child's registration in the photo-listing.
 - Assure compliance with Indian Child Welfare Act if applicable.
 - Consult with the Family Service Worker and other appropriate DCFS staff and professionals involved with the child in the selection of an adoptive family.
 - Select the most appropriate approved adoptive applicant for the child consistent with the child's needs. Ensure the applicant's ability to meet the special needs of the child. Select an applicant who has the capacity to achieve the objective and tasks within the "Case Plan" (CFS-6010). Refer to desk guide and "Minimum Licensing Standards for Child Welfare Agencies" (PUB-004).
 - Send a written recommendation for the approval of the selected adoptive family to the Area Manager or designated Adoption Supervisor within ten (10) working days of receiving the assessments of approved adoptive applicants for a child who does not have a special need(s) and within thirty (30) working days for a child with a special need(s).
 - Delete identifying information in the child's adoption packet as it relates to the child's birth/legal parent and extended family. Make a copy of the non-identified adoption packet for the selected adoptive family and one for the family's Adoption Specialist, if different from the child's Adoption Specialist. Complete a disclosure form. Forward packets and disclosure form with a memorandum.
 - Forward a memorandum to the adoptive family's Adoption Specialist if different from the child's Adoption Specialist, if the selection is approved. This memorandum must highlight significant information about the child including the need for special resources/services, provide a framework about pre-placement planning, and convey any other significant information that relates to the placement of the child.
 - Send a copy of the memorandum to the Area Manager or designated Adoption Supervisor, Family Service Worker, and OCC Attorney for the child's initiating county. Discuss delays in the selection of an adoptive family with the Area Manager or designated Adoption Supervisor and document reasons for the delay.

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- Determine immediately if another approved adoptive applicant can be selected if the Area Manager or designated Adoption Supervisor, the adoptive family, or child does not agree with a selection. Document if another approved adoptive family cannot be selected and continue recruitment activities.
 - Forward a written notification to the Adoption Specialist for each approved adoptive applicant who has been considered and provide the reason(s) for the applicant not being selected. The applicant's Adoption Specialist will notify the approved applicant in writing if he/she had asked to be considered for a child who is registered in the DCFS photo-listing, but was not selected.
 - Assure that ICPC procedures are followed if an out-of-state approved adoptive applicant is selected.

The **Adoption Coordinator** will:

- Complete within five (5) working days of receiving the required information a photo-listing registration for a child referred by an Adoption Specialist.
- Coordinate and maintain a photo-listing book of children with special needs to be distributed to each Adoption Specialist.
- Complete within five (5) working days of receiving the required information a registration on an available adoption exchange for a child referred by an Adoption Specialist.
- Send to an Adoption Specialist within three (3) working days names of prospective adoptive families who respond to recruitment activities.
- Coordinate and maintain the computer matching system to assist in the selection of an adoptive family.
- Maintain the file for adoption assessments of approved adoptive applicants who reside within the state and out of state.
- Maintain the file for photograph albums of approved adoptive applicants and send an album to a child's Adoption Specialist's at the time an adoptive family is selected.
- Forward to the Adoption Specialist within three (3) working days of receiving notification, the assessments of approved adoptive applicants to determine if there is an appropriate family for a child.
- Provide technical assistance on recruitment and selection of adoptive families.

The **Area Manager** or **designated Adoption Supervisor** will:

- Assess the child's adoption packet, the assessment of the approved adoptive applicant, and the written recommendation from the Adoption Specialist and determine the appropriateness of the selection within ten (10) working days.
- Document the determination to approve or deny the selection on the written recommendation from the Adoption Specialist and explain in writing the reason(s) for a denial.
- Return all information to the Adoption Specialist.

PROCEDURE (VIII-G8): Disclosure, Pre-Placement, and Placement Activities

After receipt of the selection memorandum and adoption information packet, the child's **Adoption Specialist** will:

- Assist the Family Service Worker in preparing the child to meet the selected adoptive family (including the presentation of the family's photograph album).
- Supervise visits of the child with the selected adoptive family when the visits are in the child's locale.
- Review information about the child with the selected adoptive family and answer questions.
- Provide support to the selected adoptive family.
- Assess the acceptance and development of a relationship between the selected adoptive family and the child.
- Remain in contact with the adoptive family's Adoption Specialist.
- Coordinate times, dates, places, and activities for the pre-placement visitation schedule with the family's Adoption Specialist and child's Family Service Worker.
- Arrange with the Family Service Worker any needed appointments for the selected adoptive family to meet with special providers, i.e., mental health counselors, doctors, school personnel, etc.
- Assess the child's wardrobe. Arrange with the Family Service Worker purchases of any additional clothing.
- Arrange and conduct at least three pre-placement visits for a child who is two (2) years of age or older.
- Arrange for a physical exam and developmental assessment by a physician within thirty (30) days prior to adoptive placement and completion of "Health Screening" (CFS-366).

Document dates of pre-placement visits, contacts, activities, progress, concerns, etc. and send a copy to the family's Adoption Specialist, Area Manager or designated Adoption Supervisor, Family Service Worker, and OCC Attorney for the child's initiating county.

The **Adoptive Family's Adoption Specialist** will:

- Review, discuss and present to the selected adoptive parent the child's non-identifying adoption packet and disclosure form and document in narrative.
- Assist in assessing appropriateness of the selection.
- Secure the signature of the selected adoptive parent on the disclosure form.
- Give the selected adoptive parent a copy of the disclosure form.
- Advise the child's Adoption Specialist of the family's interest in adopting the child.

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- Coordinate with the child's Family Service Worker and Adoption Specialist a pre-placement visitation schedule.
 - Supervise visits of the child with the selected adopted family when visits are in the family's area.
 - Discuss and coordinate with the selected adoptive parent resources (adoption subsidy, counseling, medical, educational services, etc.) which a child may need.
 - Document dates of contacts, activities, progress, concerns, etc., and send a copy to the child's Adoption Specialist, Area Manager or designated Adoption Supervisor, Family Service Worker, and OCC Attorney for the child's initiating county.
 - Send a completed "Change of Status" (CFS-414) to the Adoption Coordinator, Adoption Services Unit when the child has been placed.

The **Family Service Worker** will:

- Prepare the child for adoption.
- Prepare the child to meet the selected adoptive family.
- Prepare and support the foster family or out-of-home placement provider for separation and enlist their help with the child.
- Prepare child's school personnel, therapist, and other professionals for the proposed adoption.
- Coordinate with the child's Adoption Specialist times, dates, places and activities for the pre-placement visitation schedule.
- Participate in pre-placement and placement activities and remain involved until the process is completed.
- Assess the feelings and reactions of the child and the foster parents or out-of-home placement provider and share these with the Adoption Specialist.
- Provide information about the child to the selected adoptive family.
- Assure that the child's clothing and personal belongings are appropriately prepared and packed for the move to the adoptive family's home.
- Transfer the child's out-of-home placement record (including CHRIS record) to the adoptive family's Adoption Specialist within five (5) working days of the placement date (after pre-placement visits have been completed).

The **Foster Parent** or **Out-of-Home Placement Provider** will:

- Help prepare the child for adoption.
- Participate in the pre-placement and placement activities.
- Provide the selected adoptive family with information about the child.
- Assess and report the child's feelings, actions and reactions.

- Give permission to the child to move to the adoptive family.
- Assure that the child's clothing and personal belongings are appropriately prepared and packed for the move to the adoptive family home.

PROCEDURE (VIII-G9): Post-Placement Services

The **Adoption Specialist** will:

- Provide casework counseling, support, and referral to needed resources/services until the adoption is finalized.
- Visit the adoptive family in their home at least once a week during the first four weeks after placement and at least twice a month in the home until the adoption is finalized.
- Have a private conversation with the age-appropriate child during each visit.
- Process an application for adoption subsidy if applicable prior to recommending finalization of the adoption.
- Document place and dates of contacts, activities, progress, concerns, etc., and send a copy to the Family Service Worker, Area Manager or designated Adoption Supervisor, child's Adoption Specialist, and OCC Attorney for the child's initiating county.
- Develop a "Case Plan" (CFS-6010) within thirty (30) days of the child's placement.
- Notify the pre-adoptive parent of the date for a judicial review.
- Establish time frame for finalization of the adoption, and document the reasons the adoption has not been finalized within six (6) months.

PROCEDURE (VIII-G10): Disruption of Adoptive Placement

If a disruption of an adoptive placement is imminent before the final decree, the **Adoption Specialist** will provide appropriate services to preserve the family and prevent disruption.

If these services do not prove successful, the **Adoption Specialist** will:

- Notify immediately the Area Manager or designated Adoption Supervisor, County Supervisor, Family Service Worker, Adoption Specialist, and OCC Attorney from the initiating county.
- Schedule a staffing.
- Return case management responsibility to the initiating county Family Service Worker.
- Prepare the family for disruption and provide casework counseling and referrals for needed services.

PROCEDURE (VIII-G11): Finalization of an Adoption

Refer to FSPP Procedure VIII-F7.

POLICY (VIII-H): ADOPTION SUBSIDY

The Division provides an adoption subsidy as a service to assist in making adoption possible for a child, who, with special needs, might not otherwise be adopted and for whom a family is not readily available. Payments for maintenance and special services are to meet the needs of the child. In addition, payments for one-time expenses, known as a non-recurring adoption subsidy, may be obtained in order to reimburse the family for out-of-pocket pre-adoptive/finalization expenditures. An Adoption Assistance Agreement (adoption subsidy) must be in place prior to the finalization of the adoption. However, in cases of unknown medical and psychiatric conditions that surface after finalization, applications for assistance may be submitted. After the initial denial of this application occurs, in accordance with federal regulations, the adoptive family may appeal the decision. Authorized retroactive subsidy payments will be two (2) months prior to the date of the "Application For Adoption Subsidy" (CFS-425).

The Division will ensure health insurance coverage for any child with a medical and/or psychological condition for whom there is an adoption subsidy agreement. Coverage will be provided by IV-E Medicaid. If the child is not IV-E Medicaid eligible, medical coverage will be provided through State General Revenue Medicaid.

The Division shall access resources as necessary in Arkansas, the region and nation to find adoptive families for children with special needs.

PROCEDURE (VIII-H1): Initial Application for Adoption Subsidy

The **Adoption Specialist** will:

- Follow the same subsidy-related policy and procedures, including subsidies for non-recurring legal expenses, regardless if the adoption is being handled in-state or out-of-state.
- Ensure close coordination with the other state's adoption worker, if applicable.
- Determine that the child has a special need in relation to adoption planning, is between the age of birth to eighteen (18) years, is in the custody of DHS, and is legally free for adoption.
- Determine that a reasonable, but unsuccessful, effort has been made to place the child without providing adoption subsidy. In the case of the child who has established significant emotional ties as a foster child, DHS may certify the child as eligible for a subsidy without searching for families willing to take the child without a subsidy.
- Review the adoption subsidy program with the adoptive parent, determine what type of adoption subsidies are needed, and complete all application procedures at the same time the adoption assessment is being completed for a foster parent, kinship foster parent, or relative adoption and within sixty (60) days of placement for all other adoptions
- Review and sign the "Application for Adoption Subsidy" (CFS-425) after the adoptive parent completes it.
- Request IV-E verification of eligibility from the Foster Care/Medicaid Eligibility Unit. (Give the Eligibility Unit at least two weeks notice prior to request for eligibility).
- Assist the adoptive parents in completing the "Statement of Income and Resources for Adoption Subsidy" (CFS-426) (not required when only a non-recurring adoption subsidy is being requested or when the child is IV-E eligible).
- Attach to the CFS-426 verification of family income when a state funded adoption maintenance subsidy or a special subsidy is requested (not required for a federal funded adoption maintenance subsidy).

- Review the adoptive parents’ health insurance policy if a special subsidy is requested to determine if it will allow for any medical, dental, or psychological costs and, if so, to what extent. Document on the CFS-426.
- Complete the “Determination of Eligibility for Adoption Subsidy” (CFS-427).
- Attach the following to the CFS-427:
 - Verification of the costs for a private attorney to finalize an adoption whether in-state or out-of-state, if applicable.
 - Verification of court costs to finalize an adoption if applicable.
 - Verification of the child’s medical, dental, psychological, etc. condition by a professional which includes the diagnosis, prognosis, and costs of treatment for one (1) year if a special subsidy is requested.
 - Statement, which lists the child’s financial resources (source and amount) other than foster care, board payment if applicable.
 - Verification from the appropriate agency which explains the child’s eligibility for financial benefits (SSI, other types of Social Security benefits, VA, etc.) once the adoption is finalized if applicable (provide the agency with the amount of the adoptive parent’s income in order that a statement can be prepared).
 - Verification from Children’s Medical Services (CMS) which explains the child’s eligibility for services once the adoption is finalized if applicable (provide CMS with the amount of the adoptive parent’s income in order that a statement can be prepared).
 - Utilize the scale that is established and published annually by the Adoption Services Unit. The scale shall be 225% of the yearly published Federal Poverty Level for the State of Arkansas.
- The adoptive parent’s income is not an eligibility criterion for a federally funded adoption maintenance subsidy (a child who is IV-E or SSI eligible).
- Special subsidies are state funded, and the child’s eligibility will be considered on a case-by-case basis by the Adoption Subsidy Coordinator, Adoption Services Unit. The adoptive parent’s gross income will be considered as well as other financial resources and health insurance in determining eligibility for a special subsidy.

- Utilize the following scale to determine the amount of a full monthly adoption maintenance subsidy based upon the standard foster care board payment:

AGE of CHILD	Amount of MONTHLY Maintenance
Birth through 5 years	\$400.00
6 through 11 years	\$425.00

12 through 14 years	\$450.00
15 through 17 years	\$475.00

- Request a larger monthly adoption maintenance subsidy for the child who has received a higher than standard monthly foster care board payment. A monthly subsidy payment cannot exceed the child's foster care board rate which is in effect at the time a subsidy is approved.
- Provide the following documentation with the initial adoption subsidy application packet:
 - Emergency Petition;
 - Emergency Order or other initial custody court order;
 - Petition and Order for Termination of Parental Rights with Power to Consent to Adoption;
 - "EMS 96 or 91", or if applicable, award letter for SSI;
 - A copy of the approved selection form for an adoption that is not a foster parent, kinship foster parent, or relative adoption;
 - Copy of selection form to verify effort has been made to place the child without adoption subsidy (not required for a foster parent, kinship foster parent, or relative adoption).
- Prepare a narrative about the adoptive family to include:
 - Type of adoption (foster parent, kinship foster parent, non-foster parent, relative);
 - Type of subsidy (maintenance, special, non-recurring, non-IV-E Medicaid);
 - Funding source (federal or state);
 - Child to receive subsidy (first name, age, race, developmental information, description of special needs, problems, limitation, reasons for being in out-of-home placement, and brief description of out-of-home placement history);
 - Adoptive father (name, age, education, employment and health);
 - Adoptive mother (name, age, education, employment and health);
 - Other children in family (adopted, birth, custody, out-of-home placement, name, age, education, and health);
 - Others in household (explain if applicable);
 - Marriage (length and comments about the quality of the relationship);
 - Housing (brief description);
 - Income/resources (sources and amounts, health insurance coverage, etc.);

- Family and adoptive child relationship (description to include strengths and challenges);
- Reason for adoption subsidy (explain reason child needs adoption subsidy and reason for the adoptive parent requesting it);
- Subsidy request (maintenance costs per month and for not more than a year), special subsidy type of service and costs for not more than a year, legal assistance, if the OCC Attorney is requested to finalize the adoption, court costs, etc., other subsidy requests and costs;
- Recommendation.
- Send completed forms, narrative, documents, and other attachments to the Adoption Subsidy Coordinator, Adoption Services Unit for a decision to approve or deny the initial adoption subsidy application prior to finalization of the adoption.
- Meet with the adoptive parent to explain an approval, to review the “Adoption Assistance Agreement” (CFS-428), and to secure the adoptive parent’s signature on the CFS-428 within ten working days from receipt of the agreement.
- Send the Adoption Subsidy Coordinator and adoptive parent a copy of the signed CFS-428 within three (3) working days upon receipt.
- Contact the Adoption Subsidy Coordinator in writing within three (3) working days from the meeting if the adoptive parent has a disagreement with the contents of the CFS-428.
- Meet with the adoptive parent to explain a denial, review the decision, and explain internal review procedures within ten (10) working days from receipt of written notification to deny.
- Send a copy of the Adoption Petition for and Final Decree of Adoption to the Adoption Subsidy Coordinator within five (5) working days upon receipt.

The **Adoptive Subsidy Coordinator** will:

- Assess all submitted forms and documentation, approve or deny the adoption subsidy application, and provide written notification to the Adoption Specialist of the decision within fifteen (15) working days of receiving the initial application packet from the Adoption Specialist. Contact the Adoption Specialist if additional information/forms are needed.
- Prepare the CFS-428 if the adoption subsidy application is approved and send to the DCFS Director or designee for signature.
- Send signed CFS-428 to the Adoption Specialist with written instructions.
- Notify the adoptive parent in writing if the application is denied and explain the reason and the internal review procedures and Administrative Fair Hearing procedures.
- Send a copy of the notification of denial to the Adoption Specialist.

PROCEDURE (VIII-H2): Re-evaluation of Adoption Subsidy

The **Adoption Subsidy Coordinator** will:

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- Follow all the same subsidy-related policy and procedures regardless if the adoption is being handled in-state or out-of-state.
 - Ensure close coordination with the other state's adoption worker, if applicable.
 - Re-evaluate an approved adoption subsidy on an annual basis.
 - Contact the adoptive parent in writing within sixty (60) days of the expiration date of the existing adoption subsidy to initiate the re-evaluation process by sending the following forms for completion:
 - "Application for Adoption Subsidy" (CFS-425).
 - "Statement of Income and Resources for Adoption Subsidy" (CFS-426) if applicable.
 - "Special Adoption Subsidy Re-evaluation" (CFS-429) if applicable.
 - Approve or deny the adoption subsidy application, within fifteen (15) working days of receiving the completed forms from the adoptive family.
 - Prepare the "Adoption Assistance Agreement" (CFS-428) if the adoption subsidy application is approved and send the agreement to the DCFS Director, or designee for signature.
 - Send the signed CFS-428 to the adoptive family with written instructions.
 - Notify the adoptive parent in writing if the application is denied and explain the reason and the internal review procedures and Administrative Fair Hearing procedures.
 - Send a copy of the notification of denial to the Adoption Specialist.

The **Adoption Specialist** will:

- Assist in securing information from the adoptive parent if requested by the Adoption Subsidy Coordinator.
- Meet with the adoptive parent to explain a denial, review the decision, and explain the internal review procedures within ten (10) working days from receipt of written notification to deny.

PROCEDURE (VIII-H3): Amendment to an Adoption Subsidy

The **Adoption Specialist** will:

- Follow all the same subsidy-related policy and procedures, regardless if the adoption is being handled in-state or out-of-state.
- Ensure close coordination with the other state's adoption worker, if applicable.
- Determine with adoptive parent if an amendment to the existing adoption subsidy is needed prior to the annual re-evaluation.

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- Determine with adoptive parent what type of adoption subsidy is needed.
 - Review and sign the “Application for Adoption” (CFS-425) after the adoptive parent completes it.
 - Complete the “Determination of Eligibility for Adoption Assistance” (CFS-427) if a special subsidy is requested.
 - Complete a narrative to address the type of subsidy needed, the source of funding, the reason for the subsidy, the costs, and recommendation.
 - Send the forms, narrative, and any other documents to the Adoption Subsidy Coordinator within twenty (20) working days from the initial contact with the adoptive parent.
 - Meet with the adoptive parent to explain an approval, to review the CFS-428 (Adoption Assistance), and to secure the adoptive parent’s signature on the CFS-428 within ten (10) working days from receipt of the agreement.
 - Send the Adoption Subsidy Coordinator and adoptive parent a copy of the signed CFS-428.
 - Send the Adoption Subsidy Coordinator a written notification within three (3) working days from the meeting with the adoptive parent to explain a disagreement with the contents of the CFS-428.
 - Meet with the adoptive parent to explain a denial, review the decision, and explain internal review procedures within ten (10) working days from receipt of the written notification to deny.

The **Adoption Subsidy Coordinator** will:

- Assess all submitted forms and documentation, approve or deny the amendment and notify the Adoption Specialist of the decision within fifteen (15) working day of receiving the application packet from the Adoption Specialist.
- Contact the Adoption Specialist if additional information/forms are needed.
- Prepare the “Adoption Assistance Agreement” (CFS-428) if the adoption subsidy amendment is approved and send to the DCFS Director for signature.
- Send the completed CFS-428 to the Adoption Specialist with written instructions.
- Notify the adoptive parent in writing if the application is denied and explain the reason and the internal review and Administrative Fair Hearing procedures.
- Send a copy of the notification of denial to the Adoption Specialist.

PROCEDURE (VIII-H4): Reinstatement of Adoption Subsidy

If a child’s adoption subsidy has been closed, it may be re-opened if eligibility requirements are met. Refer to Procedure VIII-H1.

PROCEDURE (VIII-H5): Request for Continuation of Federal Adoption Subsidy after Age Eighteen

In some cases a federal adoption subsidy may be continued for adoptees eighteen (18) to twenty-one (21) years old. If the adoptive parent requests that the adoption subsidy be continued past the child's eighteenth birthday, the following criteria must be met:

- The provisions of the Procedure for Re-evaluation of Adoption Subsidy shall be completed. The adoptive parent must be receiving a federal adoption subsidy prior to the child's eighteenth birthday.
- The child must be IV-E eligible.
- This child must have applied for and been denied SSI.
- A psychologist, psychiatrist or physician must certify that the child has a mental or physical disability that prevents the child from becoming independent from the adoptive home.
- The Adoption Specialist will include the above documentation and recommend whether the adoption subsidy should be continued past the child's eighteenth birthday.
- The Adoption Subsidy Coordinator will approve or deny the request for adoption subsidy after age eighteen.
- The Adoption Subsidy Coordinator will notify the adoptive parent in writing if the request is denied and explain the reason and the internal review and Administrative Fair Hearing procedures.

PROCEDURE (VIII-H6): Interstate Compact on Adoption and Medical Assistance (ICAMA)

A child who is receiving Medicaid as a result of an adoption subsidy may continue to receive the subsidy if the child moves to or from another state.

The Adoption Specialist will:

- Refer an adoptive parent to the Adoption Subsidy Coordinator.
- Provide information to the Adoption Subsidy Coordinator for ICAMA forms to be completed.

The Adoption Subsidy Coordinator will:

- Complete the ICAMA forms in relation to a child who is moving from the state and forward the forms to the new state of residence.
- Forward completed ICAMA forms to the Medicaid Eligibility Unit in relation to a child who moves into the state.

PROCEDURE (VIII-H7): Termination of Adoption Subsidy

Termination of an adoption subsidy will occur:

- Upon the adoptive parent(s)' request.
- When the child reaches the age of 18. Adoption assistance will be provided until the child is 21 years of age if the child has a mental or physical disability which warrants continuation and federal funded subsidy is received. (See VIII-H5)
- Upon the child's death.
- Upon the death of the adoptive parent(s) of the child (one parent if a single parent family and both in a two-parent family).
- At the cessation of legal responsibility of the adoptive parent(s) for the child.
- If the Division determines that the child is no longer receiving support from the adoptive parent(s).
- If the family fails to participate in the renewal process for adoption assistance.

The **Adoption Specialist** will:

- Notify the Adoption Subsidy Coordinator of any change in the adoptive family's circumstances which would warrant termination of the adoption subsidy.

The **Adoption Subsidy Coordinator** will:

- Determine if termination of the adoption subsidy is necessary.
- Conduct a staffing with the Manager, Adoption Services Unit.
- Provide written notification to the adoptive parent to explain the reason for the termination of the adoption subsidy and the internal review procedures.
- Provide a copy of the notification to the Adoption Specialist.
- Enter computer data to terminate the adoption subsidy.

POLICY (VIII-I): MUTUAL CONSENT VOLUNTARY ADOPTION REGISTRY

The Division recognizes that some adults who were adopted as children and some birth parents who voluntarily or involuntarily relinquished a child for adoption as well as relatives within the second degree to the adoptee may wish to be identified to each other. The Division also recognizes that some adult adoptees, birth parent(s), and/or relatives to the second degree of the adoptee are unwilling to be identified. The Division further recognizes that some adult adoptees, birth parent(s) of the adoptee, adoptive parent(s), or, in the event of their death, guardians of the adoptee may wish to obtain non-identifying information pertaining to the birth family. In order to protect the privacy of those who choose not to be identified and to attempt to meet the needs of those who do wish to be

identified and to provide non-identifying formation, the Adoption Services Unit administers the Mutual Consent Voluntary Adoption Registry in accordance with Act 957 of 1985 and Act 1060 of 1987. The Division will keep records of every adult adoptee and birth parent reunited through the use of the Mutual Consent Voluntary Adoption Registry.

PROCEDURE (VIII-I1): Mutual Consent Voluntary Adoption Registry

The **Registry Administrator** will:

- Prepare forms to be shared with administrators of other agencies.
- Prepare monthly, quarterly, or annual demographic reports.
- Host a meeting of other Registry Administrators at least once every twelve (12) months.
- Prepare policies and procedures related to the operation of the Registry.
- Establish office procedures which will assure the confidentiality of the Registry, its records, and identifying information.
- Put the information for the affidavit form for placement on the Mutual Consent Voluntary Adoption Registry (MCVAR) at the Department of Human Services Internet website by one of two methods:
 - Print, fill out and send the CFS-434 (MCVAR Affidavit/Registration) to the web site manager, or
 - Fill out the CFS-434 directly on the website electronically.
- Ensure that information contained in the Registry or obtained by Registry staff consists of non-identifying information only.
- Send information packets, which have registration requirements and procedures and an affidavit to any person who inquires about registration.
- Have access to the agency's closed adoption records and to court records limited to the act of verifying a Registry match or for compilation of non-identifying information.
- Collect fees for registration services and accept affidavits for registration.
- Provide written notification to qualified registrants within twenty (20) working days as to the status of the initial search of all registrants who wish to be identified.
- Send notification to match registrants by certified mail, return receipt, restricted delivery.
- Determine if non-identifying information is available and if the registrant is eligible to receive it.
- Provide non-identifying genetic, health and social history of the adoptee within sixty-five (65) working days from the date of registration.
- Mail non-identifying information to the registrant by certified mail, restricted delivery, return receipt requested.

- Maintain copies of non-identifying information in a secured location.
- Keep records on every adult adoptee and birth parent reunited through the use of Mutual Consent Voluntary Adoption Registry.

Adoption Specialist will:

- Refer any person who inquires about the Registry to the Registry Administrator, Adoption Services Unit.
- Provide a minimum of no less than one (1) hour of counseling to Registry applicants for receipt of identifying information and sign the affidavit to verify the service.

POLICY(VIII-J): INTER-COUNTRY ADOPTIONS

The Adoption Services Unit shall provide assistance with Inter-Country Adoptions.

PROCEDURE (VIII-J1): Inter-Country Adoptions

The **Manager**, Adoption Services Unit will:

- Receive inquiries/referrals about inter-country adoptions.
- Provide packets to inquirers about inter-country adoption which will include “Adopting a Foreign Child: Handbook for Persons Thinking about Inter-Country Adoption” (PUB-006) and list of licensed private adoption agencies and licensed social workers who will complete adoption assessments for inter-country adoptions.
- Determine if an adoption assessment prepared by a licensed social worker or others designated by the court (licensed adoption agencies are exempt from this review) meet child placement licensing requirements for adoption in Arkansas.
- Provide approval letter to the United States Immigration and Naturalization Service to verify compliance to licensing requirements.
- Maintain permanent adoption files.
- Train staff with licensed private adoption agencies, licensed social workers, and others designated by the court involved with inter-country adoption.

The **Adoption Specialist** will:

Refer inter-country adoption inquiries/referrals to the Manager, Adoption Services Unit or provide an inquiry packet as described.

IX. SERVICES ACCOUNTABILITY

POLICY (IX-A): INTERNAL REVIEW AND ADMINISTRATIVE HEARING PROCESS

Determination of ineligibility, reduction of services or other adverse actions shall be subject to an Internal Review process. Individuals and families who disagree with the decision of the Division may further appeal through the Appeals and Hearing process conducted by the Office of Chief Counsel.

PROCEDURE (IX-A1): Internal Review of Adverse Action

The following steps are to be followed during the internal review process:

- The applicant who is the subject of an adverse action may request verbally or in writing an Internal Review from the appropriate Administrator or Manager.
- The Administrator or Manager will review the request and forward it with a recommendation to the appropriate Assistant Director for a final disposition.
- The Assistant Director will notify the applicant of the decision to the review within ten (10) working days of receiving the request.
- If the decision is unfavorable to the applicant, the Assistant Director will inform the applicant that the applicant has fifteen (15) working days in which to submit a written appeal to the Director, Division of Children and Family Services, P.O. Box 1437, Slot 626, Little Rock, AR 72203-1437.
- The DCFS Director will notify the applicant within ten (10) working days of the appeal decision.

PROCEDURE (IX-A2): Appeals and Hearings of Adverse Action

A request for an Administrative Hearing must be made within thirty (30) calendar days of receiving a notice of adverse action from DCFS.

When a family who is the subject to an adverse action wishes to request a hearing, they may do so by sending the request in writing to the Department of Human Services, Office of Chief Counsel, Appeals and Hearings Administration Section, P.O. Box 1437, Little Rock, AR 72203-1437.

The Appeals and Hearing Section will notify DCFS that an appeal has been filed. An Investigative File will be prepared immediately and made available to the petitioner, any representative, the OCC Attorney and the Appeals and Hearings Section. (See Procedure IX-A4.)

The Appeals and Hearings section will send out a notice of hearing which contains the time, date, and place of the hearing and the name of the hearing officer who will conduct the hearing.

The hearing will normally take place in the county of residence of the child, not the individual requesting the hearing. However, the hearing may be held in another location if the child will not be detrimentally affected.

If the petitioner fails to appear for the hearing and does not contact the Appeals and Hearing Section prior to the date of the hearing, the appeal will be abandoned.

It is the responsibility of the appropriate office/unit to designate a representative prior to the time of the hearing. The representative must be familiar with the circumstances leading to the adverse decision and must be able to summarize the pertinent aspects of the situation and present the documentation to support the basis for the findings. The representative will be able to answer questions posed by the petitioner or the hearing officer relative to the issue and should be prepared to cross examine witnesses.

The representative may request an Office of Chief Counsel Attorney for representation at the hearing only if the petitioner has an attorney. Send a request for an attorney to the Office of Chief Counsel in the Central Office. The Attorney assigned to the county of residence of the petitioner may be contacted for assistance.

The representative also is responsible for making arrangements for an appropriate place to conduct the hearing.

PROCEDURE (IX-A3): Conduct of the Hearing

- The hearing is conducted by a Hearing Officer from the Appeals and Hearings Section.
- The petitioner may be accompanied by friends or other persons and may be represented by a friend, legal counsel, or other designated representative. The hearing officer may not review material prior to the hearing unless such material is made available to the petitioner or his representative.
- The hearing is conducted in an informal but orderly manner. The Hearing Officer will explain the hearing procedure. The Administrative Hearing Statement will be read by the representative who will then present the Department's case which includes introducing evidence and questioning witnesses subpoenaed to the hearing as well as cross-examining the petitioner's witnesses. After completion of DCFS' case, the petitioner's case will be presented. This includes the opportunity to present witnesses, advance arguments, offer additional evidence, question the agency representative, and confront and cross-examine witnesses.
- Questioning of all parties will be confined to the issues involved.
- In all cases, the petitioner will be advised of the right to judicial review in the event of an adverse ruling.
- The hearing officer will prepare a hearing decision based on a comprehensive report of the proceedings. The format will consist of an Introduction, Findings of Fact, Conclusions of Law, and a Decision. Final administrative action must be completed within ninety (90) calendar days from the receipt of the appeal by the Appeals and Hearings Section provided that:
 - Delays in completing the hearing that are attributable to the petitioner shall not count against the ninety (90) day limit.
 - Failure to complete the hearing process in a timely fashion shall not deprive the department or a court reviewing the child maltreatment determination of jurisdiction to make a final agency determination or review a final agency determination pursuant to the Administrative Procedures Act.
 - The ninety (90) day limit shall not apply if there is an ongoing criminal investigation or criminal charges have or will be filed regarding the occurrence that is the subject of the child maltreatment report.

- In those cases, the administrative hearing shall be stayed pending final disposition of the criminal proceedings.
 - It shall be the duty of the petitioner to report the final disposition of the criminal proceeding to the Department.
 - Each report shall include a file-marked copy of the criminal disposition.
 - The request for an administrative hearing shall be deemed waived if the petitioner fails to report the disposition of the criminal proceedings within thirty (30) days of the entry of a dispositive judgment or order.
 - If the criminal proceedings have reached no final outcome within twelve (12) months of the filing of the administrative appeal, the administrative appeal will be deemed waived if the petitioner fails to provide a written statement of the status of the criminal proceedings every sixty (60) days and a disposition report within thirty (30) days of the entry of a dispositive judgment or order.
- The decision becomes final action unless appealed and subsequently overturned in a court of law.
 - If a true finding of child maltreatment is overturned by Appeals and Hearings, the county which made the original determination will send out an amended “Child Maltreatment Assessment Determination Notification” (CFS-312) within 15 days, advising that the report is now unsubstantiated. These notifications will be sent to all parties who received an original notification of the true finding.
 - The Family Service Worker will provide a copy of the administrative hearing order upon request by a subject of the report.

PROCEDURE (IX-A4): Investigative File for the Administrative Hearing

- The file prepared for the hearing will contain all information obtained during the course of the investigation.
- The office that prepares the investigative file will present evidence to support the decision that is the subject of disagreement. For a hearing being requested based on a child maltreatment assessment report, the file will contain a copy of the “Referral Information Report” (CFS-6001), “Notice of Child Maltreatment Allegation” (CFS-310), “Notice to LEA of Child Maltreatment” (CFS-311), “Administrative Hearing Statement” (CFS-320), and “Child Maltreatment Assessment Determination Notification” (CFS-312). A copy of the return_receipt verification (green card) must also be attached to the file.
- The “Administrative Hearing Statement” (CFS-320) will summarize the nature of the complaint, a summary of the Child Maltreatment Assessment, and the decision. The CFS-320, however, is not evidence. Complete documentation will be required in the investigative file to support the Administrative Hearing Statement.
- County staff or Crimes Against Children Division staff will have ten (10) calendar days to respond to a request from Central Registry for a copy of the investigative file.

- County staff or Crimes Against Children Division staff must complete the CFS-320 upon request by Central Registry for the investigative file. Staff will route the CFS-320 directly to Appeals and Hearings. A copy also will be forwarded to the OCC attorney, if an attorney is assigned. If the name of the assigned OCC attorney is not known, forward the copy of the CFS-320 to the County Legal Operations Coordinator.
- The individual requesting the hearing (the petitioner) will be advised by the Appeals and Hearings Section that the petitioner has ten (10) calendar days to provide a witness list.
- An OCC attorney may provide assistance in case preparation even if the attorney will not be at the hearing.
- Department employees will be expected to attend hearings and present testimony without the benefit of a subpoena and will be notified by the Appeals and Hearings Section of their required presence at the hearing.
- If the agency fails to provide a file to the Appeals and Hearing Section, the DCFS representative will not be allowed to testify or call any witnesses. The DCFS representative will be notified of any witness requested by the petitioner requesting the hearing. The DCFS representative will have five (5) calendar days from receipt of this notice to request a for rebuttal witness list.
- The Department of Human Services, Office of Chief Counsel, will issue the subpoenas under the authority of Ark. Code Ann. § 20-76-201 and 12-12-513. The Chief Counsel of DHS may designate someone to sign subpoenas issued for administrative hearings on child maltreatment.
- Administrative hearing decisions and all exhibits submitted at the hearing are confidential and may be used or disclosed only as provided in §12-12-506(a)(2)(A).

POLICY (IX-B): CHILD DEATH

The Division of Children and Family Services County Office will notify appropriate parties and initiate action to insure the safety of other children in the home when DCFS becomes aware of a child death that occurs on an active case or that may be the result of maltreatment.

The Division will assist the parents in making funeral arrangements or take other actions deemed necessary by the Area Manager.

PROCEDURE (IX-B1): Child Death Protocol

The County Supervisor will:

- Notify the Assistant Director for Community Services and Area Manager immediately by telephone and follow-up with written notification.
- Notify law enforcement as appropriate.
- Report maltreatment to the Child Abuse Hot-line immediately. (This includes weekends, also.)
- Assign a Family Service Worker to go immediately to the home if other children may be there.

- Route a briefing memo to the Assistant Director of Community Services within 24 hours or by close of business on the next day. Attach the “Child Death Notification” (CFS-329) .
- Provide all information requested by the Child Death Review Committee expeditiously.
- Obtain a copy of autopsy report if one is available and notify parents if autopsy is done for a foster child.

The **Family Service Worker** will:

- Immediately go to the home to ascertain the safety of other children remaining in the home and pursue protective custody if necessary.
- Provide any services to the family as needed.
- Share all information about prior contacts with the family with agency staff and law enforcement who are investigating the case.

The **State Police Crimes Against Children Division** will:

- Investigate child maltreatment allegations according to established procedures.
- Coordinate with law enforcement and relinquish their case to them if possible criminal charges are involved and law enforcement prefers to assume responsibility.
- Initiate needed affidavits for legal action.
- Keep the county advised of the status of the investigation, including initial notification when appropriate.
- Share all information with the parents, offender and victim.

The Office of the Assistant Director of Community Services will:

- Notify the DHS Director’s Office, and the DHS Communications Director by telephone on the first business day following the death of the child and follow-up in writing.

PROCEDURE (IX-B2): Guidelines for Funeral Arrangements for Children in Out-of-Home Placement

The Family Service Worker will:

- Notify the County Supervisor in the child’s initiating county and the parent’s resident county with the Area Manager’s approval.
- Assist parents with funeral arrangements and finances as deemed appropriate. Allowable expenses include customary costs such as flowers, appropriate clothing and a grave maker.
- Make the funeral arrangements with the help of the foster parents if the Division has guardianship or the parents are unable to assume this responsibility.
- Use a local Funeral Director.
- Receive prior approval from the Area Manager before contracting for final arrangements.

- Consider the religious and cultural patterns of the family.
- Pay expenses by routing the “Foster Care Authorization for Billing” (CFS-334) if child has savings, or use a DHS Requisition obtained through the DHS-1914 process otherwise.

POLICY (IX-C): CHILD DEATH REVIEW COMMITTEE

The Division of Children and Family Services shall convene a Child Death Review Committee for the purpose of reviewing DCFS actions and previous involvement when a child has died under one of the following circumstances:

- **The child or sibling was a client in a protective service case during the previous twelve months.**
- **The child or a sibling was a client in an open, out-of-home placement, or supportive services case and the death was not due to natural causes.**
- **The child or a sibling was a subject of a pending child maltreatment assessment, or of an assessment within the preceding 12 months.**
- **The DCFS Director requests review.**

The membership will consist of the following persons:

- **Community Services Central Office Representative (1)**
- **Policy Representative (1)**
- **Training/Staff Development Representative (1)**
- **Representative from Office of Chief Counsel (1)**
- **Representative from the Field (1)**
- **Deputy Director (Chairperson)**

The Committee may request others to participate when additional information/expertise is needed.

PROCEDURE (IX-C1): Child Death Incident Intake

The Assistant Director for Community Services will:

- Receive notification of a child death from field offices or other sources.
- Notify the Manager of the Crimes Against Children Division (CACD) of a child death where the circumstances meet the criteria for the Child Death Review Committee.

The Community Services representative will:

- Gather information regarding the death of the child to present to the Death Review Committee.

PROCEDURE (IX-C2): Child Death Review Committee

The Child Death Review Committee will:

- Meet as needed.
- Hear and consider all relevant material related to cases scheduled for review.
- Recommend to the Director appropriate actions as deemed necessary and desirable to protect other children in the home or other corrective actions.

POLICY IX-D: Removal of an Offender's Name from the Central Registry

The Child Maltreatment Central Registry is established within the Department of Human Services for the collection of records of cases involving allegations of child maltreatment which are determined to be true pursuant to Arkansas Code 12-12- 512.

Records of all cases where allegations are determined to be true shall be retained by the Central Registry. If an offender is convicted of a crime, an element of which is child maltreatment as defined by Arkansas law, the offender's name shall always remain in the Central Registry. The Department shall identify the types of child maltreatment which will automatically result in the removal of the name of an offender from the Central Registry if certain conditions are met.

Names of offenders of serious child maltreatment should never be removed from the registry. These child maltreatment types are: Abuse with a Deadly Weapon, Bone Fractures, Brain Damage/Skull Fracture, Burns/Scalding, Death, Immersion, Internal Injuries, Malnutrition, Poison/Noxious Substances, Oral Sex, Sexual Exploitation, Sexual Penetration, Shaking a Child Under Age Three, Striking a Child with a Closed Fist, Subdural Hematoma, Suffocation, and Interfering with a Child's Breathing.

The Department will also identify types of child maltreatment for which an offender can petition the Department for name removal if there has not been a subsequent true report for this type for five (5) years, and more than five (5) years have lapsed since the closure of any protective services or foster care case opened as a result of this report.

PROCEDURE (IX-D1): Automatic Name Removal from Central Registry

- The offender's name will be automatically removed from the Central Registry for the following types of child maltreatment, dependent upon no subsequent true report for one year, and verification that any related service case has been closed for at least one year prior to removal:
 - Educational Neglect-Priority II
 - Environmental Neglect – Priority II
 - Inadequate Clothing- Priority II
 - Inadequate Food- Priority II
 - Inadequate Shelter-Priority II

- Inadequate Supervision-Children 6 yrs or older-Priority II

The County Supervisor or designee will:

- Check monthly report of Automatic Removals from the Central Registry in CHRIS.
- Send Notice of Name Removal from the Central Registry (CFS-327) to offenders identified for your county within ten (10) days of receiving the CHRIS report.
- Attach copies of the original Notice to LEA (Local Education Agency) of Child Maltreatment (CFS-311) and Child Maltreatment Assessment Determination Notification (CFS-312) to the CFS-327 and submit copies to all parties who received original notice of child maltreatment determination.

**PROCEDURE (IX-D2): Name Removal from Central Registry
After Five (5) Years**

- If an offender has been entered into the Central Registry as an offender for the following types of child maltreatment, the offender may request that his name be removed from the Central Registry when the offender has not had a subsequent true report of this type for five (5) years and more than five (5) years have lapsed since the closure of any protective services or foster care case opened as a result of this report.
 1. Medical Neglect-Priority II
 2. Mental Injury-Priority II
 3. Medical Neglect of Disabled Infants-Priority I
 4. Munchausen Syndrome by Proxy or Illness Falsification by Proxy-Priority II (Non-Serious Injury)
 5. Sprains /Dislocations-Priority II
 6. Striking a Child Age Seven or Older on the Face-Priority II
 7. Striking a Child Age Six or Younger on the Face-Priority I
 8. Throwing or Kicking a Child-Priority II (Non- Serious Injury)
 9. Abandonment-Priority I
 10. Cuts, Welts, or Bruises- Priority I or II
 11. Human Bites- Priority II
 12. Inadequate Supervision- Priority II
 13. Lock-Out- Priority II
 14. Substance Misuse- Priority II
 15. Sexual Contact-Priority I (Non-Coercive Contact between two juveniles and the victim was not under the age of 10)
 16. Failure to Thrive-Priority I
 17. Pornography/Live Sex Act Exposure-Priority I

18. Indecent Exposure-Priority I
 19. Threat of Harm-Priority I
 20. Failure to Protect-Priority I or II
 21. Shaking a Child Age Four or Older-Priority I
 22. Tying/Close Confinement – Priority II
 23. Lockout-Priority II
- If an offender is criminally convicted of a crime, an element of which is child maltreatment, as defined by Arkansas law, the offender’s name shall always remain in the Central Registry.
 - Part of the request for removal must include a “clean” Arkansas Crime Information Center (ACIC) check for the preceding five years, as it relates to child maltreatment-related offenses. Evidence of rehabilitation may also be presented and considered. A committee of DCFS, CACD and OCC staff, as referenced in the attachment will consider this request.
 - If the Department denies the request for removal of the name from the Central Registry, the offender may request an administrative hearing within thirty (30) days from the receipt of the Department’s decision.

Procedure (IX-D3): Process for Application to Have Name Removed From the Central Registry After Five Years

An offender can at any time after five years from the date of a founded complaint of a child maltreatment type listed in Procedure IX-D2 make an application for a review of his case and request that his name be removed from the Child Maltreatment Central Registry.

- The application shall be in writing and shall be sent to the Director of DCFS.
- The request will be submitted via the CFS-328 (Request for Name Removal from the Central Registry).
- It shall outline the request and must mention the date and type of maltreatment, and the victim’s name, as well as any other identifying information.
- If there is an open DCFS case that stems from or is related to the report at issue, the request will be denied. There will be no appeal from this decision as the statute requires that any case be closed for five years.
- If there have been other founded complaints in the five year period, the application will be denied until there are a full five years without any further founded complaints. There will be no appeal on this decision.
- If the child maltreatment type is in the five year category, and there have been no additional founded complaints, and all resulting cases have been closed for five years, the offender will have a right to a review of the case.

The Child Maltreatment Central Registry Review Team:

- The Director of DCFS will appoint the members of the Central Registry Review Team. The Review Team will be made up of DCFS central office and field staff, CACD and a representative from OCC. There should be five members with alternates in case of scheduling conflicts.
- The Review Team will select an alternating chairperson for each quarter.

- The Review Team will review any requests that meet all criteria on a quarterly basis; the team will meet in March, June, September, and December.
- Review requests must be received 60 days in advance of the review meeting, and all Review Team members will be provided with the case information 15 days prior to the review team meeting. All decisions will be by a vote of the team members.
- All team decisions will be in writing and sent to the applicants by certified mail within 15 days of the review team meeting. All approved decisions will be submitted via the CFS-327 (Notification of Name Removal From the Central Registry).
- Attach copies of the original CFS-311 (Notice to LEA (Local Education Agency) of Child Maltreatment) and CFS-312 (Child Maltreatment Assessment Determination Notification) to all approved decisions and submit copies to all parties who received original notice of child maltreatment determination.
- If the Review Team denies the application, the perpetrator will have 30 days to appeal the decision according to the same policy as set out in the child maltreatment act for appealing initial founded complaints (A.C.A. § 12-12-512).

POLICY (IX-E): VEHICLE AND PASSENGER SAFETY

DCFS staff (paid and volunteer) will operate motor vehicles (state-owned or privately owned used on state business) in a safe manner, observing all traffic laws and making allowances for road and weather conditions. They will also promptly report to their supervisor any accident or traffic violation in which they are involved.

Seat belts will be used in accordance with Arkansas law at all times by drivers and passengers of state vehicles and private vehicles used for state business.

Children who are less than six (6) years old AND who weigh less than sixty (60) pounds will be properly restrained in an approved child passenger safety seat. If a child is at least six (6)

years old OR at least sixty (60) pounds in weight, a standard lap/shoulder seat belt will provide sufficient restraint and safety.

PROCEDURE (IX-E1): Vehicle and Passenger Safety

DCFS staff (paid and volunteer) in a state vehicle or privately owned vehicle on state business will ensure that:

- All adult passengers and children at least 6 years old OR 60 pounds in weight are restrained with a lap/shoulder seatbelt in accordance with Arkansas Law.
- All children less than 6 years old AND less than 60 pounds in weight are restrained in an approved child passenger safety seat.

X. SPECIAL SERVICES

POLICY (X-A): HOME STUDIES AND SUPERVISION

The Division will conduct home studies or provide supervision services when ordered by the juvenile division of the circuit court. The Division will also conduct home studies for cases in which DCFS is a party of the litigation and for Interstate Compact on the Placement of Children (ICPC) cases. A court order to conduct a home study is not required for cases in which DCFS is a party to the litigation nor for ICPC cases.

The Division will not be required to conduct a court ordered home study, investigation or supervision related to private litigation cases (i.e. divorce, custody) unless the court has first determined that the responsible party is indigent.

Requests for home studies on adoption cases requested from other states will only be conducted through ICPC.

PROCEDURE (X-A1): Guidelines for a Home Study

Upon receipt of a request for a home study, the Services Supervisor will:

- Log the request in the "Referral Log Screen" in CHRIS.
- Assign the case to a Family Service Worker or, if it is a request to conduct a non-relative independent adoption study, forward the request to the Adoption Unit, Slot S565 for assignment to an Adoption Specialist.
- Contact OCC if an in-state court ordered home study request is received on a private litigation case that does not contain indigent language indicating the responsible party is unable to pay.

The Family Service Worker will:

- Contact the family by letter to advise of the request to conduct a home study. Enclose with the letter the appropriate forms to be completed by the family: "Home Study/Supervision Client Questionnaire" (CFS-421/1-6), "Request for Central Registry Check" (CFS-316), and
- "Request for Criminal Record Check" (CFS-306). The family will be advised to return the completed forms to the worker within seven (7) working days.
- Contact the family a second time if the family has not returned the completed forms within the seven-day period. Advise the family that the completed forms must be returned within five (5) working days. If the family does not respond to the second request, the worker will send a letter to the requesting party advising that the family has not responded to efforts to conduct the home study. Completion of the home study should not proceed if the information forms are not completed. Any assistance in completion of the forms should be provided or arranged by the worker in situations of physical or mental disabilities or illiteracy.
- Contact the family to schedule a home interview upon receipt of the completed forms.
- Interview the family. Follow the guidelines for completing a home study as outlined in policy. The home study is to be completed within thirty (30) working days of receipt of the

request. Notify the requesting party if additional time will be required to complete the home study.

- Forward the completed home study with a cover letter to the court and the requesting party if different. A copy of the home study will be retained in the county office case file.

PROCEDURE (X-A2): Content of the Home Study

- Purpose of the Home Study: Discuss the basis of the action and primary persons involved.
- Household Composition: The full legal names of everyone residing in the home, birth dates, relationships to one another, and a brief physical description.
- Housing: Address and location, type of structure, length of time at residence, upkeep and housekeeping standards, future residence plans, and sleeping arrangements.
- Income and Expenses: Employment history for the last five (5) years (duration, salary, duties/title, degree of job security, hours), other sources of income, monthly living expenses, outstanding debts, and insurance.
- Health: Current health of each family member, prior illnesses or medical problems, disabilities, clinic or doctor utilized and frequency of use, counseling (when and purpose), and hospitalization for alcohol abuse, drug abuse, or mental illness.
- Education: Family members' educational attainment, future educational plans, parenting classes attended, child's school, child's teacher (verification with school personnel on how the child is doing, academically and behaviorally), child's current school grades, child's educational functioning, any school problems or successes experienced by the child.
- Child Care Arrangements or Plans: Current arrangement or proposed arrangement as it relates to their working hours and income.
- Child Rearing Practices: Purpose of discipline, correction methods, how they show affection, how they handle stress, allowance, chores, and homework.
- Daily Schedule: Routines, sleeping habits, feeding habits, personal hygiene habits and consistency with routine.
- Social History: Highlights and verification regarding action of marriages and divorces, children, relationships' support system, future plans, any significant extended family members not living in the home, and any significant personal, developmental, personality or legal problems.
- Family Activities: Religious interests, social organizations, activities with children, and family roles.
- Collateral and Reference Contacts: Discuss the results of contacts with the "Request for Central Registry Check" (CFS-316), "Request for Criminal Record Check" (CFS-306), school, day care providers, and "Reference Letter for Home Study" (CFS-421/2). Any problems or concerns identified through collateral or reference contacts should be shared when appropriate with the family for clarification and further discussion.
- Impressions, Conclusions and Recommendations: Evaluate the family's situation and ability to provide for a child based on the information obtained during the home study.

PROCEDURE (X-A3): Supervision Record

The Family Service Worker/Adoption Specialist will:

- Write a narrative account detailing the services delivered and activities conducted in the “Services” section in CHRIS or narrative paper.
- Maintain a file containing the court order, correspondence, narrative and any forms.

XI. DCFS EDUCATIONAL LEAVE AND EDUCATIONAL ASSISTANCE

POLICY (XI-A): DCFS EDUCATIONAL LEAVE AND EDUCATIONAL ASSISTANCE

DCFS Policy No. XI-A establishes guidelines for administering the DCFS Educational Leave and Educational Assistance Programs. This policy addresses the types of leave and assistance available, the application and selection processes and criteria, related personnel and contract processes, and participant benefits and responsibilities under the program. Also included is information on the role of the employee performance evaluation and procedures associated with completion of the program.

In administering the DCFS Educational Leave and Educational Assistance Program, DCFS will adhere to all provisions of the Americans with Disabilities Act (ADA). The program will comply with Titles VI and VII of the Civil Rights Act and will be administered without regard to age, religion, disability, political affiliation, veteran status, sex, race, color, or national origin.

PROCEDURE (XI-A1): EDUCATIONAL LEAVE

1. Full-Time Educational Leave - Full-time educational leave may be granted to an employee to attend an accredited educational institution to pursue a Master of Social Work (MSW) degree. When on approved full-time educational leave, the employee is granted time off on a full-time basis (40 hours per week). Upon completion of the educational leave program, the employee agrees to work for DCFS in a direct service position. The work commitment will be calculated at the rate of two (2) months for each month of educational leave. Attendance in any part of a month will be considered as a full month.
2. Part-Time Educational Leave - Part-time educational leave is granted to an employee to attend an accredited educational institution to pursue a Master of Social Work (MSW) degree. The employee is granted twenty (20) hours or less time off from work. Upon completion of the educational leave program, the employee agrees to work for DCFS in a direct service position. The work commitment will be calculated at the rate of one month for each month of educational leave. Attendance in any part of a month will be considered as a full month.

PROCEDURE (XI-A2): EDUCATIONAL ASSISTANCE

The Child Welfare Student Stipend Program is available to eligible students entering their senior year of study. Students selected to receive a stipend must enter into a contract and commit to employment with DCFS and remain employed with the division for a minimum of one (1) year following graduation.

POLICY (XI-B): DCFS MSW EDUCATIONAL LEAVE PROGRAM

The purpose of the DCFS MSW Educational Leave Program is to enable the Division to employ an increased number of persons who possess the MSW degree to work in programs throughout the state that serve Title IV-E children. Full-time or part-time educational leave may be approved for an employee pursuing an MSW to attend the University of Arkansas at Little Rock MSW Program, located in Little Rock (UALR), or the UALR off-campus program, located at the University of Arkansas at Fayetteville (UAF) School of Social Work. The DCFS Director can grant an employee special approval to attend accredited Schools of Social Work in bordering states if the school is in close proximity to Arkansas and is readily accessible by the employee.

The participants in the DCFS MSW Educational Leave Program are responsible for satisfying identified academic requirements and fulfilling specific obligations to DCFS while on educational leave. Failure to meet these responsibilities constitutes a violation of the Educational Leave Contract (DCFS-4331) and will result in contract termination.

PROCEDURE (XI-B1): ELIGIBLE EMPLOYEES

The DCFS MSW Educational Leave Program is limited to current DCFS employees with a minimum of two (2) consecutive years of full-time regular status DCFS employment working in child welfare prior to January 1 of the year of application. Preference will be given to employees who are in Family Service Worker, Family Service Worker Specialist, and Family Service Worker Supervisor positions. To be eligible to apply for the DCFS Educational Leave Program, the employee must currently occupy a position designated as a grade 22 or lower.

PROCEDURE (XI-B2): FULL-TIME AND PART-TIME MSW EDUCATIONAL LEAVE

- A. Under the full-time DCFS MSW Educational Leave Program, the selected employee is relieved of all duties for the duration of the program and allowed to attend the UALR MSW Program, at either the Little Rock or Fayetteville campus, on a full-time basis to pursue a MSW degree. While in the program, the participant will occupy a position at a salary determined by the DCFS Director and retain all benefits normally afforded a regular status employee, unless specifically stated in policy. (See Procedure XI-B13 (D) Rights and Benefits Retained.)
- B. The part-time MSW Educational Leave Program affords the selected employee the opportunity to attend the UALR MSW Program, at either the Little Rock or Fayetteville campus, on a part-time basis and relieves the employee of partial responsibility for job duties, in proportion to the number of semester hours attempted. The part-time educational leave program must be completed within three calendar years. The part-time participant receives a salary and retains all rights and benefits while in the program, except where stated otherwise in policy. (See Procedure XI-B13 (D) Rights and Benefits Retained.)
- C. Employees who already are enrolled in the UALR MSW Program may apply for acceptance in the MSW Educational Leave Program if they meet all other eligibility requirements for the program.
- D. Tuition, fees, and books will be provided by DCFS through a contract with UALR. The Division will not pay for parking or non-required student activity fees.

PROCEDURE (XI-B3): APPLICATION PROCESS

Participation in the MSW Educational Leave Program requires successful completion of a two-fold application and approval process, as follows:

- 1). Application and acceptance into the UALR MSW Program; and
- 2). Application and acceptance into the DCFS MSW Educational Leave Program.

The employee must follow both the UALR and Divisional procedures described in Procedure XI-B4 and Procedure XI-B5 below.

PROCEDURE (XI-B4): UALR/UAF MSW PROCEDURES

- A. Obtaining Application Forms - The employee must obtain the necessary admissions packet from UALR. Application forms for the UALR MSW Program are needed for the full-time and part-time programs at the Little Rock and Fayetteville campus. Application forms requesting entrance into the UALR off-campus program in Fayetteville must be obtained from the Graduate Coordinator at the UALR MSW Program.
- B. Admission Criteria - The employee must be accepted into the UALR MSW Program prior to acceptance into the DCFS MSW Educational Leave Program on either a full-time or part-time basis. Information on admissions criteria can be obtained directly from UALR.
- C. Completion/Submission of Application Forms - The required application forms must be completed and submitted as indicated by UALR. Pre-application assistance is available through the UALR MSW Program. Upon submission of the required application forms, the employee must forward a Letter of Interest to the DCFS Professional Development Unit.
- D. Deadline for Submission of Forms - Application forms must be submitted within the time frames established by UALR. Typically, forms must be submitted by March 1 to be considered for the MSW program beginning in August of the same year.
- E. Testing Requirements - The employee is required to take and pass either the Miller Analogy Test (MAT) or the Graduate Record Exam (GRE). The employee must pay all costs associated with the testing and is responsible for submitting the entrance examination score to the UALR MSW Program.
- F. Acceptance/Non-Acceptance - UALR will notify the employee regarding the status of his/her application. Upon acceptance, the employee must forward a copy of the notification letter from UALR to the DCFS Professional Development Unit.

**PROCEDURE (XI-B5): DIVISIONAL PROCEDURES –MSW
EDUCATIONAL LEAVE PROGRAM**

- A. Recruitment -On an annual basis, DCFS will publicize the availability of educational leave positions and accept applications for full-time and part-time MSW educational leave from qualified DCFS employees. The DCFS Professional Development Unit will distribute the information that generally describes the DCFS MSW Educational Leave Program and the process necessary for acceptance. The process includes successful completion of: 1.) An initial screening, 2.) Application submission, 3.) Selection and recommendation by the DCFS Educational Leave Committee, and 4.) Final approval by the Division Director.

- B. Initial Screening Process - The DCFS employee must submit a Letter of Interest to the Program Coordinator/Manager of the DCFS Professional Development Unit. The Letter of Interest may be submitted at any time after the statewide announcement, but no later than April 1 of the year in which the employee plans to matriculate. The Letter of Interest should contain the following, at a minimum:
- A statement expressing the employee's desire to be considered for participation in the DCFS MSW full-time or part-time program, and a request for an application for admission.
 - An affirmation that to the best of the employee's knowledge, the employee meets the following minimum eligibility requirements:
 - Is a current DCFS permanent employee with at least two (2) consecutive years of full-time regular status employment with DCFS working in child welfare prior to January 1 of the year of application.
 - Occupies a grade 22 position or less.
 - Has accrued no more than three (3) disciplinary points for infraction of departmental conduct standards during the past two years.
 - A statement explaining why the employee is interested in obtaining a MSW degree and how obtaining such a degree would benefit the Division.
 - A statement asserting an understanding of and a willingness to fulfill the required work commitment to DCFS if educational leave is granted.
 - A statement relating the status of employee's application for admission to the UALR MSW Program.

Within ten (10) working days from receipt of the Letter of Interest, the DCFS Professional Development Unit will determine if the employee meets the minimum eligibility requirements.

If the employee meets the minimum eligibility requirements, the Program Coordinator/Manager of the DCFS Professional Development Unit will:

- Send the employee a letter acknowledging receipt of the Letter of Interest and confirming that the employee meets the minimum eligibility requirements;
- Include a copy of the DHS-1188 "Application for Part-Time or Full-Time Educational Leave,";
- Include a blank copy of "Arkansas Department of Human Services Division of Children and Family Services Educational Leave Contract (Full-time/Part-time MSW Student)"(CFS-4331) for review.
- Forward a copy of the letter confirming the employee's eligibility for consideration of acceptance to the UALR MSW Program.

If the employee does not meet the minimum eligibility requirements for consideration of acceptance, the Program Coordinator/Manager of the DCFS Professional Development Unit will notify the employee by letter.

- C. Completion/Submission of Application Forms - Upon notification of acceptance to the UALR MSW Program, the employee will forward the following documentation to the DCFS Professional Development Unit:

-
- A completed DHS-1188 "Application for Part-Time or Full-Time Educational Leave," signed by the immediate supervisor(s) and the Area Manager, if applicable;
 - A written recommendation from the supervisor attesting to the employee's attitude, work ethic, and future potential, as required on the DHS- 1188; or
 - A written narrative from the supervisor stating reasons for disapproval, as required on the DHS- 1188, if applicable;
 - A copy of the application and other information submitted to the UALR MSW Program; and,
 - A copy of the Letter of Acceptance from the UALR MSW Program.

In the event the employee does not receive supervisory approval on the DHS-1188, the employee's denied application and other documentation should be routed to the DCFS Professional Development Unit. Upon receipt, the Program Coordinator or Manager of the DCFS Professional Development Unit will forward the denied application to the Division's Assistant Director for Community Services and/or Director for review and disposition.

- D. Deadline for Submission of Forms – Completed application forms must be submitted to the DCFS Professional Development Unit within ten (10) days of receipt of the Letter of Acceptance from the UALR MSW Program. Applications must be received by **June 1** to be considered for the MSW program beginning in August of the same year.
- E. Routing Forms - The routing of the applications will follow prescribed departmental routing procedures, as detailed in the instructions in the DHS-1188.
- F. Notification to Applicants – The DCFS Professional Development Unit will notify each applicant regarding the status of his/her application (DHS-1188) within ten (10) working days of receipt. Upon acceptance, the applicant will be advised that the application will be submitted to the DCFS Educational Leave Committee for further consideration. When an applicant is rejected, the reason for non-acceptance will be provided.

PROCEDURE (XI-B6): THE SELECTION PROCESS:

The following describes the selection process by which a participant is chosen for the DCFS MSW Educational Leave Program. This section includes the composition and responsibilities of the DCFS Educational Leave Committee and the in-person interview.

- A. Committee Responsibilities – The DCFS Educational Leave Committee will review all applicants who have been accepted by UALR and have met the established criteria for the DCFS MSW Educational Leave Program. The review will include conducting in-person interviews to prioritize applicants.
- B. Committee Composition – Committee members will be appointed on a yearly basis by the Division Director. The committee will consist of seven (7) individuals, as follows:
 - One Assistant Director
 - One representative from the Community Services Section
 - One graduate from the DCFS MSW Educational Leave Program
 - Two Area Managers

- One Family Service Worker or Family Service Worker Specialist
 - One representative from the University Partnership
- C. Criteria for Selection – The committee will assess each application using the following criteria:
- Type of position occupied, with preference given to individuals in Family_Service Worker, Family Service Worker Specialist, and Family Service Worker Supervisor positions.
 - Length of service with DCFS, with an emphasis on years/months spent in direct service positions.
 - Performance evaluation rating from the previous two (2) years.
 - Supervisory recommendations.
 - Demonstration of the likelihood of continued employment with DCFS in a program serving Title IV-E eligible children, for the contracted period of time following the completion of the educational plan.
 - Writing skills.
 - Information obtained and observations made during the in-person interview.
- D. Deadlines for Review Process – Completion of the committee review, including the screening and interviewing phases, must occur within twenty (20) working days after the DCFS eligibility letters are sent to the applicants.
- E. Determining Number of Selectees - The maximum number of educational leave positions available is seven (7) for the full-time program and three (3) for the part-time program. The DCFS Director has discretion to increase or decrease the number of participants in the program.
- F. Committee's Recommendation - The DCFS Professional Development Unit will submit committee recommendations and applicant rankings to the DCFS Director within five (5) working days of notification of applicants selected by the committee.
- G. Notification to Applicants - Applicants will be notified in writing within ten (10) working days following the selection or non selection of applicants by the DCFS Director.
- H. Orientation - The Division will hold an orientation session for all selected applicants. The DCFS Professional Development unit will notify each selected applicant of the date and location of the orientation. The orientation agenda will address the following:
- A discussion of relevant personnel issues.
 - An explanation of responsibilities of both the selected employee and the Division.
 - An explanation of the Educational Leave Contract (CFS-4331).
 - A period for questions and answers.
 - Signing and notarizing the CFS-4331.

PROCEDURE (XI-B7): GRADE POINT REQUIREMENTS

- A. Minimum Grade Point to be Attained - The participant must meet all academic requirements of UALR and the UALR MSW program. A minimum grade point average of 3.0 (on a scale of 4.0) must be maintained to remain in the full-time or part-time DCFS MSW Educational Leave Program.
- B. Reporting Grade Point - The participant must submit each semester's grades to the DCFS Professional Development Unit within ten (10) working days after final grades are received each semester.

PROCEDURE (XI-B8): CLASS ATTENDANCE REQUIREMENTS

Each participant in the DCFS MSW Educational Leave Program is expected to attend scheduled classes. A maximum of three (3) classes may be missed during a given semester. In case of a serious illness or emergency, the participant must contact the DCFS Professional Development Unit. Failure to attend scheduled classes will result in contract termination. The participant is considered a regular student and will take the same holidays as authorized by the university. Under the DCFS MSW Educational Leave Program, the participant is required to attend all scheduled summer sessions.

PROCEDURE (XI-B9): SUPERVISION WHILE ON EDUCATIONAL LEAVE

The DCFS Professional Development Unit will be responsible for monitoring the performance and conduct of full-time educational leave participants for the duration of the program. The part-time participant will continue to receive direction from the participant's supervisor during assigned work hours.

PROCEDURE (XI-B10): DOCUMENTATION REQUIRED AS EVIDENCE OF GRADUATION

The MSW student must provide the DCFS Professional Development Unit with official notification of graduation no later than ten (10) days prior to the scheduled graduation date.

Upon graduation from the DCFS MSW program, the participant must arrange for UALR to furnish an official transcript to the DCFS Professional Development Unit. This must be provided within twenty (20) working days following graduation. The original transcript will be placed in the employee's official personnel file, housed at the DHS Office of Human Resources (OHR).

PROCEDURE (XI-B11): PLACEMENT INTO A POSITION

Following graduation from the UALR Graduate School of Social Work, DCFS will place the employee into a regular position, according to the guidelines listed below. Participation in the normal DHS competitive hiring process is not required for new graduates of the DCFS MSW Educational Leave Program, but will be required for any subsequent position.

- A. Application Process Requirements - The graduating employee will complete an internal job application. The completed application must be sent to the DCFS Professional Development Unit six (6) weeks prior to the expected date of graduation. The DCFS Professional Development Unit will forward the document to the Assistant Director, Community Services, and the DCFS Personnel Unit.

- B. Identification of Appropriate Position - Within three (3) weeks of receiving an internal application, the DCFS Personnel Unit will review the Division's vacancies and identify a position of equal or higher grade than the position the employee held prior to acceptance into the DCFS MSW Educational Leave Program. After the review, the DCFS Personnel Unit will forward the vacancy listing to the DCFS Assistant Director for Community Services and the DCFS Professional Development Unit. In addition to qualifications presented on the application, the geographic preference indicated by the employee will be a consideration in locating an appropriate placement.

Within two (2) weeks prior to graduation, the Assistant Director for Community Services, the DCFS Professional Development Unit, and the appropriate Area Manager will meet to make recommendations for placement. Placement interviews will be scheduled prior to the day on which the employee is scheduled to report to work.

- C. Time Frames Related to Placement – The DCFS Professional Development Unit will notify the student of the assigned county and the date for reporting to work. The employee will be placed into a DCFS position within thirty (30) calendar days following the date that the Division is notified of his/her graduation.
- D. Personnel Documentation Requirements - The DCFS Personnel Unit will complete and process the Request for Personnel Action (DHS-1161) and will ensure that all necessary approvals and documentation are attached. The DCFS Director must approve each placement before the employee is notified of the assigned position. A copy of the DHS-1161 indicating placement of the MSW graduate will be sent to DCFS Professional Development Unit for placement in the graduate's file.

PROCEDURE (XI-B12): WORK COMMITMENT TO THE DIVISION

- A. Terms of Employee Obligation - As stipulated in the Educational Leave Contract (CFS-4331), the graduating employee must accept employment with DCFS in a direct service position. The employee must work the equivalent of two (2) months for each month of full-time educational leave and one month for each month of part-time educational leave. Attendance in any part of a month will be considered as a full month.
- B. Consequences if Employee Violates Terms of Agreement - Failure by the employee to honor the work commitment constitutes a contract violation and will result in the employee becoming responsible for reimbursing DCFS for the full amount expended during the contract period. (See XI-B13 (B2) Breach of Contract/Contract Termination.)

PROCEDURE (XI-B13): PERSONNEL PROCESSES RELATED TO THE DCFS EDUCATIONAL LEAVE PROGRAM

A. Designating Educational Leave Positions

Educational leave participants will be placed in a position determined by the DCFS Director.

B. Contracting Requirements

In order to formalize an employee's participation in the DCFS MSW Educational Leave Program, a contract between the Division and the employee is required, according to the following guidelines:

1. Requirements for Formal Contract

Acceptance into the DCFS MSW Educational Leave Program is not considered official until the DCFS Director and the selected employee enter into a formal contract. Employees entering either the full-time or part-time educational leave program must sign and adhere to the provisions of the Educational Leave Contract (CFS-4331).

The agreement will detail the responsibilities and obligations of both parties in relation to the DCFS MSW Educational Leave Program. Contract stipulations will address the following:

- a. Duration of the educational leave.
- b. Authorized salary and other benefits to be afforded the participant.
- c. Post-educational-leave work commitment to the Division.
- d. Provisions for premature contract termination.

2. Breach of Contract/Contract Termination

Violation of the terms of the Educational Leave Contract by the employee is considered a breach of the contract with DCFS. The Division will report a breach of contract simultaneously to the DHS Office of Administrative Services and the DHS Office of Chief Counsel. The employee will be required to make restitution to the Division for contract violations. Contract violations include, but are not limited to, being placed on academic or disciplinary probation or failing to meet the commitment for continued employment following graduation. The employee will be required to reimburse DCFS for salary and benefits and for all educational expenses, including tuition, books, academic fees, and other related expenses, for the completed period of educational leave. If an employee violates the terms of the contract after starting the work commitment, repayment will be calculated according to the months worked.

At the discretion of DCFS, the contract may be terminated or renegotiated following thirty (30) calendar days written notice to the employee. Circumstances leading to contract termination or re-negotiation may include insufficient funds, a reduction in force, or other reasons identified by DCFS.

C. Salary Received

DCFS provides a salary and benefits for each employee in the DCFS MSW Educational Leave Program for the duration of the employee's participation in the program.

1. Determining Salary Amount - The salary amount to be paid a participant in the full-time and part-time programs will be determined by the DCFS Director. This amount may not exceed the employee's salary prior to acceptance into the program.
2. Performance-based Merit Raises and Cost-of-Living Salary Increases - The employee on full-time or part-time educational leave will not qualify for any performance-based merit raise program legislated by the Arkansas General Assembly.
3. Income Tax and Social Security Deductions - DCFS will continue to withhold income tax and Social Security taxes from the employee's salary while the employee is a participant in the DCFS Educational Leave and Educational Assistance Program.

D. Rights and Benefits Retained

An employee on full-time or part-time DCFS MSW educational leave will retain all regular-status rights and benefits, unless otherwise noted.

1. Annual/Sick Leave Accrual – Employees on full-time MSW educational leave will not accrue annual or sick leave. However, if an emergency situation occurs and a full-time student is unable to attend class, the student shall contact the DCFS Professional Development Unit to discuss available options.

A participant in the part-time educational leave program will accrue annual and sick leave on a pro-rated basis.

2. Retirement - Retirement deductions, if applicable, will continue to be withheld for an employee on educational leave. The formula for calculating length of service for retirement purposes will not be affected by an employee's participation in the DCFS Educational Leave Program.
3. Insurance - A participant's insurance coverage contribution will continue to be withheld while the employee remains on educational leave. DCFS will continue to assume responsibility for a portion of the employee's insurance

E. Personnel Performance Evaluation System/Career Ladder Incentive Program Eligibility

The full-time participant in the DCFS MSW Educational Leave Program will not be subject to the annual evaluations required by the Arkansas Personnel Performance Evaluation System (PPES). The part-time participant will be evaluated only if actual work is performed for an equivalent of six or more months, as determined by the employee's PPES rating period. Neither full-time nor part-time participants will be eligible for the Career Ladder Incentive Program (CLIP).

POLICY (XI-C): CHILD WELFARE STUDENT STIPEND PROGRAM

The Division of Children and Family Services (DCFS) participates in a child welfare student stipend program in order to hire more employees with degrees in social work and social work-related fields on a state-wide basis to work in DCFS programs serving Title IV-E eligible children. Any student awarded a stipend is under contract with the Division and will be required to work for DCFS after graduation.

Eligible applicants may attend any participating degree program in the State of Arkansas. The Division and the University Partnership will determine yearly the number of stipends awarded. The Division, in conjunction with Title IV-E university staff, will determine which students will receive stipends.

Students in the BSW and other participating bachelor's degree programs are awarded stipends during their senior year.

DCFS may approve stipends for second year MSW students provided that any DCFS educational leave positions are not filled and the number of MSW stipend students does not exceed the number of vacant educational leave positions.

The following information provides the procedures governing the Child Welfare Student Stipend Program.

PROCEDURE (XI-C1): PROCESS FOR RECEIVING A STIPEND

Students interested in the Child Welfare Student Stipend Program are required to complete the Child Welfare Student Stipend Application (CFS-4332). Applications are reviewed and recommendations made by the Title IV-E university staff and the DCFS Area Managers. Upon selection the university will submit a copy of the Child Welfare Student Stipend Application (CFS-4332) and the original Child Welfare Student Stipend Agreement (CFS-4330) to the DCFS Professional Development Unit for review. After review, the DCFS Professional Development Unit will forward the CFS-4330 to the DCFS Director for approval and signature.

The student is required to enter into a contract with the Division upon awarding of the stipend. The student must sign and adhere to the provisions of the Child Welfare Student Stipend Agreement (CFS-4330). If the student violates the terms of the contract, the Division will employ remedies to address the identified breach.

PROCEDURE (XI-C2): SELECTION CRITERIA

The decision to award a stipend will be based on the following:

- Academic success. The student can not be on probation or in jeopardy of not graduating.
- Interest in child welfare; e.g., volunteer work, attendance at workshops, special training, related work experiences, independent study projects.
- Completion, or plan to complete, one or more courses/seminars with an emphasis in child welfare.
- Willingness to work, following graduation, in any county based on the needs of the Division.
- Agreement by student to complete the number of hours required by the university for field placement, while based in an assigned DCFS county office under the joint supervision of a university field instructor and DCFS supervisor.
- The approval of MSW stipends will occur as outlined in Procedure XI-B6 "The Selection Process".

PROCEDURE (XI-C3): STUDENT COMMITMENT TO DCFS

- A. The student commits to fulfill field hours in a DCFS county office, as required by the participating university program.
- B. The student commits to accept employment with DCFS for a minimum of one (1) year following graduation.

PROCEDURE (XI-C4): DCFS COMMITMENT TO STUDENT

The Division agrees to provide the student trainee with the opportunity to complete the required field hours at a DCFS county office under the joint supervision of a university field instructor and DCFS supervisor.

PROCEDURE (XI-C5): EMPLOYMENT WITH DCFS

- A. All stipend recipients must complete a "State of Arkansas Employment Application" and send it to the DCFS Professional Development Unit six (6) weeks prior to the expected date of graduation.
- B. DCFS reserves the right to designate counties where staff are needed and require students to apply in those counties identified by DCFS.
- C. DCFS reserves the right to specify the minimum number of counties in which students must state on the "State of Arkansas Employment Application" that they will accept employment.
- D. On the State employment application, the student will list the job title as "Family Service Worker Trainee" and designate the minimum number of counties required by DCFS in which the student is willing to accept employment.
- E. Students must accept interviews, answer questions, and otherwise actively participate in the hiring process in an ethical manner. The university designee will coordinate with the DCFS Professional Development Unit to keep students abreast of employment opportunities with the Division and help them follow-through with their commitment to the Division.
- F. If the student is not offered a Family Service Worker Trainee position within sixty (60) days following graduation, the student no longer is obligated to accept employment or repay the stipend.
- G. The student must repay any stipend monies received if a field placement is terminated or employment denied due to the results of:
 - An Arkansas Central Registry check,
 - An Arkansas State Police criminal background check (and, if required, a check by the Federal Bureau of Investigation),
 - A drug/alcohol screen, or
 - The provisions of the State Vehicle Safety Program are violated.
- H. If the student becomes employed by DCFS but chooses to leave prior to fulfilling the stipend commitment, the student must repay the stipend pro-rated according to the number of months worked.

APPENDIX

I. GLOSSARY

ABANDONED INFANT -- A juvenile less than nine (9) months of age and whose parent, guardian or custodian left the child alone or in the possession of another person without identifying information or with an expression of intent by words, actions or omissions not to return for the infant.

ABANDONMENT-- Failure of the parent to provide reasonable support and to maintain regular contact with the juvenile. When this failure is accompanied by an intention on the part of the parent to permit the condition to continue for an indefinite period in the future, the failure to support or maintain regular contact with the juvenile without just cause or an articulated intent to forego parental responsibility.

ABUSE -- Any of the following acts or omissions by a parent, guardian, custodian, foster parent, or any person who is entrusted with the juvenile's care by a parent, guardian, custodian, or foster parent, including, but not limited to, an agent or employee of a public or private residential home, child care facility, public or private school, or any person legally responsible for the juvenile's welfare:

- Extreme or repeated cruelty to a juvenile;
- Engaging in conduct creating a realistic and serious threat of death, permanent or temporary disfigurement, or impairment of any bodily organ.
- Injury to a juvenile's intellectual, emotional or psychological development as evidenced by observable and substantial impairment of the juvenile's ability to function within the juvenile's normal range of performance and behavior.
- Any history that is at variance with the history given.
- Any non-accidental physical injury.
- Any of the following intentional or knowing acts, with physical injury:
 1. Throwing, kicking, burning, biting or cutting a child.
 2. Striking a child with a closed fist.
 3. Shaking a child.
 4. Striking a child on the face.
- Any of the following intentional or knowing acts, with or without injury:
 1. Striking a child age six or younger on the face.
 2. Shaking a child age three or younger.
 3. Interfering with a child's breathing.

NOTE: The prior list of unreasonable actions are considered illustrative and not exclusive.

- No unreasonable action shall be construed to permit a finding of abuse without having established the elements of abuse.
- Abuse shall not include physical discipline of a child when it is reasonable and moderate and is inflicted by a parent or guardian for purposes of restraining or correcting the child.
- Abuse shall not include when a child suffers transient pain or minor temporary marks as the result of a reasonable restraint if:

1. The person exercising the restraint is an employee of an agency licensed or exempted from licensure under the Child Welfare Agency Licensing Act;
 2. The agency has policy and procedures regarding restraints;
 3. No other alternative exists to control the child except for a restraint;
 4. The child is in danger of hurting himself or others;
 5. The person exercising the restraint has been trained in properly restraining children, de-escalation, and conflict resolution techniques; and
 6. The restraint is for a reasonable period of time.
- Reasonable and moderate physical discipline inflicted by a parent or guardian shall not include any act that is likely to cause and which does cause, injury more serious than transient pain or minor temporary marks.
 - The age, size and condition of the child and the location of the injury and the frequency of recurrence of injuries shall be considered when determining whether the physical discipline is reasonable or moderate.

AGGRAVATED CIRCUMSTANCES--When a child has been abandoned, chronically abused, subjected to extreme or repeated cruelty, sexually abused or a determination by a judge that there is little likelihood that services to the family will result in successful reunification.

CARETAKER -- Parent, guardian, custodian, foster parent, or any person ten (10) years of age or older who is entrusted with a child's care by a parent, guardian, custodian, or foster parent, including, but not limited to, an agent or employee of a public or private residential home, child care facility, public or private school, or any person legally responsible for a child's welfare.

CHILD -- Individual who is under the age of eighteen, married or single; is under the age of twenty-one, married or single, who was adjudicated delinquent under the "Arkansas Juvenile Code" for an act committed prior to the age of eighteen and for whom the court retains jurisdiction; or was adjudicated dependent-neglected under the "Arkansas Juvenile Code" before reaching the age of eighteen and who, while engaged in a course of instruction or treatment, requests the court to retain jurisdiction until the course has been completed.

CHILD ABUSE HOTLINE -- This hotline is maintained by the State Police Crimes Against Families Division, for the purpose of receiving and recording notification made pursuant to the "Child Maltreatment Reporting Act". The Child Abuse Hotline is staffed twenty-four (24) hours per day and has statewide accessibility through a toll-free telephone number.

CHILD MALTREATMENT -- Physical abuse, sexual abuse, emotional abuse, neglect, sexual exploitation or abandonment of a child.

CHILD MALTREATMENT INVESTIGATION -- A fact finding assessment that occurs when an allegation of child maltreatment is received. Completion is reached when a determination is made concerning the allegations.

CUSTODIAN – A person (not a parent or legal guardian) who stands in loco parentis to the child OR an agency or institution given custody of a child through a court order.

DEPENDENT JUVENILES – Includes any child:

- Whose parent is under the age of eighteen (18) and is in the custody of the Department of Human Services;
- Whose parent or guardian is incarcerated and the parent or guardian has no appropriate

relative or friend willing or able to provide care for the child;

- Whose parent or guardian is incapacitated, whether temporarily or permanently, such that the parent or guardian cannot provide care for the juvenile and the parent or guardian has no appropriate relative or friend willing or able to provide care for the child;
- Whose custodian parent dies and no stand-by guardian exists;
- Whose parent has relinquished custody to DHS for the sole purpose of adoption; or
- Whose parent has delivered him/her to a medical provider or law enforcement agency when the child is 30 days old or younger and who expressed no intent to return for the child (Safe Haven Act–2001).

DEPENDENT-NEGLECTED JUVENILE – Any juvenile who as a result of abandonment, abuse, sexual abuse, sexual exploitation, neglect or parental unfitness to the juvenile, a sibling, or another juvenile is at substantial risk of serious harm

DEVIATE SEXUAL ACTIVITY -- Any act of sexual gratification involving:

- The penetration, however slight, of the anus or mouth of one person by the penis of another person; or
- The penetration, however slight, of the labia majora or anus of one person by any body member or foreign instrument manipulated by another person.

DOMESTIC ABUSE -- Physical harm, bodily injury, assault or the infliction of fear of imminent physical harm, bodily injury or assault between family or household members; OR any sexual conduct between family or household members, whether minors or adults, which constitutes a crime under the laws of this state. “Family or household member” means spouses, former spouses, parents and children, persons related by blood within the fourth degree of consanguinity, any child residing in the household, persons who are presently or in the past resided or cohabited together and persons who have or have had a child in common.

EXEMPTED FROM TRUE DUE TO RELIGIOUS EXEMPTION -- Determination will be entered when the parent’s decision to withhold medical treatment is based solely upon a religious belief, and the child is furnished with treatment by spiritual means alone, through prayer, in accordance with a recognized religious method of healing by an accredited practitioner. Such prohibition shall not limit the administrative or judicial authority of the State to ensure that medical services are provided to the child when the child’s health requires it.

FAMILY -- A spouse, parent, child, sibling, or a person related by consanguinity to another person.

FAMILY STRENGTHS AND NEEDS ASSESSMENT -- This is the in-depth assessment that is to be initiated whenever a report of child maltreatment or community or self referral is received. The “Family Strengths and Needs Assessment” (CFS-6009) is used to complete this assessment if a family services case is opened.

FEDERAL ADOPTION SUBSIDY (IV-E) -- Payments for a child who is categorized as IV-E (TEA/TANF, SSI-AB or SSI-AD) at the time of placement for adoption by the Division and who meets other defined special needs characteristics if it has been documented that a reasonable effort has been made to place the child without the benefit of subsidy.

FORCIBLE COMPULSION – Any act of physical force or intimidation, or any threat, express or implied, of death, physical injury, rape, sexual abuse or kidnapping of anyone committed against that person’s will. The age, developmental stage and stature of the victim and the relationship of the victim to the assailant, as well as the threat of deprivation of affection, rights and privileges from the victim by the assailant, shall be considered in weighing the sufficiency of the evidence to prove compulsion.

GUARDIAN -- Any person, agency or institution so appointed by a court.

HOLISTIC -- View of the family and accompanying circumstances that take into consideration the entire family. This view includes the psychological, sociological, physical, and environmental factors which influence the functioning of the family.

HOME STUDY -- Assessment of circumstances in a specified situation involving custody, placement, or adoption.

HOMOSEXUAL – In the context of DCFS Policy VII-A, homosexual shall mean any person who voluntarily and knowingly engages in or submits to any sexual contact involving the genitals of one person, and the mouth or anus of another person, of the same gender, and who engaged in such activity after the foster home is approved, or at a point in time that is reasonably close in time to the filing of the application to be a foster parent.

HOUSEHOLD MEMBER -- Means a person currently or formerly residing in a place of abode with another person.

ICPC – The Interstate Compact on the Placement of Children is a legislative-enacted agreement currently entered into by all fifty states. It is used to move children in need of placement, treatment or adoption across state lines.

INACTIVE -- The child maltreatment assessment cannot be completed.

INDECENT EXPOSURE--Exposure by a person of the person's sexual organs for the purpose of arousing or gratifying the sexual desire of the person, or of any other person under circumstances in which the person knows the conduct is likely to cause affront or alarm.

INDEPENDENCE -- (replaces the definition of long-term foster care) A permanency planning hearing disposition for the juvenile who will not be reunited with his/her family and for whom no other permanent plan is available and:

- A compelling reason exists why termination of parental rights is not in the juvenile's best interest; or
- The juvenile is being cared for by a relative and termination of parental rights is not in the best interests of the juvenile.

JUVENILE – A person adjudicated dependent-neglected prior to age 18. The juvenile may request the court to retain jurisdiction beyond the juvenile's 18th birthday, and the court shall grant the request only if the juvenile is engaged and remains in a course of instruction or treatment.

The court shall retain jurisdiction only if the juvenile remains in instruction or treatment and shall dismiss jurisdiction upon the request of the juvenile or when the juvenile completes, leaves or is dismissed from instruction or treatment. In no event shall this person remain within the court's jurisdiction past the age of twenty-one (21) years.

KINSHIP FOSTER PARENT—Any relative within the first, second, or third degree of kin by blood or marriage to the parent or stepparent of a child who is related through blood or marriage and is approved to be a foster parent.

LAW ENFORCEMENT AGENCY – Any police force or organization whose primary responsibility as established by law or ordinance is the enforcement of laws of this state and is staffed 24 hours a day.

MAINTENANCE SUBSIDY -- Established monthly payment to cover the costs of maintaining and providing for the basic needs of the child in an adoptive placement on a regular basis. The payment is not to exceed the child's foster care board rate which is in effect at the time the adoption subsidy is approved. The amount may increase in subsequent approvals depending on the child's age.

MANDATED REPORTER -- Individuals identified in the "Child Maltreatment Reporting Act" who must immediately notify the Child Abuse Hotline or law enforcement if they have reasonable cause to suspect that a child has been subjected to child maltreatment, or who observe the child being subjected to conditions or circumstances which would reasonably result in child maltreatment or that a child has died as a result of child maltreatment. These individuals include: any physician, surgeon, coroner, dentist, osteopath, resident intern, licensed nurse, medical personnel who may be engaged in admission, examination, care, or treatment of persons, teacher, school official, school counselor, social worker, Family Service Worker, Division of Youth Services employees, employees working under contract for the Division of Youth Services, domestic violence shelter employees, domestic violence volunteers, domestic abuse advocate, day care center worker, or any other child or foster care worker, mental health professional, peace officer, or law enforcement official.

MEDICAL PROVIDER – Any emergency department of a hospital licensed under § 20-9-214.

NEGLECT -- Acts or omissions of a parent, guardian, custodian, foster parent, or any person who is entrusted with the juvenile's care by a parent, custodian, guardian, or foster parent, including, but not limited to, an agent or employee of a public or private residential home, child care facility, public or private school, or any person legally responsible under state law for the juvenile's welfare, which constitute:

- Failure or refusal to provide the necessary food, clothing, or shelter, and education required by law, or medical treatment necessary for the juvenile's well-being, except when the failure or refusal is caused primarily by the financial inability of the person legally responsible and no services for relief have been offered or rejected;
 - Failure to take reasonable action to protect the juvenile from abandonment, abuse, sexual abuse, sexual exploitation, neglect, or parental unfitness where the existence of such condition was known or should have been known;
 - Failure or irremediable inability to provide for the essential and necessary physical, mental, or emotional, needs of the juvenile;
 - Failure to provide for the juvenile's care and maintenance, proper or necessary support, or medical, surgical, or other necessary care;
 - Failure, although able, to assume responsibility for the care and custody of the juvenile or participate in a plan to assume such responsibility.

NON-RECURRING ADOPTION EXPENSE SUBSIDY -- Payment for non-recurring adoption expenses incurred in the adoption of a child with special needs and is limited to \$1,500 per child. Payment will be made to or on behalf of parents who have adopted or have accepted placement for the purpose of adoption.

OUT-OF-HOME PLACEMENT - Placement in a home or facility other than placement in a youth services center, a detention facility, or the home of a parent or guardian of the juvenile; or placement in the home of an individual other than a parent or guardian, not including any placement where the court has ordered that the placement be made permanent and ordered that no further reunification services or six-month reviews are required.

PARENT -- Biological mother, an adoptive parent, a man to whom the biological mother was married at the time of conception or birth, or has been found by a court of competent jurisdiction to be the biological father of the juvenile.

PORNOGRAPHY -- Obscene or licentious material, including pictures, movies and videos. Applying contemporary community standards, the material will be considered pornographic if an average person would find that the material taken as a whole appeals to the prurient interest or if the material depicts in a patently offensive way sexual conduct. The material must lack serious literary, artistic, political or scientific value to be considered pornographic.

PREPONDERANCE OF THE EVIDENCE – Evidence which is of greater weight or more convincing than the evidence which is offered in opposition to it; that is, evidence which as a whole shows that the fact to be proved is more probable than not.

PUTATIVE FATHER – A man who claims or is alleged to be the biological father of a juvenile, but has not been so deemed or adjudicated by a U.S. court.

REASONABLE EFFORTS - Efforts to preserve the family, prior to the placement of a child in foster care, to prevent the need for removing the child from his home and efforts to reunify a family, made after a child is placed out of the home, to make it possible for the child to safely return home.

They also include efforts made to obtain permanency for a child who has been in an out-of-home placement for more than twelve (12) months or for fifteen (15) of the last twenty-two (22) months.

It also adds the clear and convincing standard to a finding by the court to relieve DHS from providing reasonable efforts to reunite. It further defines juvenile court a court of competent jurisdiction for purposes of determining the fast-track grounds and adds the following to the list of fast-track grounds:

- Committed a felony battery or assault that results in serious bodily injury to any child.
- Abandoned an infant.

RECEIVING PARTY -- Local agency, office, facility, or individual who will be supervising a child placed into a state under the provisions of the ICPC.

RECEIVING STATE -- State to which a child is sent for supervision under the provisions of the ICPC.

SENDING PARTY -- Local agency, office, facility, court or individual who has custody/jurisdiction of a child and has requested or arranged for an out-of-state placement the provisions of ICPC.

SENDING STATE -- A state which has sent a child to another state for supervision under the provisions of the ICPC.

SEVERE MALTREATMENT -- Sexual abuse, sexual exploitation, acts or omissions which may or do result in death, abuse involving the use of a deadly weapon as defined by the Arkansas Criminal Code § 5-1-101 et seq., bone fracture, internal injuries, burns, immersions, suffocation, abandonment, medical diagnosis of failure to thrive, or any of the previous causes resulting in a substantial and observable change in the behavior or demeanor of the child.

SEXUAL ABUSE –(A) Sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion or attempted sexual intercourse, deviate sexual activity or sexual contact by a person ten (10) years of age or older to a person younger than eighteen (18) years of age; (B) Sexual intercourse, deviate sexual activity or sexual contact or solicitation or attempted sexual intercourse, deviate sexual activity or sexual contact that occurs between a person eighteen (18)

years of age or older and a person not his spouse who is younger than sixteen (16) years of age; (C) Sexual intercourse, deviate sexual activity or sexual contact or solicitation or attempted sexual intercourse, deviate sexual activity or sexual contact between a person younger than eighteen (18) years of age and a sibling or caretaker; or (D) indecent exposure or forcing, permitting or encouraging the watching or pornography or live human sexual activity.

SEXUAL CONTACT --Any act of sexual gratification involving the touching, directly or through clothing, of the sex organs, buttocks, or anus of a person or the breast of a female. Normal affectionate hugging is not construed as sexual contact.

SEXUAL EXPLOITATION -- Allowing, permitting, or encouraging participation or depiction of the juvenile in prostitution, obscene photographing, filming, or obscenely depicting a juvenile for any use or purpose.

SPECIAL NEEDS CHILD -- Caucasian child nine years or older, a healthy child of color who is two years or older, a member of a sibling group of two or more being placed together, or a child with a serious physical, mental or emotional condition or at high risk for such who is:

- in DHS custody with parental rights terminated;
- eligible for state or federal adoption subsidy;
- under eighteen years old and whose adoption has not been finalized prior to subsidy approval.

SPECIAL SUBSIDY -- A payment to provide for the costs of special services related to the child's needs which cannot be met by the adoptive parent. It may include, but not be limited to, legal/medical/psychological/therapy services and corrective appliances.

STATE ADOPTION SUBSIDY -- Payments for a child who is not categorized as IV-E or SSI eligible at the time of placement for adoption by the Division. Such a child, who meets other defined special needs characteristics, may be eligible for subsidized adoption from state moneys if it has been documented that a reasonable effort has been made to place the child without the benefit of an adoption subsidy.

SUBJECT OF THE REPORT -- The alleged offender, the parents, guardian and legal custodians of the child who are subject to suspected maltreatment, and the child who is the subject of suspected maltreatment.

SUPERVISION -- Involves periodic visitation to the home, school, or other places to monitor or observe a child's situation or condition. This service also may include arrangement and observation of visitation.

TRUE -- Determination when the allegation of child maltreatment is supported by a preponderance of the evidence.

UNSUBSTANTIATED -- Determination when the allegation of child maltreatment is not supported by a preponderance of the evidence.

II. ADOPTIONS

A. GUIDELINE FOR AN ADOPTION SUMMARY

Adoption Summary of Child

- A. Birth Information: Prenatal care, birth date, measurements at the time of birth, a description of the delivery, any complications that occurred, alcohol/drug and tobacco involvement of birth parent during pregnancy and how it effected the infant, and any birth defects. Describe the nursery progress, discharge weight and recommendations of the doctor on discharge and results of any special health screenings/tests.
- B. Physical Description: Race, weight, height, hair and eye color, complexion, birthmarks, and bone structure. Describe any physical handicaps.
- C. Developmental History: Social, intellectual, emotional and physical development of the child, noting any delays/limitations. Early developmental milestones should be discussed. For example:

Cognitive Development

- Recognition of significant others
- Comprehension of fact vs. fantasy
- Language development
- Comprehension of concepts such as time, space, quantity, etc.

Motor Development

- Head control
- Kicking -- pushing feet
- Lifting chest
- Rolling over
- Holding toys
- Reaching for objects
- Waving bye-bye
- Sitting up
- Eye movements
- Walking
- Crawling
- Running

- Coordination
- Ability to skip
- Ability to catch ball

Social/Emotional Development

- Smiling - Laughing
- Cooing
- Ability to respond appropriately in social situations
- Self-help skills

D. Health:

- medical history (diseases, conditions, disabilities, allergies, hospitalizations, serious injuries etc.), present problems/needs, future problems/needs
- dental history, present problems/needs, future problems/needs
- mental health history, present problems/needs, future problems/needs
- type of mental health counseling and frequency of sessions
- sickle cell test results for a child with African American heritage
- medications (name, dosage, and reason)
- status of immunizations
- how health problem affects child's life
- child's attitude about health problems
- all special health care providers and frequency of appointments
- parental demands in relation to providing for child's special health care needs
- any special appliances to meet special needs
- statement whether female's menstrual periods have begun, feelings about, hygiene practices, any complications
- statement whether male is circumcised

E. Personality: general personality; for example, quiet, outgoing, withdrawn, depressed, angry, sad, happy, alert, shy, talkative, questioning, active, etc.

- interests, likes, dislikes, talents, special skills
- causes of depression and how expressed

- causes of anger and how expressed
- what makes child happy
- how child gives and receives love/affection
- child's self-esteem
- how child relates to adults, peers, younger and older children
- how child relates to siblings
- type of people the child likes/dislikes
- description of what is enjoyable about parenting the child
- description of what is difficult about parenting the child
- child's hopes, wishes, and desires
- fears and worries
- how child relates to parental/authority figures
- behavioral problems (state whether child has displayed: lying, stealing, fire setting, running away, aggression, destruction, withdrawal, bed wetting, encopresis, self harm, suicide attempts, depression, abusiveness to animals, cursing, defiance, sexual acting out (be specific), alcohol/substance abuse, etc. and, if so, explain)
- how easy or difficult is the child to discipline -- what works, what doesn't
- how child responds to discipline; what rules is the child accustomed to following
- what rules are easy for the child to comply with, and which ones are difficult for the child
- eating habits (ability to feed self, table manners, food likes/dislikes)
- sleeping habits (bedtime routine, nightmares, night light, sleeping difficulties, etc.)
- grooming/hygiene habits
- how child cares for belongings
- how child relates with pets/animals
- smoking practices (if tobacco products are used)
- play habits
- child's behavior in social situations such as church, restaurants, department stores, etc.
- knowledge child has about sex
- experience with sex

F. Daily Schedule:

- Birth to one year old -- Give detailed information regarding schedule. For example, when discussing sleeping, indicate not only the times the child sleeps but the length of naps; whether child is rocked, patted, etc., to sleep; whether child sleeps with a special blanket, pacifier, or toy; type of bed child sleeps in and the position child prefers to sleep in (i.e., stomach, back, etc.).

Indicate the types of food the child likes/dislikes and the amount child eats and intervals between meals. Include the name of the formula.

- Over one year old -- Briefly describe the child's general schedule on a typical day. Indicate whether the child follows a daily routine or has a flexible schedule.

G. Clothing:

- sizes of clothing and shoes
- type/preference of clothes
- amount of clothing
- quality of clothing (good condition, worn, etc.)
- any special requirements in relation to clothing

H. Out-of-Home Placement Experiences:

- date child entered Out-of-Home Placement and for what reasons
- describe any child maltreatment and who was offender
- statement as to how many foster homes and/or institutions child has lived in and length of time in each placement
- description of reasons for moving from each foster home and/or institution
- brief profile of current foster family or institutional setting -- for example, foster family composition and life style

I. School Experiences:

- description of the type of school the child is attending -- for example, public school, special school (school for the deaf, blind, etc.) and whether resource classes/special education classes are utilized and its schedule (whole day, half day, or certain classes)
- grade level
- history of school attendance (past and present)
- experience with schools; for example, accomplishments, problems, etc.
- attitude towards school
- best subject areas as well as weak areas
- relationship with school mates and teachers
- how teachers view child
- involvement with school activities, clubs, sports, band, etc.
- potential in relation to school
- attitude towards homework

- J. Income: Indicate if the child has a source of income. If so, give the source of income and amount (Social Security, SSI, VA, etc.) which the child receives while in Out-of-Home Placement. Do not include foster care board payment.

- K. Siblings: Provide a brief description which includes first name, birth date, living arrangement and sibling status (full sibling, half sibling, step sibling, etc.). If siblings are not placed together, explain frequency of contacts.

Birth/Legal Parent(s):

Discuss each parent separately. Obtain as much information about the parents as possible. Be objective with descriptions of the parents and give factual information about them. Do not make derogatory remarks.

- A. Physical and Personality Description: Include race, ethnic background, age, height, weight, eye and hair color, complexion, bone structure, outstanding features, general appearance, and dominant physical traits within the larger family group. Describe personalities and any special talents, interests or hobbies.
- B. Health: Discuss any medical and mental illnesses, allergies, alcohol/substance abuse and/or physical handicapping conditions. Discuss any medical and mental illnesses within the extended birth family including those of a hereditary nature. Discuss any history of neglect, physical abuse and/or sexual abuse within the extended family. Discuss any alcohol/substance abuse within the extended family. If the birth/legal parent is deceased, state the cause and date.
- C. Education: State highest educational level achieved. Discuss overall academic performance, best and weak subjects, and extracurricular activities. Discuss any mental retardation and/or learning disabilities in relation to the birth parent(s) and the extended birth family.
- D. Religion: Provide information about religious affiliation.
- E. Employment: Describe employment history.
- F. Other Significant Information:
- birth family's lifestyle
 - history of criminal behavior
 - reasons child can't return to birth/legal family
 - date child last had contact with birth/legal family, type of contact, and reaction

Preparation of the Child for Adoption

- A. Dealing with Birth/Legal Family Issue
- Reasons child gives for entering Out-of-Home Placement
 - Reasons child has been given for entering Out-of-Home Placement
 - Reason child gives why the child cannot return home
 - Reason child was given why the child cannot return home
- B. Child's feelings about not returning home
- C. Dealing with Out-of-Home Placement Issues
- Reasons child gives for placement changes while in Out-of-Home Placement

- Child's feelings about Out-of-Home Placement experiences and placements

D. Dealing with Adoption Issues

- Child's understanding about the difference in birth/legal family, foster family, and adoptive family
- Child's feelings about accepting an adoptive family's last name
- Child's understanding of the adoption process (selection of a family, pre-placement visits, post-placement visits, etc.)
- Child's feelings, fears and worries about adoption
- Child expectations about adoption/an adoptive family
- Child's preferences in relation to an adoptive family

Recommendations:

- The Adoption Specialist may describe the type of family the child needs and state if the child should not be placed in a certain location due to proximity to birth/legal parents/relatives.
- The Adoption Specialist may request the child be placed in a home of the same racial or ethnic heritage if indicated by an individualized determination that this placement is needed to advance the best interests of the child.
- If there are siblings, the Adoption Specialist will explain whether they should be placed together. If separation is recommended, reasons will be stated.
- The Adoption Specialist may state preferences in relation to pre-placement visits between the child and an adoptive family.

B. ATTACHMENTS TO THE ADOPTION SUMMARY

- Photographs:
 - Twenty-five (25) color photographs of a child with special needs (non-family foster parent adoption).
 - Five (5) color photographs of a child without special needs (non-family foster parent adoption).
 - Photographs of a child are not needed for a family foster parent adoption.
- birth certificate
- hospital birth records (delivery, care, discharge)
- CFS-457 (Hospital Data) for newborn infants being relinquished for adoption
- CFS-456 (Biological Family Background Information) -- complete Medical Passport, complete medical/developmental evaluation reports (CFS-366, EPSDT, etc.), hospitalization reports, etc. since placement in Out-of-Home Placement

- complete medical/developmental evaluation reports prior to placement in Out-of-Home Placement if accessible
- up-to-date immunization record
- sickle cell evaluation report for child with African American heritage
- dental evaluation reports since placement in Out-of-Home Placement
- vision evaluation reports since placement in Out-of-Home Placement
- psychological evaluation reports since placement in Out-of-Home Placement and any such reports prior to placement in Out-of-Home Placement if accessible
- mental health counseling (progress) reports since placement in Out-of-Home Placement and any such reports prior to placement in Out-of-Home Placement if accessible
- therapeutic Out-of-Home Placement monthly progress reports if applicable
- speech evaluation reports since placement in Out-of-Home Placement if applicable
- hearing evaluation reports since placement in Out-of-Home Placement
- complete academic transcript from kindergarten to the present
- current Individual Education Plan (IEP) if applicable
- any school academic testing results (achievement tests)
- current Out-of-Home Placement Case Plan (CFS-6010)
- termination of parental rights/court order and most recent judicial review court order
- psychological evaluations of birth parents if one has been previously completed (not for disclosure to the Adoptive family)
- written consent of child (adoption of child for whom placement is not readily available) ten (10) years of age or older to utilize photograph, video, etc. in activities to recruit an adoptive family

NOTE: Placement Specialist, Adoption Services Unit, Central Office will complete the "Child's Information Sheet" (CFS-412) on a child with special needs (adoption of child for whom placement is not readily available) if activities to recruit an adoptive family are needed.

III. PERIODICITY SCHEDULES FOR HEALTH CARE

A. Periodicity Schedule For Well-Child Assessments

- Medical: 2-6 wks., 8-10 wks., 4 mos., 6 mos., 9 mos., 12 mos., 15 mos., 18 mos., 24 mos., 3 yrs., 4 yrs., 5 yrs., 6 yrs., 8 yrs., 10 yrs., 12 yrs., 14 yrs., 16 yrs., 18 yrs., 20 yrs.
- Hearing: Same as medical schedule until age 5, then one screen at age 12 and age 18 (gross until age 3, after age 3, audiometer).
- Vision: Same as medical schedule until age 8, then one screen at age 12, 14, 18 and 20 (gross until age 3, vision test after age 3) .
- Dental: 6 mos. to 1, one exam; 1 to 21, an appointment will be scheduled every 6 mos. and the exam is to be completed within 30 days of the date scheduled.

B. Recommended Immunization Schedule

- Birth: Hepatitis B (Option 1) Primary 1
- 1 mos. Hepatitis B (Option 1) Primary 2
- 2 mos. DTP (Primary 1)
OPV (Primary 1)
Hib(HBOC) (PRP-T) (PRP-OMP) Primary 1
Hepatitis B (Option 2) Primary 1
- 4 mos. DTP (Primary 2)
OPV (Primary 2)
Hib(HBOC) (PRP-T) (PRP-OMP) Primary 2
Hepatitis B (Option 2) Primary 2
- 6 mos. DTP (Primary 3)
OPV (Last Primary)
Hib(HBOC) (PRP-T) Primary 3
Hepatitis B (Option 1 and 2) Last primary
- 12 mos. Hib (PRP-OMP) Last Primary
Hepatitis B (Option 1 and 2) Last Primary*
- 15 mos. DTP (Last Primary)
- MMR (Primary)
- Hib(HBOC)(PRP-T) Last Primary

Hepatitis B (Option 1 and 2) Last primary

4-6 yrs. DTP (Preschool)

 OPV (Preschool)

Before 7th grade entry MMR (Reinforcing)**

Every ten (10) yrs. Td (Booster)

* This dose is given any time between ages 6 months and 18 months whenever a dose of any other vaccine is due.

** The reinforcing dose of MMR can be administered at either 4-6 years or at 10-14 years.

The immunization schedule shown above should serve as a guideline only; acceptable alternate schedules do exist, and consultation may be required in some cases.

IV. LAWS

- A. "Department of Human Services-Public Assistance Powers and Duties," Ark. Code Ann. § 20-76-201.
- B. "Child Maltreatment Reporting Act," Ark. Code Ann. § 12-12-501 et seq. and Act 1341 of 1995.
- C. "Multiethnic Placement Act," Public Law 103-382.
- D. "Arkansas Juvenile Code," Ark. Code Ann. § 9-27-301 through 306, §9-27-328 through 330, § 9-27-341 through 342 and Acts 532, 804, 811, 909, and 1337 of 1995.
- E. "Interference with Custody," Ark. Code Ann. § 5-26-502.
- F. "Guidelines for Out-of-State Placements," Act 765 of 1995.
- G. "Juvenile Code," Act 1227 of 1997
- H. "Arkansas State Police/Family Protection Unit," Act 1240 of 1997
- I. "Arkansas Adoption and Safe Families Act," Act 401 of 1999.

V. RECORD RETENTION SCHEDULE

1. Retain all client files for five years after the file is closed or the last case activity.
2. Retain all child protective services, Out-of-Home Placement Services, supportive services and child maltreatment records for five years after the youngest child turns 21 years old.
3. Retain all adoption records for 99 years.
4. Retain all rules until superseded. Superseded rules must be retained on as-needed basis.
5. Retain all records relating to a person or entity contracting with DHS for five years after the contract ends or is terminated.
6. Retain all administrative records including programmatic financial records for five years after the end of the biennium in which the records were produced.
7. Retain all information in the automated data system indefinitely to assist the Department in assessing future risk and safety.
8. Hard copy records of unsubstantiated reports will be destroyed at the end of the month in which the determination is made.

VI. RECORD ORDER/RECORD FILE FOLDER

Special divided folders shall be used for the case records of foster family homes. When a foster family home is approved, the foster family home record shall be established according to the order below.

Front left: Approval/Renewal

Copy of the CFS-342 (A) (Foster Care Criminal Record Check), all information received and, in case of a report of violations, a summary of the face-to-face discussion, determination, and reasons for the determination.

Copy of the CFS-316 (Request for CPS Central Registry Check), all information received and, in case of a report of violations, a summary of the face-to-face discussion, determination, and reasons for the determinations.

CFS-450 (Foster Home Study/Application and attachments)

Summary with Recommendations

CFS-455 (Request/Consent for Health Department Services)

CFS-480 (Alternate Compliance of Water Supply Agreement), when appropriate

CFS-478 (Physician's Report)

Verification of Marriage and/or Divorce

CFS-449 (Reference Letters)

CFS-463 (Knowledge of Pre-Service Training Material)

CFS-464 (Foster Parent Evaluation)

CFS-475 (Checklist for Compliance)

Approval or Denial Letter

CFS-481 (Family Foster Home Approval Certificate)

CFS-462 (Initial Foster Home Agreement)

CFS-462 (A) (Foster Home Agreement Addendum)

CFS-485 (Foster Home Face Sheet)

Order: Foster Home Face Sheet on top, Approval or Denial Letter, CFS-475, etc., filed in chronological order with the most current on top.

Front Right: Copy of information contained in the Resource and Placement Screen in CHRIS (i.e., changes in placements, case transfer, provider changes, etc.)

Order: File information in chronological order with the most current on top.

Center Left: Narrative

Order: Filed in chronological order with the most current entry on top.

Center Right: Ongoing Monitoring/Annual Reevaluation/Transfer/Closure

CFS-451 (Foster Parent Reevaluation Form)

Reevaluation Summary or Closure Summary

Letter of Notification of Disposition of Reevaluation or of Closure

CFS-475 (Checklist for Compliance) for Ongoing Monitoring/Annual Reevaluation or Closure as appropriate.

CFS-479 (Foster Home Reevaluation Notice)

Order: CFS-479 on top, Letter of Notification of Disposition of Reevaluation or of Closure, CFS-475, Summary etc., filed in chronological order with the most current on top.

Back Left: Correspondence

Letters

Memos

Order: Filed in chronological order with the most current on top.

Back Right: Miscellaneous – Documents/Forms

TR-1 (Travel Expense Reimbursement Form)

CFS-375 (Volunteer Cover Letter)

DHS-1914 (Department of Human Services Requisition)

Order: Filed in chronological order with the most current on top.

Abandonment

County Office Assessment of Child Maltreatment Reports _____ Policy (II-E)

Abuse

Alcohol _____ Procedure (VIII-B1), Procedure (X-A2), Appendix II.A.A. and E.
 Appendix II Birth/Legal Parents B.
 Deadly Weapon _____ Procedure (II-E11), Glossary: Abuse and Severe Maltreatment
 Definition _____ Glossary
 Domestic _____ Procedure (II-E9), Policy (V-A), Drug Policy (VI-A), Procedure (VIII-B1)
 Procedure (X-A2), Appendix II., A.A.,
 Hotline _____ Policy (II-C), Procedure (II-C1-3), Procedure (II-E1), Procedure (II-H1), Policy (VII-C)
 Procedure (VII-C1), Glossary: Child Abuse Hotline, Mandated Reporter
 Laws _____ Policy (I-B), Appendix IV
 Reporting of Abuse _____ Policy (II-C), Procedures (II-C1-3), Glossary: Child Abuse Hotline, Appendix IV
 Sexual _____ Procedure (II-E4, 5, 7 & 11), Procedure (II-H1), Procedure V-E3), Policy (VI-A)
 Procedure (VIII-F8), Glossary: Abuse and Aggravated Circumstance,
 Child Maltreatment and Neglect, Severe Maltreatment and Sexual Abuse
 Appendix II., Birth/Legal Parents, B.
 Substance Abuse _____ Policy (VI-A), Appendix II., Birth/Legal Parents, B.

Administrative Hearing

Appeals and Hearings of Adverse Action _____ Procedure (IX-A2)
 Administrative Hearing File _____ Procedure (IX-A4)
 Conduct of Hearing _____ Procedure (IX-A3)
 Hearing Process _____ Policy (IX-A)
 Hearing Statement _____ Procedure (IX-A4)
 Investigative File _____ Procedure (IX-A4)

Administrative Services

Division's Organizational Structure _____ Policy (I-C)
 Official Record Keeping _____ Policy (I-D)

Adoption

Adverse Action _____ Policy (IX-A), Procedure (IX-A1-2)
 Applicant
 Assessment _____ Procedure (VIII-G4), Procedure (VIII-F1-2)
 Notification _____ Procedure (VIII-G7)
 Preparation _____ Procedure VIII-G4), Procedure (VIII-F1-2)
 Recruitment _____ Procedure (VIII-G1)
 Retention _____ Procedure (VIII-G1)
 Re-evaluation _____ Procedure (VIII-G6)
 Application _____ Procedure (VIII-G3)
 Approval _____ Procedure (VIII-F3-5), Policy (VIII-G), Procedure (VIII-G1, 3 & 5-7),
 Procedure (VIII-H3), Procedure (VIII-J1)
 Assessment and Preparation _____ Procedure (VIII-F2)
 Birth Parent's Relinquishing Infants For Adoption _____ Policy (VIII-E), Procedure (VIII-E1)
 Compacts: Juvenile, Mental Health, and Adoption and Medical Assistance _____ Procedure (VI-G15)
 Criteria _____ Procedure (VIII-G2)
 Decision _____ Procedure (VIII-F3)
 Denial _____ Procedure (VIII-E1), Procedure (VIII-F3)
 Disclosure _____ Procedure (VIII-G8)
 Development of Adoptive Placement _____ Policy (VIII-G)
 Disruption Procedure _____ (VIII-F6), Procedures (VIII-G4 & 10)
 Division's Organizational Structure _____ Policy (I-C):
 Family Service Delivery System _____ Policy (I-B)
 Finalization _____ Policy (VIII-F), Procedures (VIII-F5 & 7), Procedures (VIII-G1, 9 & 11)
 Policy (VIII-H), Procedure (VIII-H1)
 Post-finalization services _____ Procedure (VIII-F8)
 Foster Parent Adoption _____ Policy (VIII-F)
 Information Registry Guide _____ Procedure (VI-G4)
 Intake study (includes) _____ Procedure (VIII-E1)
 Inter-country _____ Policy (VIII-J), Procedure (VIII-J1)

Kinship Foster Parent Adoption _____ Policy (VIII-F), Procedures (VIII-F3 & 4)
 Matching System _____ Procedure (VIII-G7)
 Mutual Consent Voluntary Adoption Registry _____ Procedure (VIII-F8), Policy (VIII-I), Procedure (VIII-I1)
 Narrative Summary of Assessment and Preparation _____ Procedure (VIII-G5)
 Out-of-State _____ Procedure (VI-G4)
 Photo listing _____ Procedures (VIII-G3 & 7)
 Placement Development _____ Policy (VIII-G)
 Application for Adoption _____ Procedure (VIII-G3)
 Assessment of Applicant _____ Procedures (VIII-F1 & 2)
 Narrative Summary _____ Procedure (VIII-G5)
 Preparation of Applicant _____ Procedures (VIII-F1 & 2), Procedure (VIII-G4)
 Recruitment of Applicants _____ Procedure (VIII-G1)
 Retention of Applicants _____ Procedure (VIII-G1)
 Re-evaluation of Approved Applicant _____ Procedure (VIII-G6)
 Post-finalization services _____ Procedure (VIII-F8)
 Post-placement services _____ Procedure (VIII-E1), Procedure (VIII-F5), Procedure (VIII-G9)
 Pre-placement Services _____ Policy (VIII-G), Procedures (VIII-G7 & 8), Appendix II – Prepare the Child
 Recommendations _____ Procedure (VIII-F1), Appendix II – A. Recommendations
 Reinstatement of Adoption Subsidy _____ Procedure (VIII-H4)
 Registry (Mutual Consent Voluntary) _____ Policy (VIII-I), Procedure (VIII-I1)
 Relative Adoption _____ Policy (VIII-F), Procedures (VIII-F3 & 4)
 Relinquishing infant _____ Procedure (VIII-C3), Policy (VIII-E), Procedure (VIII-E1), Policy (VIII-I)
 Selection of Adoptive Family _____ Procedure (VIII-G7)
 Staffing and Recommendations _____ Procedure (VIII-C1 & 2), Procedure (VIII-F1), Procedure (VIII-G7 & 10)
 _____ Procedure (VIII-H7)
 _____ Policy (VIII-H)
 Subsidy _____ Policy (VIII-H)
 Amendment _____ Procedure (VIII-H3)
 Application (Initial) _____ Procedure (VIII-H1)
 Continuation after age 18 _____ Procedure (VIII-H5)
 Federal _____ Procedure (VIII-H1 & 5), Glossary
 Interstate Compact on Adoption and Medical Assistance (ICAMA) _____ Procedure (VIII-H6)
 Maintenance _____ Policy (VIII-H), Procedure (VIII-H1), Glossary
 Non-recurring adoption expense subsidy _____ Policy (VIII-H), Procedure (VIII-H1), Glossary
 Re-evaluation _____ Procedure (VIII-H2)
 Reinstatement _____ Procedure (VIII-H4)
 Special _____ Policy (VIII-H), Procedures (VIII-h1 & 3), Glossary
 State adoption subsidy _____ Glossary
 Termination _____ Procedure VIII-H7)
 Summary _____ Procedures (VIII-G5-7), Appendix II.A & B
 Without Prior DCFS Knowledge or petition to Adopt _____ Procedure (VIII-F4)

Adverse Action

Appeals and Hearings of Adverse Action _____ Procedure (IX-A2)
 Internal Review and Administrative Hearing Process _____ Policy (IX-A)
 Internal Review of Adverse Action _____ Procedure (IX-A1)

Affidavits

_____ Procedure (VIII-I1), Procedure (IX-B1)

Agencies Providing Protective Services

Requests for Information from Agencies Providing Protective Services _____ Procedure (II-D2)

Aggravated Circumstances

Health and Safety Assessment _____ Procedure (II-E3)
 Out-of-Home Placement Criteria _____ Policy (VI-A)

Agreements

Arkansas State Police _____ Policy (II-C), Policy (II-E), Procedure (II-E11), Procedure (IX-B1)
 Subsidy Agreement _____ Procedure (VI-G15)
 Title IV-E Adoption Assistance Agreement _____ Procedure (VII-G2)

Americans With Disabilities Act

Family Service Delivery System _____ Policy (I-B)

Appeals

Adoption Subsidy _____ Policy (VIII-H)
 Case Review Hearings for Children in Out-of-Home Placement _____ Policy (VI-F)
 Changes in Out-of-Home Placement _____ Policy (VII), Procedure (VII-D1)
 Child Maltreatment Assessment Determination _____ Procedure (II-E5)
 Court Initiates Termination of Parental Rights _____ Procedure (VIII-C2)
 Internal Review and Administrative Hearing Process _____ Policy (IX-A), Procedures (IX-A1-4)
 Services Case Opening and Re-evaluation _____ Policy (III-A)

Application

Application for Adoption _____ Procedure (VIII-G3)
 Assessment and Preparation _____ Procedure (VIII-F2)

Area Managers/County Office Operations

Division's Organization Structure _____ Policy (I-C)

Arkansas State Police (ASP)

Child Abuse Hotline _____ Policy (II-C)
 County Office Assessment of Maltreatment Reports _____ Policy (II-E)
 Crimes Against Children Division (CACD) Investigations _____ Procedure (II-E11)

Arrest

Arrest of Child _____ Procedure (VIII-D5)

Assessment

Assessment and Preparation for Permanency Planning Staffing _____ Procedure (VIII-F2)
 Assessment and Preparation of Adoptive Applicants _____ Procedure (VIII-G4)
 Cash Assistance _____ Procedure (V-C1)
 Child Abuse Hotline _____ Procedure (II-C1)
 Child Maltreatment Assessment Determination _____ Procedure (II-E6)
 County Office Request for Clearance of a Report _____ Procedure (II-C3)
 County Office Response to the Child Abuse Hotline for those assessments that remain the responsibility
 of the Department _____ Procedure (II-E1)
 Health and Safety Assessment _____ Procedure (II-E3)
 Medical Neglect of a Disabled Infant _____ Procedure (II-F1)
 Medical / Psychological Evaluation Required During Assessment _____ Procedure (II-E4)
 Other Child Maltreatment Assessment Actions _____ Procedure (II-E5)
 Risk Assessment _____ Procedure (II-E7)
 Uniform Family Needs Assessment _____ Policy (II-B), Procedure (II-B1), Procedure (II-E7), Procedure (III-A1&2)
 Procedure (V-A1), Procedures (V-E1 & 2)
 Health and Safety Assessment _____ Procedure (II-E3)
 Income
 Cash Assistance _____ Procedure (V-C1)
 Narrative Summary
 Narrative Summary of Assessment and Preparation _____ Procedure (VIII-G5)
 Risk Assessment _____ Procedure (II-E7)
 Strengths and Needs
 Assessing Families In Relation to Strengths and Needs _____ Policy (II-B), Procedure (II-B1)
 Assessment Determination _____
 Services Case Plan _____ Policy (IV-A)
 Case Plan _____ Procedure (IV-A1)

Assessment Files

Expungement _____ Procedure (II-G1)
 Retention _____ Procedure (II-G1)

Attachments to the Adoption Summary _____ Appendix II.B

Attorney ad litem _____ Procedure (II-E8), Policy (IV-A), Procedure (IV-B1), Policy (VI-A)
 Policy (VII-C), Procedure (VII-C1), Policy (VII-D), Procedure (VII-D1)
 Procedure (VIII-B2), Procedures (VIII-C1 – 3), Procedure (VIII-D5), Procedure (VIII-E1)

Automated Client Eligibility System (ACES)

County Office Response to the Child Abuse Hotline for Those Assessments that Remain the Responsibility of the Department _____ Procedure (II-E1)
 Out-of-Home Placement Services Case Opening _____ Procedure (III-A2)

Behavior Treatment Unit

Division's Organizational Structure _____ Policy (I-C)

Benefit

Financial _____ Procedure (VIII-D2), Procedure (VIII-H1)
 Medical _____ Procedure (VI-G15)

Billing

Foster Care Authorization for Billing(CFS-334) _____ Procedure (V-C2), Procedure (IX-B2)

Birth Parents Relinquishing Infants

Birth Parents Relinquishing Infants for Adoption _____ Procedure (VIII-E1)

Birth/Legal Parent(s)

_____ Procedure (III-A4), Procedure (VIII-C1 & 3), Policy (VIII-E), Procedure (VIII-E1)
 Procedure (VIII-G7), Appendix II.A

Board Rate

Financial Support to Foster Parents _____ Policy (VII-E), Procedure (VII-E1)
 Requesting a Special Board Rate _____ Procedure (VII-E2)

Case Connection

Assessing Families in Relation to Strengths and Needs _____ Procedure (II-B1)
 Services to Preserve Families in Their Homes _____ Procedure (V-A1)

Case Plan

Assessing Families in Relation to Strengths and Needs _____ Procedure (II-B1)

Case Plan

_____ Procedure (IV-A1)
 Case Staffings _____ Policy (IV-B)
 Family Service Worker Contacts _____ Procedure (V-B1)
 Services Case Plan _____ Policy (IV-A)
 Services to Preserve Families in Their Homes _____ Policy (V-A), Procedure (V-A1)

Case Re-evaluation

Case Re-evaluation _____ Procedure (III-A3)

Case Staffings

Case Staffings _____ Policy (IV-B), Procedure (IV-B1)
 Services to Preserve Families in Their Homes _____ Procedure (V-A1)

Cash Assistance

_____ Procedure (V-C1)

Central Registry

Child Abuse Hotline _____ Procedure (II-C1)
 Child Maltreatment Central Registry _____ Policy (II-D)
 Division's Organizational Structure _____ Policy (I-C)
 Protective Custody of Child in Immediate Danger _____ Procedure (II-E10)
 Retention of Assessment Files _____ Policy (II-G)
 Requests for Central Registry Information _____ Procedure (II-D1), Procedure (II-D1)
 Requests for Information from Agencies Providing Protective Services _____ Procedure (II-D2)

Search _____ Procedure (II-C1)

Checklist

Health and Safety Assessment _____ Procedure (II-E3)

Child Abuse

Child Abuse Hotline For Child Maltreatment Reports _____ Policy (II-C), Procedure (II-C1)

County Office Interaction with Child Abuse Hotline _____ Procedure (II-C2)

County Response to the Hotline for assessments that remain the responsibility of the DCFS _____ Procedure (II-E1)

Family Service Delivery System _____ Policy (I-B)

Child Abuse Hotline

Advise _____ Procedure (II-C2)

Call _____ Procedure (II-C2)

Child Abuse Hotline for Child Maltreatment Reports _____ Policy (II-C), Procedure (II-C1)

Contact _____ Procedure (II-C2), Procedure (II-C3)

County Office Interaction with Child Abuse Hotline _____ Procedure (II-C2)

County Response to the Hotline for those that remain the responsibility of the DCFS _____ Procedure (II-E1)

Inappropriate Report _____ Procedure (II-C3)

Request for Clearance of a Report _____ Procedure (II-C3)

Child Care

Services To Preserve Families in Their Homes _____ Policy (V-A)

Situations Involving Non-Caretaker, Domestic Violence, Family Moving, Multi-County Assessments,

Unlicensed Baby-sitters _____ Procedure (II-E9)

Child Death

Child Death _____ Policy (IX-B)

Funeral Arrangements _____ Procedure (IX-B2)

Incident Intake _____ Procedure (IX-C1)

Protocol _____ Procedure (IX-B1)

Review Committee _____ Policy (IX-C)

Child Maltreatment

Assessment

Child Abuse Hotline _____ Procedure (II-C1)

County Assessment of Maltreatment Reports _____ Policy (II-E)

County Interaction with the Hotline _____ Procedure (II-C2)

County Response to the Hotline for assessments that are the responsibility of DCFS _____ Procedure (II-E1)

Health and Safety Assessment _____ Procedure (II-E3)

Maltreatment Report Assessment Interviews _____ Procedure (II-E2)

Medical/Psychological Evaluation Required During Assessment _____ Procedure (II-E4)

Other Assessment Actions _____ Procedure (II-E5):

Retention of Assessment Files _____ Policy (II-G)

Requests for Information from Agencies Providing Protective Services _____ Procedure (II-D2)

Situations Involving Non-Caretaker, Domestic Violence, Family Moving,
Multi-County Assessments, Unlicensed Baby-sitters _____ Procedure (II-E9)

Assessment Determination

Child Maltreatment Assessment Determination _____ Procedure (II-E6)

Retention of Assessment Files _____ Policy (II-G)

Requests for Information from Agencies Providing Protective Services _____ Procedure (II-D2)

Risk Assessment _____ Procedure (II-E7)

Other Child Maltreatment Assessment Actions _____ Procedure (II-E5)

Child Maltreatment (continued)

Assessment Protocol

Child Abuse Hotline _____ Procedure (II-C1)

Child Maltreatment Assessment Determination _____ Procedure (II-E6)

County Office Interaction with Child Abuse Hotline _____ Procedure (II-C2)

Child Abuse Hotline for Child Maltreatment Reports _____ Policy (II-C)

Contacts

Family Service Worker Contacts _____ Policy (V-B), Procedure (V-B1)

Family Protection Unit Investigations of Child Maltreatment Reports _____ Procedure (II-E11)

Family Service Worker Contacts _____ Policy (V-B)

Investigations

Child Maltreatment Central Registry _____ Policy (II-D)

County Office Assessment of Child Maltreatment Reports _____ Policy (II-E)

Family Protection Unit Investigations of Child Maltreatment Reports _____ Procedure (II-E11)

Retention of Assessment Files _____ Policy (II-G)

Situations Involving Non-Caretaker, Domestic Violence, Family Moving, Multi-County Assessments,

Unlicensed Baby-sitters _____ Procedure (II-E9)

Religious Exemption

Child Maltreatment Assessment Determination _____ Procedure (II-E6)

Report Assessment Interview

Child Maltreatment Report Assessment Interviews _____ Procedure (II-E2)

Child Maltreatment Allegation

County Response to the Hotline for assessments that remain the responsibility of

DCFS _____ Procedure (II-E1)

Child Maltreatment Central Registry

Child Maltreatment Central Registry _____ Policy (II-D)

Child Maltreatment Reporter

Follow-up with Mandated and Other Reporters _____ Procedure (II-E8)

Child Maltreatment Reporting Act

County Office Request for Clearance of a Report _____ Procedure (II-C3)

Child Placement Advisory Committee

Division's Organizational Structure _____ Policy (I-C)

Child Welfare Act

Family Service Delivery System _____ Policy (I-B)

Child Welfare Agency Licensing

Division's Organizational Structure _____ Policy (I-C)

Child Welfare Agency Review Board

_____ Policy (I-C)

Child Welfare Services

_____ Policy (I-B), Policy (I-C)

Children's Reporting Information System

_____ Policy (I-D)

CHRIS

Assessing Families in Relation to Strengths and Needs _____ Procedure (II-B1)

Child Abuse Hotline _____ Procedure (II-C1)

County Interaction with Child Abuse Hotline _____ Procedure (II-C2)

County Response to the Hotline for assessments that remain the responsibility of

DCFS _____ Procedure (II-E1)

Divisions Organizational Structure _____ Policy (I-C)

Official Record Keeping _____ Policy (I-D)

Other Child Maltreatment Assessment Actions _____ Procedure (II-E5)

Requests for Information from Agencies Providing Protective Services _____ Procedure (II-D2)

Civil Rights Act

Family Service Delivery System _____ Policy (I-B)

Community

Based services _____ Policy (V-A)
 Notification of sex offenders _____ Policy (II-H), Procedure (II-H1)
 Referral for services _____ Policy II-A), Procedure (II-A1), Policy (V-E), Procedures (V-E1 – 3)
 Resources _____ Procedure (VIII-A1)

Community Based Family Support

Services to Preserve Families in Their Homes _____ Policy (V-A)

Community Services

Division's Organizational Structure _____ Policy (I-C)

Compacts

Adoption _____ Policy (VI-G), Procedures (VI-G1 – 14)
 Foster Care _____ Policy (VI-G), Procedures (VI-G1 – 14)
 ICPC _____ Policy (VI-G), Procedures (VI-G1 – 14)
 Juvenile _____ Procedure (VI-G15)
 Medical assistance _____ Procedure (VI-G15)
 Mental health _____ Procedure (VI-G15)

Comprehensive Health Assessment

Comprehensive Health Assessment & Health Plan for Children in Out-of-Home Placement _____ Policy (VI-D)

Gathering and Maintaining Health Records _____ Procedure (VI-C3), Procedure (VI-D1)

Summary _____ Procedure (VI-D1)

Concurrent Planning _____ Procedure (VI-A2)

Confidentiality _____ Procedure (II-C2), Policy (II-D), Procedure (IV-B1), Procedure (V-E3)
 Policy (VII-B), Procedure (VII-B1), Procedure (VIII-I1)

Consent for/to

Adoption _____ Procedure (VIII-C1), Procedures (VIII-F1, 4 & 7), Procedure (VIII-I1)
 Appointment of a guardian _____ Procedure (VIII-C3), Procedure (VIII-D7), Procedure (VIII-E1)
 Health Department Services _____ Procedure (VIII-F2), Procedure (VIII-G6)
 Major decisions _____ Policy (VIII-D), Procedure (VIII-D1)
 Mutual consent Voluntary Adoption Registry _____ Policy (VIII-I), Procedure (VIII-I1), Procedure (VIII-F8)
 Photo-listing registration _____ Procedure (VIII-G7), Appendix II. B
 Termination of parental rights _____ Procedures (VIII-C1 – 3)
 Treatment _____ Procedure (II-E10), Procedure (II-F1)
 Use of Funds and Resources _____ Procedure (VI-I1)
 Withdrawal (of) _____ Procedure (VIII-C3), Procedure (VIII-E1)

Contact

Family Service Worker Contacts _____ Policy (V-B), Procedure (V-B1)

Supervision of Children in Out-of-Home Placement _____ Policy (VII-C)

Court

Appearance _____ Procedure (VII-B1), Procedure (VIII-F1), Procedure (X-A4)
 Case plan (CFS-6010) filing _____ Procedure (IV-A1)
 Court Report (CFS-6011) _____ Procedure (II-E3), Procedure (VI-F1), Procedure (VIII-C1)
 Ex parte order of investigation _____ Procedure (II-E2)
 Infants born to incarcerated mother _____ Procedure (VI-A3)
 Initiates TPR _____ Procedure (VIII-C2)
 Judicial hearings _____ Policy (VI-F), Procedure (VI-F1)
 Notification of appearance _____ Procedure (VII-B1), Procedure VIII-F1)
 Orders _____ Procedure (II-B1), Procedure (III-A2), Procedure (VI-G4), Procedures (VI-I1 & 3)
 Procedure (VIII-C1), Procedure (VIII-F7), Procedure (VIII-H1), Policy (X-A),
 Procedures (X-A1, 3 & 5), Appendix II.B
 Permanency planning report _____ Procedure (VI-F1), Procedure (VIII-C1)
 Protective custody _____ Procedure (II-E10), Procedure (IX-B1)
 Remove offender from home _____ Procedure (II-E9)
 Reunification not required _____ Procedure (II-E10), Policy (VI-A), Procedure (VI-A2), Policy (VIII-A), Policy (VIII-C)

Court Hearing

- Case Review _____ Policy (VI-F), Procedure (VI-F1)
- Court Initiates Termination of Parental Rights _____ Procedure (VIII-C2)
- Protective Custody of Child in Immediate Danger _____ Procedure (II-E10)
- Termination of Parental Rights _____ Procedure (VIII-C2)

Crimes Against Children Division (CACD)

- Child Abuse Hotline for Child Maltreatment Reports _____ Policy (II-C), Procedure (II-C1)
- County Office Assessment of Child Maltreatment Reports _____ Policy (II-E)
- Family Protection Unit Investigations of Child Maltreatment Reports _____ Procedure (II-E11)
- Operational Protocols _____ Policy (II-E)

Criminal Background Check

- Protective Custody of Child in Immediate Danger _____ Procedure (II-E10)

Crisis Intervention

- Referral _____ Procedure (V-E2)

Criteria for Adoption

Procedure (VIII-G2)

Custody

- Child Maltreatment Assessment Determination _____ Procedure (II-E6)
- Decisions Involving Children in DHS Custody with Parental Rights Terminated Procedure (VIII-D1)
- Disclosure _____ Procedure (VIII-G8)
- Disruption of Adoption Placement _____ Procedure (VIII-F6), Procedure (VIII-G10)
- Interference With Custody _____ Policy (VI-H), Procedure (VI-H1)
- Out-of-Home Placement Services Case Opening _____ Procedure (III-A2)
- Protective Custody of Child in Immediate Danger _____ Procedure (II-E10)

Day Care

- Day Care for Children _____ Policy (V-D), Procedure (V-D1)
- Day for Children in Out-of-Home Placement _____ Policy (VII-F), Procedure (VII-F1)

Death of Child

- Child Death Review Committee _____ Policy (IX-C), Procedure (IX-C2)
- Child Death Protocol _____ Procedure (IX-B1)
- Funeral Arrangements _____ Procedure (IX-B2)
- Guidelines for Funeral Arrangements for Children in Out-of-Home Placement _____ Procedure (IX-B2)
- Incident Intake _____ Procedure (IX-C1)
- Protocol _____ Procedure (IX-B1)
- Review Committee _____ Policy (IX-C), Procedure (IX-C2)

Death of a Foster family Member _____ Procedure (VII-A3)

Death of a Parent _____ Procedure (VIII-D7), Procedure (VIII-H7)

Death of a Sibling _____ Procedure (II-E7)

Decision(s)

- Adoption decision _____ Procedure (VIII-F3)
- Appeal _____ Policy (III-A), Policy (VIII-H), Policy (IX-A), Procedures (IX-A1-2)
- Children in DHS custody with TPR _____ Policy (VIII-D0), Procedure (VIII-D1)
- Hearing Decision _____ Procedure (IX-A3)

Placement decision _____ Policy (VI-A)
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**ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES
FOLLOW-UP WITH CHILD MALTREATMENT REPORTER**

To: _____ Mandated Reporter [] Yes [] No

From: _____ County Office, Division of Children and
Family Services (DCFS)

_____ Crimes Against Children Division (CACD)

Date: _____ CHRIS Referral # _____

RE: Follow-Up With Child Maltreatment Reporter

I. TO BE COMPLETED FOR ALL REPORTERS

We [] have [] have not conducted an assessment of the Child Maltreatment allegation involving _____ that you reported on _____. I am authorized to inform you that the Division [] has [] has not offered services to the family involved in the child maltreatment assessment.

II. TO BE COMPLETED ONLY FOR MANDATED REPORTERS

For the above assessment, the allegation of Child Maltreatment was: [] true [] unsubstantiated. The following services were offered and are being provided: () Protective Services; () Foster Care; () Placement with Relative or Individual; () Placement in a Residential Facility; () Other (specify). This family [] has [] has not been referred by the Crimes Against Children Division to the local DCFS office for services.

The information provided above is confidential, and further disclosure is prohibited by law. Thank you for your cooperation in reporting your suspicions of child maltreatment. If you have any questions, please feel free to call me at _____.

Family Service Worker or CACD Worker

**ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES
NOTICE OF CHILD MALTREATMENT ALLEGATION**

To: _____
Prosecuting Attorney

Law Enforcement Agency

Attorney Ad Litem/Parent(s)
From: _____ County Office, Division of Children and
Family Services (DCFS)

Crimes Against Children Division (CACD)

Date: _____ CHRIS Referral # _____

RE: **NOTICE OF CHILD MALTREATMENT ALLEGATION**

As required by Arkansas Code Annotated §12-12-509, we are notifying you of the receipt of an allegation of severe maltreatment or other maltreatment allegations as specified below. Arkansas Code Annotated §12-12-506 also specifies that information in the Child Maltreatment report is confidential and may be released only under certain conditions specified in Arkansas Code Annotated §12-12-506.

Date of Allegation _____

Parents: _____

Address: _____

Child(ren): _____ (DOB) _____ (DOB)
_____ (DOB) _____ (DOB)
_____ (DOB) _____ (DOB)

Alleged Offender: _____

Address: _____ Phone _____

Allegation: _____

The results of our child maltreatment assessment will be forwarded to you as soon as it is completed.

Family Service Worker or CACD Worker

CFS-310 (R. 05/2002)

INSTRUCTIONS

CFS-310

Complete and mail to local Prosecuting Attorney, appropriate law enforcement agency, Attorney(s) ad litem, and the child's parent(s) upon receipt of all suspected severe maltreatment allegations, including allegation of non-related offenders such as day care staff, etc. This form is to be utilized also in non-severe maltreatment allegation whenever the Prosecuting Attorney or law enforcement agency are needed to assist in the assessment.

Allegation: Brief description of the suspected Child Maltreatment

Routing: Send original to the local Prosecuting Attorney.

Send copy to the local law enforcement agency.

Send a copy to the attorney ad litem if the victim or offender named in the child maltreatment allegation is a foster child.

Send a copy to the attorneys ad litem for all other children in the foster home.

Send a copy to the child's parent(s).

Retain file copy.

**ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES
NOTICE TO LOCAL EDUCATION AGENCY (LEA) OF CHILD
MALTREATMENT**

To: _____ **School Counselor or Administrator**

From: _____ County Office, Division of Children
and Family Services (DCFS)

_____ Crimes Against Children Division (CACD)

Date: _____ CHRIS Referral # _____

RE: () Notice Of Child Maltreatment
() Notice Of Child Maltreatment By Out-Of-Home Offender
() Notice Of Child Maltreatment By Juvenile Offender

(A). As required by Arkansas Code Annotated §12-12-515, we are notifying you that an allegation of child maltreatment involving a student at your school has been determined true. The victim of the child maltreatment is _____ (DOB)

The alleged offender is _____.
Alleged offender's relationship to the victim: _____.

(B). We are notifying you that _____,
a juvenile, has been named as an offender of a true child maltreatment report.

The Division has offered and will be providing the following services: () Protective Services; () Foster Care; () Placement with Relative or Individual; () Placement in a Residential Facility; () Other (specify): _____

This family [] has [] has not been referred by the Crimes Against Children Division to the local DCFS office for services.

In compliance with Arkansas Code Annotated §12-12-515 the above information is to become a part of the child's permanent record and maintained under the Family Education Rights and Privacy Act, 20 U.S.C. 1232(g). Arkansas Code Annotated §12-12-515 further requires that this information will be forwarded if the child transfers to another school, and that the Division will be notified of the child's new school and address, if known. The information provided is confidential and further disclosure, except as stated above, is prohibited. If you have any questions, please contact me at

Family Service Worker or CACD Worker

CFS-311 (R. 05/2002)
INSTRUCTIONS

CFS-311

Purpose: The purpose of the CFS-311 is to notify the school counselor of true child maltreatment reports involving students attending the school. The CFS-311 will convey the name of the alleged victim, the name and relationship of the alleged offender to the victim and the name of any juvenile who has been named as an offender. The CFS-311 will notify the counselor of the services being provided to the victim, the juvenile offender and the family.

Routing: Only one completed CFS-311 will be sent to the local education agency. If there is a school counselor, the CFS-311 will be sent to him. If there is not a school counselor, the CFS-311 will be sent to a specified administrator within the local education agency.

**ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES
CHILD MALTREATMENT ASSESSMENT DETERMINATION
NOTIFICATION**

CHRIS Referral # _____

County _____

To:

From: _____ [] Division of Children and Family
Services (DCFS)
Name of Investigator [] Crimes Against Children Division
(CACD)

Date: _____ Certified Mail # _____

RE: NOTICE OF CHILD MALTREATMENT ASSESSMENT DETERMINATION

CHILD(REN) INVOLVED

On _____, the Division of Children and Family Services, or Crimes Against Children Division, received an allegation of suspected child maltreatment involving you and/or your child or a child whose care you have been entrusted. The allegation stated that the incident occurred on or about the following date and time: _____ . This letter is to inform you of the assessment determination of suspected maltreatment using the standard of a preponderance of the evidence.

_____The evidence does not support the allegation of Child Maltreatment.

_____The evidence supports the allegation of Child Maltreatment and

_____ was named as the offender(s).

Circumstances indicate that a Protective Services case should be opened for your family.

_____The evidence supports the allegation of Child Maltreatment, and

_____ was named as the offender(s).

Circumstances do not indicate that a Protective Services case should be opened for your family.

If you have been named as the offender of a true report, your name will be placed in the Arkansas Child Maltreatment Central Registry. If you disagree with the assessment determination and your name being placed in the Registry, you may request an administrative hearing within thirty (30) days of receipt of the restricted certified mail notification. Mail your notarized request for an administrative hearing, along with a copy of this letter, to: Appeals and Hearings Officer, Slot N401, P. O. Box 1437, Little Rock, AR. 72203, and copy your request to the Investigator named above. See the publication "Child Protective Services: A Caretaker's" (PUB-052) for additional information, or call _____ at _____.

Family Service Worker or CACD Worker

DCFS

County Supervisor or CACD Supervisor

This information is available in different formats such as: large print, audio tape, etc. If you need another format, contact the Division's ADA Coordinator at 682-8760 or TDD 682-1442.

CFS-312 (R. 05/2002)

INSTRUCTIONS

CHILD MALTREATMENT ASSESSMENT DETERMINATION NOTIFICATION

CFS-312

Purpose: To inform the alleged victim(s) and offenders of the outcome of the Child Maltreatment Assessment. Staff from the Division of Children and Family Services and the Crimes Against Children Division (CACD) will use the CFS-312 for notification purposes. This letter is to be mailed if the Child Maltreatment Assessment is found true or unsubstantiated.

Completion: Insert the CHRIS Referral number and the county name. The form is to be addressed appropriately, the local office address added, dated, insert the certified name number, the proper assessment determination (outcome) checked, the Family Service Worker or CACD Worker's name and phone number inserted, and signed by the supervisor.

The identified county will be responsible for preparing the investigative file and defending the determination. The county for DCFS is the county where the child lives. The county for CACD is the county of occurrence.

Routing: One (1) completed letter addressed to:

- The family of each alleged victim;
- The alleged victim, if 10 years of age or older; and
- The family of each alleged offender, if the offender is a minor (under 18) or
- The offender if 18 or over.
- The Attorney Ad Litem, if the child is in an out-of-home placement.
- The Public Defender if one is assigned.
- The Juvenile Division of Circuit Court if there is a true finding of sexual abuse perpetrated by a child under the jurisdiction of the court.

If there is a true finding of child maltreatment, the CFS-312 will be routed to the above named individuals by certified mail, restricted delivery or process server to the recipient's last known address.

Two copies of the CFS-312 will be routed to anyone listed above who has appeal rights.

Retain a file copy of each letter mailed.

Posting: Post the date the letter is mailed on the Document Tracking screen in CHRIS.

**ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES
REFERRAL FOR INVESTIGATION**

To: _____ **Law**
Enforcement Agency

From: _____ Crimes Against Children Division (CACD)

From: _____ County Office, Division of Children and
Family Services (DCFS)

Date: _____ CHRIS Referral # _____

RE: **Referral for Investigation of Suspected Child Maltreatment by a Non-Caretaker**

During our assessment of alleged Child Maltreatment, it has been determined that the alleged offender is not the child(ren)'s caretaker. Under Arkansas Code Annotated §12-12-511, we are forwarding a copy of our findings for use by your agency in any criminal investigation regarding the allegations.

Please forward the results of your investigation within (30) days so that we may complete Central Registry reporting procedures.

Family Service Worker or CACD Worker

DCFS County Supervisor or CACD

Supervisor

INSTRUCTIONS

REFERRAL FOR INVESTIGATION OF SUSPECTED CHILD MALTREATMENT BY A NON-CARETAKER CFS-321

COMPLETION

If before or during the course of an investigation it is determined that the identified offender is not the child(ren)'s caretaker, the Family Service Worker, or Crimes Against Children Division Worker, will complete the CFS-321 for the DCFS County Supervisor's signature or the CACD Supervisor's signature, whichever is appropriate. The CFS-321 will be sent to the appropriate law enforcement agency (County Sheriff or local Chief of Policy). A copy of the CFS-310 (Notice of Child Maltreatment Allegation) and any other information concerning the allegation will be attached.

Routing

Send the original to appropriate law enforcement agency.

Retain file copy.

**Arkansas Department of Human Services
Division of Children and Family Services
Protective Custody/Parental Notification**

TO: Parent/Guardian

FROM: County Office, Division of Children & Family Services
Phone:

DATE:

RE: Protective Custody of Your Child(ren)

As authorized by Arkansas Code Annotated §9-27-313 and §12-12-516, this is your notification that the following child(ren) has been taken into protective custody because of an immediate danger to the child(ren):

Name: _____	DOB: _____

Your child(ren) has been placed in a Foster Home, Emergency Shelter, or other (specify) . For security reasons we cannot provide the location.

A petition for emergency custody which will temporarily remove the child(ren) from your custody is being filed in the Juvenile Division of Circuit Court, District, located at: phone . You and your child(ren) have the right to receive a copy of the petition.

An emergency hearing will be held within five (5) working days of filing the petition. You have a right to be at the hearing and the date and time will be provided. Contact me at the number at the top or the Juvenile Division Court for further information.

DCFS County Supervisor

Family Service Worker

**ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES
NOTIFICATION OF NAME REMOVAL FROM THE CENTRAL REGISTRY**

To: _____

From:

Legacy/CHRIS Referral # _____

County: _____

Date: _____

RE: NOTICE OF NAME REMOVAL FROM THE CHILD
MALTREATMENT CENTRAL REGISTRY

CHILD (REN) INVOLVED

On _____, the Division of Children and Family Services, or Crimes Against Children Division, received an allegation of suspected child maltreatment involving you and/or your child or a child whose care you have been entrusted. The allegation stated that the incident occurred on or about the following date and time: _____. Due to the "true finding" of the allegation your name was placed in the Child Maltreatment Central Registry. This letter is to inform you that your name has been removed from the Child Maltreatment Central Registry in accordance Arkansas Code 12-12-505 for the child maltreatment type:

(Child Maltreatment Type)

Your name was removed on _____
Month Date Year

Please contact _____ at _____ for additional information.

This information is available in different formats such as: large print, audiotape, etc. If you need another format, contact the Division's ADA Coordinator at 682-8760 or TDD 682-1442.

CFS-327 (05/2002)

INSTRUCTIONS

NOTIFICATION OF NAME REMOVAL FROM THE CENTRAL REGISTRY

CFS-327

Purpose: To inform offenders of child maltreatment that their name has been removed from the Child Maltreatment Central Registry. This form will be used to notify offenders whose names are removed who meet the criteria for automatic name removal and for five (5) year requests.

Completion:

- Check monthly report of Automatic Removals from the Central Registry in CHRIS.
- Send Notice of Name Removal from the Central Registry to offenders identified for your county within 10 days of receiving the CHRIS report.
- Insert the CHRIS Referral number and the county name. The form is to be addressed appropriately, the local office address added, dated, insert the certified name number, the name of a contact person, phone number inserted, and signed by the supervisor.

Routing: One (1) completed letter addressed to:

- The Offender
- All parties who received original notice of child maltreatment determination. Attach copies of the original Notice to LEA (Local Education Agency) of Child Maltreatment (CFS-311) and Child Maltreatment Assessment Determination Notification (CFS-312).
- Retain a file copy of each letter mailed.

Posting: Post the date the letter is mailed on the Document Tracking screen in CHRIS.

Arkansas Department of Human Services
Division of Children and Family Services
Request for Name Removal From the Central Registry

Requester's Personal Data

Last Name	First Name (Include any Alias)	Middle Name
Address: _____	Telephone: _____	Home: () _____
_____		Work : () _____
_____	Date of Birth _____	Race _____
_____	SS# _____	Gender _____

Child Maltreatment Report Information

1. Was a child maltreatment investigation conducted on you resulting in a true finding on one of the following child maltreatment types?

- | | |
|--|--|
| <input type="checkbox"/> Yes- Medical Neglect
<input type="checkbox"/> Yes- Mental Injury
<input type="checkbox"/> Yes- Medical Neglect of Disabled Infants
<input type="checkbox"/> Yes- Munchausen Syndrome by Proxy or Illness Falsification by Proxy
<input type="checkbox"/> Yes- Sprains/ Dislocations
<input type="checkbox"/> Yes- Striking a Child age seven or older on the face
<input type="checkbox"/> Yes- Striking a Child age six or younger on the face
<input type="checkbox"/> Yes- Throwing or Kicking a Child
<input type="checkbox"/> Yes- Abandonment
<input type="checkbox"/> Yes- Cuts, Welts, or Bruises
<input type="checkbox"/> Yes- Human Bites
<input type="checkbox"/> Yes- Inadequate Supervision | <input type="checkbox"/> Yes-Lock-Out
<input type="checkbox"/> Yes-Substance Misuse
<input type="checkbox"/> Yes-Sexual Contact
<input type="checkbox"/> Yes- Failure to Thrive
<input type="checkbox"/> Yes- Pornography Live Sex Act
<input type="checkbox"/> Yes- Indecent Exposure
<input type="checkbox"/> Yes- Threat of Harm
<input type="checkbox"/> Yes- Failure to Protect
<input type="checkbox"/> Yes- Shaking a child 4 or older
<input type="checkbox"/> Yes- Tying/ Close Confinement
<input type="checkbox"/> Yes- Lockout |
|--|--|

2. Has more than five (5) years lapsed since the closure of any protective services or foster care case opened as a result of this report and there has not been a subsequent true report for this type for five (5) years? Yes No

If you answered yes to both of the above questions you meet the criteria to have your case reviewed.

Ark. Code Ann. 12-12-505-506 requires The Department of Human Services to establish procedures to determine whether or not to remove an Offender's name from the Central Registry if there has not been a subsequent true report for this type of child maltreatment for five (5) years, and more than five years have lapsed since closure of any protective services or foster care case opened as a result of this report. A committee with expertise in the area of child maltreatment will review your case upon receipt of this request to determine if your name can be removed from the Central Registry. The law requires that you meet the criteria mentioned above for your case to be reviewed. The Review Committee meets in March, June, September, and December. Your case will be reviewed in the month closest to the date that your request is received. You will be notified in writing of the committee's decision.

Victim's Name _____ Victim's Date of Birth _____

What is the Crid number listed on your Central Registry Report? Crid # _____

If you meet the criteria to have your case reviewed please submit this form and copies of the Central Registry Report and a clean criminal background check to:

The Division of Children and Family Services

Central Registry

P.O. Box 1437, Slot S566
Little Rock, AR 72203

Arkansas Department of Human Services

Division of Children and Family Services

FEDERAL PARENT LOCATOR SYSTEM INFORMATION

See Instructions on the Back of the Form

Name of Child(ren) _____ -

THE INFORMATION IN THIS SECTION RELATES TO THE ABSENT PARENT TO BE LOCATED.

1. Name

2. Social Security Number

3. Date of Birth

4. Place of Birth

5. Mother's Maiden Name

6. Last Known Address

7. Telephone Number

8. Driver's License Number

9. Possible Current Location

10. Last Known Employer

a. Employer's Address

b. Employer's Phone Number

11. Has this person ever been a member of the Armed Forces?

Yes

___ No ___

Branch

- 3. If requested by OCSE, a CFS-408 may be sent directly to OCSE at the Office of Child Support Enforcement, P.O. Box 8133, Little Rock, AR 72203.**

IN THE CIRCUIT COURT OF _____ COUNTY, ARKANSAS
JUVENILE DIVISION

A F F I D A V I T

Comes Petitioner herein, affirming the following:

1. Petitioner is an adult agent and employee of the Arkansas Department of Human Services.
2. Facts in support of the Petition attached hereto are:

AFFIANT

V E R I F I C A T I O N

On this day the above petitioner came before me stating on oath that the facts contained in the foregoing affidavit and petition are true and correct to the best of petitioner's knowledge, information and belief.

WITNESS MY HAND AND SEAL this _____ day of _____,
_____.

NOTARY PUBLIC

MY COMMISSION EXPIRES:

To:

To:

Of:

**NOTICE OF CUSTODY WITH POWER TO CONSENT TO ADOPTION
PROCEDURE**

Take notice that on the _____ day of _____, **20** _____, a petition was filed by the Department of Human Services in the Juvenile Division of Circuit Court of _____ County, Arkansas to have (a) certain (child) (children) named _____ declared (a) dependent (child) (children) and to take from you the custody of said (child) (children) and to appoint further some suitable person as (his/her) (their) custodian with power to consent to the adoption of said (child) (children) or to place said (child) (children) in an adoptive or foster home.

Now unless you appear within twenty days after the date of this notice and show cause against such application, the petition shall be taken as confessed and the decree granted.

Dated _____

Clerk _____

_____,
Arkansas

B. Income and Expenses

List yours and your spouse's employment for the past 5 years.

Name of Employer	Address	Salary	Type Job	Date Started	Date Left	Reason for Leaving

Current working hours and days

Monthly Family Income

Source	Gross	Net
Earned Income	\$	\$
Farm Self-Emp.	\$	\$
Non-Farm Self-Emp.	\$	\$
Social Security	\$	\$
V.A.	\$	\$
AFDC	\$	\$
SSI	\$	\$
Alimony	\$	\$
Child Support	\$	\$
Worker's Compensation	\$	\$
Unemployment Compensation	\$	\$
Pensions & Annuities	\$	\$
Dividends & Royalties	\$	\$
Interest from Savings	\$	\$
Rental Income	\$	\$
Other	\$	\$
	\$	\$
Total Monthly Income	\$ 0.00	\$ 0.00

List any savings/assets:

Monthly Expenses		Other Expenses	
House Payment	\$		\$
Rent	\$		\$
Car Payment	\$		\$
Utilities	\$		\$
Child Care	\$		\$
Credit Cards	\$		\$
Groceries	\$		\$
		Total Monthly Expenses	\$ 0.00

List any other liabilities:

Any problems or successes for children at school (name, explain):

F. **Social History:** List any family member in military services (name, branch, rank, discharge date).
 List any significant personal, developmental, personality or legal problems (name, explain).

List all of client's marriages.

	Name of Spouse (maiden)	Date Married	Date Separated	Date and How Ended	# of Children
First					
Second					
Third					

List all of your current spouse's marriages.

	Name of Spouse (maiden)	Date Married	Date Separated	Date and How Ended	# of Children
First					
Second					
Third					

If you are not currently married, are you contemplating marriage? Yes No

G. **Family Activities**

Family religion:

Community/Social Activities:

H. **References:** (List the names, addresses, and phone numbers for three (3) personal references.)

Client's signature _____ Date

Client's spouse's signature _____ Date

Any applicable attachments must also be completed and returned with this form.

**Arkansas Department of Human Services
Division of Children and Family Services
Reference Letter For Home Study**

To: _____
working days to:

Return form within 7

RE: _____

This family has given your name as a reference for the purpose of gathering information for a home study. Please complete the following and return to the address above.

1. How long have you known this family?

2. What is your relationship (i.e. relative, friend, neighbor, etc.)?

3. Have you visited in their home? Yes, No. How often?

4. Describe their character, parenting abilities.

5. Describe the atmosphere in their home.

6. Do you know anything about the family which would be harmful to a child placed in their home?
 Yes No: If so, explain.

7. Please add any additional observations or comments you have regarding this family.

Completed by: _____

Date: _____

**Division of Children and Family Services
Home Study Attachment
Adoption**

If you were referred for a home study because of adoption, you will also need to complete this attachment.

Within six months of the study a report of a physical examination is required for members of the adoptive family living in the household, which verifies that each person suffers no communicable disease, specific illness, or disabilities which would interfere with the family's ability to parent a child. (PUB-004 "Minimum Licensing Standards for Child Welfare Agencies")

1. Client's Name:
Last: _____
First: _____
Middle: _____
Maiden: _____

2. How long have you been considering adoption? _____

3. What are your reasons for wanting to adopt this child(ren)?

4. What Agency/Individual currently is responsible for child(ren)?

5. Have the birth/legal parent(s), legal guardian or custodian consented to this adoption?
 YES NO UNKNOWN

6. Are you related to the child(ren)? YES, NO? If yes, state how.

7. Date child(ren) placed with your family: _____. By whom?

8. Birth/legal parent(s):
Father: _____
Address: _____

Mother: _____
Address: _____

9. Please attach copies of any information that was provided to you by the person or agency handling the adoption (i.e., non-identifying information on children and biological family).

Completed by: _____

Date: _____

Arkansas Department of Human Services
Division of Children and Family Services
Home Study Attachment
Child Custody

If you were referred for a home study because of a custody dispute, you will also need to complete this attachment.

1. Client's Name:

Docket #:

Name and phone # of your attorney:

2. List children involved in court action:

3. Has child support been paid as ordered? YES, NO

If no, amount in arrears. _____

4. Since the separation of the parents, who have the children lived with and when (dates)?

5. State the reasons you believe the other parent should not have custody/visitation. Be specific. Give examples and dates. (You may use the back of this form if needed.)

6. State the reasons you believe you should have custody/visitation. (You may use the back of this form if needed.)

Completed by: _____

Date: _____

Division of Children and Family Services
Home Study Attachment
Placement

If you were referred for a home study because a child may be placed in your home, you will also need to complete this attachment.

1. Client's Name: _____

2. What child(ren) are you considering accepting in your home?

3. What agency or individual is currently responsible for child(ren)?

4. What is your relationship to the child(ren)?

5. What is your understanding of why the child(ren) cannot remain at home?

6. What are your future plans if this child(ren) comes to live with you?

7. Any other comments:

Completed by: _____

Date: _____

Arkansas Department of Human Services
Division of Children and Family Services
Home Study Attachment
Youth Services Center (YSC)

If you were referred for a home study because a child was placed at the Youth Services Center, you will also need to complete this attachment.

1. Client's Name: _____
2. Name of child at Youth Services Center:

3. Date entered YSC: (If known):

4. Reason for placement at YSC: (If known):

5. What is your relationship to the child?

6. What were the problems in the home before the child was placed at the YSC? (If known).

7. How does your family feel about the placement of the child in your home?

8. What are your future plans if this child(ren) comes to live with you?

9. Any other comments:

Completed by: _____

Date: _____

**ARKANSAS DEPARTMENT OF HUMAN SERVICES
DIVISION OF CHILDREN AND FAMILY SERVICES**

CASE PLAN

Case ID:

Date of Last Court Hearing:

Date of Next Court Hearing:

I. GENERAL INFORMATION

Date Initial Plan:	Revision Dates:

Target Date of Current Plan:	
-------------------------------------	--

Case Plan Addresses Child's Health and Safety Needs: | yes | no

Docket Number:

Goal (What is the goal of the case?)	

Concurrent Plan (If applicable)	

II. CASE PLAN PARTICIPANTS - ALL FAMILY MEMBERS & RELATIONSHIPS

Associated Client	Relationship	Client

CASE PLAN PARTICIPANTS - OTHER THAN FAMILY MEMBERS

Participant Name(Other than Family Members)

III. CASE PLAN

Problems Being Addressed	

FAMILY PRESERVATION SERVICES NOT APPROPRIATE	
YES/NO:	COMMENTS:

ACTIONS TAKEN TO ELIMINATE OR CORRECT THE IDENTIFIED PROBLEMS

Permanency Goal

	Services/Activities to be Provided Addressing Identified Problems	Parent/Child Name	Time Frames to Provide These Services	Status

	Needs Statement	Performance Criteria	Status Comments	Service Details

Concurrent Plan

	Services/Activities to be Provided Addressing Identified Problems	Parent/Child Name	Time Frames to Provide These Services	Status

	Needs Statement	Performance Criteria	Status Comments	Service Details

VI. *Who is the father of the client? What is his status as to the client?

Child Name	*Father Name	*Status

VIII. *Is the client in an out-of-home placement?

Yes

No

If so, answer the following:

Reason for Removal. (Problems or conditions that required placement of the client outside the home)

Client

Conditions

***How will these problems or conditions be remedied?**

***When do you anticipate the client returning home?**

PLACEMENT QUALIFICATIONS/EFFORTS

(Why Out-Of-Home Placement Was Selected)

Client	Unique Qualifications of Current Placement That Meet Child's Special Needs Including the Child's Current Health and Safety Needs	Efforts to Place Child with Relative

APPROPRIATENESS OF OUT-OF-HOME PLACEMENT

(Why this Particular Placement was Selected)

Client	Placement Proximity	How Current Placement is Least Restrictive

**SOCIAL AND FAMILY SERVICES THAT MUST BE PROVIDED BY
DHS WHILE CHILD IS IN AN OUT-OF-HOME PLACEMENT**

PARENT

*Services	/ * Reason for Services:
<p>*Do you anticipate that these services will promote the availability of the juvenile to a continuous and stable living environment, promote family autonomy, strengthen family life and promote reunification?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No	

GUARDIAN

*Services	/ *Reason for Services:
<p>*Do you anticipate that these services will promote the availability of the juvenile to a continuous and stable living environment, promote family autonomy, strengthen family life and promote reunification?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No	

CUSTODIAN

*Services	/ *Reason for Services:
<p>*Do you anticipate that these services will promote the availability of the juvenile to a continuous and stable living environment, promote family autonomy, strengthen family life and promote reunification?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No	

FOSTER PARENT

Client	Services to Foster Parent

<p>*Do you anticipate that these services will promote the availability of the juvenile to a continuous and stable living environment, promote family autonomy, strengthen family life and promote reunification?</p> <input type="checkbox"/> Yes <input type="checkbox"/> No

FINANCIAL/EDUCATIONAL/HEALTH/EMPLOYMENT INFORMATION

*Is a copy of the child's health and education records attached? (CFS-6007, pertinent educational records, such as Report Cards, recognition certificates, expulsions, etc.) <input type="checkbox"/> Yes <input type="checkbox"/> No	
*Does Parent or Guardian have health insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No	
*Mother's Place of Employment	*Weekly Salary
*Father's Place of Employment	*Weekly Salary
*Guardian's Place of Employment	*Weekly Salary

SIBLING INFORMATION

*Are there any siblings? <input type="checkbox"/> Yes <input type="checkbox"/> No
*Location of Siblings
*Reason For Separation Of Siblings
*Is sibling visitation appropriate? <input type="checkbox"/> Yes <input type="checkbox"/> No
*If so, what efforts will be made to enable the siblings to maintain regular contact?
*Is reunification of siblings a possibility? <input type="checkbox"/> Yes <input type="checkbox"/> No

INDEPENDENT LIVING SERVICE

*Is the client appropriate for Independent Living Services? <input type="checkbox"/> Yes <input type="checkbox"/> No	
List programs and services that are available to help the child transition from Foster Care to Independent Living.	
Client	Services

*FAMILY VISITATION PLAN

Child(ren):

Date Developed: **Dates Revised:** ; ;

Supervision Required by DCFS? **Yes** **No** **Explain:**

RESPONSIBILITIES/RIGHTS:

DIVISION:

FAMILY:

CUSTODIAN(S):

CAREGIVER(S):

Date	TIME	PLACE	FAMILY MEMBERS VISITING
1)			
COMMENT:			
2)			
COMMENT:			
3)			
COMMENT:			
4)			
COMMENT:			
5)			
COMMENT:			
6)			
COMMENT:			
7)			
COMMENT:			
8)			
COMMENT:			
9)			
COMMENT:			
10)			
COMMENT:			

FAMILY VISITATION PLAN

Date	TIME	PLACE	FAMILY MEMBERS VISITING
11)			
COMMENT:			
12)			
COMMENT:			
13)			
COMMENT:			
14)			
COMMENT:			
15)			
COMMENT:			
16)			
COMMENT:			
17)			
COMMENT:			
18)			
COMMENT:			
19)			
COMMENT:			
20)			
COMMENT:			

***STATEMENT OF UNDERSTANDING/DISTRIBUTION**

I understand:

- The Case Plan. I have read it or had it read to me.
- I do not read (understand) English. This plan was read (interpreted) to me.
- I am to be given a copy of any change in the Case Plan.
- I may ask for a review of the Case Plan, if I disagree with it.

If this Case Plan resulted from court-ordered services, I understand I may ask the court:

- To settle any disagreement I have with the Case plan.
- For a hearing on any change to the Case plan I disagree with.

If this Case Plan resulted from a court-ordered placement, I understand:

- My rights and duties and the rights and duties of the Department of Human Services while my child is in Foster Care.
- I may lose my rights as a parent if I don't meet the conditions in this Case Plan including material failure to comply substantially (only after notice and a court hearing). [A.C.A. §9-27-338 requires that a Permanency Planning Hearing be held no later than twelve \(12\) months after the date the child enters an out-of-home placement in order to enter a new disposition in a case. Families must comply with the tasks identified in the case plan. If a family has not shown that they have worked to improve their ability to safely care for their child, DCFS will recommend to the court, at the Permanency Planning Hearing, that their parental rights be terminated unless a compelling reason exists.](#)

I affirm that:

- I agree with the Case Plan.
- I disagree with part(s) of the Case Plan: (specify): _____
- I disagree with all of the Case Plan.; or
- I make no comment.

NOTICE TO PARENTS:

- I understand that my participation in the development or the acceptance of a Case Plan shall not constitute an admission of dependency-neglect.
- I understand that this Case Plan is subject to court approval upon review by the court.

SIGNATURES

Mother	Date	Father	Date
Child	Date	Child	Date
Child	Date	Child	Date
Custodian	Date	Caregiver	Date
Family Service Worker/Child	Date	Family Service Worker/Parents	Date
Supervisor	Date	Supervisor	Date
Family Support Specialist	Date	CASA	Date
Foster Parent	Date	Other	Date

***CHECK ONE:**

- The parent(s)/custodian signed the Case Plan after it was developed and discussed with them.
- The parent(s)/custodian refused to sign the Case Plan after it was discussed with them.
- The parent was unwilling to participate.

Reason:

***DISTRIBUTION:**

Persons receiving the Case Plan:

- | | |
|--|-------|
| <input type="checkbox"/> Mother | Date: |
| <input type="checkbox"/> Father | Date: |
| <input type="checkbox"/> Custodian | Date: |
| <input type="checkbox"/> Children | Date: |
| <input type="checkbox"/> Caregiver | Date: |
| <input type="checkbox"/> Guardian ad litem | Date: |
| <input type="checkbox"/> OCC | Date: |
| <input type="checkbox"/> Court | Date: |
| <input type="checkbox"/> Foster Parent | Date: |
| <input type="checkbox"/> CASA | Date: |
| <input type="checkbox"/> Other(specify): | Date: |

Family Service Worker making distribution:

Signature: _____

Date: _____

CASE PLAN INSTRUCTIONS

PART I

The "Case Plan" (CFS-6010) is developed with the family during the completion of the Strengths and Needs Assessment" (CFS-6009) in a collaborative effort to identify their strengths and needs. The family strengths and needs will be the major components which drive the completion and workings of the Case Plan allowing the family to meet the needs that brought the family to the attention of DCFS. Other appropriate persons may be involved including guardian or custodian, age appropriate child, foster parents, the court-appointed special advocate (CASA), the child's attorney ad litem, and all parties' attorney(s).

The Case Plan must be developed, at least partially, and filed with the court no later than thirty (30) days after the petition was filed or the child was first placed out-of-home, whichever ever was sooner. All parts of the Case Plan shall be completed and filed with the court, thirty (30) days after the adjudication hearing along with the "Placement Plan" and "Placement History" printed from CHRIS.

The Case Plan is subject to court approval.

All parties shall be notified of any substantive changes to the case plan, for example, placement, visitation or the goal.

DATE INITIAL PLAN: The date of initial staffing at which time the Case Plan was developed.

REVISION DATES: The date of subsequent staffings at which the time the Case Plan is revised.

TARGET DATE: The date the Case Plan actions will be completed.

GOAL: Goals are identified by law, ordered by the court or established with the family designed to meet the needs of the children and their families. The picklist of goals are:

- Adoption – This goal is to facilitate the child's adoption by relatives, foster parents or other unrelated individuals.
- Emancipation
- Guardianship
- Independence – This goal will be selected only if the child cannot be reunited with the child's family; another permanent plan is not available; and a compelling reason exists why termination of parental rights is not in the child's best interest or the child is being cared for by a relative and termination of parental rights is not in the best interest of the child.
- Maintain Children in Own Home
- Relative Placement – This goal is to have the child live permanently with a relative or relatives other than the ones from whom the child was removed.
- Return to Parent – This goal is to keep the child in foster care for a limited time to enable the agency to work with the family with whom the child had been living prior to entering foster care in order to reestablish a stable family environment.

PART II

CASE PLAN PARTICIPANTS: Identify all family members and their relationship to the child (ren) in an out-of- home placement. Also list the Case Plan participants other than family members who will be involved in the delivery of services to achieve the goal.

PART III

PROBLEMS BEING ADDRESSED: These are picklists, divided by a separator, to allow the worker to pick more than one problem that best describes the reason for DCFS involvement with the family. This listing of problems/home environment which necessitated removal or the remediation of which will determine the child's return home.

SERVICES/ACTIVITIES TO BE PROVIDED ADDRESSING IDENTIFIED PROBLEMS: This is a brief narrative of the services or activities provided to the parent or child to remedy the problems previously listed.

PARENT/CHILD NAME: Name of individual receiving the service/activity.

TIME FRAMES TO PROVIDE THESE SERVICES: The period of time the service will be completed.

STATUS: This picklist describes the stage of completion.

CONCURRENT PLAN: Complete and Implement a concurrent plan on all out-of-home placement cases except for those cases where the court determines no reasonable efforts to provide reunification services. The level and degree of concurrent planning will be done on a case-by-case basis.

STATUS COMMENTS: This is a narrative entry of comments about the status of any services being provided.

SERVICE DETAILS: This is a narrative entry to describe details about any service being provided.

ACTIONS TAKEN BY PARTIES INVOLVED TO ELIMINATE OR CORRECT THE IDENTIFIED PROBLEMS: This is a narrative entry of the actions that must be taken by either the parent, guardian, foster parent or DCFS to eliminate or correct the identified problems described previously.

CLIENT NAME: Name of individual who is responsible for the completion of the task to eliminate or correct the identified problems.

STATUS: This picklist describes the stage of completion.

PART IV

NO PREVENTENTIVE SERVICES ARE PROVIDED FOR THE FOLLOWING REASON (S): This narrative entry is to be completed only if the Division has no knowledge or involvement with the family prior to the child (ren) entering Foster Care.

PART V

ARE ANY ADA (AMERICANS WITH DISABILITIES ACT) ACCOMMODATIONS NEEDED? IF SO WHAT AND HOW WILL THE ACCOMMODATIONS BE PROVIDED?: This is a narrative entry describing any reasonable accommodations made to parents in accordance with the Americans with Disabilities Act to assure all parents meaningful access to reunification and family preservation services.

PART VI

WHO IS THE FATHER OF THE CLIENT/ WHAT IS HIS STATUS AS TO THE CLIENT?: This is a narrative entry of the name of the individual whom the petitioner, parent, guardian or custodian knows is claiming to be or who is named as the father or possible father of the child and whose paternity of the child has not been judicially determined. There can be more than one possible father until a father has been deemed the legal father by the court.

PART VII

SERVICES PROVIDED TO THE FAMILY MEMBERS

SERVICES TO MEET NEEDS OF CHILD/CLIENT WHILE IN OUT-OF-HOME

PLACEMENT: These picklists allow the worker to pick more than one service to be provided to the child/client while they are in an out-of-home placement.

SERVICES PROVIDED TO THE FAMILY MEMBERS INCLUDING PREVENTIVE SERVICES

SERVICES PROVIDED IN LAST 6 MONTHS: This picklist lists the services provided to the family.

OTHER (SPECIFY): This is a narrative entry of a description of the service if "Other" is selected from the previous picklist.

BEGIN DATE: The date the service began.

END DATE: The date the service ended.

REVIEW DATE: The date the service was reviewed for any changes.

SERVICE FREQUENCY: This picklist describes how often the service will be or was provided.

SERVICE STATUS: This picklist describes the stage of completion.

PART VIII

REASONS FOR REMOVAL: This is a picklist of reasons that describe problems or conditions that required placement of the client outside the home.

HOW WILL THESE PROBLEMS OR CONDITIONS BE REMEDIED?: This is a brief narrative entry of what is being accomplished by the parent or child to remedy the problems or conditions that required placement to the client outside the home.

WHEN DO YOU ANTICIPATE THE CLIENT RETURNING HOME?: This is a narrative entry of the estimated time frame of the child reunifying with their parents.

PLACEMENT QUALIFICATIONS/EFFORTS: These are narrative entries of which the out of home placement was selected by considering the "Unique Qualifications of Current Placement That Meet Child's Special Needs" and the "Efforts To Place The Child With A Relative."

APPROPRIATENESS OF OUT-OF-HOME PLACEMENT: This describes why a particular placement was selected by considering the "Placement Proximity" and "How Current Placement Is Least Restrictive". A picklist is provided for placement proximity and a narrative entry for the reason the current placement is least restrictive.

SOCIAL AND FAMILY SERVICES THAT MUST BE PROVIDED BY DHS WHILE CHILD IS IN AN OUT-OF-HOME PLACEMENT: These are narrative entries of services provided to a parent, guardian, custodian or foster parent that are determined to be in the best interest of the child and to promote reunification.

FINANCIAL/EDUCATIONAL/HEALTH/EMPLOYMENT INFORMATION: This is a description of the financial support obligation to the child, including health insurance of the child's parent, parents or guardian and information concerning the child's health and education records. Workers must attach a copy of the child's comprehensive health assessment, pertinent medical records for the review period, report cards, recognition certificates, and expulsions etc.

SIBLING INFORMATION: This section determines if there are siblings, location of siblings, and the reasons for the separation of siblings, if applicable, and the efforts made to enable the siblings to maintain regular contact while separated, if appropriate, and to be reunited as soon as possible.

INDEPENDENT LIVING SERVICES: This is a narrative entry to provide a description of the programs and services that are available to help a child age sixteen (16) and over prepare for the transition from foster care to independent living.

PART IX

FAMILY VISITATION PLAN: The visitation plan will be used when a child is residing in an out-of-home placement.

DATE DEVELOPED: This is the date staffings are held during which the Visitation Plan is finalized.

DATE REVISED: This is the date of the subsequent staffings during which the visitation Plan is updated.

SUPERVISION REQUIRED BY DCFS?: The Family Service Worker will check either "yes" or "no". The Family Service Worker will check "yes" if the agency is required to supervise the visits based on the current circumstances or court order.

DIVISION: List the responsibilities of the division ensure visits are conducted.

FAMILY: List the responsibilities of the family to ensure visits are conducted and all family members are present and participate in each visit.

CUSTODIANS: This person(s) could be someone other than the parents who is the legal custodian of the children prior to Foster care or could be the person(s) with whom the children are currently placed. Their visitation responsibilities will be noted.

CAREGIVER: This is usually the foster parent. List their responsibilities for the visits.

COMPLETE DATE, TIME AND PLACE AND FAMILY MEMBERS

VISITING/COMMENTS: Complete this section based on the schedule that has been agreed to with the family, ordered by the court or in the best interest for continuing the children's relationship with the family. Indicate who will visit; parent/child; sibling/siblings; etc.

STATEMENT OF UNDERSTANDING/DISTRIBUTION

INSTRUCTIONS: This will be completed and presented to the family at the time the family and the Family Service Worker develops and finalizes the Case Plan. Discuss the entire Case Plan with the family and help them to complete all appropriate areas of the statement of understanding including their signatures and dates signed. Parents (or other persons as indicated) should read the entire plan or have it read to them. One page should be completed for each parent, guardian, or custodian involved in the case plan. Each parent should initial the statement of understanding at the top left margin to signify that they understand the Case Plan. Copies will be given to all parties who are involved in the Case Plan.



Child Maltreatment Assessment Protocol



PUB-357 (R. 05/2002)

INTRODUCTION:

The following is a protocol to be used when a DCFS Family Service Worker (FSW) or the Arkansas State Police Crimes Against Children Division (CACD) conducts a Child Maltreatment Assessment. It identifies and defines the various types of child maltreatment a FSW/CACD may encounter during an assessment. The protocol also identifies when and from whom an allegation of child maltreatment may be taken. Finally, it identifies those conditions, which must be met before an allegation of abuse or neglect can be founded (determined to be true). Please note that the level of evidence necessary to found an allegation of child maltreatment changed as a result of legislation in 1999. Previously, a FSW only needed “some credible evidence” that maltreatment occurred. Now, the FSW/CACD must show that a “preponderance of the evidence” supports the allegation of child maltreatment. This is a higher standard of evidence and should be understood to mean it is “more likely than not” that abuse or neglect occurred.

The Arkansas Child Maltreatment Hotline must accept reports of alleged maltreatment if the child or the child’s family is present in Arkansas OR the incident occurred in Arkansas. If the child or its family live in another state, the Hotline shall: (1) screen out the report, (2) transfer the report to the other state’s hotline and (3) send a copy to the appropriate investigating agency to initiate courtesy interviews. If the incident occurred in Arkansas, but the victim, parents or offender no longer reside in Arkansas the Hotline will accept the report and the Arkansas investigating agency will contact the other state to request a courtesy interview with the out-of-state subject of the report.

The Division of Children and Family Services, like law enforcement agencies, has the authority to access a child’s public and private school records during a child maltreatment investigation.

An investigative determination will be made within 30 days regardless of which Arkansas agency_(DHS/DCFS, CACD or any other law enforcement agency) conducts the child maltreatment investigation.

Arkansas Code Annotated 12-12-509 “Investigation – Examination of Children” requires that all allegations of Severe Child Maltreatment be initiated within twenty-four (24) hours of the child maltreatment report. All other investigations will begin within seventy-two (72) hours of receiving a report. This protocol identifies characteristics of severe child maltreatment as a priority I and all other child maltreatment as a priority II.

The Health and Safety Assessment located in CHRIS will be utilized in conjunction with this protocol in completing child maltreatment assessments. See FSPP Procedure (II-E3).

CHILD MALTREATMENT ASSESSMENT PROTOCOL

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CHILD MALTREATMENT ASSESSMENT PROTOCOL

ABANDONMENT (Priority I)

I. Definition

Ark. Code Annotated 12-12-503(8): "Abandonment" means the failure of the parent to provide reasonable support and to maintain regular contact with the juvenile through statement or contact, when the failure is accompanied by an intention on the part of the parent to permit the condition to continue for an indefinite period in the future, and failure to support or maintain regular contact with the juvenile without just cause or an articulated intent to forego parental responsibility.

NOTE: Abandonment is parental conduct, which demonstrates an intent to relinquish all parental or custodial rights and claims to the child. Abandonment is also defined as any parental or caretaker conduct which evinces a settled purpose to forego parental duties and relinquish parental claims to the child.

II. Taking a report

- A. An acceptable reporter is any person with reasonable cause to suspect that a child was abandoned.
- B. Usage

The reporter has reason to believe that a child has been abandoned due to the parent's or caretaker's disregard of his or her responsibilities to the child.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that a child has been abandoned; and
- . Secured a preponderance of evidence that the parent's, caretaker's or responsible person's identity and/or whereabouts are unknown or that the parent, caretaker or responsible person is no longer demonstrating an interest in retaining custody or caring for the child.

ABUSE WITH A DEADLY WEAPON (Priority I)

- I. Definition - The assault or attempt to assault an individual by inflicting a wound, or conduct that reasonably could be expected to result in a wound, or the infliction of a wound, as the direct, non-accidental action of a parent or caretaker by any object which under the circumstances in which it is used is readily capable of causing death or serious injury. This may also include using a weapon to threaten a child.

A gunshot, stabbing injury, other injuries, or the attempt to inflict such injury using any deadly weapon.

A deadly weapon is any weapon or object which, under the circumstances in which it is used, is readily capable of causing death or serious physical injury.

Assault is conduct which creates a substantial risk of death or physical injury.

- II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has received an injury as a result of abuse with a deadly weapon.

- B. Usage

The reporter has reason to believe that abuse with a deadly weapon resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in abuse with a deadly weapon (failure to protect).

- III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the parent or caretaker attempted to injure the child; or
- . Verified that the child currently has a wound caused by a deadly weapon or that the child has received such a wound in the past (verification of past wounds must come from a physician, a law enforcement officer, an equally credible witness or by a direct admission from the alleged offender); and
 - secured a preponderance of evidence that the wound was sustained as the result of abuse or neglect as defined in Section I.
- . Verified that a weapon was used to threaten bodily harm.

BONE FRACTURES (Priority I)

- I. Definition

A fracture is a broken bone. There are ten types of fractures, the most common being:

- . Chip fracture: A small piece of bone is flaked from the major part of the bone
- . Simple fracture: The bone is broken, but there is no external wound.
- . Compound fracture: The bone is broken, and there is an external wound leading down to the site of fracture or fragments of bone protrude through the skin.
- . Comminuted fracture: The bone is broken or splintered into pieces.
- . Spiral fracture: Twisting causes the line of the fracture to encircle the bone in the form

of a spiral.

- . Coroner fracture (metaphyseal): Caused by a pulling or jerking of an extremity.

II. Taking a report

- A. An acceptable reporter is any person with reasonable cause to suspect that a child sustained a bone fracture as a result of maltreatment.

- B. Usage

The reporter has reason to believe that the bone fracture resulted from one of the following:

- . A direct, non-accidental action of the parent, caretaker, or other person responsible for the child's welfare (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in a bone fracture (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child currently has a bone fracture or has sustained a bone fracture in the past (such verification must come from a physician); and
- . Secured a preponderance of evidence that the bone fracture was sustained as the result of the abuse or neglect as defined in Section I.

BRAIN DAMAGE/SKULL FRACTURE (Priority I)

I. Definition

Brain damage is an injury to the large, soft mass of nerve tissue contained within the cranium/skull.

Skull fracture is a broken bone in the skull.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child sustained brain damage or a skull fracture as the result of maltreatment.

B. Usage

The reporter has reason to believe that the brain damage or skull fracture resulted from one of the following:

- . A direct, non-accidental action of the parent, caretaker or other person responsible for the child's welfare (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in the child sustaining brain damage or skull fracture (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child is currently brain damaged or has a fractured skull or has been brain damaged or sustained a skull fracture in the past (such verification must come from a physician); and
- . Secured a preponderance of evidence that the brain damage or skull fracture was sustained as the result of maltreatment as defined in Section I.

BURNS/SCALDING (Priority I)

I. Definition

Burns are any tissue injury resulting from excessive exposure to thermal, chemical, electrical, or radioactive agents. The effects vary according to the type, duration, and intensity of the agent and the part of the body involved. Burns are usually classified as:

- . First degree: Superficial burns, damage being limited to the outer layer of skin. Scorching or painful redness of the skin.
- . Second degree or partial thickness burn: The damage extends through the outer layer of the skin into the inner layers. Blistering will be present within 24 hours.
- . Third degree or full thickness burn: Burns in which the skin is destroyed with damage extending into underlying tissues, which may be charred or coagulated. Skin grafting

may be required.

Scalding is a burn to the skin or flesh caused by moist heat and hot vapors, such as steam.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child sustained a burn or was scalded as the result of maltreatment.

B. Usage

The reporter has reason to believe that the burn or scalding resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in the burn or scalding (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that a child has been burned or scalded. Severe burns, burns of an unknown origin, or burns where the injury is not consistent with the explanation provided for it should be examined by a physician or registered nurse. This includes cigarette burns, or burns in which it appears a hot instrument was applied to the skin. All immersion burns (scalds) must be confirmed by a physician unless the alleged offender has admitted to scalding the child; and
- . Secured a preponderance of evidence that the burn or scalding was sustained as a result of maltreatment as defined in Section I.

CUTS, BRUISES, & WELTS (Priority I, referred to Crimes Against Children Division if the child is age 3 or under and the injury is reported by medical personnel, a medical facility, or law enforcement and involves injury to the head, face, neck, or torso excluding buttocks. All other reports to be considered Priority I/II and referred to DCFS.)

I. Definition

Cut (laceration): An opening, incision, or break in the skin made by some external agent.

Bruise (ecchymosis): An injury which results in bleeding within the skin, where the skin is discolored but not broken.

Welt: An elevation on the skin produced by a lash, blow, or allergic stimulus. The skin is not broken and the mark is reversible.

NOTE: Regardless of the child's age, depending on the location, severity and multiplicity of the injuries (cuts, bruises and/or welts), the case may be a Priority I.

The investigation of bruises, cuts or welts in or on any portion of the head, face, neck or abdomen that are a direct act against the child by a parent or caretaker. This does not include an injury that is the result of a failure on the part of the parent or caretaker to safeguard the child from environmental situations that resulted in those injuries.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child sustained a cut, bruise, or welt as a result of maltreatment. For the allegation to be directed to the CACD, the report must come from medical personnel, a medical facility or law enforcement and involve injuries to the head, neck, face or torso excluding buttocks of a child age 3 or under.

B. Usage

The reporter has reason to believe that the cut, bruise, or welt resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in a cut, bruise, or welt (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child currently has a cut, bruise, or welt or has sustained one in the past (such verification may come from a physician, registered nurse, law enforcement officer, observation by the Family Service Worker or by a direct admission from the

alleged offender); and any injury must involve more than transient pain or minor temporary marks; and

- . Secured a preponderance of evidence that the cut, bruise, or welt was sustained as a result of maltreatment as defined in Section I.

Abuse does not include physical discipline of a child when it is reasonable and moderate and is inflicted by a parent or guardian for purposes of restraining or correcting the child. Reasonable and moderate physical discipline should cause no more than transient pain or minor temporary marks.

The age, size and condition of the child and the location of the injury and the frequency of recurrence of injuries shall be considered when determining whether the physical discipline is reasonable and moderate.

DEATH (Priority I)

I. Definition

Permanent cessation of all vital functions.

The following definitions of death are also commonly used:

- . Total irreversible cessation of cerebral function, spontaneous function of the respiratory system, and spontaneous function of the circulatory system.
- . The final and irreversible cessation of perceptible heart beat and respiration.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has died as the result of maltreatment.

B. Usage

The reporter has reasonable cause to suspect that a child's death resulted from the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in the child's death (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child is dead (such verification must come from a physician or coroner); and
- . Secured a preponderance of evidence that the child died as a result of maltreatment as defined in Section I.

EDUCATIONAL NEGLECT (Priority II)

I. Definition

Any child who is not meeting compulsory school attendance requirements because his or her parent or custodian is failing or refusing to enforce these attendance requirements is educationally neglected. A parent or custodian is failing or refusing to enforce the state's compulsory attendance requirements if:

- . The parent or guardian having custody or charge of any child between the ages of five through seventeen years (by September 15 of the school year), both inclusive, fails to enroll and send the child to a public, private, or parochial school, or provide a home school for the child, or
- . The parent or guardian having custody or charge of a child of the above-referenced age disregards his or her responsibility to ensure that a child attends school, or actively prevents such child from attending school.

Examples of educational neglect include:

- . The parent or custodian who does not enroll the child in school; or,
- . The parent or custodian who prevents a child from attending school; or,
- . The parent or custodian who does not take reasonable action to ensure that the child regularly attends school; or,
- . The parent or custodian who has not made arrangements to home school the child.

NOTE: Failure to follow an Individualized Educational Program (IEP) does not constitute educational neglect.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child is educationally neglected.

B. Usage

The reporter has reason to believe that a child is not home schooled and is not attending school because:

- . The parent or custodian did not enroll the child in the school program; or
- . The parent or custodian disregards the responsibility to ensure that the child is attending school or the parent or custodian actively prevents the child from attending school; or,
- . The parent or custodian has not taken the necessary steps to provide home schooling.

C. Factors to be considered in taking and/or founding a report

- . The child's physical condition, particularly as it relates to the child's ability to get ready for school, and
- . The child's mental abilities, particularly concerning the child's ability to get ready for school, and
- . The number of days missed, and
- . The parent's or custodian's attempts to ensure that the child attends school, and

- . The parent or custodian has hand-delivered to the superintendent written notice of the parent's or custodian's intent to home school the child.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child is not or was not meeting mandated educational requirements;
and
- . Secured a preponderance of evidence that the child is/has been educationally neglected as defined in Section I; and
- . Verified the parent or custodian has failed to provide written notice to the superintendent of the intent to home school the child.
- . Applied the factors in Section II, C, above and determined that the child is/was educationally neglected.

ENVIRONMENTAL NEGLECT (Priority II)

I. Definition

The child's person, clothing, or living conditions are unsanitary to the point that the child's health is in significant danger of impairment. This may include infestations of rodents, spiders, insects, snakes, lice, etc., human or animal feces, rotten or spoiled food and/or garbage which the child can reach.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child is living in the conditions noted above and that the conditions are a significant threat to the child's health.

B. Usage

The reporter has reason to believe that the child is living in conditions defined above as the result of disregard of duty or negligence on the part of the child's parent or caretaker responsible for the child's welfare.

C. Factors to be considered

Special attention should be paid to the age of the child, the child's physical condition, and the living conditions in the home in order to determine whether the report constitutes an allegation of harm.

In addition, the following incident factors should be considered:

- . Severity of the conditions,
- . Frequency of the conditions,
- . Duration of the conditions, and
- . Chronicity or pattern of similar conditions.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the conditions described exist or had existed; and
- . Secured a preponderance of evidence that the unhealthful/unsanitary conditions are/were the result of neglect as defined in Section I; and
- . Applied the factors in Section II, C, above, and determined that the conditions represent a threat to the child's health.
- . Secured a preponderance of evidence that a child was maltreated as in Section I.

FAILURE TO PROTECT (Priority I or II)

I. Definition

Failure of an individual responsible for the care of a child to take reasonable action to protect that child from maltreatment when that individual had reasonable cause to believe that the child was in significant danger of being maltreated.

This allegation may include situations in which a person with a documented history as an offender of child sexual abuse is allowed to be an unsupervised caretaker of a child.

NOTE: The Priority Level (I or II) is determined by the Type of Maltreatment from which the caregiver failed to protect. This is a sub-issue when considering sexual abuse, physical abuse, neglect, etc.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child was endangered and that an individual responsible for the care of the child failed to take reasonable action to protect the child.

B. Usage

The reporter has reason to believe that failure to protect resulted from one of the following:

- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in maltreatment to the child.
- . A blatant disregard by the parent or caretaker of his or her responsibilities for the child's welfare.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has concluded that:

- . An individual responsible for the care of a child had or should have had reasonable cause to believe that the child was in significant danger of maltreatment and failed to take action to protect the child from that danger.

NOTE: A finding of failure to protect should not be made against a caretaker who was in significant fear of his or her own safety.

- . Secured a preponderance of evidence that failure to protect occurred as a result of maltreatment as defined in Section I.

FAILURE TO THRIVE (Priority I)

I. Definition

A clinical term used by pediatric clinicians to describe infants and young children, generally 3 years of age and younger, who fail to grow as expected based on established growth standards for age and gender. A central cause of failure-to-thrive is under-nutrition, whether or not an associated organic disease is present. Pediatric under-nutrition, or Failure-To-Thrive triggers an array of health problems in children and may be associated with long-term impairments in growth, physical and cognitive development, academic performance, and behavior. The majority of children who demonstrate Failure-To-Thrive do not have a physical disease. Most such situations are associated with problems in the child's environment.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child suffers from failure to thrive.

B. Usage

The reporter has reason to believe that the child has failure to thrive syndrome as a result of the parent's or caretaker's neglect.

C. Factors to be considered

.Central to the definition of Failure-To-Thrive is abnormal growth compared to children of similar age and sex, using typical national growth standards.

.The child's symptoms, i.e. weight and/or velocity of growth and/or clinical signs of deprivation improve when the child is properly nurtured.

.There appears to be significant environmental or psychosocial disruption in the child's family.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

. Verified that the child has or had failure to thrive (such verification must come from a physician); and

. Secured a preponderance of evidence that the failure to thrive was at least partially a result of the parent's or caretaker's failure to provide for or meet the needs of the child.

HUMAN BITES (Priority II)

I. Definition

A bruise or cut in the skin caused by human teeth.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child sustained a human bite as a result of maltreatment.

B. Usage

The reporter has reason to believe that the human bite resulted from one of the following:

- . A direct, non-accidental action of the parent, caretaker, or other person responsible for the child's welfare (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another which resulted in a human bite (failure to protect).
- . The failure of the parent or caretaker to appropriately supervise the child resulted in human bites (inadequate supervision).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child currently has a human bite or has sustained a human bite in the past (such verification may come from a physician, dentist, registered nurse, law enforcement officer, observation by the Family Service Worker, or by a direct admission from the alleged offender); and
- . Secured a preponderance of evidence that the human bite was sustained as a result of maltreatment as defined in Section I.

IMMERSION (Priority I)

I. Definition

Interference with a child's ability to breathe by holding the child's nose and mouth under water or other liquid.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has been immersed as a result of maltreatment.

B. Usage

The reporter has reason to believe immersion resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another which resulted in immersion (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that a child has been immersed and restricted breathing.
- . Secured a preponderance of evidence that the immersion occurred as a result of maltreatment as defined in Section I.

INADEQUATE CLOTHING (Priority II)

I. Definition

Lack of adequate clothing to protect the child from the elements.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child is inadequately clothed.

B. Usage

The reporter has reason to believe that a child is or recently has been inadequately clothed due to the parent's or caretaker's disregard of his or her responsibilities.

C. Incident factors to be considered

- . Frequency of the incident,
- . Duration of the incident,
- . Chronicity or pattern of similar incidents,
- . Weather conditions such as extreme heat or extreme cold.

NOTE: Evidence of physical harm to the child such as frostbite, hypothermia, severe sunburn, or heat exhaustion is not required in order to indicate this allegation. Lack of clothing in the home is not sufficient to indicate a report of inadequate clothing unless other factors substantiate that the child is not being clothed. Other factors must be considered.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the incident or circumstances occurred; and
- . Secured a preponderance of evidence that the child is/has been inadequately clothed in accordance with Section II,B, above; and
- . Applied the factors in Section II, C, above and determined that the clothing was not appropriate to protect the child from the elements.
- . The mere availability of clothing is not sufficient to unfound a report of inadequate clothing.

INADEQUATE FOOD (Priority II)

I. Definition

Lack of food adequate to sustain normal functioning. It is not as severe as malnutrition or failure to thrive, both of which require a medical diagnosis for a finding of "True".

Examples include:

- . The child who frequently and repeatedly misses meals or who is frequently and repeatedly fed insufficient amounts of food.
- . The child who frequently and repeatedly asks neighbors for food and other information substantiates that the child is not being fed.
- . The child who is frequently and repeatedly fed unwholesome foods when his age, developmental stage, and physical condition are considered.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has received/is receiving inadequate food.

B. Usage

The reporter has reason to believe that the child has not received/is not receiving adequate food due to the parent's or caretaker's disregard of his responsibilities.

C. Incident factors to be considered:

- . Frequency of the occurrence,
- . Duration of the occurrence,
- . Pattern or chronicity of occurrence,
- . Previous history of occurrences,
- . Availability of adequate food.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the incident or circumstances occurred; and
- . Secured a preponderance of evidence that the child received/is receiving inadequate food as the result of maltreatment as defined in Section I; and

Applied the factors in Section II, C, above and determined that the amount of food received is not adequate to sustain normal functioning.

NOTE: Lack of food in the home is not sufficient to indicate a report of inadequate food unless other factors substantiate that the child is not being fed. On the other hand, the mere availability of food in the home is not sufficient to unfound a report of inadequate food. Other factors must also be considered. Do not found a report if the parents are making alternative arrangements to provide adequate food.

INADEQUATE SHELTER (Priority II)

I. Definition

Lack of shelter which is safe and which protects from the elements.

Examples of inadequate shelter include, but are not limited to:

- . No housing or shelter.
- . Exposed, frayed electrical wiring.
- . Housing with structural defects which significantly endanger the health or safety of the child.
- . Housing with indoor temperatures consistently below 50 degrees Fahrenheit.
- . Housing which is a significant fire hazard obvious to the reasonable person.
- . Housing with an unsafe heat source which poses a significant fire hazard or threat of asphyxiation.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child is being inadequately sheltered.

B. Usage

The reporter has reason to believe that the child is being inadequately sheltered due to the parent's or caretaker's disregard of his or her responsibilities.

- C. Shelter factors to be considered
 - . Seriousness of the problem.
 - . Frequency of the problem
 - . Duration of the problem.
 - . Pattern or chronicity of the problem.
 - . Previous history of shelter-related problems.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the incident or circumstances occurred; and
- . Secured a preponderance of evidence that the child is being or has been inadequately sheltered as the results of maltreatment as defined in Section I; and
- . Applied the factors in Section II,C, above and determined that the shelter is inadequate.

INADEQUATE SUPERVISION (Priority II)

I. Definition

The parent or caretaker has failed to appropriately supervise the juvenile resulting in the juvenile being left alone at an inappropriate age or in inappropriate circumstances which put the juvenile in danger.

Examples include, but are not limited to:

- . Leaving the juvenile alone when the juvenile is too young to care for himself or for other children.
- . Leaving a juvenile alone when the juvenile has a condition that requires close supervision. Such conditions may include medical conditions, behavioral, mental, or emotional problems, developmental disabilities, or physical handicaps.
- . Leaving a juvenile in the care of an inadequate or inappropriate caretaker, as indicated by the caretaker factors in Section II, C, below.

- . Being present but unable to supervise because of the caretaker's condition. This includes the parent or caretaker who uses drugs or alcohol to the extent that it has the effect of producing a substantial state of stupor, unconsciousness, intoxication, or irrationality. This also includes the parent or caretaker who cannot adequately supervise the juvenile because of the parent's or caretaker's medical condition, behavioral, mental, or emotional problems, developmental disability, or physical handicap.
- . Leaving a juvenile unattended in a place which is unsafe considering their maturity, physical condition, and mental abilities.

NOTE: The mere occurrence of a parent or caretaker being arrested does NOT of itself constitute "inadequate supervision" unless the arrest was due to child maltreatment (e.g. DWI).

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a juvenile has been/is being inadequately supervised as a result of maltreatment.

B. Usage

The reporter has reason to believe that the juvenile has been/is being inadequately supervised due to the disregard of responsibilities by the parent or caretaker.

C. Factors to be considered

Caretaker factors

- . How long does it take the caretaker to reach the juvenile?
- . Can the caretaker see and hear the juvenile?
- . Is the caretaker accessible by telephone or pager?
- . Is the caretaker mature enough to assume responsibility for the situation?
- . Is the caretaker physically, mentally, and emotionally able to care for the juvenile?
- . Is the caretaker able to make appropriate judgments on the juvenile's behalf?

Incident factors include:

- . Frequency of occurrence.
- . Duration of the occurrence.
- . Time of day or night when the incident occurs.
- . Juvenile's location.
- . Other supporting persons who have agreed to assist in supervising the juvenile.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified/secured a preponderance of evidence that inadequate supervision occurred; and

- . Secured a preponderance of evidence that the inadequate supervision is/was due to the parent or caretaker's neglect as defined in Section I; and
- . Applied the factors in Section II, C, above and determined that the supervision was inadequate.

INDECENT EXPOSURE (Priority I)

I. Definition

The exposure by a person of the person's sexual organs for the purpose of arousing or gratifying the sexual desire of the person, or any other person, under circumstances in which the person knows the conduct is likely to cause affront or alarm.

II. Taking a Report

A. An acceptable reporter is any person who has reasonable cause to suspect that a person exposed his/her sexual organs for the purpose of arousing or gratifying the sexual desire of the person, or any other person, under circumstances in which the person knows the conduct is likely to cause affront or alarm.

B. Usage

The reporter has reason to believe that a person exposed his sexual organs for the purpose of arousing or gratifying the sexual desire of the person, or any other person, under circumstances in which the person knows the conduct is likely to cause affront or alarm.

III. Founding a Report

This allegation may be founded only after the Worker has:

Secured a preponderance of evidence that a person exposed his/her sexual organs for the purpose of arousing or gratifying the sexual desire of the person, or any other person, under circumstances in which the person knows the conduct is likely to cause affront or alarm.

INTERFERING WITH A CHILD'S BREATHING (Priority I)

This category of child maltreatment is contained within another category. See the category, "Suffocation".

INTERNAL INJURIES (Priority I)

I. Definition

Internal injury is an injury which is not visible from the outside, e.g. an injury to the organs occupying the thoracic or abdominal cavities. Such injury may result from a direct blow. A person so injured may be pale, cold, perspiring freely, have an anxious expression, or may seem semi-comatose. Pain is usually intense at first, and may continue or gradually diminish, as patient grows worse.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child sustained internal injuries as the result of maltreatment.

B. Usage

The reporter has reason to believe that the internal injuries resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to stop an action by another person which resulted in internal injuries (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child currently has internal injuries or has sustained external injuries in the past (such verification must come from a physician); and
- . Secured a preponderance of evidence that the internal injury was sustained as a result of maltreatment as defined in Section I.

KICKING A CHILD (Priority II)

I. Definition

The parent or caretaker has used a foot to deliver a non-accidental sudden and forceful blow to any portion of the child's body.

II. Taking a Report

- A. An acceptable reporter is any person with reasonable cause to suspect that a child has sustained a sudden, forceful and non-accidental blow from the parent's or caretaker's foot.

- B. Usage

The reporter has reason to believe that the child has sustained a sudden and forceful non-accidental blow from the parent's or caretaker's foot.

III. Founding a Report

This allegation of maltreatment may be founded only after the Worker has:

- . Secured a preponderance of evidence that the child sustained a sudden and forceful non-accidental blow from the parent's or caretaker's foot.

. Abuse does not include physical discipline of a child when it is reasonable and moderate and is inflicted by a parent or guardian for purposes of restraining or correcting the child. Reasonable and moderate physical discipline should cause no more than transient pain or minor temporary marks.

The age, size and condition of the child and the location of the injury and the frequency of recurrence of injuries shall be considered when determining whether the physical discipline is reasonable and moderate.

LOCKOUT (Priority II)

I. Definition

The parent or caretaker has denied the child access to the home necessary to the safety and health of the child.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has been locked out of the home.

B. Usage

The reporter has reason to believe that the child has been denied access to his home.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

Verified that the child was denied access to the home by the parent or caretaker; and

. Secured a preponderance of evidence that the lock-out occurred as a result of maltreatment as defined in Section I.

MALNUTRITION (Priority I)

I. Definition

Lack of necessary or proper food substances in the body caused by inadequate food, lack of food, or insufficient amounts of vitamins or minerals.

The child with malnutrition is not simply a diminutive version of a well-nourished child. There are various physical signs of malnutrition, including the following:

. A decrease in lean body mass or fat; very prominent ribs; the child may often be referred to as "skin and bones."

. The hair is often sparse, thin, dry, and is easily pulled out or falls out spontaneously.

. The child is often pale and suffers from anemia.

- . Excessive perspiration, especially about the head.
- . The face appears lined and aged, often with a pinched and sharp appearance.
- . The skin has an old, wrinkled look with poor turgor. Classically, skin folds hang loose on the inner thigh and buttock.
- . The abdomen is often protuberant.
- . There are abnormal pulses, blood pressure, stool patterns, inter-current infections, abnormal sleep patterns, and a decreased level of physical and mental activity.

II. Taking a report

- A. An acceptable reporter is any person with reasonable cause to suspect that a child was malnourished as a result of maltreatment.

B. Usage

The reporter has reason to believe that the child was malnourished due to the parent's or caretaker's disregard of his or her responsibilities. The malnourishment must be non-organic in nature.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child is/was malnourished (such verification must come from a physician); and
- . Secured a preponderance of evidence that the child was malnourished as a result of the parent's or caretaker's disregard of his or her responsibilities.

MEDICAL NEGLECT (Priority II)

I. Definition

Lack of medical or mental treatment for a health problem or condition which, if untreated, could become severe enough to constitute a serious or long-term harm to the child; lack of follow-through on a prescribed treatment plan for a condition which could become serious enough to constitute serious or long-term harm to the child if the plan is unimplemented.

II. Taking a report

A. Acceptable reporter is any person with reasonable cause to suspect that a child has been/is being medically neglected.

B. Usage

The reporter has reason to believe that the child has not or is not receiving proper and necessary medical care due to the parent's or caretaker's disregard of his or her responsibilities.

C. Factors to be considered

- . Seriousness of the current health problem,
- . Probable outcome if the current health problem is not treated and the seriousness of that outcome,
- . Generally accepted medical benefits of the prescribed treatment, and
- . Generally recognized side effects/harm associated with the prescribed treatment.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

Verified that the child has/had an untreated health problem, or that a prescribed treatment plan was unimplemented. Such verification must come from a physician, registered nurse, psychologist, dentist, or by a direct admission from the alleged offender, and

- . Secured a preponderance of evidence that the child is/was medically neglected as defined above.
- . Applied the factors in Section II, C, above and determined that the problem or condition, if untreated, could result in serious or long-term harm to the child. Such verification must come from a physician, registered nurse, or dentist.

NOTE: If the Family Service Worker determines that the parent's decision to withhold medical treatment was based solely upon a religious belief, choosing instead to furnish the child with prayer and spiritual treatment in accordance with a recognized religious method of healing by an accredited practitioner, the investigative determination will be Exempted From Founded Due to Religious Exemption.

IV. Determining who is the offender

When a person, usually a relative, has assumed full-time responsibility for care of the child but has not been appointed the child's legal guardian or the guardianship status is unknown when the report is taken, both that caretaker and the child's legal parents shall be named as alleged offenders. If the legal parents did not make necessary arrangements for securing medical care for the child, the parents shall be indicated as offenders of

medical neglect. If the caretaker had attempted to secure medical care, but was unable to do so because the parents did not make the necessary arrangements, the caretaker shall not be indicated as an offender of medical neglect.

MEDICAL NEGLECT OF DISABLED INFANTS (Priority I)

I. Definition

The withholding of appropriate nutrition, hydration, medication, or other medically indicated treatment from a disabled infant with a life-threatening condition. Medically indicated treatment includes medical care which is most likely to relieve or correct all life threatening conditions and evaluations or consultations necessary to assure that sufficient information has been gathered to make informed medical decisions. Nutrition, hydration, and medication, as appropriate for the infant's needs, is medically indicated for all disabled infants.

Other types of treatment are not medically indicated when:

- . The infant is chronically and irreversibly comatose,
- . The provision of the treatment would be futile and would merely prolong dying, or
- . The provision of the treatment would be ineffective in ameliorating or correcting all the life-threatening conditions.

In determining whether treatment will be medically indicated, reasonable medical judgments, such as those made by a prudent physician knowledgeable about the case and its treatment possibilities, will be respected. However, opinions about the infant's future "quality of life" are not to bear on whether a treatment is judged to be medically indicated.

NOTE: Review FSPP Policy and Procedure Section II-F, Medical Neglect Of A Disabled Infant.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a disabled infant with a life-threatening condition has been/is being medically neglected.

B. Usage

The reporter has reason to believe that the disabled infant has not received/is not receiving medically indicated treatment (including appropriate nutrition, hydration, medication, and independent evaluations and consultations) due to the parent's or caretaker's disregard of his or her responsibilities.

C. Factors to be considered

- . Infant's physical condition,
- . Seriousness of the current health problem,
- . Probable medical outcome if the current health problem is not treated and the seriousness of that outcome.
- . Generally accepted medical benefits of the prescribed treatment,
- . Generally recognized side effects/harms associated with the prescribed treatment,
- . The opinions of the Infant Care Review Committee (ICRC), if the hospital has an ICRC,
- . The judgment of the individual designated by contract for the purposes of coordination, consultation, and notification of cases of suspected medical neglect of disabled infants (Refer to FSPP II-F), and
- . The parent's knowledge and understanding of the treatment and the probable medical outcome.

- D. On acceptance of this type allegation the Hot Line supervisor will be notified immediately. The Hot Line supervisor will immediately notify the designated DCFS Child Protective Services Field Assistance Unit (501) 682-8992.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that medical treatment (including appropriate nutrition, hydration, or medication) is/was withheld from an infant; and
- . Secured a preponderance of evidence that the infant is/has been medically neglected due to the parent's or caretaker's disregard of his or her responsibilities; and
- . Applied the factors in Section II, C, above and determined that the treatment was medically indicated. Such verification must come from a physician, and may come from experts in the field of neonatal pediatrics. Appropriate nutrition, hydration, and medication is medically indicated for all disabled infants.

MENTAL INJURY (Priority II)

I. Definition

Injury to the intellectual, emotional, or psychological development of a child as evidenced by observable and substantial impairment in the child's ability to function within a normal range of performance and behavior.

II. Taking a report

- A. Any person with a reasonable cause to suspect that a child has suffered a substantial impairment in his or her ability to function as a result of a specific, non-accidental action or inaction committed by a parent or caretaker.
- B. Usage

The reporter has reason to believe that the mental injury resulted from one of the following:

 - . A direct, non-accidental action of the parent or caretaker (abuse).
 - . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in the mental injury (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child has been mentally injured. A psychiatrist, registered psychologist, licensed clinical social worker, professional employee of a community mental health center, or licensed psychological examiner must confirm that the child has suffered a mental injury; and
- . Secured a preponderance of evidence that the mental injury resulted from maltreatment as defined in Section I.

NOTE: Under some circumstances, such as divorce, a mental injury to a child may be an unavoidable consequence of purposeful parental action. When determining whether to found a report, the Family Service Worker should consider whether the parents or caretakers took reasonable action to minimize the degree of mental injury resulting from a necessary action or uncontrollable event.

MUNCHAUSEN SYNDROME BY PROXY OR FACTITIOUS ILLNESS BY PROXY –
(Priority II)

I. Definition

A form of child maltreatment in which the parent or guardian falsifies a child's medical history or alters a child's laboratory tests or actually causes an illness or injury in a child in order to gain medical attention for the child which may result in innumerable harmful hospital procedures.

II. Taking a report

A. Acceptable reporters include medical personnel or medical facilities with reasonable cause to suspect that a parent or caregiver has fabricated a medical condition in a child.

B. Usage

The reporter has reason to believe that the parent or caregiver is presenting a child to a health care provider for a fabricated medical condition.

Founding a report

This allegation of maltreatment may be founded only after the Worker has:

Verified that the child has been presented to a health care provider with a fabricated medical condition. Such verification must come from a physician, registered nurse, dentist, or by a direct admission from the alleged offender; and

Secured a preponderance of the evidence that the parent or caregiver has presented the child to a health care provider with a fabricated medical condition.

POISON/NOXIOUS SUBSTANCES (Priority I)

I. Definition

Poison is any substance, other than mood altering chemicals, tobacco, tobacco products or alcohol, taken into the body by ingestion, inhalation, injection, or absorption that interferes with normal physiological functions. (Almost any substance, including water, can be poisonous if consumed in sufficient quantity; therefore, the term poison usually implies an excessive amount rather than a specific group of substances.)

Noxious means harmful or injurious.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child consumed poison or a noxious substance as the result of maltreatment.

B. Usage

The reporter has reason to believe the child was poisoned or ingested a noxious substance as a result of one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in the child consuming poison or a noxious substance (failure to protect).
- . A blatant disregard of responsibilities for the child's welfare (neglect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child has consumed poison or a noxious substance (such verification must come from a physician or by a direct admission from the alleged offender); and
- . Secured a preponderance of evidence that the consumption of the poison or noxious substance was the result of maltreatment as defined in Section I.

PORNOGRAPHY/LIVE SEX ACT EXPOSURE (Priority I)

I. Definition

The parent, caretaker or person forces, permits or encourages a juvenile to view or observe:

- . obscene or licentious material, including pictures, movies and videos, lacking serious literary, artistic, political or scientific value, which, when taken as a whole and applying contemporary community standards would appear to the average person to appeal to the prurient interest; or
- . material which depicts sexual conduct in a patently offensive manner lacking serious literary, artistic, political or scientific value; or
- . any live human sexual activity.

II. Taking a Report

- A. An acceptable reporter is any person with reasonable cause to suspect that a child has been forced, permitted or encouraged to view or observe obscene, licentious or offensive material or any live human sexual activity.

B. Usage

The reporter has reason to believe that a child has been forced, permitted or encouraged to view or observe obscene, licentious or offensive material or any live human sexual activity

III. Founding a Report

This allegation may be founded only after the Worker has:

Secured a preponderance of evidence that a child has been forced, permitted or encouraged to view or observe obscene, licentious or offensive material or any live human sexual activity.

SEX (ORAL) (Priority I)

I. Definition

Any contact, however slight or the attempted contact between the sex organ of one person and the mouth of another person when one of those persons is a child and the other is a caretaker of the child. This includes acts commonly known as cunnilingus and fellatio.

This form of maltreatment does not require that the offender be a caretaker of the child.

II. Taking a Report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has been involved in oral sex.

B. Usage

The reporter has reason to believe that oral sex resulted from one of the following:

. A direct action by a parent or caretaker ten years of age or older (abuse); or

. A direct action by any person under any of the following circumstances:

(a) The alleged offender is ten (10) years of age or older and the alleged victim is under the age of eighteen and forcible compulsion was used in the act or attempt; or

(b) One person is eighteen (18) or older and the other is under sixteen (16) and not the spouse of the other; or

(c) One person is a caretaker or sibling of the other who is less than eighteen (18) years old.

Forcible Compulsion – physical force or a threat, express or implied, of death or physical injury to or kidnapping of any person.

. The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in oral sex (failure to protect).

III. Founding a report

This allegation may be founded only after the Worker has:

. Verified that the child has been involved in oral sex, or the attempt to engage in oral sex; and

. Secured a preponderance of evidence that the oral sex, or the attempt occurred.

SEXUAL CONTACT (Priority I)

I. Definition

Any act of sexual gratification involving the touching, directly or through clothing, of the sex organs, or buttocks, or anus of any child or the breast of a female child. This includes encouraging, forcing, or permitting the child to inappropriately touch parts of the alleged offender's body generally associated with sexual activity. Normal affectionate hugging will not be construed as sexual contact.

II. Taking a Report

- A. An acceptable reporter is any person who has reasonable cause to suspect that a child has been the victim of sexual contact.

B. Usage

The reporter has reason to believe that sexual contact resulted from one of the following circumstances:

(a) The alleged offender is ten (10) years of age or older and the alleged victim is under the age of eighteen and forcible compulsion was used in the act or attempt; or

(b) One person is eighteen (18) or older and the other is under sixteen (16) and not the spouse of the other; or

(c) One person is a caretaker or sibling of the other who is less than eighteen (18) years old.

Forcible Compulsion – physical force or a threat, express or implied, of death or physical injury to or kidnapping of any person.

- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in oral sex (failure to protect).

II. Founding a Report

This allegation may be founded only after the Worker has:

- . Secured a preponderance of evidence that a child has been the victim of sexual contact.
- . Normal affectionate hugging will not be construed as sexual contact.

SEXUAL EXPLOITATION (Priority I)

I. Definition

Allowing, permitting, or encouraging participation or depiction of the juvenile in prostitution, obscene photographing, filming, or obscenely depicting a juvenile for any use or purpose.

This form of maltreatment does not require that the offender be a caretaker of the child.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has been sexually exploited as the result of maltreatment.

B. Usage

The reporter has reason to believe that sexual exploitation resulted from one of the following circumstances:

(a) The alleged offender is ten (10) years of age or older and the alleged victim is under the age of eighteen and forcible compulsion was used in the act or attempt; or

(b) One person is eighteen (18) or older and the other is under sixteen (16) and not the spouse of the other; or

(c) One person is a caretaker or sibling of the other who is less than eighteen (18) years old.

Forcible Compulsion – physical force or a threat, express or implied, of death or physical injury to or kidnapping of any person.

. The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in oral sex (failure to protect).

III. Founding a report

This allegation may be founded only after the Worker has:

- . Verified that the child has been sexually exploited; and
- . Secured a preponderance of evidence that the sexual exploitation occurred.

SEXUAL PENETRATION (Priority I)

I. Definition:

Any penetration, however slight, of any part of the body of one person or any animal or object into the sex organ or anus of another person when at least one of the persons involved is a child. This includes acts commonly known as anal penetration, digital penetration, coition, coitus and copulation.

This form of maltreatment does not require that the offender be a caretaker of the child.

II Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child was sexually penetrated as a result of maltreatment.

B. Usage

The reporter has reason to believe that sexual penetration of a child resulted from one of the following:

. A direct action by any person under any of the following circumstances:

(a) The alleged offender is ten (10) years of age or older and the alleged victim is under the age of eighteen and forcible compulsion was used in the act or attempt; or

(b) One person is eighteen (18) or older and the other is under sixteen (16) and not the spouse of the other; or

(c) One person is a caretaker or sibling of the other who is less than eighteen (18) years old.

Forcible Compulsion – physical force or a threat, express or implied, of death or physical injury to or kidnapping of any person.

. The failure of the parent or caretaker to make reasonable and prudent efforts to prevent an action by another person, which resulted in sexual penetration (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child was sexually penetrated; and
- . secured a preponderance of evidence that the sexual penetration or attempted sexual penetration occurred.

SEXUALLY AGGRESSIVE BEHAVIOR BY CHILDREN REPORTED TO BE UNDER 10 YEARS OF AGE (Priority I)

I. Definition:

A child whose age has not been confirmed to be at least ten (10) years or older engages in one or more of the following sexually aggressive behaviors with another child:

- . Forces, permits or encourages another child to view or observe obscene or licentious material, material that depicts sexual conduct in a patently offensive manner, or any live human sexual activity.
- . Any contact or attempted contact between the sex organ of one child and the mouth of another child.
- . Any act of sexual gratification involving the touching, directly or through clothing, of the sex organs, buttocks or anus of another child or the breast of a female child.
- . Allowing, permitting or encouraging the participation or depiction of another child in prostitution, obscene photographing, filming or obscenely depicting the other child for any use or purpose.
- . Any penetration, however slight, of the anus or mouth of another child by his penis
- . the penetration of the labia majora or anus of another child by any body member or foreign instrument manipulated by the child being assessed.

II. Taking a Report

- A. An acceptable reporter is any person, who has reasonable cause to suspect that a child has engaged in sexually aggressive behaviors such as those listed above with another child
- B. Usage
 - The reported age of the child being investigated in under the age of 10.

III. Founding a Report

A determination may be made only after the Worker has:

- . Established the exact age of the child being assessed and whether or not he/she has engaged in sexually aggressive behaviors such as those listed above with another child; and
- . Secured a preponderance of evidence that the sexually aggressive behaviors or attempted sexually aggressive behaviors either occurred or did not occur.

The overall finding or determination will be one of the following:

- . **Unfounded** (unsubstantiated) - If there is no preponderance of evidence that the sexually aggressive behaviors occurred
- . **Exempt From Finding** (under ten years of age) – There is a preponderance of evidence that the sexually aggressive behaviors occurred AND the child being assessed is less than ten (10) years old.

NOTE: If there is a preponderance of evidence that the sexually aggressive behaviors occurred AND the child being assessed is ten (10) years of age or older, then an overall finding or determination of “True” will fall under one of the following types of sexual child maltreatment, whichever is most appropriate –

- (1) Pornography/Live Sex Act Exposure
- (2) Sex (Oral)
- (3) Sexual Contact
- (4) Sexual Exploitation
- (5) Sexual Penetration

SHAKING A CHILD AGE FOUR OR OLDER (Priority II)

IV. Definition

The parent or caretaker uses one or both hands to violently and rapidly intentionally or knowingly move the body of a child age four or older in a back and forth or up and down motion.

V. Taking a Report

A. An acceptable reporter is any person who has reasonable cause to suspect that a child age four or older has been intentionally or knowingly shaken by a parent or caretaker.

B. Usage

The reporter has reason to believe that a child ages four or older has been shaken by a parent or caretaker.

VI. Founding a Report

This allegation may be founded only after the Worker has:

- . Secured a preponderance of evidence that a child age four years or older has been intentionally or knowingly shaken by a parent or caretaker causing an injury.

SHAKING A CHILD AGE THREE OR YOUNGER (Priority II)

VII. Definition

The parent or caretaker uses one or both hands to violently and rapidly intentionally or knowingly move the body of a child age three or younger in a back and forth or up and down motion.

VIII. Taking a Report

A. An acceptable reporter is any person who has reasonable cause to suspect that a child age three or younger has been intentionally or knowingly shaken by a parent or caretaker.

B. Usage

The reporter has reason to believe that a child ages three or younger has been shaken by a parent or caretaker.

IX. Founding a Report

This allegation may be founded only after the Worker has:

- . Secured a preponderance of evidence that a child age three years or under has been intentionally or knowingly shaken by a parent or caretaker with or without causing an injury.

SPRAINS/DISLOCATIONS (Priority II)

I. Definition

Sprain: trauma to a joint which causes pain and disability depending upon the degree of injury to ligaments. In a severe sprain, ligaments may be completely torn. The signs are rapid swelling, heat, and disability, often discoloration and limitation of function.

Discoloration: the displacement of any part, especially the temporary displacement of a bone from its normal position in a joint. Types include:

- . Complicated dislocation: a discoloration associated with other major injuries.
- . Compound dislocation: a dislocation in which the joint is exposed to the external air.
- . Closed dislocation: a simple dislocation.
- . Complete dislocation: a dislocation which completely separates the surfaces of a joint.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child sustained a sprain or dislocation as a result of maltreatment.

B. Usage

The reporter has reason to believe that a sprain or dislocation resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in the child sustaining a sprain or dislocation (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child currently has a sprain or dislocation or had a sprain or dislocation in the past (such verification must come from a physician, registered nurse, or by a direct admission from the alleged offender); and
- . Secured a preponderance of evidence that the sprain or dislocation was sustained as a result of maltreatment as defined in Section I.

STRIKING A CHILD AGE SEVEN OR OLDER ON THE FACE (Priority II)

X. Definition

The victim child age seven or older has sustained a blow to the face inflicted intentionally or knowingly by a parent or caretaker with either an open hand or an object.

II. Taking a Report

A. An acceptable reporter is any person who has reasonable cause to suspect that a child has been intentionally or knowingly struck on the face by a parent or caretaker.

B.

Usage

The reporter has reason to believe that a child has been intentionally or knowingly struck on the face by a parent or caretaker.

III. Founding a Report

This allegation may be founded only after the Worker has:

Secured a preponderance of evidence that a child ages seven or older has been intentionally or knowingly struck on the face by a parent or caretaker causing a physical injury.

Abuse does not include physical discipline of a child when it is reasonable and moderate and is inflicted by a parent or guardian for purposes of restraining or correcting the child. Reasonable and moderate physical discipline should cause no more than transient pain or minor temporary marks.

The age, size and condition of the child and the location of the injury and the frequency of recurrence of injuries shall be considered when determining whether the physical discipline is reasonable and moderate.

STRIKING A CHILD AGE SIX OR YOUNGER ON THE FACE (Priority II)

I. Definition

The victim child aged six years or younger has sustained an intentional or knowing blow to the face inflicted by a parent or caretaker with either an open hand or an object.

XI. Taking a Report

An acceptable reporter is any person with reasonable cause to suspect that a child aged six years or younger has been intentionally or knowingly struck on the face by a parent or caretaker.

Usage

The reporter has reason to believe that a child aged six years or younger has been intentionally or knowingly struck on the face by a parent or caretaker.

XII. Founding a Report

This allegation may be founded only after the Worker has:

Secured a preponderance of evidence that a child aged six years or younger has been intentionally or knowingly struck on the face by a parent or caretaker with or without causing an injury.

STRIKING A CHILD WITH A CLOSED FIST (Priority II)

I. Definition

The parent or caretaker has used a clenched hand to intentionally or knowingly hit the child on any part of his body.

II. Taking a Report

A. An acceptable reporter is any person who has reasonable cause to suspect that a child has been intentionally or knowingly struck with a fist by a parent or caretaker.

B. Usage

The reporter has reason to believe that the child has been intentionally or knowingly struck with a fist by a parent or caretaker.

III. Founding a Report

This allegation may be founded only after the Worker has:

- . Secured a preponderance of evidence that the child has been intentionally or knowingly struck and physically injured by a parent or caretaker with a closed fist.

Abuse does not include physical discipline of a child when it is reasonable and moderate and is inflicted by a parent or guardian for purposes of restraining or correcting the child. Reasonable and moderate physical discipline should cause no more than transient pain or minor temporary marks.

The age, size and condition of the child and the location of the injury and the frequency of recurrence of injuries shall be considered when determining whether the physical discipline is reasonable and moderate.

SUBDURAL HEMATOMA (Priority I)

I. Definition

Hematoma is a swelling or mass of blood (usually clotted) confined to an organ, tissue, or space and caused by a break in a blood vessel.

Subdural means beneath the dura mater (the outer membrane covering the spinal cord and brain).

A subdural hematoma is located beneath the membrane covering the brain and is usually the result of head injuries or the shaking of a small child or infant. It may result in loss of consciousness, seizures, mental or physical damage, or death.

II. Taking a report

- A. Acceptable reporters are medical personnel, medical facilities or pediatric facilities with reasonable cause to suspect that a child sustained a subdural hematoma as the result of maltreatment.

- B. Usage

The reporter has reason to believe that the subdural hematoma resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).

- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in a subdural hematoma (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child currently has a subdural hematoma or has sustained a subdural Hematoma in the past (such verification must come from a physician); and
- . Secured a preponderance of evidence that the subdural hematoma was sustained as a result of maltreatment as defined in Section I.

SUBSTANCE MISUSE (Priority II)

I. Definition

The consumption of a mood altering substance capable of intoxication to the extent that it observably affects the child's health, behavior, motor coordination, judgment, or intellectual capability. Mood altering chemicals include cannabis (marijuana), hallucinogens, stimulants (including cocaine) sedatives (including alcohol and Valium) narcotics, or inhalants.

Examples of substance misuse may include, but are not limited to:

- . Giving a minor (unless prescribed by a physician) any amount of heroin, cocaine, morphine, peyote, LSD, PCP, pentazocine, peyote, or methaqualude or encouraging, insisting, or permitting a minor's consumption of the above substances.
- . Giving any mood altering substance, including alcohol or sedatives (unless prescribed by a physician) to an infant or toddler.
- . Encouraging, assisting, or permitting a child to consume alcohol, drugs, or another mood altering substance on a regular basis.
- . Encouraging, assisting, or permitting an adolescent to consume alcohol, drugs, or another mood altering substance on a daily basis.
- . Encouraging, assisting, or permitting any minor to become intoxicated by alcohol, drugs, or another mood altering substance, even if on an infrequent basis.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has consumed a mood altering substance as a result of maltreatment.

B. Usage

The reporter has reason to believe that the substance misuse resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . One or more of the foregoing persons encouraged or assisted the child's consumption of the mood altering substances.
- . The failure of the parent or caretaker to make reasonable efforts to stop another person from giving mood altering substances to the child (failure to protect).
- . A blatant disregard to responsibilities for the child's welfare. This includes the failure of the parent or caretaker to take reasonable actions to prevent the child from misusing mood altering substances (neglect).

C. Factors to be considered

The following factors should be considered when determining whether a child is involved in substance misuse:

- . Age of child.
- . Frequency of substance misuse.
- . Amount of substance consumed.
- . Degree of behavior dysfunction, or physical impairment linked to substance misuse.
- . The child's culture, particularly as it relates to use of alcohol in religious ceremonies or on special occasions.
- . Whether the parent's or caretaker's attempts to control an older child's substance misuse or to seek help for the child's substance misuse were reasonable under the circumstances.

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that a child is currently involved in or has been involved in substance misuse; and
- . Secured a preponderance of evidence that the substance misuse was the result of maltreatment as defined in Section I.
- . Applied the factors in Section II, C, above and determined that the substance misuse is significant enough to constitute child abuse and neglect.

SUFFOCATION (Priority I)

I. Definition

The parent or caretaker intentionally or knowingly uses any means to interfere with a child's ability to breathe. This includes, but is not limited to choking the child, compressing the child's chest, placing a binding material around the child's neck or covering the child's nose and mouth with a hand or other object that restricts breathing.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child has been suffocated as a result of maltreatment.

B. Usage

The reporter has reason to believe suffocation resulted from one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another which resulted in suffocation (failure to protect).

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that a child has been suffocated.
- . Secured a preponderance of evidence that the suffocation occurred as a result of maltreatment as defined in Section I.

THREAT OF HARM (Priority I)

I. Definition

Conduct of the parent or caretaker creating a realistic and serious threat of death, permanent or temporary disfigurement, impairment of any bodily organ, or an injury to a juvenile's intellectual, emotional or psychological development as evidenced by observable and substantial impairment of the juvenile's ability to function within the juvenile's normal range of performance and behavior.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a parent or caretaker's conduct has created a realistic and serious threat of harm.

B. Usage

The reporter has reason to believe that the parent or caretaker's conduct created a realistic and serious threat of harm that resulted from one of the following:

- . A non-accidental action of the parent or caretaker.
- . An intentional or knowing act of the parent or caretaker.

II. Founding a Report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the incident occurred; and
- . Determined that the child is/was facing a realistic and serious threat of harm; and
- . Secured a preponderance of evidence that the parent or caretaker created a significant and realistic threat of harm as defined above in Section I.

THROWING A CHILD (Priority II)

I. Definition

The parent or caretaker of the child has thrown, hurled or flung the child into an object or across a space.

II. Taking a Report

A. An acceptable reporter is any person who has reasonable cause to suspect that a child has been thrown, hurled, or flung by a parent or caretaker.

B. Usage

The reporter has reason to believe that the child has been thrown, hurled, or flung into an object or across space by his parent or caretaker.

III. Founding a Report

This allegation of maltreatment may be founded only after the Worker has:

- . Secured a preponderance of evidence that the child was thrown, hurled, or flung by a parent or caretaker into an object or across space.

Abuse does not include physical discipline of a child when it is reasonable and moderate and is inflicted by a parent or guardian for purposes of restraining or correcting the child. Reasonable and moderate physical discipline should cause no more than transient pain or minor temporary marks.

The age, size and condition of the child and the location of the injury and the frequency of recurrence of injuries shall be considered when determining whether the physical discipline is reasonable and moderate.

TYING/CLOSE CONFINEMENT: (Priority II)

I. Definition

Unreasonable restriction of a child's mobility, actions, or physical functioning by tying the child to a fixed (or heavy) object, tying limbs together or forcing the child to remain for more than a few minutes in a closely confined area which restricts physical movement. Examples include, but are not limited to:

- . Locking a child in a closet.
- . Tying one or more limbs to a bed, chair, or other object except as authorized by a licensed physician.
- . Tying a child's hands or legs together.

II. Taking a report

A. An acceptable reporter is any person with reasonable cause to suspect that a child was tied or closely confined as the result of maltreatment.

B. Usage

The reporter has reason to believe that the child was tied or closely confined as a result of one of the following:

- . A direct, non-accidental action of the parent or caretaker (abuse).
- . The failure of the parent or caretaker to make reasonable efforts to stop an action by another person which resulted in the child being tied or closely confined (failure to protect.)

III. Founding a report

This allegation of maltreatment may be founded only after the Worker has:

- . Verified that the child is/was tied or closely confined; and
- . Secured a preponderance of evidence that the tying or close confinement was sustained as a result of maltreatment as defined in Section I. If the alleged offender contends that reasonable tying/close confinement was recommended by a physician or psychiatrist as a suggested means to ensure the child's safety or control the child's behavior, this must be verified by the physician or psychiatrist.

What is Child Maltreatment?

Child maltreatment means abuse, sexual abuse, neglect, sexual exploitation or abandonment by the caretaker of the child (a parent, guardian, custodian, or foster parent). The caretaker may be anyone who is age 10 or older and entrusted with the child's care. Child maltreatment occurs when the caretaker harms the child or lets harm come to the child, or fails to meet the child's basic needs. Sexual abuse and exploitation are child maltreatment under Arkansas law whether by a caretaker or by someone else.

Who Reports Child Maltreatment?

Anyone who suspects child maltreatment may report. Some people (for example, doctors, teachers and school counselors) must, by law, report suspected child maltreatment.

What Happens When There is a Report of Child Maltreatment?

When the Division of Children and Family Services (DCFS) gets a report of suspected child maltreatment, Arkansas law says that DCFS or the Arkansas State Police Crimes Against Children Division (CACD) will assess the report.

What Happens if the Report is True?

DCFS will work with you to make sure that children in your care are protected, and their basic needs met. If you do not protect the children in your care, court action may be taken. Per A.C.A. §12-12-505-506, if there is a true finding of child maltreatment, your name will be added to the DCFS Central Registry. Under certain situations, your name can be removed from the Central Registry. Please contact your local DCFS County Office for more information.

What if the Report is Unsubstantiated (not True)?

If you are the subject of a report, you may request a copy of the report. See "Obtaining a Copy of the Report" below. The Division will not release any information regarding a pending child maltreatment report. If requested, DCFS can tell the court and the prosecuting attorney about the report.

How Can I Find out What DCFS Learned?

DCFS will tell you in writing. You will not be told who made the report. If you have been named as an offender in a true report, and you do not agree with the finding, you have 30 days from the date you are handed the written notice, or the date it was mailed, to ask for a hearing to appeal the finding.

Obtaining a Copy of the Report

Send a written, notarized request to get a copy of your report. The written request must give your name and address and the names of the children involved. You should send the written request to:

Arkansas Department of Human Services
Division of Children and Family Services
Central Registry Unit
P.O. Box 1437, (Slot S566)
Little Rock, Arkansas 72203-1437

If I Have More Questions, Where Can I Get the Answers?

Call your own attorney or Legal Services in your community, if you have any legal questions.

Call your Family Service Worker or Licensing Specialist, if you have questions about available services.

Family Service Worker Phone

Licensing Specialist Phone

This information is available in different formats such as: large print, audio tape, etc. If you need another format, contact the Division's ADA Coordinator at 682-8760 or TDD 682-1442.

PUB-052 (R.05/2002)

**Child
Protective
Services:
A Caretaker's
Guide**

**ARKANSAS DEPARTMENT of
HUMAN SERVICES**

