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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 cannot 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 cannot 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 Health & Human Services (DHHS) 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-A  Temporary Assistance for Needy Families (TANF)
   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  Adoption 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 Children’s 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 (FSPP) 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; and prohibits denying any individual the opportunity to become a foster or adoptive parent on the basis of the prospective parent’s or the child’s race, color, or national origin.

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

Consideration of race, color, or national origin is permissible only when an individual determination is made that the facts and circumstances of a particular case require the consideration of race, color, or national origin in order to advance the best interests of the child in need of placement. The Division’s compliance with the Indian Child Welfare Act of 1978 (P.L. 95-608) does not violate MEPA.
POLICY (I-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 custodial/non-custodial parent(s) parent, guardian, or custodian.
   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. The licensee or state agency shall redact counseling records, psychological or psychiatric evaluations, examinations or records, drug screens or drug evaluations, or similar information concerning a parent if the other parent is requesting a copy of a record;
E) To the child;
F) To health care providers to assist in the care and treatment of the child at the discretion of the licensee or state agency and if deemed to be in the best interest of the child. Health care providers include doctors, nurses, emergency medical technicians, counselors, therapists, mental health professionals, and dentists;
G) 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;
H) 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);
I) To the Child Welfare Agency Review Board. However, at any board meeting no information which identifies by name or address any protective services recipient or foster care child shall be orally disclosed or released in written form to the general public;
J) To the Division of Youth Services, including child welfare agency licensing specialists;
K) For any audit or similar activity conducted in connection with the administration of any such plan or program by any governmental agency which is authorized by law to conduct such audit or activity;
L) Upon presentation of an order of appointment, to a court-appointed special advocate;
M) To the Attorney Ad Litem for the child;
N) For law enforcement or the prosecuting attorney at the discretion of the licensee or state agency and if deemed to be in the best interest of the child;
O) To circuit courts, as provided for in the Arkansas Juvenile Code of 1989, § 9-27-301 et seq.;

P) In a criminal or civil proceeding conducted in connection with the administration of any such plan or program;

Q) For purposes directly connected with the administration of any of the state plans as outlined;

R) For the administration of any other federal or federally assisted program which provides assistance, in cash or in kind, or services, directly to individuals on the basis of need; or

S) To individual federal and state representatives, senators, and their staff members, with no redisclosure of information.

No disclosure shall be made to any committee or legislative body of any information which identifies by name or address any recipient of services; or

T) To a grand jury or court, upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury.

Foster home and adoptive home records are confidential and shall not be released except:

- To the foster parents or adoptive parents;
- For purposes of review or audit, by the appropriate federal or state agency;
- Upon allegations of child maltreatment in the foster home or adoptive home, to the investigating agency;
- To the Child Welfare Agency Review Board;
- To the Division of Children and Family Services, including child welfare agency licensing specialists;
- To law enforcement or the prosecuting attorney, upon request;
- To a grand jury or court, upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury; or
- To individual federal and state representatives and senators and their staff members with no redisclosure of information.

No disclosure shall be made to any committee or legislative body of any information that identifies by name or address any recipient of services.

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.

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 DHHS custody. The Family Service Worker must present a copy of the custody order to receive medical and school records. The DHHS-81 (Consent for Release of Information) must be signed by the parent to receive copies of parent’s records, however, the parent’s signature is not necessary for obtaining records for the child.
- An Attorney Ad Litem shall be provided access to all records relevant to the child’s case, including, but not limited to, school records, medical records, juvenile court records and Department of Health & 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 custodial/non-custodial parent(s), 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 the 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 DHHS Divisions via the “Information and Referral” form, (DHHS-3300).
- Begin an assessment of the family’s strengths and needs.
- Refer to other divisions/agencies as appropriate via the (DHHS-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 Health & Human Services and the Arkansas State Police (ASP) entered into an 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, or contract, shall prevent anyone from reporting child maltreatment when the person is a mandated reporter. (See Glossary.)

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

The Arkansas Child 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 another state, but the alleged offender is a resident of Arkansas AND the report of child maltreatment in the other state or country would also be child maltreatment in Arkansas at the time the incident occurred, the Hotline shall refer the report to DCFS or the Crimes Against Children Division (CACD) of the Arkansas State Police, as appropriate. Arkansas DCFS or CACD can investigate alone or together with the investigative agency from the other state or country. Arkansas DCFS or CACD shall investigate AND shall notify the alleged offender that if the allegation is determined to be true, the offender’s name will be placed in the Arkansas Central Registry. The other state may also conduct an investigation in Arkansas that results in the offender being named in a true report in that state and placed in that state’s Central Registry. 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.

If the Hotline is notified of alleged child maltreatment of a client or resident in any facility licensed or registered by the State of Arkansas, the investigating agency (CACD or DCFS) will immediately notify the facility’s licensing or registering authority of the suspected maltreatment.

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 DHHS 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 are not part of the Central Registry. They will be destroyed by the investigating agency 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, to individual federal and state senators and representatives and their staff members (no disclosure may be made to any committee or legislative body), to law enforcement agencies and to any appropriate licensing or registering authority. Any person or agency to whom disclosure is made shall not further disclose the information to any other person. 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.

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.

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 Pub-357 (Child Maltreatment Assessment Protocol). (See Policy IX-D [Removal of An Offender’s 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.

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.

PROCEDURE (II-D3) Central Registry Fees

The Department of Health & Human Services may charge a reasonable fee, not to exceed ten dollars ($10.00), for research, copying and mailing records of the investigative files of child maltreatment cases and Central Registry information. DHHS may also charge a reasonable fee for reproducing copies of tapes and photographs.

No fee will be charged to a:

- Nonprofit or volunteer agency that requests searches of the investigative files;
- Person who is indigent.

PROCEDURE (II-D4) Requests for Information from Employers who Work with Children

Employers or volunteer agencies that want to screen employees, applicants or volunteers who are, or will be, engaged in employment or activity with children may request information from the Central Registry. The employer or volunteer agency must submit a signed, notarized release from the employee, applicant or volunteer.

The Central Registry may release only the following information on true reports to the employer or agency:

- There is a true report on the employee, applicant or volunteer;
- The date the investigation was completed, and
- The type of true report.
PROCEDURE (II-D5) Information Disclosure on Pending Investigations

Information on pending investigations is confidential and may be disclosed only in accordance with the specific guidelines provided below.

Information on pending investigations shall be released upon request to:

- The Department of Health & Human Services;
- Law enforcement;
- The prosecuting attorney’s office;
- Multidisciplinary Teams;
- Any licensing or registering authority (only to the extent necessary to carry out the authority’s official responsibilities);
- Individual federal and state senators, representatives, and their staff members, who agree not to allow any redisclosure of the information. (No disclosure may be made to any committee or legislative body.)

NOTE: THE DISCLOSED INFORMATION SHALL BE MAINTAINED AS CONFIDENTIAL.

Information on pending investigations may be released to, or disclosed in, a circuit court, custody case or similar case if:

- No seventy-two (72) hour hold has been exercised under the Child Maltreatment Act §12-12-501, or pleadings filed pursuant to the Arkansas Juvenile Code of 1989 § 9-27-301, et seq.;
- Written notice of intent to request to release, or disclose, is provided to the investigating agency at least five (5) days before the date for release or disclosure;
- The investigating agency has the opportunity to appear before the court and be heard on the issue of release or disclosure;
- The information gathered thus far by the investigative agency is necessary for the determination of an issue before the court;
- Waiting until the completion of the investigation will jeopardize the health or safety of the child in the custody case;
- A protective order is issued to prevent redisclosure of the information provided by the investigating agency, or the information is only released or disclosed to the court in camera; and
- Release or disclosure of the information will not compromise a criminal investigation.

Information on pending investigations may be released or disclosed in the Juvenile Division of the Circuit Court if the victim or offender has an open dependency-neglect or Family In Need of Services (FINS) case before the Juvenile Division of the Circuit Court in the following circumstances:

- A petition for dependency-neglect has been filed and the pending investigation is the basis in whole, or in part, for the petition of dependency neglect;
- The Department identifies the pending investigation in a court report that is provided to all of the parties before the hearing; or
• A party provides written notice of intent to request release or disclosure to all other parties in the matter and to the investigating agency at least five (5) days before the date for release or disclosure.

The Juvenile Division of the Circuit Court shall order release or disclosure only after:

• Providing all parties and the investigating agency, if not a party, the opportunity to appear before the court and be heard on the issue;

• Determining that the information gathered thus far by the investigative agency is necessary for the determination of an issue before the court;

• Determining that waiting until the completion of the investigation will jeopardize the health and safety of the child in the dependency-neglect, or family in need of services, case;

• Entering a protective order to prevent redisclosure of the information provided by the investigative agency, or limiting the release or disclosure of the information to only the court in camera; and

• Determining that releasing or disclosing the information will not compromise a criminal investigation.

Nothing in the law limits discovery by a party if a petition for dependency-neglect has been filed, but not yet adjudicated.
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. 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
- Underaged Juvenile Aggressor
- Threat of Harm

During the investigation of an allegation of child maltreatment, and if the alleged offender is a family member, or lives in the home of the alleged victim, 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.

If the alleged offender is not a family member nor lives in the home of the alleged victim, the investigation shall seek to ascertain the existence, cause, nature and extent of child maltreatment, the identity of the person responsible for the maltreatment, and the existence and extent of previous maltreatment perpetrated by the alleged offender. If the report is determined to be true, the names and conditions of any minor children of the alleged offender, and whether these children have been maltreated, or are at risk of maltreatment, will be determined. If the report is determined to be true, and is a report of sexual intercourse, deviate sexual activity, or sexual contact, an assessment of any other children previously or currently under care of the alleged offender, to the extent practical, and whether these children have been maltreated, or are at risk of maltreatment, will be determined. The investigation shall also seek to ascertain all other pertinent and relevant data.

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 investigation shall have the right to enter into the home, school, or other place for the purpose of conducting an interview or completing the assessment. No publicly supported school, facility, or institution may deny access to any person conducting a child maltreatment investigation. 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 investigation 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) any adult family/household member may file a petition for an order of protection on behalf of another family or household member, including a married minor. An employee or volunteer of a domestic violence shelter or program may file a petition on behalf of a minor, including a married minor. If a minor child’s safety is a concern and the parent does not file an order of protection, the Family Service Worker should contact OCC to determine appropriate legal action. (One legal option is to petition the court for an order of less than custody.) 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. An order of protection issued by a court of another state, federally recognized Indian tribe, or a territory shall be afforded full faith and credit by the courts of Arkansas and shall be enforced by law enforcement as if it were issued in Arkansas. 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 and ANSWER systems 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) to the Prosecuting Attorney and law enforcement, as appropriate, and the Attorney Ad-litem, parents and the alleged offender on Priority I and Priority II 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 the custodial and non-custodial parent of the victim child, and inform them of DCFS responsibility to assess.

• Exercise reasonable diligence in locating the non-custodial parent of the victim child. Examples of reasonable diligence include, but are not limited to, seeking information from relatives or using information from the victim child’s birth certificate to identify and locate the non-custodial parent.

• Document all efforts at reasonable diligence, if unable to locate the non-custodial parent to ensure completion of the investigation within 30 days.

• 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 DHHS 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 DHHS 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 Service 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.

- Ensure that all the information gathered during the investigation is contained within the DCFS file; whether or not the information supports the investigative determination.

- Make a child maltreatment investigative determination (true, unsubstantiated, exempted from finding or inactive) within thirty (30) days in conference with the supervisor. (See Procedure II-E6.)

- 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.

- Document the investigative determination on the “Investigation Findings” screen in CHRIS. Individual findings for each victim are also documented on the “Investigation Finding” screen. CHRIS will automatically populate the Overall Finding (true, unsubstantiated, exempted from finding due to religious exemption or exempted from finding underaged juvenile aggressor) based on the individual findings.

- Document any additional information deemed necessary pertaining to the investigation on the “Investigation Closure” screen, and request supervisory approval of the determination. The request for approval will automatically go to the worker’s supervisor’s box for approval.

- 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 multidisciplinary teams.

The Family Service Worker Supervisor will:

- Review the investigative determination and other pertinent screens in CHRIS.

- Approve the investigation closure on the “Investigation Closure” screen.
PROCEDURE (II-E6): Child Maltreatment Investigative Determination

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

A Child Maltreatment Investigation 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 Investigation 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 Investigation 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 Investigation 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 DHHS 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 Investigation will have an individual finding of **EXEMPTED FROM FINDING (UNDERAGED JUVENILE AGGRESSOR)** if there is an overall true finding of sexual abuse by a child under the age of ten (10) to another child.

- 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 (Underaged Juvenile Aggressor)” as the individual finding in the Investigation Findings screen in CHRIS.
- When “Exempted From Finding (Underaged 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 Investigation 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 investigation was started but enough information was not gathered to finish it, etc. Failure to complete the investigation within the required 30 days is NOT a reason to place a case on inactive status. The report MUST document why the investigation could not be completed. A case will remain on inactive status for one (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-312A or B) 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 custodial/non-custodial 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.
  - Any appropriate licensing or registering authority.
  - If the allegation is true, ensure the CFS-312A or B is delivered by either a process server or certified mail with restricted delivery. This applies to each separate recipient.
- Provide information to the following individuals regarding the investigative determination and the services that were offered or provided via the (CFS-307):
  - The mandated reporter who provided the initial report of suspected child abuse.
  - The school counselor where the maltreated child attends school.
  - The people and agencies that provide services, upon their request.
- 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. Do not send the CFS-311 to the LEA on underaged juvenile aggressors exempted from a true finding. The notice to the school on all true reports of child maltreatment shall identify the name and relationship of the offender to the victim. DHHS shall also provide the local school counselor a report indicating all true reports on juveniles aged ten (10) or older named as offenders, and the services offered or provided by the Department to the juvenile. Information provided to LEA, on a true report, shall be treated as confidential and included as part of the child’s permanent educational record. The information shall be treated in the same manner as educational records are treated under the Family Educational Rights and Privacy Act, 20 U.S.C. §1232g.
• If the investigative determination is true and the victim or offender is in foster care, notification (via the CFS-312 A or B) of the determination shall be provided to:
  • The Juvenile Division of the Circuit Court judge;
  • The Juvenile Division court-appointed attorneys ad litem of the victim and offender;
  • Court Appointed Special Advocates if appointed in an open dependency-neglect case; and
  • The custodial/non-custodial parent(s) of the victim or offender who is in foster care.

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 of 1989, § 9-27-301 et. Seq. (See Glossary for definition of “Dependent”.)

In cases where domestic abuse is involved (see glossary for definition of Domestic Abuse) any adult family/household member may file a petition for an order of protection on behalf of another family or household member, including a married minor. If a minor child’s safety is a concern and the parent does not file an order of protection, the Family Service Worker should contact OCC to determine appropriate legal action. (One legal option is to petition the court for an order of less than custody.) The worker should thoroughly review the Health and Safety Assessment and 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. An order of protection issued by a court of another state, federally recognized Indian tribe, or a territory shall be afforded full faith and credit by the courts of Arkansas and shall be enforced by law enforcement as if it were issued in Arkansas.

- 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. It is not required that a permanency planning hearing be held as a prerequisite to the filing of a petition to terminate parental rights, or as a prerequisite to the court considering a petition to terminate parental rights.

- Determine whether the grandparents have the right to notice and an opportunity to be heard. In a child custody or dependency-neglect case, grandparents 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. Place a child in a Provisional Relative Foster Home if a relative is identified and it is in the best interest of the child. A child may be placed in the home of a relative on a provisional basis for up to six (6) months pending the relative’s home being opened as a regular foster home. If the relative opts to have his or her home opened as a Provisional Foster Home, the relative shall not be paid a board payment until the relative meets all of the foster home requirements and is opened as a regular foster home. See Policy VI-A, Procedure VI-A1 “Out-Of-Home Placement Criteria”, VI-J and VI-J1 Out-Of-Home Placement Non-Custody Relative Placement.

Note: The child is in the custody of the department, therefore, the child shall remain in an approved foster home or licensed shelter or facility, until the relative’s home is opened as a provisional home. It is permissible for a child to be placed on a 72 hour hold in an approved Provisional Relative Foster Home.

- Conduct a review of the home that will include a visual inspection of the home, an expedited Central Registry Check, and expedited criminal and local background check and a vehicle safety check. All criminal background checks for Provisional Relative Foster Homes must be submitted to the DCFS Foster Care Unit by completing the CFS 342A (Foster Care Criminal Record Check). To receive expedited results the CFS-342A can be faxed to the Foster Care Unit, however, the fax must be accompanied by an email to the Foster Care Unit verifying that there is an original notarized copy of the CFS-342A in the possession of the Division. There is no fee for criminal
background checks for Provisional Relative Foster Homes. The CFS-474 “Provisional Foster Home Orientation Checklist” must be completed and signed when a child is placed in a Provisional Relative Foster Family Home. When a child is placed in a provisional relative foster home for a 72 hour hold the family must acknowledge that they will not allow the alleged perpetrator access not supervised by the Division until the investigation is completed and will not allow any contact with the alleged offender that is not approved or authorized by the Division or the court after the investigation is completed (if found true).

The child(ren), if age appropriate, should also be interviewed about the placement with the relative to determine how the child feels about the placement.

- 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 the Intake Officer of the Juvenile Division of Circuit Court.
- 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 DHHS for the care of children including:
  - Day care homes,
  - DHHS foster homes,
  - Residential facilities, and
  - Pre-Adoptive homes.
- Allegations of maltreatment involving DHHS employees
- Allegations of child maltreatment in school settings
- Allegations of child maltreatment in placement resources

NOTE: In accordance with Act 758 of 2003, on request by the investigating agency, any school, day care center, child care facility, residential facility, residential treatment facility, or similar institution shall provide the investigator with the name, date of birth, social security number, and last known address and phone number of any alleged offender if the alleged maltreatment occurred at that school, center, or facility.
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 agreement between DHHS and the Arkansas State Police requires that the Crimes Against Children Division (CACD) must comply with all applicable state and federal laws.
PROCEDURE (II-E12): DCFS and Law Enforcement Interfaces and Responses

When a custodian is arrested and can no longer care for his/her child(ren), law enforcement often contacts DCFS, which usually places the child(ren) in a foster home or licensed facility. However, if the arrest is NOT related to child maltreatment, DCFS has alternative response options. Some situations and appropriate DCFS responses include the following:

- When law enforcement arrests a custodian on a CHILD MALTREATMENT RELATED charge, (e.g. driving drunk with the child) the Family Service Worker will:
  - Take a 72-hour hold and place the child(ren) in a foster home or approved facility.
  - Initiate a dependency-neglect action by completing the affidavit and notifying the Office of Chief Counsel (OCC).
  - Determine if there is a non-custodial parent or other appropriate relative, who is NOT involved in the arrest and is willing and able to care of the child(ren). If so:
    - Do an emergency home study and background check of the non-custodial parent or other relative, and
    - Submit the written home study to the court with a recommendation that it give custody to that parent or other relative, if appropriate, based on the home study and background check.
    - The child(ren) must remain in approved out-of-home care until the court grants custody to the non-custodial parent or relative.

- When law enforcement arrests a custodian for reasons NOT RELATED TO CHILD MALTREATMENT (e.g. writing bad checks) the Family Service Worker will:
  - Determine if there is another custodian, who is willing and able to care for the child(ren).
    - If there is a custodian with equal or joint custody, allow the child(ren) to remain with that custodial parent.
      NOTE: A divorced custodian must show proof of equal or joint Custody.
    - If there is no other custodian AND the child has been or is about to be placed with the custodial parent’s approval with a non-custodial parent, relative or other person with whom the family has a relationship, the Family Service Worker will:
      - Allow placement to be made or to continue, only with the parent’s approval and ONLY if there is no reason to believe that the placement is inappropriate.
      NOTE: If there is any reason to believe that the placement may be inappropriate, the FSW will take custody and place the child(ren) in an approved foster home or licensed facility.

Follow-up within 72 business hours by doing a:
  - Criminal background check
  - Central Registry check
  - Individual interviews with each child and
  - A visual inspection of the home
PROCEDURE (II-E13): Child Residency Following Alleged Child Maltreatment

At the beginning of every DCFS child maltreatment investigation and in investigations in which CACD has identified a health or safety problem, the FSW will conduct a complete Health and Safety Assessment, to include the Health and Safety Checklist (CFS-6025), to determine whether or not the child(ren) is safe remaining in the family residence. (Refer to Procedure (II-E3).

- If it is determined that the child’s health or safety is at RISK, the following options are available:
  - DCFS takes custody and places the child(ren) in an approved foster home or licensed facility.
  - The child(ren) may remain in the residence with a non-offending custodian if:
    - The alleged offender is legally restricted from contact with the child(ren) by:
      - An “Order of Less Than Custody” (see Glossary) obtained by DCFS, or
      - A “Restraining Order of Protection” obtained by the non-offending custodian.
        
        NOTE: The order must be served on the alleged offender before the child will be allowed to remain in the residence.
    - AND there is no reason to suspect that the non-offending custodian will allow the alleged offender access to the child(ren).
    - The non-offending custodian and child(ren) may enter a shelter or other setting (e.g. grandparents) to which the alleged offender has no access if there is no reason to suspect that the non-offending custodian will allow the alleged offender access to the child(ren).
  - If it is determined that the child’s health and safety are NOT at risk, the following options are available:
    - The child(ren) may remain in the family residence, OR
    - The child(ren) may be placed with another caretaker of the non-offending custodian’s choosing.
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 (true and unsubstantiated) included in the automated data system. DCFS county offices and the Crimes Against Children Division are 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 are not part of Central Registry. They will be destroyed by the investigating agency 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.
## POLICY(II-I): FAMILY IN NEED OF SERVICES (FINS)

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

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

Family services are provided in order to:

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

### Family Services Provided to a Juvenile or the Family

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

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

### Disposition-Family in Need of Services

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

1. **Order family services:**
   - To rehabilitate the juvenile and his or her family. If the Department of Health & Human Services is the provider for family services, the family services shall be limited to those services available by the Department's community-based providers or contractors, excluding the contractors with the Division of Children and Family Services of the Department of Health & Human Services, and Department services for which the family applies and is determined eligible; and
   - To prevent removal when the Department is the provider for family services, the court shall make written findings outlining how each service is intended to prevent removal.

2. If it is in the best interest of the juvenile and because of acts or omissions by the parent, guardian or custodian, removal is necessary to protect the juvenile’s health and safety, transfer custody to the Department. (This action may serve to reduce the number of foster care entries based solely of juveniles who are truant when acts or omissions of their parents is not a factor.)
At least five (5) working days prior to ordering DHHS, excluding community-based providers, to provide or pay for family services, the court shall fax a written notice of intent to the Director of the Department of Health & Human Services and to the attorney of the local Office of Chief Counsel of the Department of Health & Human Services.

The court shall not specify a particular provider for placement or family services, when DHHS is the payor or provider. In all cases in which family services are ordered, the court shall determine the parent's, guardian's, or custodian's ability to pay, in whole or in part, for these services. This determination and the evidence supporting it shall be made in writing in the court order ordering family services. If the court determines that the parent, guardian, or custodian is able to pay, in whole or part, for the services, the court shall enter a written order setting forth the amounts the parent, guardian, or custodian can pay for the family services ordered and ordering the parent, guardian, or custodian to pay the amount periodically to the provider from whom family services are received.

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

Removal of Juvenile

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

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

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

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

Within sixty (60) days of removal, the court must find:

- Which family services were made available to the family before the removal of the juvenile;
- What efforts were made to provide those family services relevant to the needs of the family before the removal of the juvenile, taking into consideration whether or not the juvenile could safely remain at home while family services were provided;
- Why efforts made to provide the family services described did not prevent the removal of the juvenile; and
- Whether efforts made to prevent the removal of the juvenile were reasonable, based upon the needs of the family and the juvenile.
Where the state agency's first contact with the family has occurred during an emergency in which the juvenile could not safely remain at home, even with reasonable services being provided, DCFS shall be deemed to have made reasonable efforts to prevent or eliminate the need for removal.

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

In all instances of removal of a juvenile from the home of his parent, guardian, or custodian by a court, the court shall set forth in a written order:

- The evidence supporting the decision to remove;
- The facts regarding the need for removal; and
- The findings as mentioned above.

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

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

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

**PROCEDURE (II-I-1): Family in Need of Services**

The Family Services Worker will:

- Be assigned to a FINS case by the County Supervisor. OCC will fax the County Supervisor the written notice of intent from the court. The court must fax written notice of intent five (5) working days prior to ordering the Department of Health & Human Services, excluding community-based providers, to provide or pay for family services.

- Determine the appropriate case that should be opened to provide services.

- Open the appropriate case for service (see Policy III-A Services Case Opening and Re-evaluation).

- Make a request for OCC to file a 20-day petition if the family is resistant.
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 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.

The Division will ensure a determination of Title IV-E/ Medicaid eligibility is obtained for each child placed in an out-of-home setting or subsidized adoption. When a child is removed from his home, a judicial determination as to whether reasonable efforts were made or were not required to prevent removal must be made no later than sixty (60) days from the date the child is removed from the home. Eligibility for Title IV-E foster care maintenance payments will be based on the following requirements:

(1) The child was removed from the home of a specified relative pursuant to judicial determination to the effect that:

- Continuation in the residence in the home would be contrary to, or that the placement would be in the best interest, of the child. The contrary to the welfare determination will be made in the first court ruling that sanctions (even temporarily) the removal of a child from the home. If the determination regarding “contrary to the welfare” is not made in the first court ruling pertaining to removal from the home, the child will not be eligible for Title IV-E maintenance subsidy for the duration of that stay in foster care; and

- A finding of or a deeming of reasonable efforts is required. The judicial determination must state that reasonable efforts to prevent a child’s removal from home or to reunify the child and family are not required.

(2) The child’s placement and care in a foster family home or childcare institution is the responsibility of either DHHS or any other public agency with whom DHHS has an agreement. (Child care institution means a private child care institution, or a public child care institution which accommodates no more than 25 children, and is licensed by the State in which it is situated or has been approved by the agency of such State or tribal licensing authority (with respect to child care institutions on or near Indian reservations) responsible for licensing or approval of institutions of this type as meeting the standards established for such licensing. This definition must not include detention facilities, forestry camps, training schools, or any other facility operated primarily for the detention of children who are determined to be delinquent.) The licensing file must contain documentation that verifies that safety considerations with respect to the staff of the institution have been addressed, and,
(3) The child received aid (for the purposes of the FSPP Manual “aid” is defined as AFDC program requirements in effect 7-16-1996) in or for the month in which court proceedings leading to the removal of the child from the home were initiated, or would have received aid in or for the month if application for such aid had been made, or had been living with a specified relative within six (6) months prior to the month in which court proceedings were initiated, and would have received aid in or for such month if the he/she had been living with such relative and an application had been made for aid under Title IV-A.

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

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

A child of a parent who is under the age of eighteen (18) years and is in DHHS custody is also considered a dependent juvenile and is eligible to receive foster care maintenance payments and is deemed to be a recipient of aid to families with dependent children. Titles XIX and XX services will be available to the child in the state in which the child resides.

The state of Arkansas is not a voluntary placement state nor does it implement constructive removals. The removal of a child from his home must occur pursuant to a judicial order placing custody of the child with the Department.

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

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.
- “Key the appropriate information in the “Placement” section of CHRIS and within the “Place” section on “Recommend”, “Diff. Care”, and “Enter/Exit” screens. Entering information in CHRIS on the first placement of a removal episode will generate a message to “Review/Complete Initial Medicaid Application.”
- 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 “DHHS Requisition” (DHHS-1914).
- Initiate a request for Medicaid within **one (1) working day** of the date the child enters DHHS custody by completing the following actions:
  - Send the “DCO/DCFS/Referral/Information Transmittal” (DHHS-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.
  - Go to the Initial Medicaid Application screen in CHRIS to verify that information contained on the application is correct and complete. After verifying/correcting the information, click the “Send” button to transmit the Initial Medicaid Application to the Eligibility Unit for processing.

**NOTE:** If you have been notified that the CHRIS system will be down, and you cannot transmit the Initial Medicaid Application within the one-day time frame, only then will you complete and fax a paper copy of the CFS-487 (Application for Title IV-E Payments/Medicaid) to the Eligibility Unit.

- Route the signed court order to Family Support Specialist (Eligibility Unit).
- 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.
- Enter income, debts and asset information in the Client/Finance Screens in CHRIS for each member of the removal household.

- Enter necessary information on the Medicaid/IV-E Application screen (4 tabs) in CHRIS in order to complete the application and click “Send” to transmit the application to the Eligibility Unit. Send the completed Medicaid/IV-E Application to the Eligibility Unit within seven (7) working days from the date the child entered the out-of-home-placement. Other information needed to establish Title IV-E/Medicaid eligibility, e.g., birth certificate, Social Security Number, removal order, petition that led to removal, etc., should also be sent to the Eligibility Unit if available at that time.

- 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.

**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.

- Receive CHRIS tickler notification of Medicaid/IV-E case Re-determination.

- Complete the Re-determination screen in CHRIS (3 tabs) and click “Send” to transmit the Re-determination to the Eligibility Unit for processing.

**NOTE:** The Eligibility Unit will be notified by an automated process for reporting “Changes” in CHRIS. When changes are made to the case record for the following circumstances: child age 18, child left care, trial visit, runaway, parental rights terminated, child age 16-19/not in school, child placed for adoption, insurance, and placement/address change, the automated notification process will occur. If a child is born to a child in DHHS custody, then the Family Service Worker will check “Client Gave Birth” on the changes tab of the Re-determination/Changes screen in CHRIS.

- Mail a “Notice to Applicants for and Recipients of Title XX Services” (DHHS-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 to the custodial/non-custodial parent(s) 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 (DHHS-1914) for the child.
- Request Medicaid determinations/re-evaluations by the DCFS 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.

**NOTE:** The court may order progress reports from the service provider whenever a child is placed out of home and in a setting other than a Department foster home. The order shall set forth the schedule for the progress reports and shall identify the service provider responsible for submitting the progress report. The service provider shall be provided a copy of the written court order by certified mail, restricted delivery or by process server.

Failure to follow the order of the court shall subject the service provider to contempt sanctions of the court.
The progress report shall include, but is not limited to:

- Reason for admission;
- Projected length of stay;
- Identified goals and objectives to be addressed during placement;
- Progress of the child in meeting goals and objectives;
- Barriers to progress;
- Significant behavioral disruptions and response of provider; and
- Recommendations upon the child's release.

The service provider shall immediately report any incidents concerning the juvenile's health or safety to the child’s attorney or Attorney Ad Litem and the custodian of the child.

- 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 are referred so that support can be paid to the Department of Health & Human Services (DHHS) while the child remains in DHHS custody. Foster care cases in which paternity is an issue will also be identified and referred. A referral for child support will be made for each parent involved in a foster care case meaning the parents the child was removed from, absent parents and putative fathers.

The IV-E/Medicaid Eligibility Unit will refer foster care cases to OCSE by sending copies of the CFS-408 (The Federal Parent Locator System Information) with family identifying information. In addition, the IV-E/Medicaid Eligibility Unit will submit all emergency and/or custody orders to OCSE upon receipt from the Office of Chief Counsel. 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 Health & 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 DHHS P.O. Box 8181, Little Rock, AR 72203.
POLICY (III-C) CLIENT DRUG SCREENING

The Division of Children and Family Services (DCFS) will conduct drug screening of clients (e.g., parents, caretakers) to comply with court orders and when appropriate during a child maltreatment investigation or during the course of a protective service, foster care or adoption case.

A DCFS Case worker may have reasonable suspicion that the child’s parent(s) or caretaker(s) are using an illegal substance. Then, the caseworker may request that the parent(s) or caretaker(s) submit to a drug-screening test. The parent(s) or caretaker(s) may decline the drug-screening test and their refusal MUST be documented in CHRIS. If they decline, the test may NOT be pursued further without a court order.

DCFS staff will only conduct urine specimen drug-screening tests. Hair samples, blood tests, or other tests that are court ordered will be handled on an individual basis under purchase order. Under NO circumstances, shall a DCFS worker request any test other than urine specimen testing for the purposes of identifying illegal substance use.

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

PROCEDURE (III-C1) Client Drug Screening

The Family Service Worker, County Supervisor, Area Manager or court will:

- Refer for drug testing;
- Clients who are court ordered for drug testing and clients who need drug testing based upon establishing reasonable suspicion using information gathered during the child maltreatment investigation, including from the Health and Safety Assessment (CFS-6025) and/or the Risk Assessment (CFS-6026) OR during the course of a protective service, foster care or adoption case.

  Note: Workers may request random drug testing based on their assessment of the situation (reasonable suspicion).

The Family Service Worker, County Supervisor, or Area Manager will:

- Notify the tester that the client is in the office for drug testing.
- Report the results to the requesting party.
- If the result of the client’s drug test is positive for illegal/controlled substances, refer the client to available substance abuse treatment services.

The Tester will:

- Schedule a client’s test no more than 48 hours after receiving the referral. Exceptions must be approved by the Area Manager or above.
- Administer the drug test only according to procedures outlined in the American BioMedica Rapid Drug Screening information below, and the training provided by American BioMedica Corporation (ABMC). Refer to Attachment 1, (Rapid Drug Screen and Rapid One Instructions) and Attachment 2, (Chain of Custody Form) for additional information.
• Written testing instructions provided by ABMC shall be kept in a binder clearly identified as such in all county offices. The tester is responsible for maintaining all updates to the testing instructions. **In no instance shall an employee who has not completed drug-testing (ABMC) training be allowed to administer a drug test to a client.**

To administer the test, **the Tester will:**

1. Refer to **Attachment 3**, (Rapid Drug Screen Quick Reference Guide) and **Attachment 4**, (Rapid Check Quick Reference Guide) for test procedure, interpreting results and other testing information.

2. Put the client’s purse/pouch and jacket away. Also, **ALL** of the client’s pockets will be emptied. The tester will observe, but not touch, each the client’s pockets to ensure that they are empty. The **ONLY** item the client may take into the restroom stall is the collection container.

3. Escort the client to the restroom. Directly observe the clients wash their hands **without** soap.

4. Give the client only the collection container. The client **must not** have access to the test Reader. Instruct the client to fill the cup to the marked line. The tester will observe the client enter the restroom stall, close the stall door to give privacy to the person being tested and remain immediately outside the stall. The tester will not directly observe the client in the process of urination.

5. If the client has difficulty giving a specimen, have the client drink at least 8 - 10 ounces of water and wait up to two (2) hours for the client to give a urine specimen. Do not attempt to do the drug test if a minimum of three (3) hours are not left in the workday.

6. Under normal circumstances, limit the entire testing process to not exceed thirty (30) minutes. (If the client has difficulty giving a specimen, refer to instruction 5. above or reschedule the drug test.)

7. After the cup has been returned to the tester, visually examine the specimen. Suspicion of adulteration and/or dilution should be verified by use of the appropriate test.

8. Air dry the specimen test strip, initial it, make photocopy, and insert the test strip into the Reader.

   **Note:** Readers must be calibrated prior to each use. If the test is positive, follow instruction 10. If your office does not have a reader, put the test strip in the plastic bag and place it in locked file.

9. Complete **Attachment 5**, (Results of Controlled Substance Test) and sign the form. Also, have the client sign the form. Document the result of the test on **Attachment 5** (Results of Controlled Substance Test), and **Attachment 6**, (DCFS Drug Screening Log). If the specimen test results are positive and the client challenges the result, offer to retest.

   The drug screening test kits used in the county offices are highly accurate.

   DCFS will only pay for three (3) client challenges by any one client. If the client persists in challenging the results beyond the third test, advise the client that he/she will have to bear the cost of any additional tests.

   If the test results are challenged 3 times, send one challenged specimen to the lab with the completed Chain of Custody form. (See instruction 14. below for additional information.) The court can order each screen to be verified.

   Challenges do **NOT** have to be in consecutive order.
10. If the result of the client’s drug test is positive for controlled substances and is challenged by the client, prepare the urine specimen for laboratory testing.

- Notify the Office of Program Support, Program Coordinator, that the collection will be sent for further testing, by faxing a copy of the **Chain of Custody** to 501-683-2610, **prior** to the urine specimen being sent to the lab.

- Check for leakage of the collection device prior to mailing/sending the specimen for confirmation testing; and

- Use the supplied mailer envelopes to send the challenged, positive, urine specimens to:

  Scientific Testing Laboratories  
  463 Southlake Boulevard  
  Richmond, VA 23236

- If you need to contact the lab, use phone number: 1-800-977-9130

**NOTE:** The lab will **not** process urine specimens that are received without proper identification.

11. If the client does not challenge the results of the test, return the specimen cup to the client **after** the specimen has been tested and the results documented. The client will dispose of the contents in the toilet or urinal, flush, and discard the container in the designated trash container.

**WARNING:** Do **NOT** dispose of a urine specimen that needs to be sent to Scientific Testing Laboratories for further testing.

12. Give the client a copy of the completed **Attachment 5**, (Results of Controlled Substance Test) with the results documented.

13. Send the DCFS worker a copy of the completed **Attachment 5**, (Results of Controlled Substance Test) with the results documented within **24 hours**.

14. If contested, documentation of the chain of custody of urine specimens taken from test subjects shall be verified by affidavit of one (1) person witnessing the procedure or extraction, packaging, and mailing of the samples and by one (1) person signing for the samples at the location where the samples are subject to the testing procedure.

Submission of the affidavits, along with the submission of the test results, shall be competent evidence to establish the chain of custody of those urine specimens.

- For a court ordered test, a written report of the test results may be prepared by the person conducting the test, or by a person under whose supervision or direction the test and analysis have been performed.

- This report must be certified by an affidavit subscribed and sworn to before a notary public.

- This report may be introduced in evidence without calling the person as a witness, unless a motion challenging the test procedures or results has been filed within thirty- (30) days before the hearing and bond is posted in an amount sufficient to cover the costs of the person's appearance to testify.

- Whenever a court orders scientific testing for drug or alcohol abuse and one (1) of the parties refuses to submit to the testing, that refusal shall be disclosed to the court.
The Tester in each county office will:

- Maintain an adequate supply of testing materials, to include copies of all attachments identified in Procedure (III-C1). The supplies will be kept in the county office. Additional copies of attachments may be obtained by contacting the Program Support Office Coordinator, at phone number 501-682-8439.

- Monitor closely the specimen collection supplies. The supplies on hand should never fall below 15 kits. The expiration date should be clearly marked on each drug screening kit. Kits past their expiration dates will NOT be used. Notification of needed supplies and supply questions will be addressed to the Office of Program Support, Program Coordinator, 501-682-8439.

- Use new supplies only after current supplies are depleted. Contact the Program Coordinator if the county has several kits nearing expiration. Under no circumstances shall a kit be used past its expiration date.

- Store the drug-screening kits at room temperature.

- Maintain and have a DCFS Drug Screening Log (Attachment 6) and Reader available for inspection at all times.

- Address questions regarding equipment to American BioMedica Corporation at phone number 1-913-667-3930.

- Address questions pertaining to Chain of Custody Challenged test to the Program Support Office, Coordinator at phone number 501-682-8439.
IV. SERVICES CASE PLAN AND STAFFING

POLICY (IV-A): SERVICES CASE PLAN

The case plan is a written document that is a discrete part of the case record between the family and the Division of Children and Family Services that outlines a plan of services. 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:

- Includes a description of the type of home or institution in which the child is placed.
- Include a description of the services offered and provided to prevent removal of the child from the home and to reunify the family.
- 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 discussion of the appropriateness of the services that have been provided to the child.
- 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.
- Where appropriate for a child 16 or over, include a written description of the programs and services that will help prepare the child for the transition from foster care to independent living. (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.

• Include a discussion of how the case plan is designed to achieve a safe placement for the child in the least restrictive (most family-like) setting available and in close proximity to the home of the parent(s) when the case plan goal is reunification, and a discussion of how the placement is consistent with the best interests and special needs of the child.

• Set forth the reasons why it is in the best interest of the child if he has been placed in an out-of-home placement that is a substantial distance from the home of the parents, or has been placed out-of-state.

• Includes a discussion of the safety and appropriateness of the placement and how DHHS plans to carry out the judicial determination made with respect to the child that:
  • Continuance in the home is contrary to the welfare of the child, or that placement would be in the best interest of the child, and
  • Reasonable efforts to prevent a child’s removal from home or to reunify the child and family are not required.

• If the child has been placed in foster care in a state outside the state in which the child’s parent(s) are located, assure that the case worker of either state visits the foster home or institution no less frequently than every twelve (12) months and submits a report on the visit to the state agency of the state where the home of the child’s parent(s) is located.

• Incorporate the health and education records of the child to the extent available and accessible, including:
  • the names and addresses of the child’s health and educational providers;
  • the child’s grade level performance;
  • the child’s school record;
  • assurances that the child’s placement in foster care takes into account the proximity to the school in which the child is enrolled at the time of placement;
  • a record of the child’s immunizations;
  • the child’s known medical problems;
  • the child’s medications; and
  • any other relevant health and education information concerning the child determined to be appropriate.

• 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.
### 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 DHHS 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).

- Address the educational needs, including any special needs identified during the Strengths and Needs Assessment, of the children in the home, and attach copies of report cards, etc., as required in the “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 in the home during the first month that the case is opened. If the case is open longer than one month, the Worker and his Supervisor may staff the case to determine if visits may safely be held less frequently than weekly. Visits to the family in the home, with a face-to-face visit with the child, will be held at least once a month. Less frequent contact shall be dictated by the needs of the child and family and must have prior approval by the supervisor. The supervisor must review the Health and Safety Assessment and Risk Assessment before granting a waiver. (See Procedure II-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. The FSW is responsible for making weekly face-to-face contacts with the family during the first month that the case is opened. Visits by other DCFS staff (e.g., SSA, Supervisor) will count as a weekly visit after the case has been opened 30 days.

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

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

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

The 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 has 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:

<table>
<thead>
<tr>
<th>School field trips</th>
<th>Camping dues</th>
<th>Dance Supplies</th>
</tr>
</thead>
<tbody>
<tr>
<td>Musical instruments</td>
<td>Registration</td>
<td>Registration fees</td>
</tr>
<tr>
<td>School supplies</td>
<td>Sport fees or equipment</td>
<td>Club fees (social)</td>
</tr>
<tr>
<td>Summer programs</td>
<td>Art supplies</td>
<td>School pictures</td>
</tr>
</tbody>
</table>

**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 DCFS County Supervisor for review and approval.

The **DCFS County Supervisor** will:

- Monitor the county’s allocation to ensure the county’s funds are sufficient to meet client needs.
- Maintain the local cash account in accordance with guidelines established in PUB-384 (Local Cash Accounts).
- 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 DHHS Requisition (DHHS-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.
- Maintain the local cash account in accordance with guidelines established in PUB-384 (Local Cash Accounts).
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 a receipt to the DCFS County Supervisor/Designee within two (2) business days following the dating of the check. Attach the receipt to the CFS-333 (Client Information Sheet). If the amount of the check exceeds the amount of the receipt, the balance must be returned to the DCFS County Supervisor/Designee immediately.

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

- Monitor the county’s allocation to ensure the county’s funds are sufficient to meet client needs.
- Maintain the local cash account in accordance with guidelines established in PUB-384 (Local Cash Accounts).
- 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.
  3) Local Cash Account. Follow guidelines in PUB-384 (Local Cash Account Guidelines).
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:

- 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, or contract, shall prevent anyone from reporting child maltreatment when the person is a mandated reporter. (See Glossary.)

  No privilege shall prevent anyone, except between a client and his lawyer or minister or Christian Scientist Practitioner, from testifying concerning child maltreatment.
VI. SERVICES TO REUNIFY FAMILIES

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

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

After the Department removes the child or the court grants custody of the child to the Department, the child shall be placed in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined at A.C.A. § 9-28-402. The court shall not specify a particular provider for placement of any foster child.

In an effort to preserve family connections, a child in foster care may be placed in a Provisional Relative Foster Home if a relative has been identified and is appropriate. A “Provisional Foster Home” means a foster home opened for no more than six (6) months by DCFS for a relative of a child in the custody of the division after the division conducts (a) A health and safety check, including a central registry check, a criminal and local background check on the relative and the appropriate people in the relative’s home, a vehicle safety check and (b) A visual inspection of the home of the relative.

“Relative” means a person within the fifth degree of kinship by virtue of blood or adoption. See Policy VI-J and Procedure VI-J1 to discuss placement options with the relative.

The child is in the custody of the department, therefore, the child shall remain in a licensed or approved foster home, shelter or facility until the relative’s home is opened as a provisional home, regular foster home or the court grants custody to the relative or person after a written approved home study is presented to the court.

If the relative opts to have his or her home opened as a Provisional Foster Home, the relative shall not be paid a board payment until the relative meets all of the licensing requirements and DCFS standards and is opened as a regular foster home. Until the relative’s home is opened as a regular foster home, the relative may apply for and receive benefits for which the relative may be entitled due to the placement of the child in the home, such as benefits under the Temporary Employment Assistance (TEA) Program or food stamps.

If the relative’s home is not fully licensed as a foster home after six (6) months of the placement of the child in the home (i.e. meet all requirements and is fully approved as a foster family home): (a) The department shall remove the child from the relative’s home and close the relative’s provisional foster home or (b) The court shall remove custody from the department and grant custody of the child to the relative.

The court shall not specify a particular provider for placement or family services, when DHHS is the payer or provider. In all cases in which family services are ordered, the court shall determine the parent's, guardian's, or custodian's ability to pay, in whole or in part, for these services. This determination and the evidence supporting it shall be made in writing in the court order ordering family services. If the court determines that the parent, guardian, or custodian is able to pay, in whole or part, for the services, the court shall enter a written order setting forth the amounts the parent, guardian, or custodian can pay for the family services ordered and ordering the parent, guardian, or custodian to pay the amount periodically to the provider from whom family services are received.
When it is in the best interest of each of the children, the Department shall attempt to place siblings together while they are in a foster care and adoptive placement. When it is in the best interest of each of the children, the Department shall attempt to place together infants with minor mothers who are in foster care. Relatives of children placed in the custody of the Department shall be given preferential consideration for placement, if the relative caregiver meets all relevant child protection standards and it is in the child’s best interest to be placed with the relative caregiver. In order to assist in placing the child with an appropriate relative, the court will order the parent(s) to provide the following information to the Department:

- The names, addresses, and phone numbers of any relatives who may be placement resources for the child;
- The names, addresses, and phone numbers and other identifying information on any putative father(s) of the child;
- Any information regarding possible membership or descent from an Indian tribe;
- Information necessary to determine financial eligibility for services or foster care.

Placement or custody of a child in the home of a relative shall not relieve the Department of its responsibility to actively implement the goal of the case. See Policy VI-J (Out-of-Home Non-DHHS Custody/Relative Placements).

If the relative meets all relevant child protection standards and it is in the child’s best interest to be placed with the relative caregiver, the worker shall discuss with the relative the following two (2) options for placement of the child in the relative’s home:

1. The relative becoming a DHHS relative foster home; or
2. The relative obtaining legal custody of the child.

The child shall remain in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined at A.C.A. § 9-28-402(12), until the relative’s home is opened as a Provisional Relative foster home or regular foster home or the court grants custody of the child to the relative after a written approved home study is presented to the court.

If the court grants custody of the child to the relative:

(A) The child shall not be placed back in the custody of the Department while remaining in the home of the relative;

(B) The relative shall not receive any financial assistance, including board payments, from the Department, except for financial assistance for which the relative has applied and for which the relative qualifies pursuant to the program guidelines, such as the Transitional Employment Assistance Program, Food Stamps, Medicaid, and federal adoption subsidy; and

(C) The Department shall not be ordered to pay the equivalent of board payments or adoption subsidies to the relative as reasonable efforts to prevent removal of custody from the relative.

Children who are in the custody of the Department shall be allowed trial placements with parents, for a period not to exceed thirty (30) days. At the end of the thirty (30) days, the court shall either place custody of the child with the parent or the Department shall return the child to a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined in A.C.A. § 9-28-402.

When a child leaves the custody of the Department and the court grants custody to the parent or another person, the Department is no longer legal custodian of the child, even if the Juvenile Division of Circuit Court retains jurisdiction.

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.
The Department shall make reasonable efforts to:

- Maintain the family unit and prevent the unnecessary removal of a child from his home, as long as the child’s safety is assured;
- Effect the safe reunification of the child and family (if temporary out-of-home placement is necessary to safety of the child); and
- Make and finalize alternate permanency plans in a timely manner when reunification is not appropriate or possible. In determining reasonable efforts to be made with respect to a child and in making such reasonable efforts, the child’s health and safety is of paramount concern.

Within 30 days of a child being placed in DHHS 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.

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. A judicial determination pertaining to reasonable efforts to prevent removal must have been made within 60 days of the child’s removal from the home, otherwise the child will not be eligible for Title IV-E foster care maintenance payments for the duration of his stay in foster care. Reasonable efforts to finalize an alternate permanency plan (i.e., place a child for adoption or with a legal guardian or permanent custodian) may be made concurrently with reasonable efforts to reunify 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. However, upon good cause shown, the hearing may be continued for an additional twenty (20) days, and the court 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 (which would have been an offense under section 1111(a) of Title 18, USC, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) of any child;
3. Committed voluntary manslaughter (which would have been an offense under section 1112(a) of Title 18, USC, if the offense had occurred in the special maritime or territorial jurisdiction of the United States) 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 an adoptive home.

If the court recommends that reunification services should not be provided to reunite a child with his family, DHHS, the Attorney Ad Litem or the court shall provide written notice to the defendants. When DHHS 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”.

VI - 3
VI. SERVICES TO REUNIFY FAMILIES

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. However, upon good cause shown, the hearing may be continued for an additional twenty (20) days.


The Family Service Worker will:

- Consider placement with appropriate relatives in a Kinship Foster Home. (See Policy VII-A.)
- Place a child in a provisional relative foster home if a relative is identified and it is in the best interest of the child. A child may be placed in the home of a relative on a provisional basis for up to six (6) months pending the relative’s home being opened as a regular foster home. If the relative opts to have his or her home opened as a provisional foster home, the relative shall not be paid a board payment until the relative meets all of the requirements and is opened as a regular foster home. The child(ren), if age appropriate, should also be interviewed about the placement with the relative to determine how the child feels about the placement.
- NOTE: The child is in the custody of the department, therefore, the child shall remain in an approved foster home or licensed shelter or facility, until the relative’s home is opened as a provisional home.
- Conduct a review of the home that will include a visual inspection of the home, an expedited Central Registry Check, criminal and local background check and a vehicle safety check. All criminal background checks for Provisional Relative Foster Homes must be submitted to the DCFS Foster Care Unit by completing the CFS 342A (Foster Care Criminal Record Check) to receive expedited results. The CFS-342A can be faxed to the Foster Care Unit for expedited results, however, the fax must be accompanied by an email to the Foster Care Unit verifying that there is an original notarized copy of the CFS-342A in the possession of the Division. There is no fee for criminal background checks conducted for Provisional Relative Foster Homes.
- The review of the home will also include the completion of the CFS-446 (In-Home Consultation Visit Report). The worker and supervisor will expeditiously review the background check results and the In-home consultation to determine if the home is a clean and safe environment for the child. The home will be approved as a Provisional Relative Foster Home if it is appropriate and in the child’s best interest. Place the child in the Provisional Relative Foster Home once the home is approved and the family has signed the CFS-474 (Provisional Foster Home Orientation Checklist). The worker and the family must complete any corrective actions necessary to bring the home into compliance with minimum licensing standards within six (6) months.
- Request an Alternative Compliance for a Provisional Relative foster home, if appropriate. However, there must be documentation that the Alternative Compliance will in no way jeopardize the health and safety of the child(ren) placed with the family. All Alternative Compliance requests must go up the chain of command and be reviewed by the County Supervisor, Area Manager, Program Administrator and Assistant Director of Community Services before being presented to the DCFS Director. The Alternative Compliance must be approved before the home can be approved and children placed in the home.
- Provide an orientation session with the family at the time of placing the child in the relative’s home. Complete the CFS- 474 “Provisional Foster Home Orientation Checklist” as part of the orientation. The relatives must sign the completed CFS-474 before the child is left in their home. Inform the family that they are eligible to receive reimbursement for Medicaid travel only.
- Provide an initial clothing order to the child if one is needed. When a child is first placed in foster care, an initial clothing order may be issued. The Family Service Worker will assess with the foster parent which clothing items are needed and issue the authorized amount of clothing allowance. Purchases will be made using the DHHS-1914 process. The FSW will accompany the foster parent to the store to approve the purchase.
- Complete all actions identified in Policy III-A “Services Case Opening and Re-Evaluation”. Complete the IV-E and Medicaid application as prescribed in Procedure III-A2.
• Complete all of the medical exam requirements for the child including the Comprehensive Health Assessment see Procedure VI-D1 “Comprehensive Health Assessment and Health Plan for Children Receiving Out-Of-Home Placement Services.”

• Complete all case opening functions as outlined in Policy IV-A “Services Case Plan” and IV-B “Case Staffings.”

• Visit the child in the relative’s home as required in policy VII-C “Supervision of Children in Out-Of-Home Placement.”

• Assist the relatives in applying for benefits. Until the relative’s home is opened as a regular foster home, the relative may apply for and receive benefits for which the relative may be entitled due to the placement of the child in the home, such as benefits under the Temporary Employment Assistance Program or food stamps.

• Ensure that the family is completing the process for foster home approval. If the relative’s home is not fully licensed as a foster home within six (6) months of the placement of the child in the home: (a) The department shall remove the child from the relative’s home and close the relative’s provisional foster home or (b) The court shall remove custody from the department and grant custody of the child to the relative.

• Assess the situation if the family does not come into compliance within six (6) months of the placement of the child in the home and recommend to OCC on how the case should proceed, i.e. remain in foster care or have a completed approved home study and recommend custody to the relative.

All Alternative Compliance requests must go up the chain of command and be reviewed by the County Supervisor, Area Manager, Program Administrator and Assistant Director of Community Services before being presented to the DCFS Director.

The Area Manager will:

• Review the request for alternative compliance

• Assure necessary documentation is included with the request.

If the request is appropriate, the Area Manager will:

• Prepare a cover memo to the Program Administrator

• Place the words “Alternative Compliance Request” in the subject line along with the name of the foster or prospective adoptive parents and their county.

• Summarize in the body of the memo (a) What action is being requested and the issues pertaining to the need for an alternative compliance request, e.g., age. (b) One or two statements why this request was supported by the Area Manager.

• Include with the request:
  (1) A copy of the current home study
  (2) The date of the next court hearing
  (3) Copies of the Central Registry Checks
  (4) Copies of the State Police Checks
  (5) A copy of the physical, if age is the issue
  (6) Copy of the results of the FBI search, if residency is an issue
  (7) If the issue is misdemeanor or felony activity, a written explanation by the prospective foster/adoptive parent explaining what the offense was, why the offense occurred and why the offense should not prevent the approval of the request.

The Program Administrator will:

• Review the request for appropriateness

• Forward the request to the Assistant Director of Community Services for review and submission to the DCFS Director.
The DCFS Director can approve an Alternative Compliance for a relative home on a case-by-case basis. Alternative compliances will only be approved in cases where there is clear documentation that the placement is in the best interest of the child. The DCFS Director may review and approve any requests for alternative compliance of DCFS Policy. The DCFS Director will review for appropriateness, requests for alternative compliance with CWAL standards, and will then forward the request to the Manager of the CWAL Unit, who will forward the request to the CWAL Board. Any requests for alternative compliance with CWAL regulations and standards can only be approved by the CWAL Review Board.

**PROVISIONAL RELATIVE HOMES [Temporary Family Placement (No Board) Service in CHRIS]**

The FSW caseworker must inform the Resource Worker of a relative who is interested in becoming a Provisional Relative Home for a child in foster care.

**The Resource Worker must enter this family into CHRIS as a Provider opening two placement services: Temporary Family Placement (No Board) Service, and Foster Family Home Service.** The Temporary Family Placement (No Board) Service must be quickly approved (once the necessary requirements are received), while the Foster Family Home Service has Applicant Status awaiting compliance (all required checks, certifications and training) for approval. In CHRIS, the family will have only one Provider Number showing two services provided by the family.

The Resource Worker will need to coordinate with the FSW to obtain demographic information on Family Members and enter the information into the CHRIS Provider screens.

In CHRIS:

- **Click Provider button and click New button:**
  
  **General Information Screen:**
  
  - **General Information Tab:**
    - Click Person radio button
    - Enter First and Last Name of Head of Household 1
  
  - **Address/Telephone Tab:**
    - Select Physical Location Address and enter address
    - Enter School District
    - Enter Phone Number
  
  - **AKA Tab:**
    - Enter Person name, if known by another name
  
  - **Services Tab:**
    - Click Placement Services radio button
      - Select Temporary Family Placement (No Board)
      - Enter Services Start Date
      - Select Parenting Structure
      - Click Add button
    - Click New button (to enter another Placement Service)
      - Click Placement Services radio button
      - Select Foster Family Home
      - Enter Services Start Date
      - Select Parenting Structure
      - Click Change button
  
  - **Contact Person Tab:**
    - **Contact Type:** Select Person Responsible for Provider and enter name.
    - **Services Provided:** Highlight Select Temporary Family Placement (No Board) and Foster Family Home Services and click Add and OK button and click Change command button [Note: if the Person identified is not the Contact Person for both services, then, select only one service and click New button to enter another person for the other service.]

  **Members Button:**
  
  - **Provider Household Members:**
    - **Household Information Tab** – complete all fields on this tab for Head of Household 1 and Head of Household 2.
• **Required Checks Tab** – complete all necessary requirements especially Central Registry check and Local and State Criminal Record checks (Requested, Received and Passed) for both Head of Household 1 and Head of Household 2

**Relations Button:**
- **Provider Household Relationships screen** – complete relationships of household members

**Services Management Button:**
- Click OK on highlighted Temporary Family Placement (No Board) Service:
  - **Admissions Button** – complete fields, click Add
  - **Rates Button** – Payment Scale defaults to None
  - **Details Button** – complete mandatory fields (yellow) and click on Request Approval button and click on Request Approval checkbox

**Contacts Button:**
- **Provider Contact Screen** – click New and enter your contacts with the Provider selecting Placement Issues in the Purpose Select Box

**Note:** Within the next six months, the family will be meeting all requirements to become a DCFS foster family, such as Training Hours, and other required checks to be in compliance (refer to the CHRIS procedures for Foster Family Approval).

When the family has an approved Foster Family service, the Temporary Family Placement (No Board) service, needs to be stopped. In CHRIS, here are the steps:

- **Click General Information Button:**
  - **Services Tab** – enter the date in the Services End Date field, selecting the appropriate Reason for End Date and entering the explanation in the Comments for End Date text field.

- Utilize court-ordered relative information obtained from the parent to locate and contact potential relative resources.

- If the relative meets all relevant child protection standards, and it is in the child’s best interest to be placed with the relative caregiver, discuss with the relative the following two (2) options for placement of the child in the relative’s home:
  1. The relative becoming a DHHS relative foster home; or

- Complete the CFS-452 (Relative Placement Kinship Care/Relative Foster Care Verification) stating that the family does/dose not want to become a relative foster home.

- 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 Underaged Child 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.

- Complete the CFS-462A (Foster Home Agreement Addendum) at the time of placement.

- 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.

- Provide the child’s parent(s) with a copy of PUB-11 (Your Child and Foster Care).
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. The family will be required by court order to provide information identifying other relatives. The Family Service Worker will use this information to locate and contact named relatives to assist in the child’s placement (see Policy VI-A). Information on the putative father or any absent parent should be obtained and submitted on the CFS-408 (Federal Parent Locator System Information) to the local OCC Attorney. 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 DHHS.
• 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 DHHS, 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 DHHS, 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 DHHS.
  - 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 DHHS. Any placement with a family or non-family member, wherein DHHS 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 DHHS 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 DHHS involvement. The other end of the spectrum would be for the court to grant custody to DHHS 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 parent’s 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. When it is in the best interest of each of the children, the Department shall attempt to place siblings together while they are in a foster care and adoptive placement. 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, or infants with minor mothers, into different foster homes are regularly reassessed and targeted recruitment efforts continue to reunite the siblings.

Children in DHHS custody shall have an opportunity to visit with grandparents, or great grandparents, provided the grandparents, or great grandparents, have been granted visitation rights by the courts.

If it is in the child’s best interest, visits between siblings and with relatives may continue after Termination of Parental Rights (TPR), if visitation was established prior to TPR. Visitation after TPR will continue until an adoption placement is made or the Out-of-Home placement case is closed.

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. Place infants with minor mothers in the same foster home. Separate siblings, or infants with minor mothers, 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, or infants with minor mothers, placed separately.
• Arrange visitation between the child and grandparent or great grandparent. Visitation between the child and grandparent, or great grandparent, must conform to the visitation requirements stated in the court order granting the grandparent, or great grandparent, visitation rights.

• Document sibling and relative visits that occur after TPR in CHRIS contacts screen.

The Director’s designated Administrator will:

• Receive requests to place siblings, or infants with minor mothers 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 DHHS 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 DHHS 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).

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**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

Following a probable cause hearing, an adjudication hearing shall be held to determine whether the allegations in a petition are substantiated by a preponderance of the evidence. The dependency-neglect adjudication hearing shall be held within thirty (30) days after the probable cause hearing under A.C.A. § 9-27-315, but on motion of the court and parties for good cause shown it may be continued for no more than thirty (30) days following the first thirty (30) days. However, the adjudication hearing shall not be completed more than sixty (60) days after the probable cause hearing. In dependency-neglect cases, a written adjudication order shall be filed by the court within thirty (30) days of the date of the hearing or prior to the next hearing, whichever is sooner. The Office of Chief Counsel is responsible for drafting and filing court orders. The court can determine the case disposition at the adjudication or at a separate hearing. A disposition determines what actions the agency will take in the case. A judicial determination as to whether reasonable efforts were made or were not required to prevent removal must be made no later than sixty (60) days from the date the child is removed from the home.

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 to: (1) determine the safety of the child, the continuing need for and appropriateness of the placement, (2) determine the extent of compliance with the case plan, (3) determine the extent of progress made toward alleviating or mitigating the causes necessitating the placement, and (4) project a likely date by which the child may be returned and safely maintained at home or placed for adoption or legal guardianship. Pertaining to Title IV-E eligibility requirements, the judicial review is conducted by court review, not an administrative review process. During each six-month review, the court shall make determinations based upon the best interest of the child. The best interest of the child shall be paramount at every stage of the judicial process.

Each child in an out-of-home placement, including children placed out-of-state, shall have a permanency planning hearing within 12 months of the date the child is considered to have entered foster care and not less frequently than every 12 months thereafter during the continuation of foster care. (A child will be considered to have entered foster care on the date the child enters an out-of-home placement.) When the court determines that reasonable efforts to return the child home are not required, the court shall hold a permanency hearing within thirty (30) days of the determination in order to enter a new disposition in the case to determine the child’s future status. A permanency hearing shall also be held after a child has been in an out-of-home placement for fifteen (15) of the previous twenty-two (22) months, excluding the time spent while the child is on a trial home placement and runaway status. The Permanency Planning Hearing will be conducted by the court, not by an administrative body.

The Division must obtain a judicial determination that reasonable efforts were made to finalize the permanency plan for the child within 12 months of the date the child entered foster care. If a child remains in an out-of-home placement after the initial permanency planning hearing, an annual permanency planning hearing shall be held to reassess the permanency goal selected for the child. If a judicial determination regarding reasonable efforts to finalize a permanency plan is not made, the child will be ineligible under Title IV-E from the end of the 12th month following the date the child is considered to have entered foster care or the end of the 12th month following the month in which the most recent judicial determination of reasonable efforts to finalize a permanency plan was made, and remains ineligible until such a judicial determination is made.

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, including a minor foster child caring for his or her own child who is in foster care, 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, DHHS, 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. However, upon good cause shown, the hearing may be continued for an additional twenty (20) days. 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.

If it is in the child’s best interest, visits between siblings and with relatives may continue after Termination of Parental Rights (TPR), if visitation was established prior to TPR. Visitation after TPR will continue until an adoption placement is made or the Out-of-Home placement case is closed.

(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). In the case of a child who has attained age 16, the permanency planning hearing will determine the services needed to assist the child to make the transition from foster care to independent living.
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.

If DHHS concludes, after considering reunification, adoption, legal guardianship, or permanent placement with a fit and willing relative, that the most appropriate permanency plan for a child is placement in another planned permanent living arrangement, DHHS will document to the court the compelling reason for the alternate plan.

The Department may seek the services of the Federal Parent Locator Service to search for absent parents at any point in order to facilitate a permanency plan.

The Department shall provide the foster parent(s) of a child, and any pre-adoptive parent or relative providing care for the child with timely notice of, and an opportunity to be heard in, permanency hearings and six-month periodic reviews held with respect to the child during the time the child is in the care of such foster parent, pre-adoptive parent or relative caregiver. Notice of, and an opportunity to be heard, does not include the right to standing as a party to the case. The permanency hearing will also serve to address procedural safeguards as they apply with respect to parental rights pertaining to the removal of the child from the home of his or her parents, to a change in the child’s placement, and to any determination affecting visitation privileges of parents.

Judicial determinations regarding “contrary to the welfare”, reasonable efforts to prevent removal, and reasonable efforts to finalize the permanency plan in effect, including judicial determinations that reasonable efforts are not required, must be explicitly documented and made on a case-by-case basis and so stated in the court order.

If reasonable efforts and “contrary to the welfare” judicial determinations are not included as required in the court orders, a transcript of the court proceedings is the only other documentation acceptable to verify that the required determinations have been made.

Neither affidavits nor nunc pro tunc orders will be acceptable as verification documentation in support of reasonable efforts and “contrary to the welfare” judicial determinations.

Court orders that reference state law to substantiate judicial determinations are not acceptable, even if state law provides that removal must be based on a judicial determination that remaining in the home would be contrary to the child’s welfare or that removal can only be ordered after reasonable efforts have been made.

At any hearing in which the Department of Health & 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 DHHS is not a party to the case, failure by the court to provide at least five (5) working days’ notice to DHHS renders any part of the order pertaining to DHHS void. Refer to Policy II-1 for information related to FINS cases.
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 DHHS is
  the requesting party.
- Complete a court report for all review hearings.
- Submit the “Court Report” (CFS-6011) to the OCC Attorney within fifteen (15) working days
  prior to the hearing.
- Submit 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.
- Make a recommendation to the court to continue visits between siblings and with relatives who
  have established visitation prior to TPR, if this is in the child’s best interest. Document the
  recommendation in the “Permanency Planning Hearing Court Report” (CFS-6024).
- 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.

The court may order progress reports from the service provider whenever a child is placed out-of-home
and in a setting other than a DHHS foster home.

The order shall set forth the schedule for the progress reports and shall identify the service provider
responsible for submitting the progress report.

The service provider shall be provided a copy of the written court order by certified mail, restricted
delivery or by process server.

Failure to follow the order of the court shall subject the service provider to contempt sanctions of the
court.

The progress report shall include, but is not limited to:

- Reason for admission;
- Projected length of stay;
• Identified goals and objectives to be addressed during placement;
• Progress of the child in meeting goals and objectives;
• Barriers to progress;
• Significant behavioral disruptions and response of provider; and
• Recommendations upon the child's release.

The service provider shall immediately report any incidents concerning the juvenile's health or safety to the child’s attorney or Attorney Ad Litem and the custodian of the child.
POLICY (VI-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 a foster or pre-adoptive placement, adoption across state lines or reunification with parent(s). A foster child is defined as a child who has been removed from the home of his parent, guardian or custodian by a court of competent jurisdiction and whose custody has been placed with a private or public agency.

When a child requires placement for foster care or a possible adoption outside the resident state, DCFS shall use the ICPC process. Unless authorized by the ICPC, all communications with other states regarding approval of placement, progress reports, disruption of placement, or termination of the ICPC case should process through the Arkansas ICPC Office, to the Family Service Worker.

The ICPC process ensures:

- Proper extensions of authority into the receiving state.
- The sending agency can obtain home studies for proposed placements, is identified as legally and financially responsible and does not lose jurisdiction once the child leaves the sending state.
- The receiving agency can determine the placement is not “contrary to the child’s interests” and that all applicable laws and policies have been followed.
- Supervision is maintained out-of-state and the sending agency receives progress reports.
- Maximum opportunity for each child to be suitably placed.
- Proper information to authorities in the receiving state.
- Effective utilization of cross-jurisdictional resources to facilitate timely foster, adoptive or permanent placements.

DCFS caseworkers should not directly contact the ICPC offices in other states, but should direct their communication to the DCFS ICPC Office. Interstate communication between field staff from the involved states is discouraged, except for the routine sharing of information, which is NOT related to case approval, progress reports, disruption or termination of placement.

The Juvenile Division of Circuit Court shall retain jurisdiction to issue orders of adoption, interlocutory or final, when a child is placed outside the state of Arkansas.

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

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

- Foster care placements,
- Pre-adoPTION placements,
- Adoptive placements,
- Parent, other relative, or non-agency guardian placements.

NOTE: 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): Types of Placement Not Covered by ICPC

Types of placements that are not covered by ICPC include:

- Divorce or custody investigations involving home studies.
- Placement of a probationer, parolee or aftercare juvenile.
- Interstate placement of mentally ill and mentally defective children.
- Placement into a primarily educational institution.
- Runaways from Arkansas to another state or to Arkansas from another state. (See Procedure VI-G17 about other compacts).
- Kidnapped children transported out-of-state.
- Visits that do not extend beyond 30 days and are not pre-placement visits.
- Placement outside the resident state when custody will be transferred to that person.

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

The sending party will:

- Provide proper notice of the intent to place using the ICPC 100A (IC Placement Request) and receive authorization from the receiving state prior to the placement.
- Work with the receiving parties to arrange the placement details (i.e., childcare payment, type of monitoring, frequency of supervisory reports, and transportation) after approval is given.
- Provide additional information when requested by the receiving state to ensure the placement is not “contrary to the interests of the child”.
- Notify the receiving state of the placement date and any change in the child’s status by using the ICPC 100B (IC Report on Child’s Placement Status).
- Retain jurisdiction over the child sufficient to determine all matters of custody, supervision, care and disposition of the child until the child is adopted, reaches majority, becomes self-supporting, or is discharged with concurrence of the appropriate authority in the receiving state.
- 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-G4): Responsibilities of the Receiving State

The receiving state will:

- Assess and monitor the placement to ensure compliance with applicable laws and policies of the receiving state, and that the placement is “not contrary to the interests of the child”.
- Notify the sending state in writing whether or not the placement is appropriate and in the best interest of the child.
- After the child is placed and the ICPC 100B received, supervise the placement and provide or arrange for necessary services.
- Submit quarterly progress reports to the sending party. More frequent reports may be submitted on request.
- Honor and enforce lawful orders of the court of jurisdiction of the sending state unless it conflicts with Arkansas policies and/or laws.

PROCEDURE (VI-G5): 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 briefly explaining the following placement plans. It should:
  - Request an evaluation of the proposed placement, or home and explain why it is needed.
  - Clarify legal status and court/Division plans.
  - Clarify discrepancies in the request (incomplete or excluded documents).
  - Clarify financial planning (foster care payments are to be made, Medicaid coverage, etc.).
  - Specify special needs of the child (medical, educational, etc.) and issues to be addressed.
  - “Interstate Compact Placement Request” (ICPC-100A). (Retain one copy and include five copies with the packet.)
  - Court order showing DHHS custody of or court jurisdiction over the child.
  - “Case Plan” (CFS-6010),
  - Court order (most recent) showing that DHHS has custody or the court has jurisdiction of the child (a special court order requesting a home study is not required).
  - Documentation of the child’s IV-E eligibility status (DCO-91).
  - Complete a thorough Social Summary including background information on the child and family.
Include the following additional information if applicable:

- psychological testing reports,
- counseling reports,
- school reports / records,
- medical records / reports,
- other appropriate reports/documents.

Send packet to Administrator, Interstate Compact on the Placement of Children Unit, P.O. Box 1437, Slot S567, Little Rock, Arkansas 72203-1437.

**NOTE:** Financial arrangements should be discussed with the prospective placement resource before the study is requested. If a board payment is needed, a foster home study must be requested.

The **Arkansas ICPC Office** will:

- Review the packet to determine whether or not it is complete and ready to forward to the receiving state’s ICPC office.
- Coordinate with the sending party if changes in the packet are needed.
- 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 (placement must be made within 6 months of placement approval).

The **Family Service Worker/Area ICPC Liaison** 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 and made. Show the date of the placement or of the withdrawal of the request.
- Close the Arkansas Medicaid so that Medicaid services can be pursued in the receiving state.
- 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-G6): Children Entering Arkansas for Placement

Services to children should not begin without placement approval (ICPC-100A) from the receiving state’s ICPC office AND receipt of placement notification (ICPC-100B) from the sending state’s ICPC office.

- Requests from sending state should include the same information as described in the Interstate Placement Packet and outlined in Procedure VI-G5.
- Contact the Arkansas ICPC Administrator if additional information is needed from the sending state to initiate services.

The disposition of requests is as follows:

- Requests for home studies of foster parent, relative homes, or adoptive homes received in the Arkansas ICPC office will be forwarded to the appropriate County Office for a reply.
- The Arkansas ICPC Unit will forward the foster home study to the ICPC Field Liaison, Area Manager or DCFS Supervisor.

**NOTE:** The Arkansas ICPC Unit will forward the adoptive home study to the Adoption Field Service Manager, who will forward it to the Adoption Specialist.

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

The *Family Service Worker/Area ICPC Liaison* will:

- Complete a Central Registry Check and a thorough home study, including the results of the criminal record check; if available, with signed recommendation regarding placement within ninety (90) calendar days of a request. The DCFS Supervisor must also make a recommendation for or against placement. If the criminal record checks have not been received, a copy of the application/request must be included in the packet and the results sent when received.

**NOTE:** The Adoption Field Services Manager must sign and date the recommendation in an adoption home study.

- 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 Administrator, Interstate Compact Unit, not directly to the other state.

PROCEDURE (VI-G8): Routing of a Home Study

ICPC approved home study packets are valid for six (6) months from the date the ICPC Office signed the ICPC-100A. The child must be placed within that 6-month period.

The Arkansas ICPC Unit (Receiving Office) will:

• Review the home study packet to determine whether or not it is appropriate to forward to the sending state ICPC Office.
• If the home study packet is complete, send it to the sending state ICPC office.

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 indicating placement or withdrawal of the request for placement.
• Forward the ICPC-100B to the receiving state ICPC Office once the child is placed.

The Arkansas ICPC Unit will:

• Forward the ICPC-100B to the appropriate DCFS field operative (i.e. ICPC Liaison, DCFS Supervisor or Area Manager) so that they will be notified of the placement and services can begin.

PROCEDURE (VI-G9): 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 often as requested on the ICPC-100A.
• Notify the Arkansas 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-G10): Travel Procedures for Children Receiving Out-of-Home Placement Services

When an Arkansas foster child has been approved to move into or out of Arkansas for a foster care or adoptive placement, or for reunification with parent(s) the Family Service Worker/Area ICPC Liaison will:

- Submit request for travel to ICPC office with “Application for Out-of-State Travel” (DHHS-1010) no less than 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 DHHS.
- Submit ICPC-100B to the ICPC office for forwarding to the receiving state after the child is placed in the receiving state.

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

- Submit the same information as stated above for foster children travel.
- No travel shall commence until the DHHS-1010s are signed.

PROCEDURE (VI-G11): Other Travel (Non-ICPC and Non-DCFS Children)

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

- Request prior approval, using the DHHS-1010 for a child and for an escort, as appropriate. (e.g., to attend a funeral, go on vacation with a foster parent or go on a visit of less than thirty (30) days.)
- Direct requests and questions to the Foster Care Unit.

Exception: For children placed out-of-state by an Arkansas court, the sending party is responsible for arranging transportation (DHHS does not have legal custody).

- Forward the DHHS-1010 to the Assistant Director of Community Services and the DCFS Director for signature.
- Attach the child’s court order giving authority to travel and written documentation from the Attorney Ad Litem.

NOTE: An out-of-state visit is 30 days or less and is not subject to ICPC. However, if it is greater than 30 days, it is a placement, which is subject to ICPC.
PROCEDURE (VI-G12): Progress Reports

The receiving state must:

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

PROCEDURE (VI-G13): Termination of ICPC Cases

An Interstate Compact Placement can only be terminated with the concurrence of the receiving state ICPC Office. Reasons for terminating an ICPC placement include the following reasons:

- 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.
- Transfer of jurisdiction.
- Concurrence of the receiving state.

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’s ICPC office to notify them of the closure of the ICPC case.

NOTE: The sending state is responsible for the original submission of both the ICPC-100A and 100B.

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/Area ICPC Liaison, with the approval of the Area Manager, will:

- Write a memo to the Interstate Compact Administrator to fully explain the situation.
- Request that exceptions to policy be made.
The Arkansas ICPC Administrator will:

- Review the request.
- Inform the Family Service Worker/Area ICPC Liaison of the decision.

**PROCEDURE (VI-G15): Request for a Priority Placement (Regulation No. 7 in the Guide to the Interstate Compact on the Placement of Children)**

A priority placement is when a court, upon request or on its own motion, or where court approval is required, determines that a proposed priority placement of a child from one state into another state is necessary because:

- The child is under two years of age;
- The child is in an emergency shelter; or
- The court finds that the child has spent a substantial amount of time in the home of the proposed placement recipient.

**NOTE:** Regulation No. 7 does not define “substantial amount of time”, consequently leaving its interpretation to the receiving state ICPC.

The receiving state agency has thirty (30) days to complete a request for a priority placement. Requests for placement shall not be expedited or given priority except as outlined below.

A request for a priority placement will be implemented as follows:

- The court shall send its order to DCFS within two (2) business days.
- The order shall include:
  - The child’s name, address and phone number;
  - The Fax number of the judge and the court, if available.
- The sending party will send the following to the state Central Office ICPC via overnight mail, or fax, within three (3) business days:
  - The signed court order. (The court order must specify how the case qualifies as Regulation No. 7);
  - A completed form 100A (ICPC Placement Request);
  - Supporting documentation according to policy.
- Within two (2) business days after the receipt of the ICPC priority placement request, the sending state ICPC office will overnight mail the priority request and its supporting documentation to the receiving state ICPC office with a notice that the request for placement is entitled to priority processing.
- The receiving state ICPC Office shall send all the documents to the receiving state’s local office within two (2) days. The receiving state’s local office has twenty (20) working days to send a determination back to the receiving state’s ICPC Office.
The receiving ICPC office has two (2) days to overnight mail the determination to the sending state’s ICPC office. The sending state ICPC office has two (2) days, through overnight mail, to send the determination to the local office.

The foregoing shall not apply if:

Within two (2) business days of receipt of the ICPC priority placement request, the sending state Compact Administrator determines that the ICPC request documentation is substantially insufficient, specifies that additional information is needed, and request the additional documentation from the FSW by FAX or telephone if FAX is not available, or

Within two (2) business days of receipt of the ICPC priority placement request, the receiving state Compact Administrator notifies the sending state Compact Administrator that further information is necessary. Such notice shall specifically detail the information needed.

NOTE: For such a case in which either of the two prior dot points apply, the twenty (20) business day period for the receiving state Compact Administrator to complete action shall be calculated from the date of the receipt by the receiving state Compact Administrator of the additional information requested.

PROCEDURE (VI-G16): 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 DHHS custody pending further proceedings from a court of competent jurisdiction.
- Contact OCC Attorney immediately.
POLICY (VI-I): FOSTER CHILD TRUST ACCOUNTS

The Department of Health & Human Services (DHHS) 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. DHHS 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 DHHS/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 DHHS/DCFS is the new payee.

- For RR benefits – Contact the Benefits Department of the specific, individual railroad company to advise them DHHS/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 DHHS/DCFS as the new payee.

- Designate the payee as follows: DHHS 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 DHHS) 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/conserve 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/conserve funds.
- Funds will not be held more than 30 business days of the initial request to hold/conserve 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 affect 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 DHHS 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): DHHS Office of Fiscal Management –
General Operations Section Trust Account Responsibilities

The DHHS 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 for 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.

POLICY (VI-J): OUT-OF-HOME (NON-DHHS CUSTODY)/RELATIVE PLACEMENTS

A.C.A. § 9-27-354 of the Juvenile Code states placement or custody of a juvenile in the home of a relative shall not relieve the Department of its responsibility to actively implement the goal of the case. If the relative meets all relevant child protection standards and it is in the juvenile’s best interest to be placed with the relative caregiver, the Department shall discuss with the relative the following two (2) options for placement of the juvenile in the relative’s home:

(A) The relative becoming a DHHS relative foster home; or

(B) The relative obtaining legal custody of the juvenile.

The juvenile shall remain in a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency until the relative’s home is opened as a regular foster home or the court grants custody of the juvenile to the relative after a written approved home study is presented to the court.

If the relative chooses to obtain legal custody of the juvenile a protective services case must be opened on the child and a case plan developed to establish permanency for the child. The Division must provide services similar to the services that would have been provided if the child was placed in foster care, and the case plan must address these services. For example, if there are health, education, or counseling needs of the child they should be addressed in the case plan.

Relatives have the option of obtaining permanent custody or guardianship if all efforts toward reunification are exhausted and/or to achieve case plan goals for permanency. If the court grants permanent custody, or guardianship is granted, the protective services case will be closed.

If Termination of Parental Rights (TPR) is an option for the case, the relative is eligible to adopt the child and can receive services identified in Procedure (VIII-H2) Subsidy Payments and Support for Non-Custody Adoptions (Out-Of-Home Placement Services, SSI Eligible Private Agency and Independent Adoptions), if the child is eligible.
PROCEDURE (VI-J1): Out-of-Home (Non-DHHS Custody)/Relative Placements

The Family Service Worker will:

- Complete the home study on the relative and submit the home study to the court with the recommendation to place or not to place the child with the relative.
- Complete the CFS-452 (Relative Placement Kinship Care/Relative Foster Care Verification) to ensure that the family has an understanding of their role in the case.
- Open a protective services case on the child if the court grants custody to the relative.
- Schedule a staffing within 30 days of opening the protective services case and invite the child’s parents, relatives, the child, if age appropriate, and community providers as appropriate. The staffing needs to determine the permanency goal for the child: reunification, permanent custody with the relative, TPR or adoption.
- Complete or update the CFS-6009 (Family Strengths and Needs Assessment) within 30 days of opening the protective services case.
- Develop or update the case plan (CFS 6010) within 30 days of opening the protective services case.
- Complete the Permanency Planning Hearing Court Report (CFS-6024) and submit to the OCC attorney within fifteen (15) working days prior to any hearings scheduled for the case.
- Hold staffings, as needed, in accordance with Procedure IV-B1 (Case Staffings) and update the Family Strengths and Needs Assessment (CFS-6009) and Case Plan (CFS-6010).
- Invite the Adoption Specialist to the staffing when appropriate.
- Conduct a staffing to discuss closure when appropriate.
POLICY (VI-K) EDUCATIONAL SERVICES FOR CHILDREN IN OUT-OF-HOME PLACEMENT

It is the responsibility of DCFS to assure that foster children are afforded educational opportunities to help each foster child meet his/her full potential. The Division shall make every attempt to maintain the enrollment of a foster child in the school he was attending prior to placement into foster care. The Division shall coordinate transportation issues with the local school district. To ensure that children in the custody of the Department receive a quality education, it is the Division’s policy to enroll foster children only in schools accredited by the Arkansas Department of Education. This requirement also applies to children placed in residential facilities. The local county office should be aware of educational resources in the community and across the state so that they can access these resources for foster children.

If a foster child is currently enrolled in a “School Improvement” school as determined by the Arkansas Department of Education (ADE), the child’s case can be staffed to assess the child’s progress at that school. If the child is progressing at the current school he can remain at that school, or the child can transfer to another school if it is in the child’s best interest to do so. The Manager of the Foster Care Unit will review the ADE Website quarterly to determine the “School Improvement” schools and notify the appropriate County Supervisor of the information.

Due to the special education needs of many children who enter foster care it is necessary to assess and identify educational needs early in the casework process. A comprehensive health assessment must be completed on each foster child within 60 calendar days of removal from home. (See Policy VI-D Comprehensive Health Assessment and Health Plan for Children Receiving Out of Home Placement Services) The comprehensive health assessment includes assessments of cognition/achievement, speech/language development, hearing, vision, medical, emotional and behavioral development which can be used by the child’s school in the process of determining the child’s need for services. The University of Arkansas for Medical Sciences Project for Adolescent and Child Evaluation (UAMS PACE) Program is responsible for conducting the comprehensive health assessments and will make recommendations concerning the child’s educational needs and referrals for Special Education Services.

Home Schooling is not allowed for foster children. However, the DCFS Director may grant an educational waiver allowing a child to be home schooled if a certified mental health professional presents documentation stating that home schooling is in the child’s best interests. A foster child may receive Home Bound Instruction as part of their Individualized Education Program (IEP). Home Schooling and Home Bound Instruction are two different programs. Home Bound Instruction is a planned, time limited program that is established and provided by the child’s school.

The Individuals with Disabilities Education Act (IDEA) states that ADE ensures that all children with disabilities ages 3 to 21 residing in the State have the right to and availability of a free appropriate public education including children with disabilities who have been suspended or expelled from school. Free Appropriate Public Education (FAPE) also requires that the services provided to a child with disabilities under this part must address all of the child’s identified special education and related services needs. The services and the change of placement needed by each child with a disability to receive FAPE must be based on the child’s unique needs and not on the child’s disability. Each public education agency shall implement child-find requirements to identify, locate, and evaluate all children with disabilities.

Each public education agency shall ensure that the rights of a child are protected if no parent can be identified; the public agency, after reasonable efforts, cannot discover the whereabouts of a parent; or the child is a ward of the state of Arkansas under the laws of this state. The duty of the public education agency includes the assignment of an individual to act as a surrogate for the parents. This must include a method for determining whether a child needs a surrogate parent, and for assigning a surrogate parent to the child. If the goal for a foster child is reunification, the worker should encourage the child’s parent to attend all scheduled school conferences and evaluations, and no surrogate parent is necessary. If DCFS is unable to locate the child’s parent, the parent(s) are not involved in the case, or the parent’s rights have been terminated, the Division shall request that the child’s foster parent be assigned as the surrogate parent. If the foster parent has not received surrogate parent training, the LEA Special Education Supervisor or designee can assist in coordinating the surrogate parent training for the foster parent. Transition planning is a required component of the IEP for children age 16 and above.
PROCEDURE (VI-K1) Educational Services

The Family Service Worker will:

If the child is maintained in the same school after entry into foster care:

- Complete the CFS-362 (Medi-Alert) immediately when a child is removed and placed out of the home of the parent or legal guardian into foster care or adoptive home or moved to another foster care provider. Section IX of the Medi-Alert addresses the child’s Academic Status and must be completed upon the child entering care or changing a placement. Complete Section IX in consultation with the child’s parent upon initial placement. Update Section IX of the CFS-362 as information becomes available if the parent does not provide needed information at the time of placement.

- Accompany the child to school and notify the school counselor of the child’s placement into foster care. Give the counselor authorization of who can pick the child up from school. Present the school counselor with the child’s court order if you have it. If you do not have it when accompanying the child to school, present it to the school once it is received.

- Provide guidance to the school counselor on the role of the child’s biological parent in the case (i.e. supervised visitation, unable to locate parent, working towards reunification or TPR, parent cannot have access to any foster parent information) and the role of the parent in the education process (i.e. parents will be attending school conferences as part of reunification services, TPR and parents will not be attending conferences).

- Obtain the child’s school records from the school counselor for documentation in the child’s case record. The child’s school records will also be used to help address the child’s educational needs in the case plan. Provide the University of Arkansas for Medical Sciences Project for Adolescent and Child Evaluation (UAMS PACE) Program copies of any school records available to assist in the Comprehensive Health Assessment.

- Ensure that the foster parents are given the names of the child’s teacher and counselor. Ensure that the foster parents are involved in the child’s education process. The foster parents must attend all scheduled parent/teacher conferences and school open house. The foster parent will encourage foster children in their home to participate in school extracurricular activity and provide transportation to those activities.

- Complete and update, as needed, the Medical Passport information related to the child’s educational needs.

If the child is enrolled in a new school after entry into foster care:

- Complete each step outlined in the above section.

- Enroll the child in school and provide the school with copies of any documents that would assist in the child’s educational program. Provide UAMS PACE Program with any school records that are available.

- Notify the child’s old school of the child’s transfer to a new school and request copies of the child’s school records. Involve the child’s current school in the transfer process if this is a planned move for the child.

- When conducting a request of change of placement staffing (see Procedure VII-DI Changes in Out-Of-Home Placement) discuss the impact of the child transferring to a new school if there is a change in placement.

- Notify the parents that a change in schools was necessary if their parental rights have not been terminated.
PROCEDURE VI-K2: Special Education Needs Service Delivery Process:

Service Delivery Process

- The FSW will enroll the child in school and provide the school with copies of any documents that would assist in the child’s educational program. Provide UAMS PACE Program with any school records that are available.

- The DCFS Health Services Specialist will refer the foster child to UAMS PACE Program for a Comprehensive Health Assessment (CHA) within 3 working days of the child entering care.

- The FSW will notify the Health Specialist of all placement changes. The Health Services Specialist will forward all notifications to UAMS PACE Program.

- UAMS PACE Program will obtain a copy of the child’s school records via a DHHS-81 (Consent for Release of Information) and DHHS-4000 Authorization to Disclose Health Information, if the records have not been received from the Family Service Worker. The child’s parent and FSW must sign the DHHS-81 and DHHS-4000. The FSW will also send the court order to UAMS PACE Program indicating that the child is in DHHS custody.

- UAMS PACE Program will forward the results of the Comprehensive Health Assessment (CHA) to identified DCFS staff. UAMS PACE Program will key recommendations from the CHA into CHRIS for DCFS staff access.

- The FSW/Health Specialist will present recommendations for referrals for special education consideration to the school building principal and or Local Education Agency (LEA) Special Education Supervisor or Designee.

- The FSW will provide the school with the name and address of the child’s biological parent(s), if available, so that the school can send notice of the conference to the parent. If not appropriate, DCFS will request the school to appoint a surrogate parent for the child.

- If DCFS is unable to locate the child’s parent, the parent(s) are not involved in the case, or the parent’s rights have been terminated, the FSW will request that the child’s foster parent be appointed as the child’s surrogate parent. The LEA Special Education Supervisor can assist in coordinating the surrogate parent training for the foster parent.

- A conference will be scheduled with the appropriate school personnel, the biological parent, and foster parents/surrogate parent, to discuss the child’s needs.

- The FSW will attend the referral conference.

- The foster parent will be actively involved in the child’s educational process and must attend all scheduled conferences and meetings, upon notification by the school and or DCFS, for children placed in their home.
POLICY (VI- L): MENTAL HEALTH SERVICES FOR CHILDREN IN FOSTER CARE

The Division of Children and Family Services is dedicated to ensuring that all foster children receive a full range of health care services including mental health services (evaluation and treatment). School age children (5 to 18 years old) who need mental health services will be referred to a Community Mental Health Center (CMHC) within five days of entry into foster care. Children under five years of age will be referred for mental health services if the need is identified by a physician during the UAMS comprehensive health assessment or by the DCFS worker or foster parent.

Urgent (requiring immediate action) or emergent (appearing for the first time) mental health treatment needs identified by the Primary Care Physician (PCP) during the initial health screening (24-72 hours of entering foster care) shall be referred immediately by the DCFS worker to a CMHC.

Mental health problems can manifest themselves at any time during foster care. Therefore, DCFS workers will refer a foster child for mental health services at any time during the child’s stay in foster care when they think it is appropriate, and immediately whenever a traumatic event takes place in the life of a foster child.

Continuity of care is extremely important. Consequently, if a child or any family members are already receiving mental health services when the child enters the foster care system, DCFS will continue mental health services clinically indicated by the current provider, unless there is a compelling reason to change providers. Other ways the DCFS worker can help promote continuity of care include encouraging cooperation and coordination between service providers. Additionally, the DCFS worker can encourage the PCP to act without delay. Finally, the DCFS worker will provide the CMHC with a copy of the court order whenever custody changes.

When possible, the DCFS worker will make every effort to expedite access to appropriate documents from previous treatment as this can be critical to successful authorization of services by the Division of Medical Services (DMS), as well as the quality and timeliness of services.

PROCEDURE (VI- L1): Referral for Mental Health Assessment

The Family Service Worker will:

- Refer foster children in need of mental health services, ages 5-18 years old, to a CMHC for routine mental health services within five (5) days of their entry into foster care. Need may be determined by a physician, mental health professional, FSW or the foster parent. The FSW should—
  - Contact the closest CMHC and follow their specific referral procedures;
  - Provide required referral documentation (See Procedure VI-M3).

- Refer children under 5 years old for mental health services when the need is identified by the physician during the UAMS comprehensive health assessment or by the DCFS worker or foster parent. Follow the CMHC’s referral procedures and provide any necessary documentation.

- Refer foster children with urgent or emergent mental health needs identified by the Primary Care Physician during the initial health screening, immediately to a local CMHC. Follow the organization’s referral procedures and provide any required documentation.
- Refer a foster child for mental health services immediately whenever a traumatic event occurs in the life of a foster child. Follow the referral procedures and provide any required documentation.

- Refer a foster child for mental health services anytime the FSW thinks appropriate. Follow the organization’s referral procedures and provide any required documentation.

- Promote continuity of care by –
  - Continuing clinically indicated mental health services the foster child or family members were receiving prior to entering foster care.
  - Take timely action to ensure the continuity of the Primary Care Physician’s referral.
  - DCFS will provide the CMHC a copy of the court order when custody changes.
  - Whenever possible, expedite access to appropriate documents from previous treatment to reduce delay in the authorization of services by the Division of Medical Services.

**PROCEDURE (VI-L2): Comprehensive Health Assessment by University Of Arkansas for Medical Sciences (UAMS)**

The Family Service Worker will:

- Ensure that the foster child receives a comprehensive health assessment by UAMS within 60 days of the child’s entry into foster care.

- Ensure that a hard copy of the Community Mental Health Center’s mental health assessment is sent to UAMS with the child’s medical records.

- Share the results of the comprehensive health assessment with the foster child’s mental health professional.

**PROCEDURE (VI-L3): Mental Health Assessment and Evaluation**

The Family Service Worker will:

- Refer the foster child to the CMHC and document the referral in the Medical Services screen in CHRIS.

- Ensure the referral to the CMHC is accompanied by:
  - Authorization for treatment,
  - A copy of the current court order,
  - A copy of the medical history,
  - A copy of the case history information.

NOTE: If any of the above information is not available at the time of the initial referral, DCFS will forward those documents as soon as they become available. The CMHC needs this information for effective treatment and to obtain prior authorization from Medicaid.
• Assure adequate and appropriate participation in the assessment process by:
  • Attending the first appointment with the child to sign consents and facilitate treatment and treatment planning.
  • Ensuring that the adult(s) who have the most complete information about the child will accompany the child to the assessment/evaluation. This may mean the Family Service Worker, foster parent and/or parent(s), as appropriate.
  • Ensure that the foster parent receives a copy of the child’s mental health assessment.
  • Establish a schedule regarding dates for evaluation and treatment sessions with the mental health provider.

DCFS understands the Community Mental Health Center will:
  • Offer routine assessment or evaluation of the child within five (5) working days from receipt of the DCFS referral, receipt of authorization for treatment and a copy of the court order.
  • If a complete psychiatric evaluation is needed, the CMHC has forty-five [45] working days to complete the evaluation.
  • Immediately evaluate any client who presents as a psychiatric crisis or an outpatient mental health emergency (See Glossary for definitions) and offer triage/assessment by a Mental Health Professional to the level deemed appropriate.

NOTE: The CMHC will make a copy of the emergency assessment or evaluation available immediately through the Center’s emergency services.
  • Provide immediate verbal feedback regarding the child’s mental health evaluation to the DCFS worker.
  • Provide a copy of the child’s written mental health assessment report to the DCFS worker as soon as possible, and in every case within five (5) business days.

NOTE: It is understood and agreed that prior authorization requests, diagnostic assessments, master treatment plans, progress notes and other documentation required by the Division of Medical Services may be utilized to impart information, in lieu of written reports to DCFS.

PROCEDURE (VI-L4): Outpatient Therapy and Treatment

If the assessment/evaluation indicates that mental health services are needed, the Family Service Worker can expect the Community Mental Health Center to:
  • Offer counseling (individual, group and/or family) and/or other appropriate treatments suited to the individual child’s needs.
  • Treatment will be offered within five working days of the referral (or in emergency situations within twenty-four [24] hours).
  • Assist DCFS in making appropriate referrals to other facilities if the CMHC does not have the specialized services required for the child.

If copies of the current court order and other information (e.g. case history), necessary for the CMHC to offer treatment services, are not initially available, the DCFS Family Service Worker will:
  • Forward those documents to the CMHC as soon as they become available.

NOTE: The CMHC needs this information to provide effective treatment and to obtain prior authorization from Medicaid. The Medicaid prior authorization process may affect the deadlines mentioned above.
  • Remain engaged in the counseling process and will determine with the Center’s therapist at the beginning of counseling the degree and methods of the DCFS worker’s engagement (e.g. phone conversations, written reports, conferences).
• Will determine, in coordination with the CMHC therapist, which adults, if any, need to accompany the child to treatment and/or be involved in the child’s treatment.

• Will assure adequate and appropriate participation in the treatment process.

• Will, along with the foster parent, attend each appointment scheduled with the psychiatrist, if possible.

• Review and sign all master treatment plans and updates.

• Document the child’s mental health services in the Medical Services screen in CHRIS.

PROCEDURE (VI- L5): Inpatient and Other Residential Treatment Programs

• DCFS understands the Community Mental Health Center will:

  • Immediately evaluate any client who presents as a psychiatric crisis or an outpatient emergency (see Glossary for definitions) and offer triage/assessment by a mental health professional to the level deemed appropriate.

  • Assist DCFS in making appropriate referrals to other facilities if the CMHC does not have the specialized services required for the child.

  • Assist in securing appropriate mental health services within its catchment area.

  • Assign a mental health clinician to coordinate mental health treatment for the child, including but not limited to coordination with other agencies, convening staffings, or assisting with the location of 24-hour mental health placement.

  • Work with DCFS to ensure that mental health services compliment case planning, management, and the Multi-Agency Plan of Services (MAPS) Plan. MAPS is a process in which the parent/caregiver and child meet with a multi-agency service team for individualized service planning. The child is assigned a MAPS case manager.

  • Share information about past treatment and coordinate treatment services/discharge plans with inpatient/residential provider, providing the appropriate consent forms have been signed.

  • NOTE: DCFS retains ultimate case planning and management responsibility for placement and permanency issues.

Every DCFS service area has a Placement Coordinator designated by the Area Manager. The Placement Coordinators will:

• Be familiar with all mental health placement resources available within Arkansas and become aware of new placement resources as they develop.

• Know what documentation is required in placement packets submitted to providers with whom placement is considered.

• Understand the Child Case Review Committee (CCRC) process and be able to articulate that information to the courts.
Attend court hearings to:
- Explain the current status of the case being addressed.
- Identify which placements have been pursued.
- Explain why specific placements have not been made.
- Respond to any questions regarding the CCRC process and/or the state law requirements that must be met before a child in DHHS/DCFS custody may be sent out of state for treatment.

Receive the placement packet from the Family Service Worker and use it to:
- Check for completeness and coordinate with the Family Service Worker to acquire any missing information.
- Ensure that a packet is complete before forwarding it to the Behavioral Treatment Unit (BTU). Incomplete packets will be returned immediately to the Placement Coordinator.
- Review the child’s needs and make recommendations for possible appropriate placements.
- Consult with the BTU Manager to determine which placement programs have slots and/or funds available.
- Act as a conduit for communication between the county staff and BTU.
- Keep a monthly log containing information about:
  - Which children were referred for placement,
  - The county staff member responsible for case management,
  - The current status of a case and pending actions,
  - The length of stay in a placement.
- Monitor the Medicaid Certificate of Need approval.
- Be involved in discharge planning, and assure discharge planning begins when the child is admitted.

The Family Service Worker will:
- Make a referral to the Community Mental Health Clinic’s Clinical Director or his designee when a child needs intensive mental health services (including any 24-hour services).
- When a referral is made for Inpatient/Residential services the worker will assure adequate and appropriate participation in the Inpatient/Residential evaluation/intake process by:
  - Providing comprehensive and accurate information about the child during the assessment and admission phase to an inpatient or residential facility.
  - Attending the first appointment with the child to sign consents and facilitate treatment and treatment planning. Whenever possible, expedite access to appropriate documents from previous treatment to reduce delay in the authorization of services by the Division of Medical Services.
  - If copies of the current court order and other information (e.g., case history) necessary for the CMHC to offer treatment services are not initially available, the DCFS Family Service Worker will:
    - Forward those documents to the inpatient/residential provider as soon as they become available.
NOTE: The CMHC needs this information to provide effective treatment and to obtain prior authorization from Medicaid. The Medicaid prior authorization process may affect the deadlines mentioned above.

- Ensure that the adults who have the most complete information about the child will accompany the child to the assessment/evaluation. This may mean the Family Service Worker, foster parent, and/or parents, as appropriate.

- Update the treatment team on changes of custody status and/or discharge plans and availability.

- Take timely action to ensure the continuity of the Primary Care Physician’s referral.

- Once the child has been admitted to a residential facility, the Worker will collaborate with the facility in the development of the Plan-of-Care by:
  - Establishing a schedule regarding dates for treatment sessions with the inpatient/residential provider.
  - Remaining engaged in the treatment process and will determine with the therapist at the beginning of treatment the degree and methods of the DCFS worker’s engagement (phone, conversation, written reports, conferences).
  - Assure discharge planning begins on admission and the FSW is involved in that planning.
  - Assure contact by FSW and other appropriate adults with the child.
  - Will determine in coordination with the therapist, which adults, if any, need to accompany the child to treatment and/or be involved in the child’s treatment, including family therapy sessions.
  - Will, along with the foster parent, attend each appointment scheduled with a psychiatrist.
  - Review and sign all master treatment plans and updates.
  - Ensure that he/she receives a copy of the child’s records including evaluations, treatment plans, updates and discharge plan.
  - Coordinate after care plans post discharge from the inpatient or residential facility by:
    - Facilitating a timely discharge by identifying specific placement plans as early as possible to promote a positive transition from one level of care to another.
    - Coordinating with the CMHC or other contracted outpatient provider before, during and immediately following discharge from an inpatient or residential facility.
    - Participating in a CASSP staffing to complete a MAPS (Multi-Agency Plan of Service).
    - Obtaining an outpatient appointment immediately following discharge from an inpatient facility.
    - Obtaining a PCP referral to an outpatient provider if needed.
    - Making sure of compliance with all scheduled outpatient appointments.

NOTE: If other DHHS agencies and/or their contracted providers are involved in the case, full coordination extends to them as well.
PROCEDURE (VI- L6): Responsible and Appropriate Adult Participation

The Family Service Worker will:

- Assure the adequate and appropriate participation in the assessment and treatment process by the adult(s) who knows the child best (e.g., family member(s) [unless reunification is not the plan or their involvement is contraindicated], the child’s DCFS worker and/or foster parent(s)).

- Make all reasonable efforts to enable the child’s parent(s) to comply with the court’s orders and the approved case plan.

- Appropriately document if and when the mental health professional recommends a cessation of parental involvement in the child’s assessment and/or treatment and share the recommendation with the court for final disposition.

NOTE: The main goal of foster care is to achieve a permanent plan for the child. However, in some cases, parental involvement in the child’s treatment can be counter-therapeutic and not in the child’s best interest.

The professional mental health provider will determine if it is appropriate for the family to participate in the child’s treatment. This will protect the child from victimization by family members who are unable or unwilling to take an appropriate role in the child’s treatment.

Whenever necessary or appropriate, the court of jurisdiction should be advised of the mental health professional’s recommendations so it can enforce parental compliance.

PROCEDURE (VI- L7): Treatment Planning

The Family Service Worker will:

- Make a referral to the Community Mental Health Clinic’s Clinical Director or his designee when a child needs mental health services (including any 24-hour services).

- Ensure the referral includes all the information necessary for treatment planning (e.g., authorization for treatment, current court order, case history and information about previous treatment) if the CMHC does not already have the information or if there is a change in mental health providers.

- Forward copies of all critical information that was not available at the time of the initial referral as it becomes available.

- Keep the mental health professional apprised of any changes in the child’s case or placement.

- Coordinate all casework being done in the case with the mental health provider through phone calls, correspondence, email, meetings, joint staffing or case conferences, as discussed and agreed to with the mental health provider.

- Consult the mental health provider regarding permanency-planning decisions primarily to protect the child while engaging the family in a clinically appropriate manner.

- Invite the mental health professional serving the child to attend or otherwise participate in DCFS staffings.

- Provide a copy of the court order to the CMHC once the foster child has been discharged from DHHS custody.
• NOTE: If other DHHS agencies and/or their contracted providers are involved in the case, full coordination extends to them as well. Keep the child’s school advised about the mental health treatment being received, as well as informed about the child’s needs and progress. This coordination will help ensure the effectiveness of the treatment.

• Invite school personnel to attend staffings, case conferences, and family centered meetings, as appropriate.

• Document in the child’s case plan if the child is receiving school-based mental health treatment. Also document details about any responsibilities the mental health provider has regarding coordination of services.

DCFS can expect the Community Mental Health Center to:

• Assign a mental health professional to coordinate mental health treatment for the child including but not limited to coordination with other agencies, convening staffings, or assisting with the location of 24-hour mental health placement, when needed.

• Work with DCFS to ensure that mental health services complement case planning and management.

NOTE: DCFS retains ultimate case planning and management responsibility for placement and permanency issues.

• Make coordination services available after regular work hours.

• Make the recommendation for the most appropriate disposition with regard to medical necessity.

• Assist in securing appropriate mental health services within its catchment area.

• Coordinate the mental health services being delivered by the mental health provider with the DCFS worker through phone calls, correspondence, email, meeting, joint staffing or case conferences as previously discussed and agreed to.

In accordance with Arkansas Code § 9-27-358 Placement – Staffing and planning (a)(1), the DCFS Family Service Worker will:

• Arrange a staff meeting within forty-eight (48) hours to discuss what services or assistance is needed to stabilize the foster placement when foster parents have requested that a foster child be removed from their home.

• Request that the licensed mental health professional from the CMHC or private mental health provider who is treating the child attend or otherwise participate in the required staffing to discuss removal of the foster child and options to supporting the placement.

PROCEDURE (VI- L8): Promote Continuity of Care

If a child is receiving mental health services upon entry into the foster care system, the Family Service Worker will:

• Continue clinically indicated mental health services with the provider who is already delivering those services, unless there is a compelling reason to change providers

If the current mental health provider must be changed (e.g., child placement in another part of the state) the FSW will request that the old and new mental health providers will:

• Share information about past treatment.

• Coordinate treatment services provided the appropriate consent forms have been signed and are in place.
PROCEDURE (VI-L9): Participation in the Child and Adolescence Service System Program (CASSP) at the Local, Regional and State Levels

When a child requires intensive mental health services and inter-agency involvement on service plans, the DCFS Family Service Worker will:

- Refer the child to the CASSP Service Team (after the initial mental health assessment is completed), in coordination with the CMHC therapist.

If the referral is appropriate, according to CASSP guidelines, the CASSP Service Team will:

- Develop and oversee the individual service plan.
- Define and develop an interagency individualized service plan to serve the child and family.

NOTE: The plan will reflect integrated service delivery and will specify services or programs with the funding to be provided by each agency.

NOTE: DCFS retains ultimate case planning and management responsibility for placement and permanency issues.

- Follow the Procedure VI-L12 (Resolution of Issues Encountered) if attempts to resolve disagreements locally are unsuccessful.
- Refer disagreements about case management for an individual child to the Regional CASSP Service Team to be addressed at its next regularly scheduled meeting.

NOTE: Identified systems issues such as gaps in services and services needed with no identified funding source will be addressed by the Regional CASSP Planning Team with regional recommendations forwarded to the State CASSP Coordinating Council.

PROCEDURE (VI-L10): Communication

If any party needs to cancel an appointment, that cancellation will be done at least twenty-four (24) hours in advance, except in genuine emergency situations such as illness.
PROCEDURE (VI-L11): Implementation of Agreements Monitoring

NOTE: DCFS has agreements (informal) and/or contracts (legally binding agreements) with most community mental health centers and with other mental health providers. The DCFS Area Manager is responsible for working with the Community Mental Health Center (CMHC) Directors to establish an oversight process and create a DCFS/CMHC Oversight Team. The Area-wide DCFS/CMHC Oversight Team will work closely with the CASSP Regional Team and community stakeholders to ensure the quality and effectiveness of the mental health services provided.

The Division of Children and Family Services will:

- Comply with all joint agreements/contracts with mental health service providers.
- Hold an initial joint meeting in each catchment area to:
  - Review the agreements,
  - Assess implementation of the agreements to date,
  - Identify barriers to implementation of the plan,
  - Develop a plan to address the identified barriers.
- Hold a biannual joint meeting (following the initial joint meeting) in each catchment area to review the four topics listed above and any other pertinent issues.

PROCEDURE (VI-L12): Resolution of Issues Encountered during Implementation of Agreements

If CMHC staff believes that DCFS staff is not following the terms of the provider agreement, they will:

- Attempt to resolve the issue with the appropriate DCFS County Supervisor.
- Contact the appropriate Area Manager if the issue cannot be resolved at the county level.

If DCFS staff believes that CMHC staff is not following the terms of the provider agreement, they will:

- Attempt to resolve the issue with the Children’s Services Director or other designated staff at the CMHC.
- Contact the CMHC Director if the issue cannot be resolved at the lower level.

If an issue cannot be resolved through the above processes, the parties will contact the following senior staff to resolve the issue.

- The DCFS Assistant Director of Community Services,
- The Division of Mental Health Assistant Director for Children’s Services.

NOTE: The Community Mental Health Centers and DCFS agree that neither shall have nor exercise any control or direction over the methods by which the other’s employees perform their clinical functions and that no relationship of employer and employee or of joint venture between the parties is created by this agreement.
POLICY (VI- M): CHILD CASE REVIEW COMMITTEE (CCRC) –
GUIDELINES FOR REFERRAL AND REVIEW

The CCRC ensures appropriate response to the service needs of multi-challenged children and their families. The committee also serves as the gatekeeper for out-of-state placements for children in DHHS custody.

The CCRC deals mainly with the following types of cases:

- Children in DHHS custody who have significant trouble being placed due to multiple, more serious and/or complex needs.
- Cases where out-of-state treatment is recommended.
- There are no available Arkansas resources that can meet the child’s identified needs.
- All available in-state resources have been used, but have not been measurably effective.
- Coordination between DHHS divisions has not resolved which division will be responsible for the specific case.

The CCRC is comprised of the following members:

- Director of the Department of Health & Human Services (Chairman);
- The Directors of the following DHHS Divisions – Children and Family Services, Youth Services, Medical Services, Developmental Disabilities Services, Behavioral Health Services, and Office of Chief Counsel;
- A representative of the Department of Education;
- CCRC Coordinator (Manager, Behavioral Treatment Unit), whose responsibilities include:
  - Coordinating the CCRC meetings;
  - Managing contracts; and
  - Providing technical assistance.

NOTE: The CCRC Coordinator does NOT do case management or find placements for children.

- Additional committee members may include:
  - Division representatives who act as referral coordinators within their agencies;
  - The designated caseworker for the child and family;
  - Appropriate service providers;
  - Others needed to develop a suitable plan of service to meet the child’s needs.
PROCEDURE (VI-M1): The Child Case Review Committee (CCRC) Referral Process

When any local Divisional staff member becomes aware of a child who meets the criteria for referral to the CCRC, he should contact both the County Supervisor and the designated Placement Specialist for the Area.

The Placement Specialist will discuss the child’s needs with the caseworker and the County Supervisor to verify it is an appropriate referral for the CCRC.

NOTE: Children from counties with active “Together We Can” and/or CASSP teams should be referred to the appropriate team before the child is considered for referral to the CCRC. The County Administrator should facilitate referrals to “Together We Can”.

A referral packet to CCRC should be submitted to the CCRC Coordinator (Manager, Behavioral Treatment Unit) and shall contain the following information:

- Presenting problem;
- Chronological summary of placements [include reasons for moves and a narrative description of the circumstances and behaviors that led to each move];
- Summary of referrals, rejections and reasons for rejection;
- Social history:
  - Family
  - Child development
  - Services
- Outline the steps taken to locate an appropriate placement;
- Psychological history (include mental health services, testing results and copies of all evaluations);
- Educational information [include the Individual Educational Plan (IEP) in compliance with PL-49-142 or an explanation why the IEP has been omitted];
- Medical history;
- Permanency plan.

If the referral to the CCRC is determined to be inappropriate, the CCRC Coordinator will give the county office specific guidance on how to handle the case.

If the referral is determined to be appropriate for the CCRC, the CCRC Coordinator will:

- Place the case on the agenda for the next scheduled CCRC meeting (unless an emergency is indicated in the referral material).
- Advise the Division’s contact person which people need to attend or be available by conference call for the CCRC meeting.

The referring county shall send key staff knowledgeable about all aspects of the case to the CCRC meeting to review details of the case.
When a referral is appropriate for the DHHS Child Case Review Committee (CCRC) process, the Family Service Worker will:

- Contact BTU only through the Placement Coordinator, except in cases of extreme urgency or when the Placement Coordinator is unavailable.
- Collect information for the placement packet.
- Create the packet consisting of the following items:
  - Cover memo which includes:
    - Family Service Worker’s name and title, phone and fax numbers, and supervisor’s name;
    - Child’s name, age, legal status and current location;
    - Concise paragraph detailing the reasons for referring the child for placement and when the placement is needed;
    - Child’s last/current placement and an explanation for the removal;
    - Placement history (give dates) and reason for discharge;
    - Clinical recommendation for placement from the last discharge and previous providers if applicable;
    - A copy of the MAPS from the CASSP staffing;
    - Letters of referral and/or denial;
    - Intelligence quotient (I.Q.) – Full Scale;
    - Psychological testing results (most recent – 1 year old or less);
    - Educational information;
    - Date and reasons the child entered foster care;
    - Case plan and goals.

**PROCEDURE (VI- M2 ): The CCRC Case Review Meeting**

The CCRC is scheduled to meet on the first (1st) and third (3rd) Tuesdays of each month from 9:00 a.m. to 10:30 a.m. in the DHHS-DCFS Central Office Complex, Donaghey Plaza South, 7th and Main, Little Rock, Arkansas CCRC members will be notified on the Friday before a scheduled meeting.

The following always applies:

- Each committee member is expected to attend the meeting or send a designee with the authority to make decisions for their Division;
- The CCRC Coordinator will ensure that Divisions are made aware when they have a case on the agenda.
- Decisions will be made by majority vote with the Chairman breaking any tie votes.
- Dates will be established for the CCRC to be updated on the status of the plan implementation.
- Committee members and other participants will respect the confidentiality rights of each individual client.
PROCEDURE (VI-M3): Medicaid and Financial Issues

If a child in DHHS custody is placed in an out-of-state placement without proper documentation, as required by ACA §20-46-106 (See below), or CCRC authorization:

- Medicaid will not approve a Certificate of Need (CON).
- Authorization to pay the provider/facility for services will not be given.

ACA §20-46-106 Documentation Requirements for Out-of-State Placements:

- Before an emotionally disturbed child/youth is placed in an out-of-state treatment facility, the Office of Chief Counsel will make and document the following determinations, which will be reviewed with the CCRC Coordinator (Manager, Behavioral Treatment Unit).
  - Whether the emotionally disturbed child/youth has been appropriately and accurately diagnosed;
  - Whether an appropriate treatment facility exists within Arkansas;
  - Whether there is an appropriate treatment facility in a border state;
  - Whether the treatment facility being considered has the most appropriate program;
  - Whether the program requires payment of board, and if so, what is the amount;
  - Whether the total cost for treatment in the out-of-state facility exceeds the cost of treatment in Arkansas;
  - Where youth at the facility attend school, and whether the school is accredited;
  - What type of professional staff is available at the facility;
  - What mechanisms are in place to address problems that are not within the purview of the program;
  - What other considerations exist, in addition to the youth’s emotional problems, such as other medical conditions, travel expenses, wishes of the youth, best interests of the youth, effect of out-of-state placement on the youth, and proximity to the youth’s family.
  - What alternatives exist to out-of-state placement, and the benefits and detriments of each alternative?

NOTE: The information collected by the above determinations shall be included in the child’s/youth’s case file. The information shall be reviewed and considered by the juvenile judge.

PROCEDURE (VI-M4): Follow-up to CCRC Recommendations

The Placement Specialist or Caseworker will:

- Work with the CASSP Team to develop a plan to implement the CCRC recommendations; this will be a revision of the CASSP Plan.
- Work to implement the CASSP Plan/CCRC recommendations.
- Report to the CCRC Coordinator:
  - Progress on implementing the CASSP Plan/CCRC recommendations.
  - Problems and barriers encountered in trying to implement the CASSP Plan/CCRC recommendations.

If the CASSP Plan must be modified, the caseworker assigned to the case will contact the CCRC Coordinator to schedule the child’s case for an update at the next scheduled CCRC meeting.

The CCRC Coordinator will ensure that Divisions are made aware when they have a case update on the agenda.
VII. SERVICES TO SUPPORT FOSTER PARENTS

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

Foster care is a team effort involving DCFS, the family foster parents, the foster child, and the custodial/non-custodial 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.)

For the purpose of Title IV-E eligibility, a foster family home means the home of an individual or family licensed or approved as meeting the standards established by the Child Welfare Agency Review Board that provides 24-hour out-of-home care for children. (With respect to foster family homes on or near Indian reservations, approval would rest with the tribal licensing or approval authority(ies). The term includes group homes, agency-operated boarding homes or other facilities licensed or approved for the purpose of providing foster care. Foster family homes that are approved must be held to the same standards as foster family homes that are licensed. Anything less than full licensure or approval is insufficient for meeting Title IV-E eligibility requirements.

In addition, the Child Welfare Agency Licensing Act defines a foster home as a private residence of one (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.

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

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.

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.

The Division shall recruit a sufficient number of foster parents to ensure that all children are placed in the least restrictive, most family like setting that meets the child’s individual needs. The Division shall diligently recruit potential foster families that reflect the ethnic and racial diversity of children in DHHS custody for whom a foster home is needed. Recruitment of new foster families is an ongoing activity for which Area and County staff are mainly responsible. Recruitment can be achieved by several means including participation from current foster parents, development of local and statewide media campaigns and through the use of contact with community organizations. The Division will employ the use of the Family Foster Home Needs Assessment to assist with specific county recruitment efforts. The Family Foster Home Needs Assessment will also be utilized in the development of the Foster Home Recruitment Plan. Targeted recruitment of specialized foster parents shall address the special needs of children needing placement.
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 local and state criminal records background check.

A FBI criminal records check shall be conducted on persons who have not resided in Arkansas continuously for the past five (5) years. The Division will provide documentation in the case record that the criminal record check was conducted on the prospective foster parent. DCFS will check the driving record (violation points) for each potential foster parent. The Arkansas State Vehicle Safety Program sets the maximum number of traffic violation points a foster parent may be allowed. The completion and approval for all foster home re-evaluations must be documented in CHRIS. 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. 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.

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. The completion and approval of all foster home re-evaluations must be documented in CHRIS. If a foster family re-evaluation is not completed and documented annually in CHRIS, any IV-E eligible child placed in the home will lose his IV-E eligibility until the re-evaluation of the family is completed and documented.

DCFS employees are not permitted to be agency approved foster family homes. However, in situations where Division staff are relatives to children placed in DHHS 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.

DCFS will retain good foster homes by ensuring good communication with and support to those homes.

**PROCEDURE (VII-A1): Foster Parent Recruitment**

The purpose of foster parent recruitment is to increase the number of qualified, trained family foster parents in Arkansas through the recruitment process. Each Area will develop Recruiters to assist in the recruitment process, and Foster Home Evaluators to conduct the In-Home Consultation Visit and ensure that the family completes the approval process. These evaluators will be contracted or designated staff. Each Area will develop an annual recruitment plan to be initiated at the beginning of each fiscal year. The Family Foster Home Needs Assessment (CFS-445) will be utilized in the development of the recruitment plan. The CFS-445 will be conducted at least annually. The plan will outline ongoing recruitment efforts for the Area.

Some examples of recruitment are:

- Involvement of present foster parents. Foster parents can be encouraged to make:
  - One-to-one contacts;
  - Speaking engagements;
  - Active coordination with professional people and minority groups to create public interest.
• Contact with community organizations, faith-based organizations, the media (newspaper, radio, and television), dissemination of fliers and brochures, and manning booths at county fairs and other such community activities.

• One county, several counties or an Area may conduct a community outreach recruitment meeting to share information with the community on the requirements to become a foster family. Community orientation sessions are encouraged and can be used as a tool to promote foster family recruitment.

• Volunteer groups to create public awareness of county needs.

The Area Manager or designee will:

• Conduct an annual assessment of current foster homes and identify the need for additional foster homes by utilizing the CFS-445.

• Submit the CFS-445, referrals and inquiries to the Foster Home Evaluator.

INQUIRY

NOTE: The entire process from initiation of a foster parent inquiry to approval for training is processed through an automated tracking system in the Inquiry Screen. Only when the automated system (Internet/Intranet) is down will manual processing of information be necessary (i.e., use of the CFS-413 [Foster Care/Adoption Inquiry] or CFS-563 [Foster Parent/Adoptive Parent Recruitment Log]).

The DCFS County Supervisor will designate a staff person to accept all inquiry calls. It is imperative to acknowledge any inquiry that is made. When an inquiry is made, the staff person will give a brief explanation of the county foster care needs, correct any misinformation the caller may have and explain the Pre-Service training and assessment process. The designated staff person will log all inquiries on the DCFS Foster/Adoptive Home inquiry screen on DHHS Gold, hovering over the “Program, Policy and Procedures Manuals” icon and selecting “Inquiry to Become a Foster/Adoptive Parent”. The CFS-413 (Foster Care/Adoption Inquiry) can be used to log the inquiry if the inquiry screen on the Internet cannot be accessed.

Prospective foster parents can log on to the State of Arkansas/DCFS/Foster Families Internet website page and make an inquiry. Notification of Internet inquiries made by prospective foster parents will go directly to the Area Manager. The Area Manager will assign the inquiry to the designated Foster Care Resource staff person. The Area Manager must assign a designated staff person when they are out of the office to ensure timely responses to inquiries.

After either a telephone inquiry received by staff, or an Internet inquiry made by a prospective foster parent, the designated staff person must make contact with the family within three (3) working days of the inquiry. Initial contact will be via telephone, mail or visit on all referrals and inquiries received. The designated staff person will document contact on the DCFS Foster/Adopt Home Inquiry screen located on DHHS Gold (hover on Program Policies and Procedures books). If the Internet is down, use the CFS-563 (Foster Parent/Adoptive Parent Recruitment Log) to document contact. Transfer information listed on the CFS-563 to the DCFS Foster/Adopt Home Inquiry screen when Internet use returns.

After initial contact is made, provide the family with an information packet. The information packet will consist of a letter identifying a contact person, a brochure titled “Foster Parenting A Little Goes a Long Way” and a copy of PUB-022 (Standards for Approval of Foster Family Homes). The initial contact letter is located on the Foster/Adoptive Home Inquiry screen. Copies of the brochure can be obtained from the DCFS Foster Care Unit. The information packet must be sent to the family within three (3) working days of the initial inquiry.
IN-HOME CONSULTATION VISIT

The Foster Home Evaluator will:

- Within ten (10) working days after initial contact, conduct an in-home consultation visit with the prospective foster parent for the following reasons:
  - Review and complete the In-Home Consultation Visit Report (CFS-446).
  - Discuss the standards for approval of foster parents as outlined in PUB-22.
  - Advise the prospective foster parent of his right to voluntarily withdraw his consideration to be a foster parent.
  - Inform the prospective foster parent of the possibility that he may not be approved to become a foster parent if he does not meet minimum qualifications.
  - Discuss training requirements including completion of CPR and First Aid Training and certification prior to approval; and inform the prospective foster parent of his responsibility to obtain the CPR and First Aid Training and certification prior to approval. Both heads of households must obtain certification. Advise the prospective foster parent that training and certification will only be accepted from a certified trainer associated with the American Heart Association, the National Safety Council or the American Red Cross. First Aid training provided through the National Safety Council must be the Standard First Aid, not Basic First Aid. All CPR classes must cover infant, child and adult methods. The prospective foster parent must obtain a certification card from the trainer representing the certifying national organization. In addition, advise the prospective foster parent that DCFS staff will coordinate the CPR and First Aid training with the national organization, instead of the prospective foster parent arranging their own training sessions. Document information on the inquiry screen.
  - Distribute and review the Arkansas State Vehicle Safety Program (ASVSP) Foster Parents/Applicants with the family. Complete with the family the CFS-593 (Additional Requirements for DCFS Drivers), Form VSP-1 (Authorization to Operate State Vehicles and Private Vehicles on State Business) and Form VSP-2 (Authorization on Obtain Traffic Violation Record). Submit the signed forms along with a legible copy of the prospective foster family’s driver licenses to the DCFS Office of Financial and Administrative Support Unit. The front and back of the driver’s license must be copied. The county office must receive the results of the Arkansas State Vehicle Safety Program check before the family can be approved for training. Document on the inquiry screen.
  - Per PUB-04 (Minimum Licensing Standards), foster parents shall allow foster children to be transported only by persons having a valid driver’s license. Teenage drivers in the home will be subjected to the ASVSP and must be licensed if they will be allowed to transport foster children who are placed in the home. The result of the teenager’s ASVSP report should not impact the decision to approve the home as long as the parent’s ASVSP check is favorable. If the teenager’s report is negative he will not be able to transport foster children.
  - Unless the Foster Home Evaluator has already excluded the prospective foster parent applicant, distribute and complete with the family the CFS-316 (Request for CPS Central Registry Check), CFS-342A (Foster Care Criminal Record Check [requires a notary]), CFS-349B (Request for Local Criminal Record Check of Foster Parents), an FBI criminal record check, and CFS-450 (Family Foster Home Study Application), as appropriate. Obtain all appropriate signatures on each form. Document on the inquiry screen.
• 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. The CFS-316 must be submitted for checks by the designated DCFS staff person and routed to the DCFS Child Protective Services Unit. Document on the inquiry screen.

• 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. The CFS-342A must be submitted for checks by the designated DCFS staff person and routed to the DCFS Foster Care Unit. Document on the inquiry screen.

• The CFS-349B must be completed for each household member age fourteen (14) years and older. The CFS-349B must be submitted for checks by the designated DCFS staff person. Local background checks are to be repeated every two (2) years. Document on the inquiry screen.

• An FBI criminal record check must be requested 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. The designated DCFS staff person will be responsible for submitting the FBI check. Inform the family that they are responsible for paying for the FBI check and ensure that the family completes the FBI print card with good, un-smudged prints. If the prints are not readable the family will have to re-submit and pay for a new check. Document on the inquiry screen.

• NOTE: You must have the results of the Motor Vehicle Safety program before you can recommend a family for pre-service training. The results of the criminal background checks or Central Registry checks are not required to recommend a prospective family for training. However, if the results of a check are received before the completion of the in-home consultation and the results include a negative finding, then the family cannot be recommended for training. See procedure VII-A5 (Denial of a Foster Home). Document on the inquiry screen.

• Within 30 calendar days of the initial contact and in-home consultation, submit the signed and completed CFS-446 (In Home Consultation Visit Report) to the DCFS County Supervisor with one of the following recommendations:
  • Invite the applicant to attend Pre-Service Training, or
  • Do not invite the applicant to Pre-Service Training and provide an explanation, i.e., the applicant fails to meet standards.

**SELECTION FOR PRE-SERVICE TRAINING**

The DCFS County Supervisor/or Designated Supervisor will:

• Log receipt of the CFS-446 on the DCFS Foster/Adopt Home Inquiry screen located on the Intranet. If the Intranet is down, use the CFS-563 (Foster Parent/Adoptive Parent Recruitment Log) to document contact. If the CFS-563 is used to document contact, then follow up and document the information on the inquiry screens on the Intranet for reporting and tracking purposes.

• Note approval or disapproval of recommendation within five (5) working days of submission of the CFS-446 by the Foster Home Evaluator.
- Either approve or disapprove the recommendation of the Foster Home Evaluator. Enter recommendation in the Inquiry screen. The system will automatically notify MidSouth of approval status.

- Sign and return the CFS-446 to the Foster Home Evaluator.

- Send letter to applicants who were not approved to attend Pre-Service Training, forward a copy of the letter to the Foster Home Evaluator, and log notice of non-selection on the DCFS Foster/Adopt Home Inquiry screen located on the Intranet. If the Intranet is down, use the CFS-563 (Foster Parent/Adoptive Parent Recruitment Log) to document contact. If the CFS-563 is used to document contact, then follow up and document the information on the inquiry screens on the Intranet for reporting and tracking purposes.

- Submit the completed CFS-316 (Request for CPS Central Registry Check), CFS-342A (Foster Care Criminal Record Check), CFS-349B (Request for Local Criminal Record Check) and FBI criminal record check to respective agencies responsible for the checks. Submit completed forms for checks on the same day that approval is sent to MidSouth. Document the date the forms were submitted in the “Inquiry” screen on the Intranet. If a fee is charged for conducting the local criminal record check, forward the bill to the DCFS Chief Fiscal Officer, Slot S561.)

The Foster Home Evaluator/Designated Supervisor will, within five (5) working days of approval:

- Invite approved applicant to Pre-Service Training.

- Submit a copy of the following to the prospective foster parents with a copy to the foster parent trainer (MidSouth):
  - The CFS-446 approving the family to attend Pre-Service Training.
  - The family’s completed and signed CFS-316, CFS-342A, and CFS-349B. The CFS-316, CFS-342A, CFS-349B and FBI check must be submitted for checks by the designated DCFS staff upon completion. The forms must be submitted prior to the family attending training, however, the results are NOT required before the family can attend training.
  - Cover letter to the prospective foster family that will:
    - Inform the prospective foster parent of approval to attend Pre-Service Training.
    - Inform the prospective foster parent that the trainer (MidSouth) will contact them to schedule the Pre-Service Training session.
    - If the CFS-450 (Family Foster Home Study Application) was not previously completed, instruct prospective foster parent to complete the CFS-450 and submit it at the first Pre-Service Training Session.
    - Remind prospective foster parent of their responsibility to secure CPR and First Aid Training and certification prior to approval.

Counties or Areas may conduct pre-orientation sessions to further clarify the foster parent application process, to collect paperwork from prospective families, and to notarize criminal background checks. If a pre-orientation session is held, the session will count as 1½ hours towards the 30 hours needed for pre-service training.
PROCEDURE (VII-A2): Foster Parent Training

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

- Submit the completed 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.
- Maintain current CPR certification and First Aid training. Maintenance of CPR certification and First Aid training is in addition to the fifteen (15) hours of continuing education and cannot be counted as part of the continuing education.
- Submit a TR-I within 30 days of completing training to receive reimbursement for CPR Certification and First Aid training.

The Family Service Worker or Designee will:

- Refer to PUB-022 (Standards for Approval of Family Foster Homes) for training requirements.
- Maintain an “Individual Training Record Report” (CFS-6058) to include the Individual Training Needs Assessment (ITNA) for each foster parent.

Enter the foster parents’ hours of in-service training on the “Training” screen in CHRIS.

PROCEDURE (VII-A3): Approval of Foster Home

Prospective foster families must complete a home evaluation as part of the process to become an approved foster family. A family can be evaluated by designated Division staff or by staff contracted through the MidSouth Training Academy. These staff are responsible for the following:

- Completing a home study on the family. The home study must address and describe the family’s compliance to the standards listed in PUB-022 (Standards for Approval of Family Foster Homes).
- Completing the approval process based upon the Division’s “Standards for Approval of Family Foster Homes” (PUB-022).
- Submitting the completed home study to the DCFS County Supervisor for review within 30 days of the family completing pre-service training, with a recommendation for approval/denial.

The DCFS County Supervisor will:

- Make a final face-to-face visit to the prospective foster family home recommended for approval.
- Enter a disposition as to the approval/denial of the foster home within 30 days of receipt of the home study from the Evaluator. If the recommendation is approval, then:
• Complete the CFS-475 (Checklist for Compliance).

• Schedule a date for a County or Area Orientation Session for newly approved foster parents.

• Send a “Letter of Approval” to the foster family and invite the foster family to the County or Area Orientation Session.

Enter approval in the Inquiry screen. If the Internet is down, use the CFS-563 (Foster Parent/Adoptive Parent Recruitment Log) to document approval. Transfer information listed on the CFS-563 to the Inquiry screen when Internet use returns.

If the recommendation is denial, send a “Letter of Denial” to those applicants who were not approved. (See Procedure VII-A5 [Denial of a Foster Home].) Document denial on the Inquiry screen. If the Internet is down, use the CFS-563 (Foster Parent/Adoptive Parent Recruitment Log) to document denial. Transfer information listed on the CFS-563 to the Inquiry screen when Internet use returns.

DCFS County Supervisor or Designee will:

• Hold the Area or County Orientation Session. At the Orientation Session, County or Area staff will, at a minimum, provide each foster family with a new foster parent packet and review the packet content with the foster parents. The packet will include a Certificate of Approval, a Foster Parent Handbook (PUB-30), a foster parent journal, a supply of TR-1s and any other forms deemed necessary.

The Placement Supervisor, DCFS County Supervisor or Area Manager 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

The Family Service Worker will:

• 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-A4): Re-evaluation of the Foster Home

The Foster Home Evaluator will:

• Complete the Individual Training Needs Assessment in conjunction with the foster parent.
• Complete the CFS-475 (Checklist for Compliance).
• Complete the “Family Foster Parent Re-evaluation” (CFS-451).
• Re-evaluate the foster home annually. Please note: The completion and approval of all foster home re-evaluations must be documented in CHRIS. If a foster family re-evaluation is not completed and documented annually in CHRIS, any IV-E eligible child placed in the home will lose his IV-E eligibility until the re-evaluation of the family is completed and documented.
• 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.
  • The 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.
  • Submit documentation to the DCFS County Supervisor or Designee.
  • Enter appropriate data in CHRIS.

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.
Procedure (VII-A5) Denial of a Foster Home

Non-Approval as a Result of the In-Home Consultation Visit Report:

- The Foster Home Evaluator will inform the family of their non-compliance with any identified standard. If there is a standard that the family can correct, a corrective action plan will be documented on the In-Home Consultation Visit Report (CFS-446) with identified time frames and persons responsible for achievement. The family cannot be approved to attend training until the corrective action is completed.

- The Foster Home Evaluator will recommend non-approval for training if the family cannot comply with all approval standards, including if they receive a negative result from the Vehicle Safety Program.

- The non-compliance will be shared with the family by the Foster Home Evaluator and documented on the CFS-446. The family will sign the In-Home-Consultation acknowledging non-compliance. The County Supervisor will disapprove the family and the family will be given a copy of the CFS-446 with all signatures.

Negative Results of a Background Check:

- If a negative result from a background check is received before a family starts training, the County Supervisor/Designee will share the results with the family and inform them of their ineligibility to attend training.

- The County Supervisor will send a “Letter of Denial” to the applicant.

- Document the results of the background check and the date the “Letter of Denial” is sent in the Inquiry Screen on DHHS Gold.

Non-Approval of the home:

- The County Supervisor will send a “Letter of Denial” to all applicants who are not approved.

- Document in the Inquiry Screen the reason for denial and the date the “Letter of Denial” was sent.

Procedure (VII-A6) Foster Parent Retention

The Family Service Worker will follow the guidelines below to ensure good casework practice to retain foster parents:

- Ensure good communication among all team members, as well as mutual respect, understanding, and honesty are essential elements of the team effort. All team members share the responsibility for ensuring the lines of communication are kept open and in use.

- Keep foster parents informed of DCFS programs, services, and policies that relate to foster family care.

- Discuss and assist with the completion of the Initial Foster Family Agreement (CFS-462) and Foster Home Agreement Addendum (CFS-462A) and compliance with the terms.

- Support foster homes as needed to adequately serve children.

- Provide foster parents with telephone numbers of the assigned Family Service Worker at the time of placement. Foster parents will be provided a list of after hours DCFS contacts and numbers.

- Inform foster parents of their access to a grievance procedure when differences arise with DCFS which have not been resolved to the foster parents satisfaction, as outlined in the Family Foster Parent Handbook (PUB-030).
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, education records, 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.
- Review and update the child’s health and education records, and provide copies to the out-of-home care provider at the time of placement.
- 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 for the first month of placement into foster care or a new foster home. Visitation after the first month in care will occur monthly in the foster home, with the worker maintaining weekly contact with the child through the following settings: school, parental visits, during transportation to medical appointments, court hearings or via telephone.

The purpose of these visits shall be to:

- Keep open communication with the age-appropriate child;
- Engage the child and foster parents, as appropriate, in activities geared to accomplish case plan goals and to assure the child’s needs are being met;
- Assess the quality of the care being provided;
- Determine the extent to which the child’s developmental, medical, intellectual, and emotional needs are being met; and
- 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 for the first month of placement or placement in a new foster home. Visits by other DCFS staff (e.g., SSA, Supervisor) will count as a weekly visit after the case has been opened 30 days.
- Visit the child in the foster placement monthly and document visits in the contact screens in CHRIS. Visits by other DCFS staff will not count towards the worker’s required monthly visit.
- Maintain weekly contact with the child in foster care. Weekly contact can be face-to-face in other settings (e.g., school, during parental visits, during transportation to medical visits, after a court hearing, or via telephone). Document weekly contacts in the contact screens in CHRIS.
• Report to the Child Abuse Hotline immediately if the child is the subject of an allegation of child maltreatment, and then immediately notify the child’s custodial/non-custodial parent(s), the OCC Attorney and Attorney Ad Litem.

• Follow up immediate notification by forwarding a copy of the CFS-310 (Notice of Child Maltreatment Allegation) immediately, but no later than five (5) business days, to the child’s custodial/non-custodial parent(s), Attorney Ad Litem and OCC Attorney whenever the child is the victim or offender named in an allegation of child maltreatment.

• Notify Attorneys ad litem, via the CFS-310, immediately, but no later than five (5) business days, for all the children placed in the same 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. Within twenty-four (24) hours of the emergency change in placement, DHHS shall notify the custodial/non-custodial parent(s), the OCC Attorney and the child’s Attorney Ad Litem of the change via the CFS-300 (Parent/Attorney Ad Litem Notification of Change). DHHS shall provide written notice to the Attorney Ad Litem with the name and address of the new out-of-home placement provider. Within seventy-two (72) hours of the emergency change in placement, DHHS shall provide written notice to the OCC Attorney and Attorney Ad Litem for the specific reasons justifying the change of placement without advance notice.

If an agent, employee, or contractor of DHHS fails to comply with the emergency notice of change in placement requirements, then an action for violation of the requirement may be filed by any party to the action against the person who failed to comply with the requirement. The court will determine the assessment of punishment with the most probable punishment being cited as contempt of court.

If the court finds the agent, employee, or contractor of DHHS failed to comply with the requirement, then the court may order DHHS or the agent, employee, or contractor to pay all of the costs of the proceedings brought under this requirement.

When a foster parent requests a foster child be removed from their home, excluding an emergency that places the child or a family member at risk of harm, the foster parent must attend a staffing to discuss what services or assistance may be needed to stabilize the placement. The staffing will be held within 48 hours of notification by the foster parent to remove the child from their home. The foster child, the child’s Attorney Ad Litem and a CASA, if appointed to the case, shall be notified so that they can attend and participate in the staffing and planning for the child’s placement. If the placement cannot be stabilized the foster parent will continue to provide for the foster child until an appropriate alternative placement is located, but this shall not be longer than five (5) business days. These efforts will serve to reduce the number of placements of children in foster care.

The DCFS 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, a juvenile detention center, placed with a relative (non-kinship care), on runaway status, or on a trial placement, etc. The child’s Medicaid case will close the date the child’s foster care case is closed.
Children who are in the custody of the Department shall be allowed trial placements with parents, for a period not to exceed thirty (30) days. At the end of the thirty (30) days, the court shall either place custody of the child with the parent or the Department shall return the child to a licensed or approved foster home, shelter, or facility, or an exempt child welfare agency as defined by A.C.A. §9-28-402. To comply with Title IV-E eligibility requirements, trial placement must occur in the home of the custodial/non-custodial parent(s) and may not exceed six (6) months in duration, unless a court orders a longer trial home visit. If a trial placement extends beyond six (6) months and has not been authorized by the court, or exceeds the time period the court has deemed appropriate, and the child is subsequently returned to foster care, that placement must then be considered a new placement, and Title IV-E must be newly established. Under these circumstances, judicial determinations regarding “contrary to the welfare” and reasonable efforts to prevent removal are required. Trial home visits will not exceed thirty (30) days for all children who are placed in the custody of the Department whether the child is IV-E eligible or not.

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 summary 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 via the CFS-300 (Parent/Attorney Ad Litem Notification of Change in Placement) 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. The CFS-300 must be given to all parties listed for all planned or emergency changes in placement.

- 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 in CHRISt.

- 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 OCC Attorney, Attorney Ad Litem and the child’s parent by phone or in person within 24 hours of the change in placement, when a placement is an emergency. If the whereabouts of the parent are unknown, reasonable diligence to locate the parents must be made and documented.

- Complete and fax or hand deliver the CFS-300 to the Attorney Ad Litem within 72 hours of the move. The top portion of the CFS-300 is to be completed only for the child’s parent and the entire form must be completed for the notification to the Attorney Ad Litem.

- 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. Updating the placement information will open a response window to notify the Eligibility Unit of the placement change.

• Document submission of the CFS-300 and CFS-495 in the CHRIS Document Tracking Screen.

If a request for removal is made by the foster parent:

The Family Service Worker will:

• Hold a staffing within 48 hours of notification of a request for removal from the foster parent. If the request is made on the weekend or a holiday, the staffing must be held by the close of business of the next working day.

• Remove the child immediately without holding a staffing if the request for removal from the foster parent meets the definition for “imminent harm”. Imminent harm is defined as an emergency that places the child or a family member at risk of harm.

• Prepare immediate notification of a staffing to be given to the OCC Attorney, Attorney Ad Litem, CASA, and the foster child if age appropriate. If appropriate, request that a licensed mental health professional or private mental health provider attend, or otherwise participate, in the staffing. The notification can be by phone, fax, or email. Ensure that you have a way of contacting the Attorney Ad Litem and CASA immediately. This staffing and notification does not impact required staffings and should only be conducted to help stabilize the placement and/or planning for the child’s placement.

• Make an appropriate alternative placement within five (5) business days from the request, if the placement cannot be stabilized.

These requirements do not apply to planned moves, or planned placements, or to respite care.

PROCEDURE (VII-D2): When A Foster Child Runs Away

Out-of-home placement providers (foster parents, shelters and residential facilities) need to be aware that there are instances when a child will leave a placement without authorization (runs away). If it is suspected that a child has run away, the out-of-home provider should begin an immediate search for the child. The search will entail the following actions: (1) searching the immediate premises (2) searching the community and (3) contacting the child’s friends and family members who may know of, or have clues about, the child’s whereabouts. If the child cannot be located within two (2) hours, the out-of-home provider shall notify their Family Service Worker or the DCFS County Supervisor. (If a foster child is placed in a facility or shelter outside of the initiating county, the Family Service Worker in the resident county shall be responsible for notifying the initiating county Family Service Worker of the child’s runaway status, in accordance with Procedure III-A4.)

After notification of the child’s disappearance by the foster parent, shelter or residential facility, the Family Service Worker or DCFS County Supervisor will:

• Notify the Area Manager.

• Notify the local police department, state police, sheriff’s office and the child’s Attorney Ad Litem, give a description of the child and contact OCC for a pick-up order. A picture of the child can be released to assist with identification provided that the child is not identified as a foster child.

• Contact OCC who will then notify the judge who has jurisdiction. If the child is from another county, the resident county Family Service Worker will notify the initiating county Family Service Worker to contact OCC.
• If the child’s home is in another county, or if the custodial/non-custodial parent(s) or relatives live in another county, the Family Service Worker in the family’s resident county should be notified to alert the local police and sheriff’s department to look for the child.

• Notify the child’s custodial/non-custodial parent(s) within two (2) hours, or sooner depending on the age of the child, of the discovery of the child’s disappearance by phone or visit to the home. If the custodial/non-custodial parent(s) current or correct address or telephone number is unknown, a letter should be written to their last known address. If the custodial/non-custodial parent(s) are in another county the Family Service Worker in that county will assume responsibility for notifying the custodial/non-custodial parent(s).

• If the child has indicated a destination, the police in the designated area should be notified to look for the child and whom to notify if the child is picked up.

• Update the child’s placement information in CHRIS. Updating the placement information will open a response window to notify the DCFS Eligibility Unit of the placement change.

• Complete and transmit the DHHS Incident Reporting Screen data fields in IRIS to the DCFS Director’s office and the DHHS Director’s office, via the Client Advocate, no later than the end of the second business day following the incident. (See DHHS Policy 1090 “Incident Reporting”.)

• As soon as the child is found, call, or email, each person, and unit that has been alerted, and let them know the child has been located.

• When an Arkansas foster child has run away and is located in another state, the Administrator of the Interstate Compact on Juveniles (ICJ) should be notified. The Division of Youth Services administers the Interstate Compact on Juveniles.

• ICJ will process all out-of-state runaways (probationers, runaways, foster children).

• Foster children who are located after they run away from Interstate Compact on the Placement of Children (ICPC) approved placements are handled by the DCFS ICPC office. However, if a pick-up order is issued, ICJ is responsible.

• Neither ICJ nor ICPC are responsible for children that are kidnapped (by either a custodial or non-custodial parent) in one state and taken to another state. These situations are a matter between the legal custodian and law enforcement.

• If the child is not found, continue to call previously contacted parties and inquire for information, furnish further information that becomes available, and if appropriate, extend the search to other counties and states. Advise the court of jurisdiction of the status of the runaway foster child. Frequent contacts, not less than monthly, should be made with the custodial/non-custodial parent(s) to assure them that the search continues.

• Submit a follow-up or final report on the DHHS-1910, in IRIS, as warranted by the circumstances. The follow-up report should be submitted to the DCFS Director and DHHS Director’s office as soon as additional information becomes available.

• Update the child’s placement status in CHRIS.
POLICY (VII-E): FINANCIAL SUPPORT TO FOSTER PARENTS

Title IV-E foster care maintenance payments for a child in foster care may cover the costs of (and the cost of providing) food, clothing, shelter, daily supervision, school supplies, a child’s personal incidentals, liability insurance with respect to the child, and reasonable travel to the child’s home for visitation with family or other caretakers. Local travel associated with the preceding list of items are also an allowable expense.

Foster care maintenance payments made on behalf of a child placed in a family foster home or child care institution, who is the parent of a child in the same home or institution, include amounts which are necessary to cover costs incurred on behalf of the child’s son or daughter. The costs are limited to funds expended on those items described above.

The Division shall provide foster parents with a monthly board payment as an aid to cover the items listed above for each child receiving out-of-home placement services. When foster parents are caring for a child with special needs and the child’s needs cannot be met with the regular board payment, the Division may provide the foster parents with an additional payment to cover the extra expenses incurred. The amount of these higher, special board rates will be based on the nature and extent of the child’s special needs. The amount of this additional monthly payment will not exceed $460.00 above the standard board rate for the child’s age group. However, if the child is SSI eligible, the rate can go up $460.00 above the SSI rate.

Special board rates exceeding $935.00 will be forwarded to the DCFS Assistant Director, Community Services, for approval. 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.
- Have the authority to approve all Special Board Rates up to $935.00.
- 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. A Special Board Rate becomes effective the day the Area Manager or Assistant Director, as appropriate, approves it. Retroactive payments will be determined on a case-by-case basis and must be approved by the Assistant Director, Community Services.
- 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 DCFS Assistant Director, Community Services will:

• Have the authority to approve or disapprove all Special Board Rates over $935.00
• Receive completed request packets for special board rates over $935.00 from Area Managers.
• Check each request packet for completeness to include –
  • A completed CFS-304 (Justification for Special Board Rate).
  • Clear and convincing documentation of any emotional, physical and/or auxiliary problems the child has that may justify a special board rate.
  • The Area Manager’s dated signature on the CFS-304 as evidence of his review.
  • A Cover Memo from the Area Manager to the Assistant Director that:
    • Identifies the proposed subsidy as over $935.00.
    • Provides a justification for the proposed special subsidy, and
    • Makes a recommendation regarding approval or disapproval.
• Review the request for appropriateness and consider the Area Manager’s recommendation
• Refer the request to the Foster Care Unit Manager for technical assistance if desired.
• Reach a disposition regarding the request within three (3) working days.
• Inform the requesting Area Manager in writing of the request’s disposition and reasons for approval or disapproval.

The Foster Care Unit Manager will:

• Provide only technical assistance when requested regarding special board rates.
• Return the request to the Area Manager or Assistant Director, as appropriate, for his decision and action.

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 enter the total specialized board amount into the Authorized 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 childcare 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 DHHS-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 childcare, 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

The Division of Children and Family Services is responsible for administering the Chafee Foster Care Independence Program (CFCIP). Each child in DHHS custody, age fourteen or older, is eligible for the Chafee Foster Care Independence Program (CFCIP). CFCIP was created by federal legislation to provide services to youth in foster care that are normally unavailable through other program funds, such as Title IV-E Foster Care Maintenance Payments. Services provided are primarily educational and are intended to keep youth in school while they obtain life-skills that will assist them in transitioning to adulthood. The program coordinates age-appropriate life skills training for eligible youth who are likely to remain in foster care until age 18. CFCIP provides support for three groups of the foster care population. (A) CFCIP provides support for children in foster care ages 14-17. Services for this age group include the Ansell-Casey Life Skills Assessment, basic life skills training, and other services such as tutoring that can be approved on a case-by-case basis. (B) Children who remain in DHHS custody, between the ages of 18 and 21 and are engaged in post-secondary education, including vocational training, are eligible for CFCIP. (C) If a youth was in foster care on his 18th birthday, and his foster care case is closed, he will be eligible for CFCIP “After Care” and can receive assistance until age 21. After Care services include limited room and board, limited start-up assistance, staff services and life-skills training sessions to acquire needed skills. PUB-404 (Chafee Foster Care Independence Program Handbook) provides additional information concerning CFCIP and service availability and should be referenced when implementing these policies.

Youth entering foster care between the ages of 14 and 18 will be immediately referred to the CFCIP coordinator to determine eligibility and be immediately assessed for basic life skills abilities. Assessments and age-appropriate services will begin at age 14 for youth already in foster care.

DCFS shall provide those services identified in the Ansell-Casey assessment that are necessary to help the child achieve independence, either directly or through contract. The case plan must identify and address the specific independent living skill needs of each child receiving CFCIP. Each child age 14-17 receiving Independent Living Services shall be assessed every six (6) months to determine the progress in acquiring basic life skills. Basic life skills will be assessed at each staffing held for a child in out-of-home placement receiving CFCIP.

If a youth was in foster care on or after his 14th birthday and was adopted before his 18th birthday, he will be eligible for CFCIP services until his 21st birthday.

According to federal interpretation, youth who are incarcerated are not in foster care and are, therefore, ineligible for CFCIP services.

In cases where the court orders CFCIP services for a child younger than 14 or a child is more mature and needs basic life skills training, the DCFS County Supervisor and/or Area Manager may grant a waiver for services.

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.

The Family Service Worker will:

- Complete the Chafee Foster Care Independence Grant Program Referral Form (CFS-001) on all youth entering foster care between the ages of 14 and 18. The CFS-001 will be completed also on youth who turn 14 while in foster care. All teens must be assessed for Life-Skills within 30 days of entering care or within 30 days after their 14th birthday. The CFS-001 must be submitted 10 days after the youth enters care or 10 days after the 14th birthday.

- Forward the completed and signed CFS-001 to the CFCIP Coordinator for eligibility determination. The youth must sign the CFS-001 to be eligible for CFCIP.

- Document in CHRIS ILP screen youth’s eligibility or ineligibility. If the youth is eligible, the worker will notify the County Supervisor who will e-mail the CFCIP Supervisor asking them to assign the CFCIP Coordinator as secondary worker.

- If the youth has been determined ineligible or unable to receive CFCIP services, send documentation to the CFCIP Coordinator along with the CFS-001.

- Assist the youth in completing the Ansell/Casey Life-Skills Assessment. (The CFCIP Coordinator is responsible for ensuring the completion of the initial assessment.)

- Conduct a staffing with the CFCIP Coordinator, the foster child, foster parents and child’s parent(s) (if appropriate), to develop a case plan that will address the results of the assessment.

- Develop an initial CFCIP Participation Agreement with the youth. Use PUB-404 (Chafee Foster Care Independence Program Handbook) as a guide in developing the agreement. A sample agreement is in the PUB-404. The youth, foster parents, sponsor, CFCIP Coordinator, FSW, FSW Supervisor and the Attorney ad Litem must sign the contract.

- Complete the case plan and ILP screen after the staffing.

- Ensure that each youth age 14-17 is assessed every six (6) months to determine the level of basic life skills, and complete the Independent Living “IL” screen in the Case Plan section of CHRIS. Share the reassessment results with the CFCIP Coordinator and document the reasons for non-completion.

- Schedule a staffing when the youth is between the age of 17-17½ or the beginning of their final high school year whichever occurs last to determine the post-secondary education plans or plans to transition from foster care to independence. Complete the CFS-460 (Plan for Foster Child Attaining Majority).

- Update the child’s CHRIS file for Independent Living Information and life-skills training sessions.

- Coordinate transportation to life skills training with the foster parent or caretaker.

- 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.

- Key into CHRIS all pertinent information changes, including the change of address, any status changes and foster parent, sponsor or facility placement prior to or by the time of transfer so that current information is available in CHRIS. Information changes that occur after the transfer should be keyed by the FSW/Coordinator in the county of residence.
CHRIS instructions for FSW Caseworker/Supervisor:

- Document the date that the signed CFS-001 (CFCIP Referral) was routed to the CFCIP Coordinator in the document tracking screen.
- FSW Supervisor will request that the CFCIP Supervisor assign the CFCIP Coordinator secondary responsibility in the youth’s case.
- Document the date that the CFCIP Contract/Agreement with the youth was signed and routed to all involved parties in the Document Tracking screen.
- Document the Chafee Foster Care Independence Grant Program as a Service in the youth’s Services Offered/Delivered screen.
- Document the specific Life Skills in the youth’s Placement Plan Child Information screen.
- Document the specific ILP needs/services in the youth’s Treatment Plan Needs Based Services screen.
- Document the ILP services in the Independent Living Screen.

**NOTE:** If the client transfers to another county, the supervisor in the transferring county should immediately notify, by email, the supervisor and the CFCIP Supervisor in the receiving county that the client is transferring. The receiving supervisor should then make secondary caseload assignments to the Family Service Worker and the CFCIP Coordinator and directly notify the FSW and CFCIP Coordinator of the assignment. All workload assignments will go through the Coordinator’s immediate supervisor and not the individual county supervisors.

If a client is transferred to another Area/County, the Family Service Worker in the residence Area/County should assist in obtaining an assessment/reassessment if the date occurs while the client is in the other county.

- Transfer case files and all records of life-skills training sessions attended, skills acquired or mastered and copies of assessment results to the FSW and CFCIP Coordinator in the county of residence to ensure that training needs and goals will continue to be addressed.
- Use PUB-404 as a resource in conducting all CFCIP activities.

The **CFCIP Coordinator** will:

- Review all submitted CFS-001’s to determine a youth’s eligibility for CFCIP services.
- Forward the CFS-001 to the referring FSW with a determination of the youth’s eligibility.
- Schedule a date and time with the youth’s FSW for the youth to complete the initial Ansell/Casey Basic Life Skills Assessment. If a teen enters foster care at the age of 14 or older, they will be assessed within 30 days after entry. All teens age 14-17 should be re-assessed at 6-month intervals after the initial assessment to determine acquisition of transitional life-skills.
- Ensure that the youth complete the Ansell/Casey Life-Skills Assessment within 30 days of entering care.
- Receive results of completed Ansell-Casey Life Skills Assessment and forward results to the child, Family Service Worker, and foster parents.
- Update the Contact Screen in CHRIS each time contact is made with a teen on their caseload. Contacts include group training sessions, face-to-face contact or contact by phone, and/or the teens attendance in life-skills training. Indicate the title or content and information concerning the teen’s participation.
• Develop life skills training resources.

• Complete the CFS-035 (Chafee Foster Care Independent Program (CFCIP) Statistical Summary) for monthly reporting of activities. Submit the CFS-035 to the Coordinator’s supervisor and the Central Office CFCIP Statewide Coordinator by the sixth (6th) day of the month.

• Use PUB-404 (Chafee Foster Care Independence Program Handbook) as a resource in conducting all CFCIP activities.

• Coordinate CFCIP activities with the FSW when appropriate.

CHRIS Instructions for CFCIP Coordinator:

• Document the completion of the initial Ansell/Casey Basic Life Skills Assessment and any re-assessments in the ILP screen.

• Document that the results of the Ansell/Casey Basic Life Skills Assessment were routed to the youth, FSW and foster parents/provider in the Document Tracking screen.

• Complete the Contact screen for all contacts with child and complete Education and Employment screens when appropriate.

• Document all contacts with youth on the Contact Screen.

• Document all CFCIP activities/services on the youth’s Services Offered/Delivered screen selecting Chafee Foster Care Independence Program (Resource 112416) as the Service Provider and complete the IL Subsidy Exceptional Amount field if ILP funds were authorized.

Please refer to Chafee Foster Care Independence Program Handbook (PUB-404), Appendix II, for a step by step outline of CHRIS Procedures when a youth is receiving ILP.
POLICY (VIII-B): CHAFEE FOSTER CARE INDEPENDENCE PROGRAM (CFCIP) POST SECONDARY AND AFTER CARE SERVICES

Ark. Code Ann. § 9-27-303 defines a juvenile as 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 the juvenile remain within the court’s jurisdiction past the age of twenty-one (21) years.

Juveniles who request to remain in foster care and are enrolled in a post-secondary educational program such as public or private school, pursuit of a GED, vocational-technical school, rehabilitative training, trade or specialty school are eligible for CFCIP services. Post Secondary services are identified in PUB-404 (Chafee Foster Care Independence Program Handbook). Room and board expenses cannot be paid for with CFCIP funds for youth in foster care under the age 18 or for youth who choose to voluntarily remain in foster care after age 18. Board payments must be made through Title IV-E funds for teens under age 18. Board payments for youth age 18 and older remaining in care and not in a foster home must be paid using State General Revenue funds.

CFCIP funds can be used to provide assistance and services to children who have left foster care because they have attained 18 years of age and who have not attained 21 years of age. These services are called CFCIP After Care services. The youth must have been in foster care on their 18th birthday and currently is not in DHHS custody to be eligible for After Care services. PUB-404 outlines the available After Care services and must be used as a guide in providing all CFCIP services.

PROCEDURE (VIII-B1): CFCIP Post-Secondary Services

The Family Service Worker will:

- Conduct a staffing when the youth is between the age of 17-17 ½ to determine the youth’s plans when age 18 is reached. Complete the CFS-460 (Plan for Foster Child Attaining Majority). A determination of continued services, post-secondary education, employment, emancipation, housing and other factors should be made. The staffing should be attended by the foster parent(s), FSW Supervisor, sponsor (if selected), CFCIP Coordinator, the Attorney ad Litem, youth, and parent, if appropriate. Refer to PUB-404 (Chafee Foster Care Independence Program Handbook) for a list of allowable expenditures for “Post-Secondary Educational Services.”

**Issues to be addressed in the staffing include the following:**

- The school the youth will attend,
- Living arrangements,
- Choosing a sponsor,
- Budgeted income/expenses,
- Amount of board payment,
- Start-up items (see PUB-404 for list of allowable start up items),
• Transportation needs,

• Continued Life-Skills Training, and

• Continued assistance by DCFS/CFCIP to help youth remain in school.

• Revise the Chafee Foster Care Independence Program Contract with the youth, using Pub-404 as a guide. The youth, foster parents, CFCIP Coordinator, Attorney ad Litem, Family Service Worker and the Family Service Worker’s Supervisor must sign the contract.

• Assist the youth in determining whether they will live with a foster family, CFCIP Sponsor or in a school dormitory for their first school year.

• Revise the youth’s CFCIP contract/agreement to include IL residence requirements once a youth has obtained upperclassman status. These decisions must be based on the maturity level of the youth. Examples of independent living residences include boarding houses, apartments or residences for men and women operated by church or civic groups. Independent living residence services can only be used for youth who choose to remain in foster care after they turn 18 and will not be living in a foster home. Expenses for the residence cannot be paid with CFCIP funds. Board payments for youth age 18 and older remaining in care and not in a foster home must be paid using State General Revenue Funds.

• 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.

• 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.

• 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, if appropriate.

• 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.

• Assist the youth with managing their budget if selected as board payment payee.

• Visit the youth at least twice monthly.

• Notify the Family Service Worker of any problems detected during the visit.
CHRIS Instructions for FSW Caseworker/Supervisor:

- Document the signed Chafee Foster Care Independence Grant Program Referral Form (CFS-001) in the Document Tracking screen routed to the CFCIP Coordinator.

- FSW Supervisor will request that the CFCIP Supervisor assign the CFCIP Coordinator as Secondary Responsibility in the youth’s case.

- Document the signed CFCIP Contract/Agreement or any revisions with the youth in the Document Tracking screen routed to all involved parties.

- Document the Chafee Foster Care Independence Grant Program (Resource 112416) as a Service in the youth’s Services Offered/Delivered screen.

- Document the specific Life Skills in the youth’s Placement Plan Child Information screen.

- Document the specific ILP needs/services in the youth’s Treatment Plan Needs Based Services screen.

- Document the ILP services in the Independent Living Screen.

- If an ILP Sponsor is located, enter the ILP Sponsor as a Resource in CHRIS in order to place the youth in the ILP Sponsor’s home on the Enter/Exit screen.

CHRIS Instructions for CFCIP Coordinator:

- Document the completion of the initial Ansell/Casey Basic Life Skills Assessment and any re-assessments in the ILP screen.

- Document that the results of the Ansell/Casey Basic Life Skills Assessment were routed to the youth, FSW and foster parents/provider on the Document Tracking screen.

- Document all contacts with youth on the Contact screen.

- Document all CFCIP activities/services on the youth’s Services Offered/Delivered screen and complete the IL Subsidy Exceptional Amount field if ILP funds were authorized.
PROCEDURE (VIII-B2): CFCIP After Care Services

The County Supervisor will:

- Make a referral to the CFCIP Coordinator for After Care Services on the CFS-001A (CFCIP After Care Referral).
- Send a copy of the CFS-001A to the ILP Supervisor.
- Upon receipt of the CFS-001A approving the youth for service, re-open the youth’s closed child protective service case and assign the CFCIP Coordinator as the primary worker. If the youth is adopted, open a new case.
- Select Independent Living Program services as the case type.

Please note this information about the new Independent Living Program case type:

- Only a Supervisor can select this value in the Case Type field.
- Once an ILP case, always an ILP case (cannot be changed).
- Removal, Placement and Adoption buttons/screens are locked.
- No Ticklers in ILP case (no COR elements).

The CFCIP Coordinator will:

- If former foster youth, change the case type from Child Protective Services to Independent Living Program Services. If adoptive youth, leave case type as Independent Living Program and complete the Client General Information screen on youth.
- Complete the Contact screen for all contacts with child and complete Education and Employment screens when appropriate.
- Receive referrals (CFS-001A) for After Care Services and document in the Document Tracking screen in CHRIS.
- Complete the CFS-001A to approve the youth for services and obtain youth’s signature on the CFS-001A and document in the Document Tracking screen in CHRIS.
- Request supervisor to open a case to assist the youth to meet their immediate housing need.
- Documentation will include the type and extent of financial assistance to be provided. In CHRIS, complete Services Offered/Delivered screen selecting Independent Living Program-After Care Services (Resource 111074) as the Service Provider and completing status, frequency, dates and ILP Subsidy amounts fields.
- Assist the youth in selecting a residence that is appropriate for their immediate needs.
- Complete a Residence Checklist (CFS-370) to assure the residence and location are acceptable and document in the Document Tracking screen in CHRIS.
- Provide the youth with available alternatives for meeting their immediate housing needs, if appropriate.
- Recommend and arrange for any staff counseling or additional life-skills training that may be needed on the topics of money management, job search and housekeeping.
- Counsel the youth on the availability of community services or assistance and how to apply for assistance if the youth wishes to start or continue a post-secondary educational program.
  - All allowable payments must be made directly to one or more approved vendors.
- Submit purchase request(s) for payment of allowable assistance and document in the Document Tracking screen.
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 a child for adoptive placement, when it has been determined that reunification with the family is not a viable option.

The court may consider a petition to terminate parental rights if the court finds that there is an appropriate permanency placement plan for the child. It is not required that a permanency planning hearing be held as a prerequisite to the filing of a petition to terminate parental rights, or as a prerequisite to the court considering a petition to terminate parental rights.

The court shall authorize DHHS to file a petition to terminate parental rights unless: (a) The child is being cared for by a relative, including a minor foster child caring for his or her own child who is in foster care, and termination of parental rights is not in the best interest of the child; (b) DHHS 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) DHHS has not provided to the family of the child, consistent with the time period in the case plan, such services as DHHS 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 DHHS 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-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.

- The child has been determined by a court of competent jurisdiction to be an abandoned infant. The petition to terminate parental rights will be made within thirty (30) days of the judicial determination that the child is an abandoned infant.

- The parent has been convicted of a felony and the court determines no reunification services are required. (See Policy VI-A). The petition to terminate parental rights will be made within thirty (30) days of a judicial determination that reasonable efforts to reunify the child and parent are not required.

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 circuit 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.
NOTE: For the purpose of Title IV-E compliance, the Division will file or seek to join a petition to terminate the parental rights of a parent(s) whose child has been in foster care under the responsibility of the state for 15 of the most recent 22 months. The petition must be filed by the end of the child’s 15th month in foster care. In calculating when to file a petition for termination of parental rights, the Division:

1. Will calculate the 15 of the most recent 22 month period from the date the child entered foster care;
2. Will use a cumulative method of calculation when a child experiences multiple exits from and entries to foster care during the 22 month period;
3. Will not include trial placement or runaway episodes in calculating 15 months in foster care; and
4. Only apply the 15 of the most recent 22 month rule once if the state does not file a petition because of one of the following exceptions applies.

The state may elect not to file a petition or join a petition to terminate the parental rights of parent if:

a. At the option of the state, the child is being cared for by a relative, including a minor foster child caring for his or her own child who is in foster care.

b. DHHS has documented in the case plan (which must be available for court review) a compelling reason for determining that filing such a petition would not be in the best interests of the individual child.

c. DHHS has not provided to the family, consistent with the time period in the case plan, services that DHHS deems necessary for the safe return of the child to the home, when reasonable efforts to reunify the family are not required.

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.
- Schedule and conduct a permanency planning staffing prior to the permanency planning hearing to determine if continuing contact with the custodial/non-custodial parent(s) or putative parent could cause harm to the child and to determine the likelihood that the child will be adopted if the termination petition is granted. Those invited to participate in the staffing are the custodial/non-custodial parent(s), attorney for the parent, age-appropriate child, OCC Attorney, County Supervisor, Adoption Specialist, Attorney Ad Litem, and foster parents.
- 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 custodial/non-custodial 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 DHHS. 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): Custodial/Non-Custodial Parent(s) Requests Termination of Parental Rights

When parents want to relinquish custody to DHHS 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 Division of Circuit Court in the county designated by the consent as the county in which the termination of parental rights will be filed, and providing the address of the juvenile court clerk of the county in which the termination of parental rights will be filed.
- The Family Service Worker will assist the parent in filing the affidavit to withdraw parental consent.
- If the ten-day (10) 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 DHHS (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 custodial/non-custodial parent(s) or putative parent could cause harm to the child and to determine the likelihood that the child will be adopted if the termination petition is granted. Those invited to participate in the staffing are the custodial/non-custodial parent(s), attorney for the parent, age-appropriate child, OCC Attorney, County Supervisor, Adoption Specialist, Attorney Ad Litem and foster parents.
- 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 custodial/non-custodial 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 DHHS CUSTODY WITH PARENTAL RIGHTS TERMINATED

The Department of Health & Human Services has designated the County Supervisor, (or the Adoption Field Services 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 DHHS Custody with Parental Rights Terminated

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

- Give written consents in the following decisions involving children in DHHS 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 DHHS 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” (DHHS-1910), when appropriate, for incidents/events involving a child in DHHS 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” (DHHS-1910).

- Update child placement information in CHRIS. Updating the placement information will open a response window to notify the Eligibility Unit of the placement change.
PROCEDURE (VIII-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 DHHS

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, DHHS will petition the court for an order of emergency custody. The parent must not express any intent to return for the child. DHHS 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.
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.


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 “Arkansas Mutual Consent Voluntary Adoption Registry” (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.

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 from 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’s birth 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. Each family and child will be carefully assessed and prepared for adoption. The Division provides pre-placement services for relative adoptions to move children into adoptive families in a timely manner. A foster child placed in an adoptive home continues status as a foster child until finalization of the adoption and the adoption subsidy is initiated. Prior to the finalization of the adoption, post-placement services are provided and services to preserve adoptive families are offered after the adoption is finalized.

Before placement of a child in the home of the adoptive parent, a home study will be conducted. The home study shall address whether the adoptive home is a suitable home, and shall include a recommendation as to the approval of the petitioner as an adoptive parent.

Before placement for adoption, the Division shall compile and provide to the prospective adoptive parents a detailed, written health history and genetic and social history of the child which excludes information which would identify custodial/non-custodial parent(s) or members of a custodial/non-custodial parent(s)’ family. The information shall be set forth in a document that is separate from any document containing information identifying the custodial/non-custodial parent(s) or members of the custodial/non-custodial parent(s)’ family. The detailed, written health history and genetic and social history shall be identified as such, and shall be filed with the clerk before the entry of the adoption decree. The adoption summary shall serve as the detailed health history, genetic, and social history document. Upon order of the court for good cause shown, the clerk of the circuit court may tender to a person identified by the court a copy of the detailed, written health history and genetic and social history.

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. The original petitioner in the juvenile matter shall provide relative caregivers notice of any review or hearing. 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. Adoptive parents, and each member of the household age ten (10) years and older, residing in Arkansas shall be checked with the Child Maltreatment Central Registry. Adoptive parents and each member of the household age ten (10) years and older residing out of state shall provide Child Maltreatment Central Registry Checks from their state of residence.

Adoptive parents and each member of the household age fourteen (14) years and older residing in Arkansas shall be checked with the Identification Bureau of the Arkansas State Police for convictions of offenses listed in ACA §9-28-409. Adoptive parents and each member of the household age fourteen (14) years and older residing out of the state shall provide State Police Criminal Record Checks from their state of residence. Out of state adoptive families do not need to do an Arkansas State Police Check if they have never resided in Arkansas. Adoptive parents and each member of the household age sixteen (16) years and older who have not resided in Arkansas continually for the past six (6) years, shall complete a record check with the Federal Bureau of Investigation. The Division will provide documentation in the case record that a criminal record check was conducted on the prospective adoptive parent.
A prospective adoptive parent will not be approved or licensed if, based on a criminal record check, a court of competent jurisdiction has determined that the prospective adoptive parent has been convicted of a felony involving child abuse or neglect, spousal abuse, a crime against a child or children (including pornography), or a crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery.

A prospective adoptive parent will not be approved or licensed if, based on a criminal record check, a court of competent jurisdiction has determined that the prospective adoptive parent has, within the last five (5) years, been convicted of a felony involving physical assault, battery, or a drug-related offense.

All records of any adoption finalized in the state of Arkansas shall be maintained for ninety-nine (99) years.

The Juvenile Division of Circuit Court shall retain jurisdiction to issue orders of adoption, interlocutory or final, when a juvenile is placed outside the state of Arkansas.

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 if the Adoption Specialist was not at the hearing.
- 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 or kinship foster parent if they are 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, County Supervisor, Attorney-ad-Litem, OCC Attorney, CASA, and other professionals, if applicable. The staffing is to determine if this type of adoption is an appropriate referral for an adoptive family assessment. The 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 home study from a licensed adoption agency in their state. The family’s home study must be on file in the Adoption Services Unit.
Residency to determine jurisdiction over an adoption may be established in accordance with one of the three following sets of criteria:

1. 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
   - 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. Or in the case of a nonresident adoptive family, upon receipt of Interstate Compact on the Placement of Children (ICPC) approval, the child and the prospective adoptive parents may go back to their state of residence and subsequently may return to Arkansas for a hearing on the petition for adoption.

2. 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.

3. 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 that is at an age so that it can be anticipated that the caregiver can parent the child into adulthood.

**Marital Status:**

- In a two-parent home, the husband and wife shall be joint applicants, each shall actively participate in the approval process, and shall provide verification that they have been married at least two years. The marriage shall be stable.
- A person, who is divorced must provide verification of that divorce and must have been divorced for at least one year from the date on the court order.
- A single person may apply to adopt.

**General Physical and Mental Health:**

- Members of the household do not have a health condition or disability that would interfere with the family’s ability to parent the child. Each member of the household shall have a physical examination by a physician within six (6) months prior to the approval of the adoption home study on the prospective adoptive family.
VIII. SERVICES TO PROVIDE OTHER PERMANENT LIVING SITUATIONS

**Housing:**

- Space is adequate to promote health and safety.
- All firearms are maintained in a secure, locked location.
- All water hazards and dangerous pets will be assessed, and a safety plan developed, as appropriate.
- 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 and an Arkansas State Police background check and must have no history of convictions for offenses listed in ACA § 9-28-409. These offenses include: capital murder, 1st or 2nd degree murder, manslaughter, negligent homicide, kidnapping, false imprisonment in the first and second degrees, permanent detention or restraint, battery in the 1st, 2nd or 3rd degree, aggravated assault, assault in the 1st or 2nd degree, terrorist threatening in the 1st or 2nd degree, any sexual offense, permitting abuse of a child, endangering the welfare of a minor in the 1st or 2nd degree, contributing to the delinquency of a minor, engaging children in sexually explicit conduct for use in visual or print medium, transportation of minors for prohibited sexual conduct, use of a child or consent to use of a child in sexual performance, and producing, directing, or promoting sexual performance by a child; incest, interference with visitation, interference with custody, engaging in conduct with respect to controlled substances, distribution to minors, public display of obscenity, prostitution, promoting prostitution, criminal attempt, criminal complicity, criminal solicitation, criminal conspiracy, any felony or misdemeanor involving violence, threatened violence or moral turpitude, and former or future law of this or any other state or of the federal government which is substantially equivalent to one of the aforementioned offenses.

- Out of state adoptive families do not need to do an Arkansas State Police Check if they have never resided in Arkansas. Adoptive parents and each member of the household age fourteen (14) years and older residing out of the state shall provide state police criminal record checks from their state of residence.

- In addition applicants and all members of their household age sixteen (16) years or older 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.

- Any person who is found guilty of, or pleads guilty or nolo contendere to, an excluded criminal offense pursuant to ACA § 901-28-409(e)(1) shall be excluded as an adoptive parent.

**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.

- 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.
Resources:

- The applicant must have sufficient resources to meet the financial, medical, physical, educational, emotional and shelter needs of the child. Verification of income/employment is required.

Birth Family:

- The family will meet the child’s needs to have continuity with the birth family if applicable.
- The 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:

- The 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:

- The applicant has completed pre-service training.
- The 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 Adoption Field Services Supervisor within five (5) working days of the staffing. The Adoption Field Services Supervisor will make a decision and notify the County Supervisor in writing within five (5) working days of receiving the summary. If the criteria are required by the Minimum Licensing Standards for Child Welfare Agencies, the request must be approved by the Adoption Field Services Supervisor and then forwarded to the Adoption Field Services Manager for review. The Adoption Field Services Manager will forward the request to the Assistant Director of Community Services for approval. If approved by the Division Director, the request must be forwarded to the Manager of the Child Welfare Agency Licensing Unit (C WALU) for a decision of alternative compliance. The CWALU will make a recommendation to the Child Welfare Agency Licensing Review Board. The decision must be given in writing and filed in the case record. Alternative compliance with the standards required by the Minimum Licensing Standards for Child Welfare Agencies may be granted if the alternative form of compliance offers equal protection of the health, safety and welfare to children and meets the basic intent of the requirement for which the alternative compliance is sought.

- The Adoption Field Services 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 Field Services 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 “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.

The **County Supervisor** will (if staffing does not support referral for an adoptive family assessment):

• Forward a copy of the written summary to the Adoption Field Services Supervisor within five (5) working days of the staffing:
  
  • Written summary, which provides the date of the staffing, names/Titles of persons participating, and 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.

  • 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 Adoption Field Services Supervisor disagrees with the recommendation and directs that an adoption home study be completed.

The **Adoption Field Services 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 Adoption Field Services Manager, and OCC Attorney.

• 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, Area Manager and Adoption Field Services Manager.
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.

- Prepare the child for adoption and assist in preparing the 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-04)] 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);
  - “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 CPS Central Registry Check” (CFS-316) for members of the household who are ten (10) 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. Send the adoption home study, recommendations, completed forms, reference letters, child’s adoption packet and “Change of Status” (CFS-414) to the Adoption Field Services Supervisor within four (4) months of the court hearing that terminates parental rights.

• Make at least two (2) visits in person with the prospective adoptive family with at least one visit being in the home. Have a separate, face-to-face interview with each prospective adoptive parent. Interview each household member in person who is ten (10) years of age or older.

• Refer a relative who has not been approved as a foster parent or kinship foster parent to pre-service training. Complete the assessment and preparation process with this relative and send the adoption home study, recommendation, completed forms, reference letters, child’s adoption packet, and CFS-414 to the Adoption Field Services Supervisor within four (4) to six (6) months of the court hearing that terminates parental rights.

• In CHRIS:
  • complete the Affidavit of Disclosure screen on the child in the child’s protective service case. If Foster Parent Adoption, be sure to check the Foster Parent(s) Adoption checkbox.
  • 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 for Adoption (CFS-471) 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 for Adoption (CFS-471) form and assure a copy is provided.
  • Assist in preparing the child for adoption and prepare the foster parent, kinship foster parent, or relative for adoption.
  • Notify the foster parent, kinship foster parent or relative in writing if the adoption home study cannot be completed within sixty (60) days of the final home visit and explain the reason.
  • Send a copy of this notification to the Adoption Field Services Supervisor and Family Service Worker.
  • Discuss any delays in completing the assessment and preparation process with the Adoption Field Services 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 Services Unit.
PROCEDURE (VIII-F3): Foster Parent, Kinship Foster Parent, or Relative Adoption Decision

The Adoption Field Services 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 home study 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 Adoption Field Services Manager, Adoption Specialist, Area Manager, 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.
- In CHRIS:
  - Assign the Adoption Specialist as Primary Worker in the Assign/Transfer Screen. The child remains in the current foster parent placement until finalization.
  - Enter current foster parent or relative as an adoptive resource completing the Resource Screens.
  - If child is to exit current foster care placement to enter relative’s adoptive home, exit child from current foster parent placement and enter child into the relative’s adoptive home in the Placement screens in the child’s protective service case.

The Adoption Specialist will:

- Forward a “Change of Status” (CFS-414) to the Adoption 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, Adoption Field Services Supervisor, OCC Attorney and Adoption Field Services Manager 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, and Adoption Field Services 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 Adoption Field Services 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.
- Inform the family about post-adoption services (provide brochure).
PROCEDURE (VIII-F6): Disruption of Foster Parent, Kinship Foster Parent or Relative Adoption

If disruption (prior to finalization) of an adoptive placement is imminent, the family’s Adoption Specialist will:

- Provide appropriate services to preserve the family and prevent disruption, if applicable.
- Notify the Adoption Field Services Supervisor, County Supervisor, Family Service Worker, Adoption Field Services Manager, OCC Attorney and attorney ad-Litem.
- In CHRIS:
  - Document the staffing, reason for disruption, and all contacts with adoptive family in the Contacts screen.
  - Exit child from current adoptive home placement selecting Placement Resource Requested Removal or Child Requested Change of Placement in the Enter/Exit screen.
  - Transfer the case back to the last Primary Assigned Family Service Worker in the Assign/Transfer screen.
- Schedule and conduct a staffing to include those listed above and the foster parents, kinship foster parent(s) or relative any age appropriate child and any other significant individuals.
- Return case management responsibility to the Family Service Worker of the initiating county and transfer primary worker designation in CHRIS back to the Family Service Worker if it is not the plan to immediately select another adoptive family, and disruption occurs. Return the child’s paper record back to the Family Service Worker within five working days of the disruption.
- 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 Adoption Field Services Supervisor when submitting the recommendation to finalize the adoption:

- checklist for Recommendation for Finalization (CFS-432);
- “Change of Status” (CFS-414);
- “Adoption Application” (CFS-400);
- initial adoption home study 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-adoption services.

- Document in case record narrative the plan of action to resolve barrier to finalizing the adoption (if the Adoption Field Services 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 the adoption coupon and securing the fee from the family for an amended birth certificate.

- Forward the child and adoptive family records to the Adoption Services Unit when the adoption is finalized.

- The final decree of adoption shall be entered into the child’s record prior to forwarding any records.

- In CHRIS:
  - **Child Protective Service Case:**
    - Exit child out of current ‘pre-adoptive’ placement by selecting Adoption as Exit Reason and entering the finalized adoption date as Exit Date.
    - Close child protective service case in Case Summary screen if all children are adopted and no other child protective services are being offered to birth family or siblings.
  - **Adoption Case:**
    - Open New Adoption Case with adoptive parents and adoptive child as clients.
    - Complete Client General Information screens on all clients; retrieve the adoptive child’s characteristics, eligibility and affidavit of disclosure screens from old child protective service case.
    - Complete Adoption Subsidy screens if adoptive parents are receiving an adoption subsidy.
    - Document contacts with adoptive family in Contacts Screen.

The **Adoption Field Services Supervisor** will:

- Assess the information and recommendation, which has been forwarded by the Adoption Specialist, within five (5) working days.

- 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.

- Prepare and sign a consent for adoption if it is agreed that procedures to finalize the adoption should be initiated.

- Notify the Adoption Specialist in writing to explain if there is disagreement to initiating the procedures to finalize the adoption.
• Formulate with the Adoption Specialist a plan of action to resolve the barriers to finalizing the adoption.

The Adoption Field Services Supervisor will:

• Forward within five (5) working days a packet of information to the OCC Attorney or Private Agency Attorney. This packet will include:
  • the signed consent to the adoption;
  • certified birth certificate of child;
  • termination of parental rights court order;
  • adoption home study of the adoptive family;
  • child’s adoption summary (The child’s adoption summary serves as the detailed, written health history and genetic and social history and must be filed with the clerk before the entry of the adoption decree.);
  • “Adoption Application” (CFS-400);
  • “Adoption Assistance” (CFS-428) if applicable;
  • FBI criminal record check if applicable;
  • Post-placement narrative.

PROCEDURE (VIII-F8): Post-Adoption Services

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

• Adoption subsidy;
• Mutual Consent Voluntary Adoption Registry;
• Casework management;
• Information about, and referral to, service providers;
• Respite care;
• Education and training;
• Adoptive parent support groups;
• Resource library;
• Intensive Family Services;
• Family Support Services.

The Adoption Specialist will:

• Arrange these services upon request from the adoptive family.
• Assist the adoptive family in completing forms and in following procedures.
• Document contacts, activities, progress, concerns, etc.
**Subsidy Note:** Re-evaluations for state adoption maintenance subsidies are not required. However, when state funded subsidies extend beyond one (1) year, or for federally funded subsidies, verification of circumstances to continue the subsidy must be documented annually. To verify a continued need for subsidy in out-of-state cases the child’s school, therapist, physician or clergy can provide verification by submitting a letter which states that the adoptive parent(s) still has the care and responsibility for the child.

- The Central Office Adoption Support Specialist will forward a cover letter along with the CFS-431 (Certification of Adoption Subsidy Eligibility to the adoptive parents annually. The cover letter will inform the adoptive parents that the local Adoption Specialist will contact them to schedule a visit.

- The Central Office Adoption Support Specialist will forward a copy of the cover to the local Adoption Specialist concurrently with notice to the adoptive parents.

- The adoptive parents will complete and submit the CFS-431 to the DCFS Adoptions Services Unit within ten (10) working days of the date of the accompanying cover letter. The Central Office Adoption Support Specialist will forward a copy of the completed CFS-431 to the Adoption Specialist for their records.

- The Adoption Specialist will have annual face-to-face contact with the child or otherwise verify that the child is still with the adoptive family. The Adoption Specialist should make the face-to-face contact a positive experience by exploring any needs for post adoption services. The Adoption Specialist should also inquire as whether the adoptive parents have added the adoptive child to their medical insurance and if so the family must complete a DCO –662 (Third Party Resource). The Adoption Specialist is responsible for submitting the completed form to the Medical Services Section of the Medical Services Division.

- In CHRIS:
  - Document all contacts, activities, concerns in the Contact screen in the adoption case.
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. A child is assessed and prepared for adoption. The child’s health and safety shall be of paramount concern in the development of the adoptive placement.

Siblings shall be placed together in the same adoptive home. Siblings may be placed separately upon written documentation by a Mental Health Professional that placement of the siblings together would be detrimental to their best interests or is otherwise not possible at the time of placement.

Before placement of a child in the home of the adoptive parent, a home study will be conducted. The home study shall address whether the adoptive home is a suitable home, and shall include a recommendation as to the approval of the petitioner as an adoptive parent.

Before placement for adoption, the Division shall compile and provide to the prospective adoptive parents a detailed, written health history and genetic and social history of the child which excludes information which would identify custodial/non-custodial parent(s) or members of a custodial/non-custodial parent(s)’ family. The information shall be set forth in a document that is separate from any document containing information identifying the custodial/non-custodial parent(s) or members of the custodial/non-custodial parent(s)’ family. The detailed, written health history and genetic and social history shall be identified as such, and shall be filed with the clerk before the entry of the adoption decree. The adoption summary shall serve as the detailed health history, genetic, and social history document. Upon order of the court for good cause shown, the clerk of the circuit court may tender to a person identified by the court a copy of the detailed, written health history and genetic and social history.

The Division provides pre-placement services to move children into adoptive families in a timely manner and post-placement services to help the family adjust. After finalization, services are available to help preserve adoptive families.

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.

The Juvenile Division of Circuit Court shall retain jurisdiction to issue orders of adoption, interlocutory or final, when a juvenile is placed outside the state of Arkansas.

Adoptive parents, and each member of the household age ten (10) years and older, residing in Arkansas shall be checked with the Child Maltreatment Central Registry. Adoptive parents and each member of the household age ten (10) years and older residing out of state shall provide Child Maltreatment Central Registry Checks from their state of residence.

Adoptive parents and each member of the household age fourteen (14) years and older residing in Arkansas shall be checked with the Identification Bureau of the Arkansas State Police for convictions of offenses listed in ACA 9-28-409. Adoptive parents and each member of the household age fourteen (14) years and older residing out of state shall provide State Police Criminal Record Checks from their state of residence. Out of state adoptive families do not need to do an Arkansas State Police Check if they have never resided in Arkansas. Adoptive parents and each member of the household age sixteen (16) years and older who have not resided in Arkansas continually for the past six (6) years, shall complete a record check with the Federal Bureau of Investigation (FBI).
The Division will provide documentation in the case record that a criminal record check was conducted on the prospective adoptive parent.

A prospective adoptive parent will not be approved or licensed if, based on a criminal record check, a court of competent jurisdiction has determined that the prospective adoptive parent has been convicted of a felony involving child abuse or neglect, spousal abuse, a crime against a child or children (including pornography), or a crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery.

A prospective adoptive parent will not be approved or licensed if, based on a criminal record check, a court of competent jurisdiction has determined that the prospective adoptive parent has, within the last five (5) years, been convicted of a felony involving physical assault, battery, or a drug-related offense.

Legal risk adoptive placements may be considered for a newborn that is being relinquished for adoption or for a child whose custodial/non-custodial parent(s) has filed an appeal to the termination of parental rights.

All records of any adoption finalized in the state of Arkansas shall be maintained for ninety-nine (99) years.
PROCEDURE (VIII-G1): Recruitment and Retention of Adoptive Applicants

The Adoption Specialist will:

- Publicize the need for adoptive families.
- Publicize the availability and purpose of adoption subsidy.
- Recruit adoptive families that reflect the ethnic and racial diversity of children for whom adoptive homes are needed.
- Recruit for placement for specific children when necessary.
- Utilize adoptive families and volunteers in recruitment campaigns.
- Respond within three (3) working days to families wanting to adopt.
- Complete the Adoption Inquiry (CFS-413).
- 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).

The Adoption Field Services Supervisor will:

- Develop, implement and monitor an area-wide adoption recruitment plan.
- Track and monitor adoption inquiries.

The Adoption Services Unit Manager or designee will:

- Develop, implement and monitor a state-wide adoption recruitment plan.
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 forty (40) 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 can parent the child into adulthood.

Marital Status:

- In a two-parent home, the husband and wife shall be joint applicants, each shall actively participate in the approval process, and shall provide verification that they have been married for at least two (2) years. The marriage shall be stable.

- A person who is divorced must provide verification of that divorce and must be divorced for at least one (1) year from the date on the court order.

- A single person may apply to adopt.

General Physical and Mental Health:

- Members of the household do not have a health condition or disability that would interfere with the family’s ability to parent the child. Each member of the household shall have a physical examination by a physician within six (6) months prior to the approval of the adoption home study on the prospective adoptive family, and annually thereafter until placement of a child.

Housing:

- Space is adequate to promote health and safety.

- All firearms are maintained in a secure, locked location.

- All water hazards and dangerous pets will be assessed, and a safety plan developed, as appropriate.

- 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 and a State Police background check and must have no history of convictions for offences listed in ACA § 9-28-409. (See Procedure VIII-F1 for a listing.)

- Out-of-state adoptive families do not need to do an Arkansas State Police Check if they have never resided in Arkansas. Adoptive parents and each member of the household age fourteen (14) years and older residing out-of-state shall provide state police criminal record checks from their state of residence. A FBI check is not required if applicant has resided in the state for six (6) years or longer.

- In addition, applicants and all members of their household age sixteen (16) years or older must agree to a FBI Criminal Record Check if he has been a resident of the state for less than six (6) years.

- Any person who is found guilty of or pleads guilty to an excluded criminal offense pursuant to ACA § 901-28-409(e)(1) shall be excluded as an adoptive parent.

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.

- 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.

Resources:

- The applicant must have 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. Verification of income/employment is required.

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 Adoption Field Services Supervisor. The Adoption Field Services Supervisor will make a decision and notify the Adoption Specialist in writing within five (5) working days of receiving the request. If the criteria are required by the Minimum Licensing Standards for Child Welfare Agencies, the request must be approved by the Adoption Field Services Supervisor and then forwarded to the Adoption Field Services Manager for review. The Adoption Field Services Manager will forward the request to the Assistant Director of Community Services for approval. If approved by the Division Director, the request must be forwarded to the Manager of the Child Welfare Agency Licensing Unit for a decision of alternative compliance. The CWALU will make a recommendation to the Child Welfare Agency Licensing Review Board.

The decision must be given in writing and filed in the case record. Alternative compliance with the standards required by the Minimum Licensing Standards for Child Welfare Agencies may be granted if the alternative form of compliance offers equal protection of the health, safety and welfare to children and meets the basic intent of the requirement for which the alternative compliance is sought.

- 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 DHHS employees to the Adoption Field Services 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 Adoption Field Services Supervisor if this time frame cannot be met.

The Adoption Field Services 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 home study on the family is the basis for selection.
- Priority is given to completing an adoption home study 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)
- “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 a FBI
criminal record check on each adult applicant who has not resided in the state for at least six (6) years.

- “Request for CPS Central Registry Check” (CFS-316) for members of the household who are ten (10) 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 approving the adoption home study on the prospective adoptive family.

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 in person with the prospective adoptive family with at least one visit in the home.
- Have a separate, face-to-face interview with each prospective adoptive parent.
- Set up pre-service training for the applicants.
- Interview each household member separately who is ten (10) years of age or older.
- 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.
- 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): Adoption Home Study

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-04)] about the adoptive applicants.

The Adoption Specialist will:

- Submit the narrative summary and written recommendation, all required forms and references to the Adoption Field Services 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 Adoption Field Services Supervisor.
- Evaluate with Adoption Field Services 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 Adoption Field Services 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.
- In CHRIS:
  - Upon approval of the adoptive applicant, enter the new adoptive family in CHRIS by completing the Resource screens to obtain a resource provider number. Also, the Vendor Maintenance Form - F10021 must be completed and sent to AASIS as soon as possible.
  - 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

A foster child placed in an adoptive home continues status as a foster child until finalization of the adoption. The adoptive home must be re-evaluated annually until the adoption is finalized. If an approved applicant has not had a child placed within one (1) year, or a child has been placed and the adoption has not been finalized, 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 and the adoption is finalized.
- Submit within forty-five (45) days from the home visit a packet to the Adoption Field Services Supervisor to include:
  - Narrative summary with recommendation;
  - “Adoption Questionnaire” (CFS-409);
  - “General Medical Form-Adoption” (CFS-404s) on each member of the household;
  - “State Adoptions Criminal Record Check” (CFS-342Bs) 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 ten (10) 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.
- In CHRIS:
  - Complete the Resource Evaluation Screen on the adoptive family.
  - Complete the Contact Screen on all activities concerning re-evaluation process.
  - Update the Resource Household Members screens especially the Criminal Record Checks and the Central Registry Checks.
  - Complete the Resource Contracts/Status screen to enter the new Home Study re-evaluation date and Status of the approved home study and Request for Approval.
  - If the approved applicant experiences any major changes (e.g., marriage, divorce, separation, or changes in health, residence or family composition), the Adoption Specialist will re-evaluate the family prior to placement of the child. The Adoption Specialist will not wait for the annual re-evaluation. An additional home visit is required if there has been a change of residence. Completion of new forms, listed above, will be necessary depending on the type of change. A new narrative summary with a recommendation is also required.
The **Adoption Field Services Supervisor** will:

- Refer to Procedure VIII-G5.
- In CHRIS:
  - Review the Resource Evaluation screen on adoptive family.
  - Review and approve the new Home Study and Status on the Contracts/Status screen on adoptive family.

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

The **Family Service Worker** will:

- Notify Adoption Specialist of staffings that address the permanency plan of adoption. (See Procedure VI-A2 “Concurrent Planning”.)
- 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 if the Adoption Specialist was not at the hearing.
- 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 (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.
- Place siblings together in the same adoptive 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.
- Continue to prepare the child for adoption.
- In CHRIS:
  - Complete the Recommendation for Termination of Parental Rights screen and the Termination of Parental Rights screen to document the dates, Notice Type and Outcome of Hearing.

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.

• In CHRIS:
  
  • Complete the Adoption Characteristics section in the Child’s Characteristic’s Screen in the child’s child protective service case.

• Enter characteristics of the child into the computer matching system, Adoption Data Matching (CFS-468), within five (5) working days from the court hearing that terminated parental rights to obtain a listing of approved and registered adoptive applicants from in and out-of-state.

• 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.

• Assist the Family Service Worker in preparing the child for adoption.

• Complete and maintain an Individualized Recruitment Plan (CFS-433) written recruitment plan if an appropriate adoptive family is not available.

• Send the following to the Adoption Coordinator, Adoption Services Unit, if a photo-listing and website registration of the child is needed: ten close-up color photographs, adoption summary, special evaluations if applicable, the Adoption Recruitment Agreement (CFS-467) if ten (10) years or older and a draft of the completed registration page.

• Notify the Adoption Coordinator in writing if registrations are needed on available, national adoption exchanges.

• Monitor and document recruitment activities on the Individualized Recruitment Plan (CFS-433).

• Enter characteristics of the child into the computer matching system Adoption Data Matching (CFS-468) 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, website and/or adoption exchange registration. Send a copy of the updated summary to the child’s Family Service Worker.

• Send ten (10) color photographs every twelve (12) months to the Adoption Coordinator, Adoption Services Unit, to update a child’s registration in the photo-listing and website.

• Assure compliance with Indian Child Welfare Act, if applicable.

• Consult with the Family Service Worker, the family’s Adoption Specialist and other appropriate DCFS staff and professionals involved with the child in the selection of an adoptive family. Schedule and conduct a staffing, if applicable.

• 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. Refer to desk guide and “Minimum Licensing Standards for Child Welfare Agencies” (PUB-04). Document the selection by completing the Selection of Adoptive Family (CFS-470).

• Send the completed Selection of Adoptive Family (CFS-470) to the Adoption Field Services 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). Attach a copy of the child’s adoption summary and the selected family’s adoption assessment to the CFS-470).

- 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. Upon approval of the selection, complete a Disclosure for Adoption (CFS-471). Forward packets and CFS-471 with a memorandum to the family’s Adoption Specialist, if different from the child’s Adoption Specialist.

- The memorandum should include significant information about the child including the need for special resources/services, provide a schedule for pre-placement activities and convey any other significant information that relates to the placement of the child.

- Send a copy of the memorandum to the Adoption Field Services Supervisor, Family Service Worker, and OCC Attorney for the child’s initiating county.

- Discuss delays in the selection of an adoptive family with the Adoption Field Services Supervisor and document reasons for the delay.

- Determine immediately if another approved adoptive applicant can be selected if the Adoption Field Services 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 had asked to be considered for a child who is registered in the DCFS photo-listing and website but was not selected.

- Initiate and follow ICPC procedures 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 and website registration for a child referred by an Adoption Specialist.

- Coordinate and maintain a photo-listing book and website 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 a 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 Adoption Field Services Supervisor will:

- Assess the child’s adoption packet, the assessment of the approved adoptive applicant, and the Selection of Adoptive Family (CFS-470) 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 Selection of Adoptive Family (CFS-470) 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 the selection of an adoptive family has been approved, the child’s Adoption Specialist will:

- Continue to assist the Family Service Worker in preparing the child for adoption.

- Assist the Family Service Worker in preparing the child to meet the selected adoptive family (including the presentation of the family’s photograph album) after the adoptive parents have signed the disclosure form.

- In CHRIS:
  - Complete the Affidavit of Disclosure in the child’s child protective service case once an adoptive family has been selected.
  - Document all contacts, visits, activities, progress, concerns in the Contact Screen in the child’s protective service case.

- Arrange and conduct pre-placement visits between the child and the selected adoptive family. There must be at least three pre-placement visits for a child who is two (2) years of age or older. These visits shall not be scheduled until the selected adoptive parent(s) have signed the disclosure form.

- 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 any needed appointments with the Family Service Worker 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 purchases of any additional clothing with the Family Service Worker.

• Arrange with the Family Service Worker a physical exam and developmental assessment by a physician within thirty (30) days prior to adoptive placement and completion of the “Health Screening” (CFS-366).

• Present and explain the Legal Risk Adoption Placement Agreement (CFS-420) to the selected adoptive parent(s) if a legal risk adoptive placement is planned. Secure the adoptive parent’s(s) signature on the CFS-420 prior to placement.

• Document dates of pre-placement visits, contacts, activities, progress, concerns, etc. and send a copy to the family’s Adoption Specialist, Adoption Field Services 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 for Adoption (CFS-471) and document in narrative.

• Assist in assessing appropriateness of the selection.

• Secure the signature of the selected adoptive parent on the CFS-471.

• Give the selected adoptive parent a copy of the signed CFS-471.

• Advise the child’s Adoption Specialist of the family’s interest in adopting the child.

• 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. In addition, when discussing an adoption subsidy, the Adoption Specialist will be clear that they will only be screening for a determination of special needs, subsidy eligibility and making a recommendation to the Adoption Services Unit. The Adoption Specialist will notify the family of approval/denial of an adoption subsidy. (See Procedure VIII-H1 [Initial Application for Adoption Subsidy].) The Adoption Specialist must also explore other resources and assistance that may be available for the child and adoptive family when screening for a subsidy.

• Document dates of contacts, activities, progress, concerns, etc., and send a copy to the child’s Adoption Specialist, Area Manager or designated Adoption Field Services 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:

- Continue to prepare the child for adoption.
- Prepare the child to meet the selected adoptive family with the assistance of the child’s Adoption Specialist after the adoptive parents have signed the Disclosure for Adoption (CFS-471).
- 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 child’s 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 family’s Adoption Specialist will assume primary case management responsibility at the time of placement.
- In CHRIS:
  - In the Enter/Exit screen, exit child from current foster home placement selecting Pre-Adoptive Placement and enter child in the adoptive family’s home.
  - Update Contact screen, Characteristic Screen, Court Hearing screen and Termination of Parental Rights screen to document all current available information on child.
  - In the Assign/Transfer screen, assign the family’s Adoption Specialist as the Primary Responsible Person for case.

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 to the Family Service Worker and/or the Adoption Specialist.
- Encourage and support the child to accept the adoptive family.
PROCEDURE (VIII-G9): Post-Placement Services

The Adoptive Family’s 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 (4) 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. (Refer to FSPP Policy VIII-H.)
- Document place and dates of contacts, activities, progress, concerns, etc., and send a copy to the Family Service Worker, Area Manager or designated Adoption Field Services 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.
- Inform the family about post-adoption services (provide brochure).
- In CHRIS:
  - Document all adoption post placement services in the Contact Screen of child’s protective service case.
  - Complete Case Plan Treatment Goal screens when case plan has been revised within thirty days of placement.
  - Complete the Court Hearing screens on all judicial reviews.

PROCEDURE (VIII-G10): Disruption of Adoptive Placement

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

- Notify immediately the Adoption Field Services Supervisor. From the initiating county notify the County Supervisor, Family Service Worker, Adoption Specialist, OCC Attorney and Attorney ad litem.
- Schedule and conduct a staffing to include those listed above and the adoptive parent(s), age appropriate child and any other significant individuals.
- Return the following case management responsibilities to the initiating county Family Service Worker if there is no plan to immediately select another adoptive family and disruption occurs:
• Primary case management responsibility for the case.

• Primary information management responsibility in CHRIS.

• The child’s paper record within five (5) working days of the disruption.

• Prepare the family for disruption and provide casework counseling and referrals for needed services.

• In CHRIS:
  • Document the staffing, reason for disruption, and all contacts with adoptive family in the Contacts screen.
  • Exit child from current adoptive home placement selecting Placement Resource Requested Removal or Child Requested Change of Placement in the Enter/Exit screen.
  • Transfer the case back to the last Primary Assigned Family Service Worker in the Assign/Transfer screen.

PROCEDURE (VIII-G11): Finalization of an Adoption

Refer to FSPP Procedure VIII-F7.
**POLICY (VIII-H): ADOPTION SUBSIDY**

The Division provides a federal (Title IV-E) or state funded adoption subsidy as a service to assist in making adoption possible for a child, who, with special needs, might not otherwise be adopted and for whom a family is not readily available. A foster child placed in an adoptive home continues status as a foster child until finalization of the adoption and the adoption subsidy is initiated.

**SPECIAL NEEDS CHILD**

A special needs child is defined as a child who is free for adoption and belongs to a group of children for whom the Division does not have an adequate resource of approved applicants to provide a pool of available waiting adoptive families. Other children may be eligible for adoption assistance under this category if they have severe medical or psychological needs that require ongoing rehabilitation or treatment. These children include:

- a Caucasian child nine years or older,
- a healthy child of color who is two years or older,
- or a member of a sibling group of three or more children being placed together who share at least one biological parent and who have either lived together or otherwise developed a bond prior to adoptive placement, and the child is:
  - legally free for adoption with parental rights terminated,
  - under eighteen years old and whose adoption has not been finalized prior to approval of the subsidy,
  - (for the purposes of a State Subsidy only), in DHHS custody, or
  - a member of a Non-Custody/Out-of-Home Placement Services case, or
  - who is SSI eligible at the time the adoption petition is filed.

Children at high risk for the development of a serious physical, mental, developmental or emotional condition may be considered special needs if documentation of the risk is provided by a medical professional specializing in the area of the condition for which the child is considered at risk, but no subsidy payment will be made without documentation that the child has developed the actual condition. (See Procedure VIII-H1.)

Adoption subsidies can be funded through federal Title IV-E adoption assistance or state funds depending on the child’s eligibility.

Adoption assistance payments may be made to parents who adopt a child with special needs. A child will not be considered special needs unless:

- The state has determined the child cannot or should not be returned to the home of his parents;
- The state has determined that a specific factor or condition exists with respect to the child (such as ethnic background, age or membership in a minority or sibling group; or the presence of factors such as medical conditions or physical, mental, or emotional disabilities) because of which it is reasonable to conclude that such a child cannot be placed for adoption without providing adoption assistance or medical assistance under Title XIX; and
A reasonable, but unsuccessful, effort has been made to place the child without providing assistance except where it would be against the best interest of the child due to such factors as the existence of significant emotional ties with prospective adoptive parents while in the care of such parents as a foster child.

For the purpose of this policy, “AFDC” refers to the AFDC program as in effect 7-16-1996.

ELIGIBILITY
There are four ways that a child can be eligible for Title IV-E adoption assistance:

1. The child is AFDC-eligible and meets the definition of a child with special needs.

Adoption assistance eligibility that is based on a child’s AFDC eligibility is predicated on a child meeting the criteria for such both at the time of removal and in the month the adoption petition is initiated. At the time adoption proceedings were initiated the child must have been removed from the home of a specified relative as a result of a judicial determination to the effect that continuation therein would be contrary to the welfare of the child. In addition, the special needs determination must be made prior to finalization of the adoption.

2. The child is eligible for Supplemental Security Income (SSI) benefits and meets the definition of a child with special needs.

A child is eligible for adoption assistance if, at the time the adoption petition is filed, the child meets the requirements for Title XVI SSI benefits, and prior to the finalization of the adoption is determined by the state to be a child with special needs. There are no additional criteria that a child must meet to be eligible for Title IV-E adoption assistance when eligibility is based on a special needs child meeting SSI requirements. Specifically, how a child is removed from his home or whether the state has responsibility for the child’s placement and care is irrelevant in this situation. The child’s eligibility for SSI benefits must be established no later than at the time the adoption petition is filed.

3. The child is eligible as a child of a minor parent and meets the definition of a child with special needs.

A child is eligible for Title IV-E adoption assistance in this circumstance if:

- The child’s parent is in foster care and receiving Title IV-E foster care maintenance payments that cover both the minor parent and the child at the time the adoption petition is initiated, AND

- Prior to the finalization of the adoption, the child of the minor parent is determined by the state to meet the definition of a child with special needs.

There are no other additional criteria that must be met in order for the child to be eligible for Title IV-E adoption assistance if the child’s eligibility is based on his minor parent’s receipt of foster care while placed with the minor parent in foster care.

As with SSI, there is no requirement that a child must have been removed from the home as a result of a judicial determination. However, if the child and minor parent have been separated in foster care prior to the time of the adoption petition, the child’s eligibility for Title IV-E adoption assistance must be determined based on the child’s current and individual circumstances.

4. The child is eligible due to prior Title IV-E adoption assistance eligibility and meets the definition of a child with special needs.
In the situation where a child is adopted and receives Title IV-E adoption assistance, but the adoption later dissolves or the adoptive parents die, a child may continue to be eligible for Title IV-E adoption assistance in a subsequent adoption. The only determination that must be made by the state prior to the finalization of the subsequent adoption is whether the child is a child with special needs. Need and eligibility factors must not be re-determined when such a child is subsequently adopted because the child is to be treated as though his circumstances are the same as those prior to his previous adoption. Since Title IV-E adoption assistance eligibility need not be re-established in such subsequent adoptions, the manner of a child's removal from the adoptive home, including whether the child is voluntarily relinquished to an individual or private agency, is irrelevant.

If eligible, the Division will make adoption assistance payments to adoptive parents in amounts so determined through an adoption assistance agreement. The amount of such payment:

- Will take into account the circumstances of the adopting parents and the needs of the child being adopted;
- May be adjusted periodically with the concurrence of the adoptive parents to reflect changing circumstances; and
- May not exceed the foster care maintenance payment, which would have been paid during the period if the child with respect to whom the adoption assistance payment is made had been in a foster home.

In determining eligibility for state funded adoption assistance payments, there is an income eligibility requirement (means test) for the adoptive parents. There is no means test for determining eligibility for federal Title IV-E adoption assistance payments.

Adoption assistance payments may be terminated if it is determined that:

- The child has attained the age of 18 (or the age of 21, where the state determines that the child has a mental or physical disability which warrants the continuation of assistance), or
- The parents are no longer legally responsible for the support of the child, or
- The child is no longer receiving support from the adoptive parents.

The adoptive parents are required to inform the Division of circumstances that would make them ineligible for adoption assistance payments or eligible for adoption assistance payments in a different amount.

**ADOPTION ASSISTANCE AGREEMENT**

An Adoption Assistance Agreement, a written binding agreement between the adoptive parents, the Division, and other relevant agencies must be in place prior to the finalization of the adoption.

The Adoption Assistance Agreement must: (1) be signed by the adoptive parents and the Division and be in effect before adoption assistance payments are made under Title IV-E, but no later than the finalization of the adoption; (2) specify the duration of the agreement; (3) specify the amount of the adoption assistance payment (if any) and the nature and amount of any other payments, services and assistance to be provided (including non-recurring adoption expenses in agreements that became effective on or after January 1, 1987, for expenditures incurred by the parents on or after that date); (4) specify the child's eligibility for Title XIX and Title XX; (5) specify, with respect to agreements entered into on or after October 1, 1983, that the agreement remains in effect regardless of the state of residence of the adoptive parents; (6) contain provisions for the protection of the interests of the child in case the adoptive parents and child should move to another state while the agreement is in effect; and (7) for agreements entered into on or after October 1, 1983, if needed
service specified in the agreement is not available in the new state of residence, the state making the original assistance payment remains financially responsible for providing the specified service(s).

However, in cases of unknown medical and psychiatric conditions that surface after finalization, applications for federally funded assistance may be submitted. After the initial denial of this application occurs, in accordance with federal regulations, the adoptive family may appeal the decision.

The types of situations that would constitute grounds for an appeal include: (1) relevant facts regarding the child, the biological family or the child’s background were known, but not presented to the adoptive parents prior to the adoption’s finalization; (2) Any subsidy decision which the adoptive parents deem adverse to the child; (3) erroneous determination by the Division that a child is ineligible for adoption assistance, and (4) failure by the Division to advise adoptive parents of the availability of adoption assistance. If an appeal is upheld, the child may be eligible for a federal (Title IV-E) or state subsidized adoption. The effective date of a federal (Title IV-E) retroactive subsidy payment will be the date of finalization or a date subsequent to finalization.

Authorized retroactive state funded subsidy payments will be two (2) months prior to the date the subsidy was approved.

For foster parent and kinship adoptions, it is not necessary to determine that without subsidy the child would not otherwise be adopted.

Payments for a maintenance subsidy and special services subsidy are to meet the needs of the child. In addition, payments for one-time expenses, known as a non-recurring adoption subsidy, may be obtained in order to reimburse the family for out-of-pocket pre-adoptive/finalization expenditures.

MEDICAL COVERAGE

The Division will ensure health insurance coverage for any child determined to be a child with special needs for whom there is an adoption subsidy agreement in effect. Federal Title IV-E Medicaid will be utilized to provide medical coverage for a Title IV-E eligible child. Medical coverage, for a non-Title IV-E eligible child who has a special need for medical or rehabilitative care, may be provided under the Medicaid category Non-Title IV-E Special Needs Adoptive Child if the child is eligible for state maintenance subsidy and meets specified Medicaid eligibility requirements. (See Medical Services Policy 6590.2 Eligibility Requirements.) If the child does not qualify for Medicaid under federal Title IV-E or Non-Title IV-E Special Needs Adoptive coverage, the family may make application for Medicaid under a different category.

Any eligible child for whom there is an adoption assistance agreement in effect is deemed to be a dependent child and is deemed to be a recipient of AFDC (per AFDC requirements in effect 7-16-1996). Any child of such eligible child will be eligible for such services.

The Division shall access resources as necessary in Arkansas, the region and nation to find adoptive families for children with special needs.
PROCEDURE (VIII-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 DHHS (for state subsidy only), and is legally free for adoption.

**NOTE:** These procedures should be followed for federal IV-E adoption maintenance subsidy and state funded adoption maintenance subsidy. Determine if the child is eligible for federal IV-E adoption maintenance subsidy first. If ineligible for Title IV-E, determine if the child is eligible for state funded adoption maintenance subsidy.

- Determine that a reasonable, but unsuccessful, effort has been made to place the child without providing adoption subsidy. Such an effort might include the use of adoption exchanges, referral to appropriate specialized adoption agencies, or other such activities. **There are exceptions to this requirement when applying for a Title IV-E maintenance subsidy.** These exceptions are: (1) It would not be in the best interests of the child because of such factors as the existence of significant emotional ties with prospective adoptive parents while in the care of those parents as a foster child, (2) Another circumstance is adoption by a relative, in keeping with the statutory emphasis on the placement of children with relatives.

**Exceptions for state maintenance subsidy:** In the case of a child who has established significant emotional ties with prospective adoptive parents while in their care as a foster child, the Department 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 Title IV-E verification of eligibility from the DCFS Eligibility Unit.
- Assist the adoptive parents in completing the “Statement of Income and Resources for Adoption Subsidy” (CFS-426). Attach to the CFS-426 verification of family income when a state funded adoption special subsidy is requested. The CFS-426 is not required for a federal funded adoption maintenance subsidy.
- 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.
- Be clear in their discussion with the family that they will only be screening for a determination of special needs, subsidy eligibility, and making a recommendation to the Adoption Services Unit. Under no circumstances will the Adoption Specialist give the adoptive family the subsidy determination prior to receipt of approval from the Adoption Services Unit. The Adoption Specialist must also explore other resources and assistance that may be available for the child and adoptive family when screening for a subsidy.
• 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.

• Complete the CFS-429 (Special Adoption Subsidy Needs Assessment) to verify 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, that lists the child’s financial resources (source and amount) other than foster care board payment, if applicable.

• Special needs subsidy based on a “high risk” condition - Children at high risk for the development of a serious physical, mental, developmental, or emotional condition may be considered special needs if documentation of the risk is provided by a medical professional specializing in the area of the condition for which the child is considered at risk, but no subsidy payment will be made without documentation that the child has developed the actual condition. In order to be eligible for special needs subsidy based on developmental delay, documentation must be provided, current within 6 months, attesting to the fact that the child has a delay of 24% or more in two major developmental categories.

• Verification from the appropriate agency which explains the child’s eligibility for financial benefits (SSI, other types of Social Security benefits, VA, etc.) once the adoption is finalized if applicable (provide the agency with the amount of the adoptive parent’s income in order that a statement can be prepared). Once a child has been determined eligible for a federal subsidy, the adoptive parents cannot be rejected for adoption assistance or have payments reduced without their agreement because of their income or resources or the child’s resources.

• 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).

• For state-funded subsidies, 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 an eligibility criterion for state funded adoption maintenance subsidy. The adoptive parent’s income is not an eligibility criterion for a federally funded adoption maintenance subsidy (i.e., a child who is Title IV-E or SSI eligible).

• Special subsidies are state funded, and the Adoption Subsidy Coordinator, Adoption Services Unit, will consider the child’s eligibility on a case-by-case basis. The consideration will be based on the information developed during the Adoption Specialist’s determination of the child’s special needs in relation to adoption planning. The adoptive parent’s gross income will be considered as well as other financial resources and health insurance in determining eligibility for a special subsidy.

• Complete the CFS-426 (Statement of Income and Resources for Adoption Subsidy) for all special subsidy requests.
• Utilize the following scale to determine the amount of a full monthly adoption maintenance subsidy based upon the standard foster care board payment:

<table>
<thead>
<tr>
<th>AGE of CHILD</th>
<th>Amount of MONTHLY Maintenance</th>
</tr>
</thead>
<tbody>
<tr>
<td>Birth through 5 years</td>
<td>$400.00</td>
</tr>
<tr>
<td>6 through 11 years</td>
<td>$425.00</td>
</tr>
<tr>
<td>12 through 14 years</td>
<td>$450.00</td>
</tr>
<tr>
<td>15 through 17 years</td>
<td>$475.00</td>
</tr>
</tbody>
</table>

• 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.

• Note: Special Board Rate formulas and procedures will be used strictly as guides in determining an appropriate nonstandard rate to discuss with the family and to use in negotiating a lower rate (when appropriate). No subsidy will exceed $460.00 above the standard board rate for the child’s age group. However, if the child is SSI eligible, the rate can go up $460.00 above the SSI rate.

• 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 DCO-93 ”, 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 that documents efforts to place the child without adoption subsidy. (Not required for a foster parent, kinship foster parent, or relative adoption.)

• Prepare a narrative entitled “Subsidy Family Profile” 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.);
- Exploration of other resources and assistance that may be available for the child and adoptive family when screening for a subsidy.
- 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 to approve or deny.

- Submit the completed packet to the Adoption Field Services Supervisor for review and comment. (The Adoption Field Services Supervisor has three (3) days to review and sign-off on the packet before returning the packet to the Adoption Specialist.)

- Upon completion of supervisory review, 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.

- Upon receipt of approval of the adoption subsidy, 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. Advise the adoptive parent to notify the local adoption specialist if they decide to add the child to their medical insurance policy.

- 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.

- In CHRIS:

  - Open a new adoption case on adoptive family entering the adoptive parents and adoptive child as clients. If child was in the custody of DHHS, you must retrieve the child’s eligibility, medical and characteristics screens from the closed child protective service case by entering the child’s protective service case and client numbers in the child’s General Information screen. If child
was not in foster care prior to being adopted, the adoptive child’s Characteristic and Medical screens must be completed to identify the special needs.

- Complete the Adoption screens: General Information screen, Affidavit of Disclosure screen, and Subsidy screen. Request for Approval on subsidy.

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 (Adoption Assistance Agreement) if the adoption subsidy application is approved, and route the CFS-428 to the Manager of the Adoption Services Unit and Community Support Section Administrator for approval, then send the CFS-428 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.

**NOTE ON RE-DETERMINATIONS/RE-EVALUATIONS:**

**TITLE IV-E RE-DETERMINATION**

The federal Title IV-E adoption assistance program does not require re-determinations of a child’s eligibility. Although, the Title XIX Medicaid Program and the programs that, in part, may qualify a child initially for adoption assistance, such as AFDC and SSI, require re-determinations, they are unnecessary for the purpose of maintaining a child’s eligibility for Title IV-E adoption assistance. Once a child has been determined eligible and is receiving Title IV-E adoption assistance, a state may terminate the assistance only under three circumstances:

1. The child has attained the age of 18 (or if the State determines that the child has a mental or physical disability which would warrant continuation of assistance up to the 21st birthday).

2. The State determines that the adoptive parents are no longer legally responsible for support of the child.

3. The State determines that the adoptive parents are no longer providing any support to the child.

- The Central Office Adoption Support Specialist must immediately notify the Adoption Specialist at the time the adoption subsidy is terminated. (See Procedure VIII-H7 [Termination of Adoption Subsidy].)

**STATE SUBSIDY RE-EVALUATION**

Re-evaluations for state adoption maintenance subsidies are not required. However, when state funded subsidies extend beyond one (1) year, or for federally funded subsidies, verification of circumstances to continue the subsidy must be documented annually. To verify a continued need for subsidy in out of
state cases the child’s school, therapist, physician or clergy can provide verification by submitting a letter which states that the adoptive parent(s) still has the care and responsibility for the child.

- The Central Office Adoption Support Specialist will forward a cover letter along with the CFS-431 (Certification of Adoption Subsidy Eligibility) to the adoptive parents annually. The cover letter will inform the adoptive parents that the local Adoption Specialist will contact them to schedule a visit.

- The Central Office Adoption Support Specialist will forward a copy of the cover letter to the local Adoption Specialist concurrently with notice to the adoptive parents.

- The adoptive parents will complete and submit the CFS-431 to the DCFS Adoptions Services Unit within ten (10) working days of the date of the accompanying cover letter. The Central Office Adoption Support Specialist will forward a copy of the completed CFS-431 to the Adoption Specialist for their records.

- The Adoption Specialist will have annual face-to-face contact with the child or otherwise verify that the child is still with the adoptive family and/or the adoptive family continues to maintain legal responsibility and provides support to the child. The Adoption Specialist should make the face-to-face contact a positive experience by exploring any needs for post adoption services. The Adoption Specialist should also inquire as whether the adoptive parents have added the adoptive child to their medical insurance and if so the family must complete a DCO–662 (Third Party Resource). The Adoption Specialist is responsible for submitting the completed form to the Medical Services Section of the Division of Medical Services.

- In CHRIS:
  - Complete the Contact screen documenting all activities with the adoptive family.
  - Print the Contact screen information and send the Adoption Support Specialist a copy of the documented contact (CHRIS screen) for the subsidy file.


ELIGIBILITY CRITERIA FOR NON-CUSTODY/OUT-OF-HOME PLACEMENT SERVICES:

If in the month of initiation for court proceedings leading to removal, the language of “contrary to the child’s welfare to remain in the home” is included in the first court order, a child not currently in DHHS custody can be eligible for a federal subsidy or a state legal subsidy.

Services shall be offered to families on whom the Department has filed a dependency-neglect petition when the court has placed the child(ren) in the custody of a relative or other person. Adoption services shall be offered to families who have custody of children due to a dependency/neglect order, if the family requests such services.

Sections 406 and 407 of the Social Security Act allow for Title IV-E subsidy eligibility, if certain criteria are met, in regards to the method of removal of a child from a home. These criteria are:

- If the child is removed from the home pursuant to a judicial determination, such determination must indicate that it was contrary to the child’s welfare to remain in the home;
- In the month the court proceedings were initiated to remove the child, the child must have been AFDC eligible in the removal home;
- The child must be AFDC eligible in the month in which the adoption proceedings were initiated;
- The state must determine that the child meets the definition of a child with special needs; and
The adoption assistance agreement is signed prior to the finalization of the adoption.

The **Adoption Specialist** will:

- Accept and review referrals for non-custody adoptions.
- Forward a request to the DCFS Eligibility Unit to determine if the child is eligible for Title IV-E adoption assistance. The request consists of a cover letter indicating that this is a Non-Custody/Out-of-Home Placement Services case needing AFDC determination for the initiation of an adoption petition. The request must be submitted within the first five (5) working days of the month. The request must be mailed or faxed to the DCFS Eligibility Unit.

The request must include the following information:

- The cover letter requesting the AFDC determination.
- A completed CFS-487. The application must include everyone in the adoptive home at the time the form is signed and all the income and resources for each family member. Include the relationship of the adoptive child to everyone in the adoptive home.

The following is a list of the eligibility factors that must be satisfied for AFDC determinations. Listed for each factor is the information needed to make the determination.

Complete the CFS-487 (Application for Title IV-E Payments/Medicaid) by listing everyone in the adoptive home at the time the form is signed. This includes individuals who may be temporarily absent from the home such as individuals on vacation, away at school, etc. Provide a birth certificate or some other legal document that verifies the custodial blood relatives’ relationship to the child.

1. **Age Requirement.**
   Children must be under 18 years of age. The child’s birth certificate must be submitted to verify age.

2. **Citizenship or Alienage Requirement.**
   Eligible members must be US citizens or lawfully admitted aliens intending to permanently reside in the US. Since this will be child-only AFDC determination, the birth certificate should verify citizenship.

3. **Residence Requirements.**
   The individual(s) must presently reside in Arkansas and intend to make it his home. No specific duration of residence is required. If the applicant has the present intention to make the state his home, his eligibility will not be affected by the fact that he intends to leave the state at some future time. Residence is not affected by temporary absence from the state.

4. **Deprivation of Parental Care and Support Requirement.**
   Submit the Termination of Parental Rights (TPR) court order to satisfy this eligibility requirement.

5. **Assignment of Rights to Support to the State.**
   Since there has been TPR, there is no assignment of rights as there are no custodial/non-custodial parent(s) of the child at this time.

6. **Cooperation in Child Support Enforcement Activities.**
   Since there has been TPR, there is no cooperation requirement with OCSE as there are no custodial/non-custodial parent(s) of the child at this time.

7. **Relationship Requirement and Living with Specified Relative.**
   TPR has not changed the relationship of the adoptive parent to the child. The relationship does no change until the adoption is finalized.
Degrees of Relationship

The child must be living with a relative who is in one of the following degrees of relationship to the child.

1st degree - Parent.

2nd degree - Grandparent, sibling.

3rd degree - Great-grandparent, uncle, aunt, nephew, niece.

4th degree - Great-great-grandparent, great-uncle, great-aunt, first cousin.

5th degree - Great-great-great-grandparent, great-great-uncle, great-great-aunt, first cousin once removed (i.e., the child of one's first cousin).

Half relationships will be considered the same as full relationships.

Step father, step mother, step brother, step sister.

Spouses of any persons named in the above groups. Such relatives may be considered within the scope of this provision though the marriage is terminated by death or divorce.

Relationship must be verified by birth certificates, baptismal records, Bureau of Vital Statistics Records, other authentic documents, or by written statement of a collateral which provides conclusive evidence that the relative is so related to the dependent child.

Persons Who Must be Included in the Standard of Need - Standard Filing Unit

The following relatives of an AFDC dependent child or a child for whom application is made must be included in the assistance unit with the child if they are living in the home with the child and are otherwise AFDC eligible:

The income and resources of these individuals must be reported and verified as part of the determination.

- The natural or adoptive parent of the child, including an unemancipated minor parent.
- All brothers and sisters of the child who are under age 18, unemancipated, and meet the deprivation of parental care or support requirement. This includes brothers and sisters of half-blood relationships but not step-brothers or step-sisters.

8. Non-Participation in a strike.
   No additional documentation needed.

   Submit a copy of the child’s Social Security card if available. If the card is not available ensure that the Social Security number is documented on the CFS-487.

    In completing the CFS-487, carefully read and answer appropriately each question about the type of income and assets of the child. Since you are the authorized representative for the family’s AFDC determination it is critical that these questions are answered as accurately and completely as possible.

    - The DCFS Eligibility Unit will make the AFDC eligibility determination within five (5) working days of receipt of the completed application and fax the determination to the Adoption Specialist.
NOTE: If the CFS-487 is not completed, and all supporting documentation needed is not submitted in a timely manner, the eligibility determination cannot be made.

- Notify OCC immediately of the child’s eligibility status. If the child is determined Title IV-E eligible OCC must file the petition for adoption in the same month of the eligibility determination. Therefore give OCC 10 working days notice to allow enough time to file the petition in the same month.

- Follow Policy and Procedure VIII-F (Foster Parent, Kinship Foster Parent and Relative Adoption) in approving the family for adoption.

- Refer the family for “Foster Pride/Adopt Pride” training. The family must complete the training prior to approval.

- For state legal subsidy: Complete the CFS-425 (Application for Special Subsidy) and specify “Use of Agency Attorney” to receive legal services from OCC for those children in a Non-Custody/Out-of-Home Placement Services case who do not meet the criteria for special needs. Children in a Non-Custody/Out-of-Home Placement Services case who do not meet the special needs criteria are eligible for “Use of Agency Attorney” to finalize an adoption.

- Document in the “Subsidy Family Profile” that the children are in a Non-Custody/Out-of-Home Placement Services case and state, “But for the child’s placement with a relative or other person, the child would still be in foster care.”

CRITERIA FOR SSI ELIGIBLE PRIVATE AGENCY AND INDEPENDENT ADOPTIONS

A child who is SSI eligible and is part of an independent adoption (i.e., not in the custody of a public or private agency) is eligible for a Title IV-E subsidy. Cases in which a child is subsequently adopted who received Title IV-E adoption assistance in a previous adoption that dissolved or in which that adoptive parents died are eligible for Title IV-E adoption subsidy. (See FSPP Policy VIII-H.)

The Adoption Subsidy Coordinator will:

- Accept and review referrals for independent adoption and private agency subsidy applications.

- Assess all submitted forms and documentation, approve or deny the adoption subsidy application, and provide written notification to the applicant, the person who arranged the independent adoption or the private agency representative of the decision within fifteen (15) working days of receiving the initial application packet from the Adoption Specialist. Contact the applicant, the person who arranged the independent adoption or private agency representative if additional information/forms are needed.

- Prepare the CFS-428 (Adoption Assistance Agreement) if the adoption subsidy application is approved, and route the CFS-428 to the Manager of the Adoption Services Unit and Community Support Section Administrator for approval, then send the CFS-428 to the DCFS Director or designee for signature.

- Send signed CFS-428 (Adoption Assistance Agreement) to the Applicant and Private Agency representative, if applicable, with written instructions.

- Notify the adoptive parent in writing if the application is denied and explain the reason for denial and the internal review and Administrative Fair Hearing procedures.

- In CHRIS:

  - Open a new Adoption Case on adoptive family entering the adoptive parents and adoptive child as clients.
• Complete the adoptive child’s Characteristic and Medical screens to identify the special needs.

• Complete the Adoption screens: General Information screen, Affidavit of Disclosure screen, and Subsidy screen. Request the Approval for the adoption subsidy.

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

The Adoption Specialist will:

• Follow 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.

• Amend a subsidy if there is documentation that an “at risk” child has developed a serious physical, mental or emotional condition.

• Determine with adoptive parent if an amendment to the existing adoption subsidy is needed. (An amendment may be requested at any time.) The adoptive family must consent to any subsidy amendment (Title IV-E only).

• Determine if there has been a material change in circumstances in the adoptive family to amend a federally funded subsidy. Material changes in circumstances include, but are not limited to, a different medical problem or a change in the type of condition of the child or a significant change in household. A state may renegotiate an adoption assistance agreement if the adoptive parents request an increase in payment due to a change in their circumstances and a higher foster care rate would have been paid on behalf of the child if the child had still been in foster care. Alternatively, a state may negotiate an adoption assistance agreement that automatically allows for adjustments to the adoption assistance payment when there is an increase in the foster care board rate.

• 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.

• Assist the adoptive parents in completing the “Statement of Income and Resources for Adoption Subsidy” (CFS-426). Attach verification of family income to the CFS-426 when a state funded adoption special subsidy is requested. The CFS-426 is not required for a federal adoption maintenance subsidy. Note that an amendment for an increase of a state subsidy will not exceed the amount the child would have received for a special board rate if in foster care. The amount of any amendment will not exceed $460.00 above the standard board rate for the child’s age group. However, if the child is SSI eligible, the rate can go up $460.00 above the SSI rate.

• Carefully review all requests for increases in payment for state funded subsidies and special subsidies. As state dollars are limited, an exploration of other resources is required and must be documented in the narrative when submitting an amendment request. The Division Director can review extraordinary circumstances at his discretion.

• Review the adoptive parent’s health insurance policy if a special subsidy is requested to determine if it will allow for any medical, dental, or psychological costs and, if so, to what extent. Document the information on the CFS-426.

• Complete the “Determination of Eligibility for Adoption Assistance” (CFS-427) if a special subsidy is requested.
VIII. SERVICES TO PROVIDE OTHER PERMANENT LIVING SITUATIONS

- Complete a narrative to address the type of subsidy needed, the source of funding, the reason for the subsidy, the costs, and recommendation.

- Send all requests, the forms, narrative, and any other documents to the Adoption Field Services Supervisor within twenty (20) working days from the initial contact with the adoptive parent. The Adoption Field Services Supervisor must submit all requests, except for special board rate increases, to the Adoption Subsidy Coordinator within five (5) working days of receipt.

- For requests of special board rate increases, forward completed packets to the Adoption Field Services Supervisor for review and comment. Upon completion of the review, the Adoption Field Services Supervisor will forward within three (3) working days the packet to the Adoption Field Services Manager. The Adoption Field Services Manager will review and make recommendations and submit the packet to the Subsidy Coordinator within five (5) working days of receipt.

- 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(s) 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.

In CHRIS:

- If subsidy amendment is approved, change the Subsidy Ending Date on the Adoption Subsidy screen to stop the existing adoption subsidy. Then, click Clear and enter the new amended subsidy with the new Beginning and Ending dates and the subsidy amount. Request the Approval for the amended subsidy amount.

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 CFS-428 (Adoption Assistance Agreement) if the adoption subsidy application is approved, and route the CFS-428 to the Manager of the Adoption Services Unit and Community Support Section Administrator for approval, then send the CFS-428 to the DCFS Director or designee 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 and State Funded Adoption Maintenance Subsidy after Age Eighteen

In some cases a federal adoption maintenance subsidy or state funded maintenance subsidy may be continued for adoptees eighteen (18) to twenty-one (21) years old. Medicaid, however, cannot be extended past age 18 for state funded subsidies. While the foster care Medicaid cannot be extended beyond the month the child turns eighteen (18), the family may apply for another type of Medicaid.

If the adoptive parent requests that the adoption subsidy be continued past the child’s eighteenth birthday, the following criteria must be met:

- The adoptive parent must be receiving a federal or state funded adoption maintenance subsidy prior to the child’s eighteenth birthday.
- The 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 Central Office Adoption Support Specialist will

- Include the above documentation and recommend whether the adoption subsidy should be continued past the child’s eighteenth birthday.
- Approve or deny the request for adoption subsidies after age eighteen.
- Prepare the CFS-428 (Adoption Assistance Agreement) if the adoption subsidy application is approved, and route the CFS-428 to the Manager of the Adoption Services Unit and Community Support Section Administrator for approval, then send the CFS-428 to the DCFS Director or designee for signature.
- Notify the adoptive parent in writing if the request is denied and explain the reason for denial and procedures for the internal review and Administrative Fair Hearing.
- In CHRIS:
  - If subsidy has been extended, change the Subsidy Ending Date on the Adoption Subsidy screen to continue subsidy past child’s eighteenth birthday.
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:

- Contact the ICAMA Coordinator or refer an adoptive parent to the ICAMA Coordinator in the DCFS Adoption Services Unit.
- Provide the ICAMA Coordinator with the adoptive family’s new address, phone number, and the effective date of the move.

The ICAMA 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 the following: (1) Form 6.01 (Notice of Medicaid Eligibility/Case Activation), (2) Form 6.02 (Notice of Action), and (3) Form 6.03 (Change in Child/Family Status), if applicable.
- Forward completed ICAMA forms to the Eligibility Unit in relation to a child who moves into the state. Forward the following: (1) Form 6.01 OR a COBRA Letter and (2) a copy of the Adoption Subsidy Agreement.
- Notify the Eligibility Unit via the CFS-495 when an ICAMA child leaves the state of Arkansas, and make documentation in CHRIS.

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 a federal funded subsidy or state maintenance 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).
The **Adoption Specialist** will:

- Notify the Central Office Adoption Support Specialist of any change in the adoptive family’s circumstances, which would warrant termination of the adoption subsidy.

- In CHRIS:
  - If adoption subsidy is terminated, change the Subsidy Ending Date on the Adoption Subsidy screen to stop the existing adoption subsidy.
  - If there are other adoptive siblings with existing adoption subsidies:
    - End-Date the adoptive child’s Involvement in Case selecting the appropriate reason on the Child’s General Information screen.
  - If there are no other adoptive siblings with existing adoption subsidies:
    - Close the adoption case on the Case Summary screen selecting the appropriate reason.

The **Central Office Adoption Support Specialist** 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.

**PROCEDURE (VIII-H8): Payment for Non-recurring Adoption Expenses and Special Subsidy**

The **Adoption Specialist** will:

- Submit a billing packet to the Adoption Subsidy Coordinator for non-recurring adoption expenses within sixty (60) days after the finalization of the adoption.
  - For non-travel related expenses, the packet will include the DHHS-1914, W-9, original invoice, a copy of the CFS-428 and final adoption decree.
  - For travel related expenses the packet will include the TR-1, receipts, a copy of the CFS-428 and the final adoption decree.
  - For payment of a special subsidy, the packet will include: DHHS-1914, W-9, original invoice, copy of the CFS-428 and the final adoption decree.

The **Adoption Subsidy Coordinator** will:

- Review, code and forward each completed billing packet within ten (10) working days and forward to the manager of the Adoption Services Unit for approval. The Manager of the Adoption Services Unit will forward approved packet to the office of finance for payment within ten (10) working days of receipt from the subsidy coordinator.
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.

A.C.A. §9-9-505 Requires compilations of nonidentifying histories of adoptions be available upon request, throughout the time the agency is required to maintain records, to the following persons only: (a) The adoptive parents of the child or, in the event of death of the adoptive parents, the child’s guardian; (b) The adoptee; (c) In the event of the death of the adoptee, the adoptee’s children, the adoptee’s widow or widower, or the guardian of any child of the adoptee; (d) The birth parent of the adoptee; (e) Any child welfare agency having custody of the adoptee. Any additional nonidentifying information which may have been added on health or on genetic and social history, but which excludes information identifying any birth parent or member of a birth parent’s family or the adoptee for any adoptive parent of the adoptee, shall be made available ONLY to the persons listed in this paragraph.

Any affidavits filed for placements on the registry and any other information collected shall be retained for ninety-nine years following the date of registration. Any qualified person may choose to remove his name from the Registry at any time by filing a notarized affidavit with the Registry.

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

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 Health & 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 of every adult adoptee and birth parent reunited through the use of Mutual Consent Voluntary Adoption Registry.

• Provide a copy of the foster care record to the adoptee upon request. De-identify the names of any reporters of child abuse and/or neglect.

• Arrange for an adoptee to review his foster care record upon request. This access is NOT available to adoptees who were placed as infants for the sole purpose of adoption.

The Adoption Specialist will:

• Refer any person who inquires about the Registry to the Registry Administrator, Adoption Services Unit.

• Provide a minimum of no less that one (1) hour of counseling to Registry applicants for receipt of identifying information and sign the affidavit to verify the service.
POLICY (VIII-J): INTERNATIONAL ADOPTIONS

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

PROCEDURE (VIII-J1): International Adoptions

The Manager, Adoption Services Unit, or designee will:

- Respond to inquiries/referrals about international adoptions.
- Provide list of licensed private adoption agencies who will complete adoption assessments for inter-country adoptions.
- Determine if an adoption assessment prepared by a qualified licensed social worker or others designated by the court meet child placement licensing requirements for adoption in Arkansas. (Licensed adoption agencies are exempt from this review.)
- Provide an approval letter to the United States Immigration and Naturalization Service upon request 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 designee.
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 S560, 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 Health & Human Services, Office of Chief Counsel, Appeals and Hearings Administration Section, P.O. Box 1437, Slot N401, Little Rock, AR 72203-1437.

The Appeals and Hearing Section will notify DCFS 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.

In the event a true child maltreatment determination is the subject of an appeal, consultation will occur between the Family Service Worker, County Supervisor, OCC Attorney and the Area Manager. The purpose of the consultation will be to review the evidence used to establish the true determination and ascertain the impact of any subsequent events of the case after the determination was made. If the consultation reveals no merit for defending the true finding, then the Area Manager will be responsible for
completing the CFS-346 (Approval Not to Defend a True Child Maltreatment Determination). A copy of the CFS-346 will be retained by the Area Manager, and one copy each given to the County Supervisor and OCC attorney. The OCC attorney will inform Appeals and Hearing of the decision not to defend. The CFS-346 will be included in the investigative file. (See Procedure IX-A4.)

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 180 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 180 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 180-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. Upon request by the petitioner, DCFS shall provide a list of persons who were told previously that the report was “True”.

• The Family Service Worker will provide a copy of the administrative hearing order upon request by a subject of the report.
PROCEDURE (IX-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 investigation 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 the “Child Maltreatment Assessment Determination Notification” (CFS-312). A copy of the return receipt verification (green card) must also be attached to the file.

- The CFS-346 (Approval Not to Defend a True Child Maltreatment Determination) will be included with the investigative file if the agency has decided that the true child maltreatment determination will not be defended.

- The “Administrative Hearing Statement” (CFS-320) will summarize the nature of the complaint, a summary of the Child Maltreatment Investigation, 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 Health & 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 DHHS 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 follow established Department of Health & Human Services policy and procedures governing the reporting of incidents (see DHHS Administrative Policy 1090 “Incident Reporting”). The Division will not automatically issue press releases on cases of child fatality or near fatality, but will respond to requests for information as they are received. Per A.C.A.§ 12-12-503 a near fatality means an act that, as certified by a physician, places a child in serious or critical condition. As such, the Division will rely on the involved medical facility’s designation of the child’s condition in determining if a particular incident meets the criteria of near fatality as defined by law.

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

PROCEDURE (IX-B1): Child Death Protocol

All DCFS employees must report an incident that may effect the health and safety of DHHS clients, employees, volunteers, and others on DHHS premises or while receiving DHHS services, and occurrences that interrupt or prevent the delivery of services, to the DCFS Division Director and the DHHS Director’s office. An incident includes the death of a child who was in DHHS custody, in a Protective Services or Supportive Services case, or who died under conditions believed to have been caused by child maltreatment. The death of a child, or the sibling, who was the subject of a maltreatment report within the proceeding twelve (12) months must also be reported.

The Employee will:

- Complete and transmit the DHHS Incident Reporting Screen data fields in IRIS (use the Incident Report Information System {IRIS} link on the DHHS Gold home page) to the DCFS Director’s office and the DHHS Director’s office, along with the CFS-329, via the Client Advocate, no later than the end of the second business day following the incident (see DHHS Policy 1090).

- Submit a follow up or final IRIS report if information submitted in the initial report is incomplete. The follow-up or final report should be submitted to the DCFS Director and DHHS Director’s office as soon as the additional information becomes available.

The County Supervisor will:

- Notify the Area Manager, Assistant Director for Community Services, and the DCFS Director immediately by telephone and follow-up with written notification.

- Notify the DHHS Chief Counsel within one (1) hour of occurrence of the child’s death.

- Notify the DHHS Communications Director by telephone within one (1) hour of occurrence if the incident is expected to receive media attention.

- 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).

• Send a copy of the briefing memo and the CFS-329 to the Child Death Review Committee Chairperson (Assistant Director of Community Support).

• 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.

• Send a copy of the incident report, along with a complete copy of the case record, to the Child Death Review Committee Chairperson (Assistant Director of Community Support) within three (3) business days of the occurrence, if the death occurred under one of the following circumstances:
  
  • The child or sibling was a client in a protective services case during the previous twelve (12) months.
  
  • The child or sibling was a client in an open, out-of-home placement, or supportive services case.
  
  • The child or a sibling was a subject of a pending child maltreatment investigation, or an investigation within the preceding twelve (12) months.

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 DHHS Director's Office, and the DHHS Communications Director by telephone on the first business day following the death of the child and follow-up in writing.

• Discuss relevant details of the case with the Communications Director to determine the type of information that will be released to the media. Pertinent information that can be released will include:


- the name of the child;
- the child’s date of birth;
- the date of the incident;
- the location of the child at the time of the incident;
- the current condition of the child if the incident was a near fatality (as determined by the medical facility);
- allegations or preliminary cause of the child’s death;
- the identity of the person responsible for the fatality or near fatality;
- any anticipated legal action (e.g., hospital, foster home, etc.);
- any pending criminal charges; and
- the child’s involvement with the agency (only in relation to the child maltreatment report that resulted in the fatality or near fatality).

Do not release any information concerning siblings or attorney-client communications.


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 DHHS Requisition obtained through the DHHS-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 Health & 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 or Head-Priority II
  7. Striking a Child Age Six or Younger on the Face or Head-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
  24. Pinching or Striking a Child in the Genital Area-Priority II
  25. Extreme or Repeated Cruelty to a Juvenile-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, and the investigation, study or supervision is to take place within the state of Arkansas.

The following policy statements are in accordance to the Uniform Adoption Act. The Department or any licensed certified social worker shall conduct a home study before placement of a child in the home of the petitioner. Home studies on non-Arkansas residents may also be conducted by the person or agency in the same state as the person wishing to adopt as long as the person or agency is authorized under the law of that state to conduct home studies for adoptive purposes.

The Department of Health & Human Services shall not be ordered by any court, except the juvenile division of circuit court, to conduct a home study, unless:

- The court has first determined the responsible party to be indigent; and
- The person to be studied lives in the state of Arkansas.

The home study shall be prepared and submitted in conformity with regulations promulgated pursuant to the Child Welfare Agency Licensing Act § 9-28-401 et seq., as stated in PUB-04.

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:

- 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 “Foster Care Criminal Record Check” (CFS-342A) or “State Adoptions Criminal Record Check” (CFS-342B), whichever is applicable. 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.

• In CHRIS:
  • Enter the family as a Resource by completing the General Information screen, Status screen, and Homes screens.
  • Close the family as a Resource on the General Information screen upon completion of the home study.

PROCEDURE (X-A2): Content of the Home Study

• 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:

• In CHRIS:
  • Document services delivered and activities conducted on the Services Provided To Resource screen in Resource.
  • 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 DHHS-1188 "Application for Part-Time or Full-Time Educational Leave";
  - Include a blank copy of "Arkansas Department of Health & 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 DHHS-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 DHHS-1188; or
- A written narrative from the supervisor stating reasons for disapproval, as required on the DHHS-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 DHHS-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 DHHS-1188.

F. Notification to Applicants – The DCFS Professional Development Unit will notify each applicant regarding the status of his/her application (DHHS-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 DHHS 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 DHHS 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 (DHHS-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 DHHS-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 DHHS Office of Administrative Services and the DHHS 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 cannot 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.
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. Abandonment does not include acts or omissions of a parent toward a married minor.

ABUSE -- Any of the following acts or omissions by a parent, guardian, custodian, foster parent, person eighteen years of age or older living in the home with a child whether related or unrelated to the child, or any person who is entrusted with the juvenile’s care by a parent, guardian, custodian, or foster parent, including, but not limited to, an agent or employee of a public or private residential home, child care facility, public or private school, or any person legally responsible for the juvenile’s welfare, but excluding the spouse of a minor:

- 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 and without justifiable cause:
  1. Throwing, kicking, burning, biting or cutting a child.
  2. Striking a child with a closed fist.
  3. Shaking a child.
  4. Striking a child on the face or head.
- Any of the following intentional or knowing acts, with or without injury:
  1. Striking a child age six or younger on the face or head.
  2. Shaking a child age three or younger.
  3. Interfering with a child’s breathing.
  4. Pinching or striking a child’s genital area.

NOTE: The prior list of unreasonable actions 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.
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—Aggravated circumstances exist 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; or a child has been removed from the custody of the parent or guardian and placed in foster care or in the custody of another person more than three (3) times in the last fifteen (15) months.

CARETAKER – A 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 – A person who is from birth to the age of eighteen (18).

CHILD ABUSE HOTLINE – The Child Abuse Hotline is maintained by the State Police Crimes Against Families Division, for the purpose of receiving and recording notification made pursuant to the “Child Maltreatment Reporting Act”. The Child Abuse Hotline is staffed twenty-four (24) hours per day and has statewide accessibility through a toll-free telephone number.

CHILD CARE INSTITUTION – A private child care institution, or a public child care institution which accommodates no more than 25 children, and is licensed by the State in which it is situated or has been approved by the agency of such State or tribal licensing authority (with respect to child care institutions on or near Indian reservations) responsible for licensing or approval of institutions of this type as meeting the standards established for such licensing. This definition must not include detention facilities, forestry camps, training schools, or any other facility operated primarily for the detention of children who are determined to be delinquent.

CHILD MALTREATMENT -- Physical abuse, sexual abuse, emotional abuse, neglect, sexual exploitation or abandonment of a child.

CHILD MALTREATMENT INVESTIGATION -- A fact finding assessment that occurs when an allegation of child maltreatment is received. Completion is reached when a determination is made concerning the allegations.

CUSTODIAN – A person (not a parent or legal guardian) who stands in loco parentis to the child OR an agency or institution given custody of a child through a court order.
DELINQUENT JUVENILE – Any juvenile:

- Ten (10) years of age or older who has committed an act other than a traffic offense or game and fish violation, which, if the act had been committed by an adult, would subject the adult to prosecution for a felony, misdemeanor, or violation under the applicable criminal laws of this state or who has violated §5-73-119; or
- Any juvenile charged with capital murder or murder in the first degree, subject to extended juvenile jurisdiction.

DEPENDENT JUVENILES – Includes a child:

- Whose parent is under the age of eighteen (18) and is in the custody of the Department of Health & 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;
- Who is an infant relinquished to the custody of DHHS for the sole purpose of adoption; or
- Who is a safe haven baby. (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 IN NEED OF SERVICES (FINS) – Any family whose juvenile evidences behavior which includes, but is not limited to, the following:

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

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.

FAST TRACK -- Fast track implies that reunification services will not be provided or will be terminated before twelve (12) months of services.

FEDERAL ADOPTION SUBSIDY (IV-E) -- Payments for a child who is categorized as IV-E (TEA/TANF, SSI-AB or SSI-AD) at the time of placement for adoption by the Division and who meets other defined special needs characteristics if it has been documented that a reasonable effort has been made to place the child without the benefit of subsidy.

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 who is between birth and age eighteen (18).

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, foster parent, Division of Juvenile Services employees, employees working under contract for the Division of Juvenile Services, Court Appointed Special Advocate (CASA) program staff or volunteer, juvenile intake or probation officer, domestic violence shelter employees, domestic violence volunteers, domestic abuse advocate, day care center worker, or any other child care worker or foster care worker, mental health professional, peace officer, law enforcement official or clergyman. Clergyman includes a minister, a priest, rabbi, accredited Christian Science practitioner, or other similar functionary of a religious organization, or an individual reasonably believed to do so by the person consulting him, except to the extent he has acquired knowledge of suspected maltreatment through communications required to be kept confidential pursuant to the religious discipline of the relevant denomination or faith, or he received knowledge of the suspected maltreatment from the offender in the context of a statement of admission.

MEDICAL PROVIDER -- Any emergency department of a hospital licensed under § 20-9-214.

NEGLECT -- Acts or omissions of a parent, guardian, custodian, foster parent, or any person who is entrusted with the juvenile’s care by a parent, custodian, guardian, or foster parent, including, but not limited to, an agent or employee of a public or private residential home, child care facility, public or private school, or any person legally responsible under state law for the juvenile’s welfare, but excluding the spouse of a minor and the parents of a married minor, which constitute:
• 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.

ORDER OF LESS THAN CUSTODY – A court order that DCFS may seek when there are protection issues regarding a child who has been subjected to severe maltreatment, but the Division does not want to seek custody.

OUT-OF-HOME PLACEMENT - Placement in a home or facility other than placement in a youth services center, a detention facility, or the home of a parent or guardian of the juvenile; or placement in the home of an individual other than a parent or guardian, not including any placement where the court has ordered that the placement be made permanent and ordered that no further reunification services or six-month reviews are required.

OUTPATIENT MENTAL HEALTH EMERGENCY – Defined by the Community Mental Health Center’s actions and protocol, including, but not limited to, facilitation of admission to a hospital or other appropriate 24 hour treatment facility.

PARENT -- Biological mother, an adoptive parent, a man to whom the biological mother was married at the time of conception or birth, or has been found by a court of competent jurisdiction to be the biological father of the juvenile.

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.

PSYCHIATRIC CRISIS – Any condition requiring greater than routine services, but requiring less than hospitalization; a condition that is not homicidal or suicidal, or if it is, one that can be handled with a no-harm contract and/or a viable plan for safety.

PUTATIVE FATHER – A man who claims or is alleged to be the biological father of a juvenile, but has not been so deemed or adjudicated by a U.S. court.
REASONABLE EFFORTS - Efforts to 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 DHHS 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.

SEXUAL ABUSE – Any of the following acts committed:
(A) By a person ten (10) years of age or older to a person younger than eighteen (18) years of age:
   - Sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion
   - Attempted sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion
   - Indecent exposure or forcing the watching of pornography or live human sexual activity.
(B) By a person eighteen (18) years of age or older to a person not his or her spouse who is younger than sixteen (16) years of age:
   - Sexual intercourse, deviate sexual activity or sexual contact or solicitation or
   - Attempted sexual intercourse, deviate sexual activity or sexual contact.
(C) By a sibling or caretaker to a person younger than eighteen (18) years of age:
   - Sexual intercourse, deviate sexual activity or sexual contact or solicitation or
   - Attempted sexual intercourse, deviate sexual activity or sexual contact.
(D) By a caretaker to a person younger than eighteen (18) years of age:
   - Forcing or encouraging the watching of pornography, or
   - Forcing, permitting or encouraging the watching of live sexual activity.
(E) By a person younger than ten (10) years of age to a person younger than eighteen (18) years of age:
   - Sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion
   - Attempted sexual intercourse, deviate sexual activity or sexual contact by forcible compulsion

SEXUAL CONTACT -- Any act of sexual gratification involving the touching, directly or through clothing, of the sex organs, buttocks, or anus of a person or the breast of a female. 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 -- A child who is free for adoption and belongs to a group of children for whom the Division does not have an adequate resource of approved applicants to provide a pool of available waiting adoptive families. Other children may be eligible for adoption assistance under this category if they have severe medical or psychological needs that require ongoing rehabilitation or treatment. These children include:

- a Caucasian child nine years or older,
- a healthy child of color who is two years or older,
- or a member of a sibling group of three or more children being placed together who share at least one biological parent and who have either lived together or otherwise developed a bond prior to adoptive placement, and the child is:
  - legally free for adoption with parental rights terminated,
  - under eighteen years old and whose adoption has not been finalized prior to approval of the subsidy,
  - (for the purposes of a State Subsidy only), in DHHS custody, or
  - a member of a Non-Custody/Out of Home Placement Services case, or
  - (For the purposes of private and independent adoptions only), who is SSI eligible at the time the adoption petition is filed.

Children at high risk for the development of a serious physical, mental, developmental or emotional condition may be considered special needs if documentation of the risk is provided by a medical professional specializing in the area of the condition for which the child is considered at risk, but no subsidy payment will be made without documentation that the child has developed the actual condition.

In order to be eligible for special needs based on developmental delay, documentation must be provided, current within 6 months, attesting to the fact that the child has a delay of 24% or more in two major developmental categories.

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. A child must be in DHHS custody to be eligible for a State funded subsidy.

SUBJECT OF THE REPORT -- The alleged offender, the custodial and non-custodial parent, guardian and legal custodians of the child who are subject to suspected maltreatment, and the child who is the subject of suspected maltreatment.

SUPERVISION -- Involves periodic visitation to the home, school, or other places to monitor or observe a child’s situation or condition. This service also may include arrangement and observation of visitation.

TRIAL PLACEMENT -- The custody of the child remains with DHHS but the child is returned to the home of a parent for a period not to exceed thirty (30) days.

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

GUIDELINE FOR AN ADOPTION SUMMARY- DETAILED HEALTH HISTORY AND GENETIC AND SOCIAL HISTORY

Before placement for adoption, the Division shall compile and provide to the prospective adoptive parents a detailed, written health history and genetic and social history of the child which excludes information which would identify birth parents or members of a birth parent’s family. The detailed, written health history and genetic and social history shall be set forth in a document that is separate from any document containing information identifying the birth parents or members of the birth parent’s family. The detailed, written health history and genetic and social history shall be clearly identified as such, and filed with the clerk before the entry of the adoption decree. Upon order of the court for good cause, the clerk may tender to a person identified by the court a copy of the detailed, written health history and genetic and social history.

Adoption Summary of Child

A. Birth Information: Prenatal care, birth date, measurements at the time of birth, a description of the delivery, any complications that occurred, alcohol/drug and tobacco involvement of birth parent during pregnancy and how it 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 and Social History: Social, intellectual, emotional and physical development of the child, noting any delays/limitations. Early developmental milestones should be discussed. For example:

- Cognitive Development
  - 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 History:
• medical history (diseases, conditions, disabilities, allergies, hospitalizations, serious injuries etc.), present problems/needs, future problems/needs
• genetic history
• 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, genetic history, 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


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.
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<td>KINSHIP FOSTER PARENTING</td>
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INSTRUCTIONS FOR FINDING ARKANSAS CODE ANNOTATED ONLINE

1. Go online with Internet Explorer.

2. Type into the address box: http://www.courts.state.ar.us and then hit the “Enter” key.


4. The “Arkansas Code” screen will come up.

5. Double left click on “Got to the Arkansas Code”.

6. On the screen that comes up, double left click on “HTML Only Version”.

7. A search screen will come up on the left side of the screen.

8. Click on the little arrow next to the words “Select Search Form”.

9. Click on “Advanced Search” and the Advanced Search Screen will come up.

10. In the top box labeled, “containing all these words:” type in the Arkansas Code you want to find (use only numbers and dashes). Hit the “Enter” key.

11. Either the Arkansas Code you want will come up on the screen OR a list of code will appear on the screen.

12. If you get a list, scroll down to the code you want and click on it.
V. RECORD RETENTION SCHEDULE

1. Retain all child protective services, Out-of-Home Placement Services, and supportive services for five years after the youngest child turns 21 years old. Retain all other client files for five years after the file is closed or the last case activity.

2. Retain all adoption records for 99 years.

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

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

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

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

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

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

9. Records of all cases where allegations are determined to be unsubstantiated shall not be included in the Central Registry, per A.C.A. §12-12-505(a)(1)(B).

9. 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  (Family Foster Homes)

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)

DHHS-375 (Volunteer Cover Letter)

DHHS-1914 (Department of Health & Human Services Requisition)

Order: Filed in chronological order with the most current on top.
VII. CASE RECORD ORDER (Out-Of-Home Placement Cases)

The Family Service Worker shall maintain and organize the current case record on every foster child in his caseload. Policy (I-D): Official Record Keeping, states that a hard copy file of case information will be maintained for data not in CHRIS. Hard copy files will be created, if necessary for case review. The following is the case record order to maintain files on information not in CHRIS. This case record order will also be used when hard copy files are created for case review.

Front Left   Legal Section
Services Face Sheet CFS-386
Client Information CFS-6002
6 Month Review Order
Adjudication Order
Emergency Order
Summons
Warning Orders
Order Terminating Parental Rights and Granting to DHHS the Power to Consent to Adoption
Petitions
Affidavit CFS-411
Birth Certificate
Social Security Card SS-5

Order: CFS-386 (Services Face Sheet) on top, Order Terminating Parental Rights (if applicable), next to the top, then most current court order followed by all legal documents related to that order (i.e., petition, warning orders, summons, etc.). Other information behind this is filed in chronological order with the most current on top. Behind each court order, file all legal documents related to the order.

Front Right   Case Plan, Staffings, and Progress Reports
Case Plan (CFS-6010)
Treatment Plan – signed CFS-6010
Placement Plan – signed CFS-6008
Child’s Health History Services Plan CFS-368/Medical Passport
Independent Living Case Plan (if applicable)

Order: CFS-6010 (Case Plan) on top and applicable medical passport forms, and staffing reports filed in chronological order with the most current on top.

Center Left   Child’s Social Record and Narrative
Family Strengths and Needs Assessment CFD-6009
Case Summary CFS-6022
Client Services CFS-6005
Contacts/Visits CFS-6006
Court Report CFS-6011
Home Studies

Order: File in chronological order with the most current on top.
Center Right  Correspondence
Invitation to Family Centered Meeting CFS-590
Change in Placement Review CFS-331
Letters/Memos
Incident Reports (use IRIS link on DHHS Gold)

Order: Most current on top.

Back Left  Medical and School Record
CFS-362 Medi-Alert Form (Initial Placement)
Placement Plan – Placement Provider Information CFS-6007
Client Medical and Psychological Information (each client) CFS-6012
Child Health Services Plan CFS-368
Health Screening CFS-366
Medical, Dental, Vision, Hearing and Psychological Episodic Form CFS-352
Past Medical History Records Requested CFS-353
Consent for Release of Information DHHS-81
School Records (Report Cards, IEP, etc.)
Psychological Evaluations

Order: Child’s medical record on top; others intermixed with most current on top.

Note: Educational records and reports of each age appropriate child, not just those children with special educational needs, shall be filed in the foster child’s case record. Reports and records include report cards, Individual Education Plan (I.E.P), etc.

Back Right  Financial
Application for Title IV-E Payments/Medicaid CFS-487 (print from CHRIS screen)
Referral/Information Transmittal DHHS-91
Notification of Change (print from CHRIS screen)
Requisition DHHS-1914
Authorization for Billing CFS-334 (Only for payments from Child’s Trust Account)
Homemaker Referral CFS-322
Information/Referral DHHS-3300

Order: Intermixed with most current on top.
VIII. PROTOCOL FOR FAMILY SERVICE WORKERS – Responding To Methamphetamine And Meth Lab Exposure Of Children

1. If you discover a meth lab or suspect that you have come across chemicals being used to make methamphetamine during a home visit or child maltreatment investigation, leave the house, depart the immediate area, contact law enforcement and call the Hotline to report the child maltreatment.

2. Remain away from the house until after law enforcement has responded to your call and secured the house and the people inside.

3. Advise the law enforcement officers about any children that are in the house.

4. Do not enter the house as you may risk contaminating yourself.

5. If you are called to a meth lab site by law enforcement, respond to the call, but do not enter the house.

6. Be sure to put on a pair of disposable Nitrile gloves.

7. When the child(ren) are brought out of the house, touch them only with your gloved hands. Discuss with law enforcement the children’s estimated level of contamination and what degree of decontamination is needed.

8. If the law enforcement officers or other personnel at the scene have decontamination equipment, allow them to decontaminate the children. If there is no decontamination equipment on site, drape a non-contaminated material (e.g., blanket or plastic) around the child(ren) like a cape, head to foot before placing the children in any vehicle. (You will need to keep a blanket or plastic sheeting in your car for use in these cases.) Ensure that the children have something on which to rest their feet.

9. Transport the child(ren) to an appropriate medical facility previously identified in the city/county where they can be medically examined, tested for exposure and decontaminated, if still necessary. Remember that part of the reason for the medical examination is to collect evidence that the children have been exposed to methamphetamine and/or the chemicals used in a meth lab.

10. When decontamination, medical testing and medical examination have been completed, follow the appropriate DCFS policies and procedures for placing the child(ren) in out-of-home care.

11. If the children have not yet been decontaminated, be sure to advise the foster parents of the immediate need to shower or bathe the children with soap and water. Also instruct the foster parents to clean their shower or bathtub with dishwashing liquid and water afterward. Advise the foster parents to dispose of the children’s contaminated clothes. Do not try to wash the clothes, as this will spread the contamination.

12. Advise the foster parents of the immediate need for some new clothes since the child(ren) were not allowed to bring anything (clothes, toys, etc.) from the meth lab sight. In accordance with the Family Foster Parent Handbook (PUB-30, page 29 Initial Clothing Order) the Family Service Worker (FSW) will assess, with the foster parent, which items of clothing are needed and issue the authorized amount of clothing allowance. Purchases will be made using the DHHS-1914 process. The FSW will accompany the foster parent to the store to approve the purchase.
Foster Parent Inquiry/Referral Received

Designated DCFS Staff contacts family within 3 working days after referral of the inquiry.

Foster Home Evaluator conducts home consultation within 10 workdays of initial family contact.

Foster Home Evaluator should:
- Discuss foster parent requirements.
- Provide record check forms for completion.

DCFS County Supervisor or Designee will:
- Log receipt of the CFS-446.
- Approve/disapprove recommendation for training applicant within 5 workdays of receiving CFS-446.
- Sign and return CFS-446 to the Foster Home Evaluator.
- Submit all record check requests on the same day applicant approval (electronic) is sent to MidSouth Academy.

Foster Home Evaluator submits CFS-446 to supervisor within 30 calendar days of initial family contact. Foster Home Evaluator recommends inviting the applicant into training.

DCFS County Supervisor or Designee will:
- Approve or deny foster home within 30 days of receipt of home study.
- Notify the prospective foster family by letter of approval or denial.
- Log disposition in CHRIS inquiry screen.
- Schedule & hold County or Area orientation

Foster Home Evaluator:  
- Invite applicant to pre-service training within 5 days of approval.
- Forward copies of CFS-446, cover letter and other forms to prospective foster parent(s) and MidSouth.

Foster Home Evaluator:
- Invite applicant to pre-service training within 5 days of approval.
- Forward copies of CFS-446, cover letter and other forms to prospective foster parent(s) and MidSouth.

HOME STUDY
Submitted to DCFS County Supervisor for review within 30 days of family completing pre-service training.

STAFF (DCFS or Contract): Conducts and completes the home study on the prospective foster home.

Placing Foster Parent completes:
- CPR and First Aid Training, and
- Pre-service training by MidSouth.

Family Service Worker Monitors each foster home on a quarterly basis. Maintains a comprehensive foster home record on each foster family.

Placement Supervisor, DCFS County Supervisor or DCFS Area Manager will enter the approved foster family into CHRIS as a resource.

DCFS COUNTY SUPERVISOR will:
- Approve or deny foster home within 30 days of receipt of home study.
- Notify the prospective foster family by letter of approval or denial.
- Log disposition in CHRIS inquiry screen.
- Schedule & hold County or Area orientation
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.
Deadly Weapon ___________________________ Procedure (II-E11), Glossary: Abuse and Severe Maltreatment
Drug _____________________________ Policy (VI-A), Procedure (VIII-B1), Procedure (X-A2), Appendix II., A.A.,
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Compacts: Juvenile, Mental Health, and Adoption and Medical Assistance __________________ Procedure (VI-G15)
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Decision ____________________________________________ Procedure (VIII-G3)
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Family Service Delivery System ____________________________________________ Policy (I-B)
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Inter-country Policy (VIII-J), Procedure (VIII-J1)
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Minimum Licensing Standards for Child Welfare Agencies

Child Welfare Agency Review Board
&
Arkansas Department of Health and Human Services
Division of Children and Family Services

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Introduction


Child Welfare Agency Review Board

The Child Welfare Agency Review Board shall promulgate and publish rules and regulations setting minimum standards governing the granting, revocation, refusal, and suspension of licenses for a child welfare agency and the operation of a child welfare agency.

The board may consult with such other agencies, organizations, or individuals as it shall deem proper.

The board shall take any action necessary to prohibit any person, partnership, group, corporation, organization, or association not licensed or exempted from licensure pursuant to this chapter from advertising, placing, planning for, or assisting in the placement of any unrelated minor for purposes of adoption or for care in a foster home. The prohibition against advertising shall not apply to persons who are seeking to add to their own family by adoption.

The board may amend the rules and regulations promulgated pursuant to this section from time to time, in accordance with the rule promulgation procedures in the Arkansas Administrative Procedure Act, § 25-15-201 et seq.

The board shall promulgate rules and regulations that:

1. Promote the health, safety, and welfare of children in the care of a child welfare agency;
2. Promote safe and healthy physical facilities;
3. Ensure adequate supervision of the children by capable, qualified, and healthy individuals;
4. Ensure appropriate educational programs and activities for children in the care of a child welfare agency;
5. Ensure adequate and healthy food service;
6. Include procedures for the receipt, recordation, and disposition of complaints regarding allegations of violations of this subchapter, of the rules promulgated under the Child Welfare Agency Licensing Act, or of child maltreatment laws;
7. Include procedures for the assessment of child and family needs and for the delivery of services designed to enable each child to grow and develop in a permanent family setting;
(8) Ensure that criminal record checks and central registry checks are completed on owners, operators, and employees of a child welfare agency as set forth in this subchapter;

(9) Require the compilation of reports and making those reports available to the division when the board determines it is necessary for compliance determination or data compilation;

(10) Ensure that a child placement agency:
   (a) Treats clients seeking or receiving services in a professional manner, as defined by regulations promulgated pursuant to this act; and
   (b) Provides clients seeking or receiving services from a child placement agency that provides adoption services with the phone number and address of the Child Welfare Agency Licensing Unit of the Department of Health and Human Services where complaints can be lodged.

(11) Require that all child welfare agencies that provide adoption services fully apprise in writing all clients involved in the process of adopting a child of the agency’s adoption program or services, including all possible costs associated with the adoption program.

The Arkansas Administrative Procedure Act, Ark. Code Ann. 25-15-201 et seq., shall apply to all proceedings brought to the Board pursuant to this Act. The Arkansas Rules of Civil Procedure and the Arkansas Rules of Evidence shall also apply to adverse action hearings.

The Department of Health and Human Services, Division of Children and Family Services is designated as the governmental agency charged with the enforcement of the provisions of the Act. Only the Division, licensees, and applicants for a license shall have standing before the Board, except where otherwise provided by law.

The Department of Health and Human Services shall maintain a website accessible to the general public that contains information on child placement agencies. The website shall contain:

1. The name, phone number and address of all child placement agencies licensed by the board;
2. Information on each child placement agency, specifically if the license is in good standing, and if the license has ever been revoked or suspended, or if any letters of caution or reprimand have been issued by the Child Welfare Agency Review Board; and
3. The name and contact information for a person in the Child Welfare Agency Licensing Unit of the Department of Health and Human Services who handles complaints about child placement agencies.
Agencies Requiring Licensing

Any person, organization, corporation, partnership, voluntary association or other entity which provides care, training, education, custody, or supervision for a total of six (6) or more unrelated minors on a twenty-four (24) hour basis, and is not otherwise exempt by the Act, requires a license.

Any person, organization, corporation, partnership, voluntary association, or other entity which places, plans for or assists in the placement of any unrelated minor for care in a foster home, adoptive home, or residential facility, and is not otherwise exempt by the Act, requires a license.

The Board shall take any action necessary to prohibit any person, partnership, group, corporation, organization or association not licensed or exempted from licensure from advertising, placing, planning for, or assisting in the placement of any unrelated minor for the purposes of adoption or for care in a foster home. The prohibition against advertising shall not apply to persons who are seeking to add to their own family by adoption.

The Board may impose a civil penalty upon any person, partnership, group, corporation, organization or association not licensed or exempt from licensure as a child welfare agency in the State of Arkansas that advertises, places, plans for or assists in the placement of any unrelated minor for purposes of adoption or for care in a foster home. The prohibition against advertising does not apply to persons who are seeking to add to their own family by adoption.

Types of Licenses

RESIDENTIAL CHILD CARE FACILITY

Any child welfare agency that provides care, training, education, custody or supervision on a twenty-four (24) hour basis for six (6) or more unrelated minors.

EMERGENCY RESIDENTIAL CHILD CARE FACILITY

Any child welfare agency that provides twenty-four (24) hour custodial care for six (6) or more unrelated children on an emergency basis, not to exceed ninety (90) days. All regular residential agencies qualify as emergency shelters. Any child admitted as an emergency placement shall be designated as such and must be discharged within ninety (90) days. The child may be discharged to the same facility, but the child’s record must reflect the date the child was admitted into regular residential care.
PSYCHIATRIC RESIDENTIAL TREATMENT FACILITY

A residential child care facility in a non-hospital setting that provides a structured, systematic, therapeutic program of treatment under the supervision of a physician licensed by the Arkansas State Medical Board who has experience in the practice of psychiatry. It is for children who are emotionally disturbed and in need of daily nursing services, physician’s supervision and residential care, but who are not in an acute phase of illness requiring the services of an inpatient psychiatric hospital.

SEXUAL OFFENDER PROGRAM

A treatment program that offers a specific and specialized therapeutic program for juvenile sexual offenders. A licensed sexual offender program may be in a residential childcare facility, a therapeutic foster care home, or a psychiatric residential treatment facility. A sexual offender is described as a person who has committed one or more confirmed acts of sexual abuse/misconduct, which constitutes the predominant need for specialized treatment services.

CHILD PLACEMENT AGENCY - ADOPTION

A child welfare agency which places, plans for or assists in the placement of an unrelated minor in a household of one (1) or more persons which has been approved to accept a child for adoption.

CHILD PLACEMENT AGENCY – FOSTER CARE

A child welfare agency which places, plans for or assists in the placement of an unrelated minor in a private residence of one (1) or more family members for care and supervision on a twenty-four (24) hour basis.

CHILD PLACEMENT AGENCY – THERAPEUTIC FOSTER CARE

Any child welfare agency that places, plans for or assists in the placement of an unrelated minor in a therapeutic foster home. Therapeutic foster care is intensive therapeutic care for children provided in specially trained family homes supported by licensed mental health professionals. A therapeutic foster care program is a family-based services delivery approach providing individualized treatment for children, youth, and their families. Treatment is delivered through an integrated constellation of services with key interventions and supports provided by therapeutic foster parents who are trained, supervised, and supported by qualified program staff. Therapeutic foster care services shall be provided in a separately identified program of a larger agency or be provided by an independent agency.
An agency may be licensed for any or all types of licenses, depending on the types of services it provides.

**License Status**

The Board shall issue all licenses to child welfare agencies upon majority vote of members present during each properly called board meeting at which a quorum is present when the meeting is called to order. The Board shall have the power to deny an application to operate a child welfare agency or to revoke or suspend a previously issued license to operate a child welfare agency. The Board may also issue letters of reprimand or caution to a child welfare agency. Any denial of application or revocation or suspension of a license shall be effective when made.

**NEW PROVISIONAL**

Issued to a newly licensed agency for a one (1) year period, to give the agency time to demonstrate substantial compliance with minimum licensing standards.

**PROVISIONAL**

Issued to an agency that has failed to maintain compliance with minimum licensing standards, but the Board believes that compliance can be restored and subsequently maintained. This license may be issued for up to one (1) year, at the discretion of the Board.

**REGULAR**

Issued either to a previously licensed agency that continues to meet all minimum licensing standards, or issued to an agency that meets all essential standards and has a favorable compliance history, which predicts full compliance with all standards within a reasonable time. A regular license shall remain open and effective until closed at the request of the agency or Board action.

**SUSPENDED**

Board action taken when an agency has failed to maintain compliance with minimum licensing standards, but the deficiencies do not warrant revocation. A license may not be suspended for longer than one (1) year at a time. The Board may issue a provisional or regular license when compliance is restored.

**CLOSED**

Board action taken when the agency requests that the license be closed.
REVOKED

Board action taken when an agency has failed to maintain compliance with minimum licensing standards. The agency may not apply for a new license for at least one (1) year from the date of revocation.

STATUS CHANGE

An altered license will be issued any time there is a change in the agency’s program that affects the license type, status, capacity, or a name change.

A license to operate a child welfare agency shall apply only to the address and location stated on the application and license issued, and it shall be transferable from one holder of the license to another or from one place to another.

Whenever ownership of a controlling interest in the operation of a child welfare agency is sold, the following procedures must be followed:

(1) The seller shall notify the division of the sale at least thirty days prior to the completed sale

(2) The seller shall remain responsible for the operation of the child welfare agency until such time as the agency is closed or a license is issued to the buyer.

(3) The seller shall remain liable for all penalties assessed against the child welfare agency which are imposed for violations or deficiencies occurring before the transfer of a license to the buyer

(4) The buyer shall be subject to any corrective action notices to which the seller was subject; and

(5) The provisions of subsection (a) of this section, including those provisions regarding obtaining licenses or permits from the Office of Long-Term Care of the Division of Medical Services of the Department of Health and Human Services and regarding obtaining any permits from the Health Services Permit Agency or the Health Services Permit Commission shall apply in their entirety to the new owner of the Child Welfare Agency.

INFORMING CLIENTS OF LICENSE STATUS CHANGES – Child Placement Agencies

The Child Placement Agency shall inform current and potential clients if their license has been suspended or revoked, or if they have voluntarily surrendered their license.
How To Apply The Standards

Section 100 of the Minimum Licensing Standards for Child Welfare Agencies applies to all agencies that engage in residential care or placement of children into residential facilities, foster homes, or adoptive homes. Subsequent sections apply to specific types of residential facilities or child placement agencies. Not all sections of the Minimum Licensing Standards for Child Welfare Agencies apply to a specific license. Each agency must meet the license requirements of its agency category.

Alternative Compliance

The Board may grant an agency’s request for alternative compliance upon a finding that the child welfare agency does not meet the letter of a regulation promulgated under the Child Welfare Agency Licensing Act, but that the child welfare agency meets or exceeds the intent of that rule through alternative means.

If the board grants a request for alternative compliance, the child welfare agency’s practice as described in the request for alternative compliance shall be the compliance terms under which the child welfare agency will be held responsible and violations of those terms shall constitute a rule violation.
100. General Requirements

The standards in Section 100 apply to all agencies.

100.1 Applications & Licensing Procedure

1. The owner or board shall prepare and furnish an application for a license that contains the following minimum information:
   a. A completed application form;
   b. A letter from the agency’s board authorizing a person to sign the application;
   c. A copy of the Articles of Incorporation, bylaws, and current board roster, if applicable, including names and addresses of officers. Out of state agencies shall have legal authorization from the Arkansas Secretary of State to do business in Arkansas.
   d. A personnel list with verifications of qualifications and experience;
   e. Substantiation of the agency’s financial soundness (e.g., an annual budget showing projected income and expenses);
   f. A written description of the agency’s program of care, including intake policies, types of services offered, and a written plan for providing health care services to children in care;
   g. Fire inspection, Arkansas Department of Health inspection, zoning approval for residential childcare.

2. The agency or facility shall furnish the Licensing Specialist with any additional information reasonably needed to verify compliance with these standards and to make a recommendation regarding the granting of a license.

3. Once a completed application has been received, the Division shall complete a recommendation within ninety days. If a recommendation is not made within ninety days, the applicant may appear before the CWARB to request a license.

100.2 Monitoring & Corrective Action

1. The Licensing Specialist shall conduct monitoring visits to ensure continued compliance with licensing standards.

2. The Licensing Specialist shall investigate complaints of alleged violation of licensing standards, and may participate in investigations of alleged child maltreatment.

3. Monitoring visits may be scheduled or unscheduled, at the discretion of the Licensing Specialist.
4. The frequency of monitoring visits shall be at the discretion of the Licensing Unit.

5. At the discretion of the Licensing Unit, a multi-disciplinary team may be asked to advise the Licensing Specialist during initial approval or upon monitoring visits. This team may include a professional in the appropriate field.

6. Upon finding any deficiencies with licensing standards, the Licensing Specialist shall issue to the agency a corrective action notice, which shall state:
   a. A factual description of the conditions that constitute a violation of the standard;
   b. The specific law or standard violated;
   c. A reasonable time frame within which the violation must be corrected;
   d. Agreement regarding the corrective action and time frame shall be shown by signature of the agency representative and the Licensing Specialist.

7. The agency shall provide a written corrective action plan when requested to do so by the Licensing Specialist in a corrective action notice.

8. The agency shall establish and follow written procedures for reporting allegations of child maltreatment according to Arkansas law, including notification of the Child Maltreatment Hotline.

9. The agency shall take steps to prevent harm or retaliation against the child while an allegation of child maltreatment is being investigated.

10. The agency shall ensure that the staff member accused in a maltreatment complaint does not have unsupervised contact with children during the investigation, unless an alternate plan is agreed upon between the agency, the Licensing Unit, and the custodian of the child.

11. The agency and all staff shall cooperate fully with investigators during a child maltreatment investigation.

12. The agency shall notify the Licensing Unit of critical incidents, such as serious injuries requiring emergency medical treatment, arrests, suicide attempts, or deaths.

100.3 Organization & Administration

1. The purpose and mission of the agency, including treatment philosophy, services provided, and characteristics of children it is designed to serve, shall be stated in writing.

2. The following policies of the agency shall be current and available to all employees of the agency and the Licensing Specialist:
   a. Personnel policies;
   b. Volunteer/Student intern policy;
   c. Admission policy;
d. Intake policy;

e. Behavior Management policy;

f. Crisis Management policy;

g. Child Maltreatment/Mandated Reporter policy;

h. Child Exploitation policy;

i. Visitation policy;

j. Family Therapy/Therapeutic Pass policy (Psychiatric only);

k. Admission Health Assessments policy (Psychiatric only);

l. Public Safety policy (Sexual Offender Programs policy only);

m. Target Population, Admission/Exclusion Criteria, and Discharge Criteria policy (Sexual Offender Programs only)

n. Emergency, Respite Care, and Disruption policy (Placement Agencies only);

o. Exclusion Policy (Adoption Agencies only).

3. The child placement agency shall obtain a license before placing, or planning for the placement of, children in a foster home, adoptive home, or institution. The residential facility shall obtain a license before receiving six (6) or more children who are unrelated to the caregiver for care on a twenty-four hour basis.

4. The agency shall be legally authorized to conduct business in Arkansas by state law and local ordinance.

5. The agency shall meet all federal, state, and local laws and ordinances that apply to child welfare agencies and to the proper care of children in such facilities.

6. The agency shall have one designated person or entity that assumes responsibility for lawful operation of the agency.

7. All agencies shall maintain a current organizational chart showing the administrative structure of the organization.

8. All agencies applying for an Arkansas license shall provide proof that they are licensed in good standing in their home state, if applicable, and are in good standing in all other states where they are licensed. If an agency is being disciplined or sanctioned in another jurisdiction, the board must be notified.

9. All agencies licensed in Arkansas after January 18, 2002 shall have an office in Arkansas.

10. All agencies licensed in Arkansas shall maintain all required files for licensing review as needed. They may choose to:

   a. Maintain these files in their office in Arkansas; or

   b. Arrange to provide the required files to the licensing staff; or

   c. Pay reasonable expenses for licensing staff to travel to their home office.
11. All agencies licensed in Arkansas shall have a qualified person on call to supervise emergency services. [Pursuant to 100.6 – 100.8]

12. All agencies licensed in Arkansas shall be bonded, maintain liability insurance, or be self-insured.

100.4 Central Registry & Criminal Record Checks

1. The following persons in a child welfare agency shall be checked with the Child Maltreatment Central Registry in his state of residence, if available, 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, for reports of child maltreatment:
   a. Employees having direct and unsupervised contact with children.
   b. Volunteers/student interns/visiting resources having direct and unsupervised contact with children.
   c. Foster parents, house parents, and each member of the household age ten (10) years and older.
   d. Adoptive parents, and each member of the household age ten (10) years and older, residing in Arkansas. Adoptive parents and each member of the household age ten (10) years and older residing out of state shall provide Child Maltreatment Central Registry Checks from their state of residence, if available.
   e. Owners having direct and unsupervised contact with children.
   f. Members of the agency’s board of directors having direct and unsupervised contact with children.

2. Persons required to have the Child Maltreatment Central Registry Check shall repeat the check every two (2) years, except that adoptive parents, and each member of the household age ten (10) years and older, shall repeat the check, if available, every year until the adoption decree has been issued.

3. Any person found to have a record of child maltreatment shall be reviewed by the owner or administrator of the agency, in consultation with the Child Welfare Agency Review Board or its designee, to determine corrective action. Corrective action may include, but is not limited to, counseling, training, probationary employment, non-selection for employment, or termination.

4. The following persons in a Child Welfare Agency shall be checked with the Identification Bureau of the Arkansas State Police for convictions of offenses listed in Arkansas Code Annotated 9-28-409:
   a. Employees having direct and unsupervised contact with children.
   b. Volunteers/student interns/visiting resources having direct and unsupervised contact with children.
100.5 General Personnel Requirements

All personnel employed on or after April 12, 1999 shall meet the following requirements:

1. The Administrator, Social Services Director, and each caseworker of a child welfare agency shall have twenty-four (24) hours of job-related continuing education each year.

2. Written personnel policies shall be current and available for review by agency staff and the Licensing Specialist.
3. The agency shall maintain a personnel file for each employee, which shall include
   a. A resume or application;
   b. Verifications of qualifications;
   c. Documentation of required annual training
   d. Criminal Record Check and Child Maltreatment Central Registry Check
      information as required by law;
   e. Documentation that employees working directly with children are informed that
      they are mandated reporters of suspected child maltreatment and are provided
      the information needed to make a report;
   f. A functional job description;
   g. At least three (3) positive personal references.

100.6 Administrator

1. Each agency shall have an Administrator who shall be responsible for the general
   management of the agency.

2. The Administrator shall possess at least one of the following qualifications [Only
   “a” and “b” meet requirements for Psychiatric facilities]:
   a. A doctorate degree;
   b. A master’s degree in a human services field (child development, psychology,
      sociology, social work, guidance and counseling, divinity, education) or in
      administration, business, or a related field;
   c. A bachelor’s degree in a human services field or in administration, business, or
      a related field, and at least two years of work experience in a human services
      agency.

100.7 Social Services Director

1. The agency shall have a Social Services Director who shall supervise child
   placement activities and/or casework services by the agency.

2. The Social Services Director shall possess at least one of the following
   qualifications:
   a. A master’s degree or higher in a human services field (child development, psychology,
      sociology, social work, counseling and guidance, divinity, education);
   b. A bachelor’s degree in a human services field and two (2) years or work
      experience in a child welfare agency.

3. Anyone permitted to supervise child placement or casework services shall meet
   the qualifications for Social Services Director.
100.8 Caseworkers
1. Each agency shall assign caseworkers who are responsible for doing assessment, case planning, and casework services for children and families.
2. Caseworkers shall have a bachelor's degree in a human services field, or a bachelor's degree and two (2) years work experience in a human services field.
3. A caseworker shall not have more than twenty-five (25) cases at a time.

100.9 Volunteers & Student Interns
1. Each agency shall have a policy clearly defining the qualifications, duties, and supervision of volunteers and student interns.
2. Volunteers and interns shall be supervised by an appropriate and designated staff person.
3. A volunteer or intern who works unsupervised shall meet the qualifications required for a paid employee in that position.

100.10 Visiting Resources
A visiting resource is defined as a non-related situation in which a visit occurs away from the facility, excluding normal age-appropriate activities such as overnight visit with friends, extra-curricular activities, church activities, or short-term summer camps. Records shall include the following:
1. Documentation and narrative of at least one (1) home visit for evaluation purposes prior to visitation occurring.
2. At least three (3) character references.
3. Documentation of State Police Criminal Record Checks and Child Maltreatment Central Registry Checks, if available.
4. All members of the household older than twelve (12) years shall receive a Mantoux skin test for tuberculosis every three (3) years, as long as test results remain negative. Household members with a positive skin test must provide documentation from a physician every two years certifying that they are free from communicable tuberculosis.
5. Narrative of continuing contact and an annual review, in person, of the visiting resource.
100.11 Admission

1. Each child welfare agency shall establish written criteria for admitting/excluding children.
2. The agency shall not admit any child for whom the agency cannot provide adequate care.
3. Each child shall have a medical exam no more than sixty days before admission, or scheduled within one (1) week of admission.
4. Age-appropriate immunizations shall be current or scheduled within one (1) week of admission.
5. The child placement agency shall obtain written authority from the parent(s), guardian(s), or court before placement, or within 72 hours if an emergency placement.
6. The residential childcare facility shall attempt, and shall document their attempts, to obtain written verification of the placing agents authority to place the child at the time of admission, or within five (5) working days if an emergency placement.
7. The agency shall obtain written authority for medical care for the child from the parent(s), guardian(s), or court at the time of placement, or within 72 hours in an emergency placement.
8. The agency shall comply with the Interstate Compact on the Placement of Children when placing/admitting children from outside Arkansas.

100.12 Intake & Assessment

1. An intake study shall be completed on each child in care within ten (10) working days after admission, except for adoption agencies.
2. The intake study shall include:
   a. Demographic information on the child and parent(s), including name, address, birth date, sex, race, and religious preference;
   b. A factual description of the circumstances requiring placement;
   c. A brief social history of the family;
   d. The child's current legal status/custody;
   e. Any history of previous placements outside the family;
   f. An assessment of services needed to ensure the health and welfare of the child, including medical history and psychological history.
100.13 Case Planning

1. There shall be a case plan for each child placed by a child placement agency or received for care by a residential facility. The plan shall address the child’s needs as identified in the intake study.

2. If the agency is providing casework services to the child’s parents, its plan shall be included in the child’s case record.

3. If placed by a licensed or exempt agency, the case plan shall be developed before placement, except an emergency placement.

4. If the child is received into residential care without a case plan, the case plan shall be developed within thirty days after placement.

5. The case plan shall be developed after a staffing. Every effort shall be made to include the parent(s), foster parents (if applicable), facility staff (if applicable), caseworker, social worker or probation officer (if applicable), and the child.

6. The child’s case plan shall contain, at the minimum:
   a. Specific and measurable goals for the child;
   b. Specific tasks for accomplishing the case plan goals
   c. Time frames for completing tasks and goals;
   d. Designation of the person responsible for completing each task
   e. Visitation schedule between child and parent(s), if appropriate including arrangements for transportation and supervision of visits;
   f. A plan to ensure that the child’s educational needs are met according to state law
   g. Date of next review of the case plan, if applicable;
   h. Special treatment issues (e.g., psychotropic medications, sexual misconduct, neurological disorders) shall be identified, with a statement of how the special needs shall be met.

7. A copy of the case plan shall be made available to the parent(s), guardian(s), court, or other agencies involved in case plan services delivery.

8. The case plan shall be reviewed at least semi-annually, and goals shall be updated to reflect the child’s growth, development, and progress. Psychiatric case plans shall be reviewed monthly. Sex Offender case plans shall be reviewed quarterly.

9. There shall be a specific caseworker responsible for coordinating the delivery of the case plan.

10. If independence is a goal, the case plan shall include training in independent living skills.
100.14 Children's Records

The agency shall keep a confidential case record for each child that includes the following:

1. Demographic information;
2. A complete intake study;
3. Consents, including consent for medical care and authority to place the child;
4. Interstate Compact information, if applicable;
5. Case plans and case plan reviews
6. Copies of legal documents (e.g., birth certificate, social security card, court orders);
7. Physical exams and immunization records;
8. Psychological reports;
9. Educational reports;
10. Disciplinary and incident reports (may be kept in a separate file)
11. Progress reports
12. Records of visitation and family contacts;
13. Documentation of casework services and client contact, current to within one (1) month of occurrence;

100.15 Behavior Management

1. The agency shall have a written discipline policy that is consistently followed.
2. Discipline shall be directed toward teaching the child acceptable behavior and self-control.
3. Discipline shall be appropriate to the child’s age, development, and history.
4. The following forms of discipline shall not be used:
   a. Denial of meals, sleep, shelter, essential clothing, or case plan activities;
   b. Denial of parental visits or regular phone/mail contact with family. Non-disciplinary case planning issues are excepted
   c. Lewd or obscene language;
   d. Derogatory comments about the child, the child’s family, race, or gender;
   e. Restriction to a room for more than a short period of time without periodic observation;
   f. Locked isolation (psychiatric facilities excepted);
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**g.** Physical injury or threat of bodily harm;

**h.** Humiliating or degrading action;

**i.** Extremely strenuous work or exercise;

**j.** Mechanical/chemical restraints (psychiatric facilities excepted);

5. Physical restraint shall be initiated only by trained staff, and only to prevent injury to the child, other people or property, and shall not be initiated solely as a form of discipline.

6. A child shall not be allowed to administer discipline, except teen parents may discipline their own children.

7. Searches of a child or a child’s personal property shall be for reasons limited to safety and security of children and staff, or in cases of suspected theft.

8. Any searches requiring removal of clothing shall be done in privacy, and except in foster homes, shall be witnessed by two (2) staff of the same sex as the child.

**100.16 Exploitation of Children**

1. The facility shall not require a child to acknowledge dependency, destitution, or neglect or to make public statements about his/her background.

2. The facility shall not use or allow to be used, any reports, pictures, or any other information from which a child can be identified, except under the following conditions:

   a. The child and the parent/guardian sign a consent form that describes the purposes for which the identification is being made;

   b. The signed consent shall say in which publication or broadcast the identification will appear;

   c. The parent/guardian and child shall be informed that the consent may be withdrawn.

3. All information regarding children and their families shall be kept strictly confidential and may be released without the consent of the child or parent/guardian, only to authorized persons or agencies.

**100.17 Ethical Standards**

The Arkansas Child Welfare Agency Review Board sets forth this section as a Code of Ethics/Standards for Practice for all child placement agencies within the State of Arkansas that place children in adoptive or foster homes pursuant to A.C.A. 9-28-401. Violations shall

Violations shall be grounds for disciplinary action.
1. **Confidentiality** In providing services, a child placement agency must safeguard information given by clients. Except when required by law or judicial order, a child placement agency must obtain the client’s informed written consent before releasing confidential information. If the client is a minor, then the written consent shall be made with the minor and their legal representative or guardian.

2. **Responsibility** A child placement agency must provide a clear, written description of what the client may expect in the way of services, reports, risks, fees, billing, estimated schedules and grievance procedures.

3. **Misrepresentation** A child placement agency must not misrepresent its program services or experience.

4. **Client Relationships** Relationships with clients must not be exploited by the child placement agency staff for personal gain.

Unprofessional conduct in the practice of child placement activities shall include, but not limited to the following:


2. Permitting. Aiding, or abetting an unlicensed person to perform activities requiring a license.

3. Misrepresenting type or status of education, training, expertise, licensure, or professional affiliations.

4. Failing to maintain confidentiality, except as otherwise required or permitted by law, or all information that has been received from a client in confidence during the course of services.

5. Violating the ethical standards adopted by the Board.

6. Failing to report to the Board any disciplinary action taken against the child placement agency by another licensing jurisdiction or failing to report to the board the surrender of a license or authorization to practice child placement activities in another jurisdiction.

7. Failing to comply with any stipulation or agreement with the Board involving probation or a settlement of any disciplinary matters.

8. Engaging in sexual behavior with a client.
100.18 Discharge

1. The agency shall discharge a child when the case planning team decides that the child is no longer in need of services or can no longer benefit from services provided by the agency.

2. Except in the case of an emergency discharge, the discharge shall be planned by appropriate agency staff, parent(s), child, and any agency that will offer post-discharge services.

3. The agency may discharge a child on an emergency basis if failure to do so could result in harm to the child, other persons, or significant property damage.

4. Each child shall be discharged to the custody of a responsible party.

5. The agency shall promptly notify the Arkansas office of the Interstate Compact on the Placement of Children upon discharging a child from outside Arkansas.

6. The agency shall complete a discharge summary on each child and provide a copy of it to the child’s custodian.
200. Child Placement Agencies: Foster Care

In addition to all standards in Section 100, the following standards shall be met:

200.1 Selection of Foster Home

1. The agency shall select the home that is in the best interest of the child, the least restrictive possible, and is matched to the child’s physical and emotional needs. The placement decision shall be based on an individual assessment of the child’s needs.

2. The agency shall document reasons if a child is placed in a foster home more than a two (2) hour drive from the parent(s) home. This does not apply to children in short term foster care awaiting adoptive placement.

3. The agency shall place children only in approved foster homes.

4. Foster homes shall not have more than five unrelated minor children in care. The foster home may care for more children if they are related to the caregiver. The foster home shall not have more than eight children in their home, including their own children.

5. Foster homes shall not have more than two (2) children under the age of two (2) years, including the foster parent’s own children.

6. At least one parent in the foster home shall be able to communicate effectively in the language of the child in care. This does not apply to foster parents for infants or short term emergency placements.

7. The agency shall not place children in foster homes approved by another agency without written approval of the other agency.

8. Foster homes shall not also operate as Day Care Family Homes.

9. No children shall be placed in the foster home unless there is an approval letter for the foster home in the foster home record from the Licensing Agency.

10. A provisional foster home means a foster home opened for no more than six (6) months by the Division of Children and Family Services of the Department of Health and Human Services or any Licensed Agency, on a relative of a child in the custody of the division /or agency after the division or agency:

   (A) Conducts a health and safety check, including a central registry check and a criminal background check or check with local law enforcement on the relative's home; and

   (B) Performs a visual inspection of the home of the relative to verify that the relative will meet the standards for opening a regular foster home.
200.2 Approval of Foster Homes

1. The agency shall complete a home study for each foster home applicant to learn if the applicant complies with the Foster Home Standards (see Section 200.3).

2. The agency shall conduct at least two (2) visits in person with the foster parent applicants, including at least one (1) visit to the home, and shall interview every age-appropriate member of the household.

3. At least three (3) confidential personal references must be obtained on the foster family.

4. Each member of the foster family shall have a physical exam within six (6) months before the initial approval.

5. The agency shall ensure that the foster parents receive at least 10 hours of pre-service training (excluding CPR and First Aid) before placing a child in the home.

6. In addition to the required hours of pre-service training, the foster parent(s) shall have current CPR and First Aid training. A foster home shall not have a child placed in their care until they have received the CPR and First Aid training.

7. If the agency approves the foster parent(s), the agency shall specify in the home study the number, age, sex, and other characteristics of children for whom the home is approved to provide care. For each foster parent, an individualized training plan shall be developed taking into consideration the age and characteristics of children for whom the foster parent has expressed preferences.

8. Foster parents shall provide documentation that they carry homeowner’s or renter’s insurance and general liability insurance.

200.3 Personal Qualifications/Home Study

1. In a two-parent home, the husband and wife shall be joint applicants, shall each participate in the approval process, and shall provide verification that they have been married at least two (2) years.

2. The stability of the foster family shall be evaluated and determined to be appropriate.

3. Foster parents shall be at least twenty-one (21) years of age.

4. All members of the household older than twelve (12) years shall receive a Mantoux skin test for tuberculosis every three (3) years, as long as test results remain negative. Household members with a positive skin test must provide documentation from a physician every two years certifying that they are free from communicable tuberculosis.

5. All preschool age children in the household shall have proof of current health immunizations in accordance with the Periodicity Schedule recommended by the American Academy of Pediatrics and the Centers for Disease Control and
6. Foster parents shall be physically, mentally, and emotionally capable of caring for children.

7. The foster family shall provide documentation of sufficient financial resources to meet their needs.

8. The foster family shall provide a plan for child care if both parents are employed outside the home.

9. Each foster parent shall obtain at least fifteen (15) hours of training each year after the first year. This does not apply to foster parents for infants in short term foster care awaiting adoptive placement. Such foster parents shall obtain ten (10) hours of training for the primary care giver and five (5) hours of training for the secondary care giver each year.

10. Each foster parent shall maintain current CPR certification and First Aid training.

11. No new placements of children shall occur with foster parents who have not satisfied the annual training requirements. Administrative-level staff, designated by the agency Director, may grant an exemption to this restriction for up to sixty (60) days. The administrator shall review the quality of care provided by the foster parents, and the reasons for failing to complete the training on time, in deciding whether to grant an exception.

200.4 Physical Requirements of the Home

1. The foster home shall be accessible to community resources needed by foster children.

2. The foster home shall be clean and free of hazards.

3. The foster home shall have a continuous supply of sanitary drinking water. If the source is not a municipal water system, the water must be tested and approved by the Arkansas Department of Health.

4. The foster home shall have at least one (1) flush toilet, one sink with running water, and one bath or shower with hot and cold running water.

5. There shall be operational smoke alarms within ten (10) feet of the kitchen and each bedroom.

6. There shall be a chemical fire extinguisher in the cooking area of the home.

7. The foster parents shall practice and document emergency evacuation drills with each new child entering the home, if appropriate, and at least quarterly thereafter.
8. All heating units with hot external areas shall be screened or otherwise shielded to prevent contact with children.

9. The home shall have at least two (2) exterior doors situated to provide safe exit.

10. The home shall have an operational telephone.

11. Each child shall have adequate space for storing clothing and personal belongings.

12. All household pets shall have proof of current rabies vaccinations.

13. An assessment of the safety of the home shall include any water hazards, including, but not limited to, swimming pools and hot tubs, dangerous pets, and firearm safety. All firearms shall be maintained in a secure, locked location.

14. The foster home record shall contain an agency approved safety plan for swimming pools, hot tubs, and other water hazards.

15. A current floor plan of the home with room dimensions shall be in the foster home record.

200.5 Sleeping Arrangements

1. Each bedroom shall have at least fifty (50) square feet of floor space per occupant.

2. Each bedroom used for foster children shall have a window to the outside.

3. No more than four (4) children shall share a bedroom.

4. Each foster child shall be provided with a comfortable bed, in good condition.

5. Children of the opposite sex shall not share the same bedroom if either child is four (4) years old or older.

6. No children shall share a bed if either child is four (4) years old or older.

7. No child under age six (6) years shall occupy a top bunk.

8. Foster children, except infants under age two (2) years, shall not share a sleeping room with adults.

9. Each foster child shall be provided with clean bedding, in good condition, that shall be laundered at least weekly, or as needed.

200.6 Medications

1. Foster parents shall administer medications only in accordance with directions on the label.

2. All medications shall be stored in a secure location, and psychotropic medications shall be kept securely locked.

3. Foster parents shall be aware of possible side effects of all medications.
4. The dispensing of all medications shall be logged.

200.7 Transportation
1. Foster families shall have their own transportation available.
2. Any vehicles used to transport foster children shall be maintained in compliance with motor vehicle laws, and be insured.
3. Foster parents shall allow foster children to be transported only by persons having a valid driver’s license.
4. Foster children shall be transported only while wearing safety belts, or in child safety seats, according to Arkansas law.

200.8 Responsibilities of Foster Parents
1. Foster parents shall provide regular activities to promote the physical, social, intellectual, spiritual, and emotional development of the children in care.
2. Foster parents shall provide each child their own clothing that is clean, well-fitted, seasonal, appropriate to age and sex, and comparable to community standards.
3. Foster parents shall allow foster children to acquire and keep personal belongings.
4. Foster parents shall fully cooperate with the child placement agency’s efforts to achieve the case plan goals for each foster child, including visitation.
5. Foster parents shall provide routine transportation for each child.
6. Foster parents shall attend and participate in case planning and case plan reviews.
7. Foster parents shall attend school conferences concerning a foster child, and shall notify the placing agency of any situations that may affect the case plan or require agency involvement.
8. Foster parents shall notify the child placement agency promptly of serious illness, injury, or unusual circumstances affecting the health, safety, or welfare of the foster child.
9. Foster parents shall cooperate with the child placement agency and the Licensing Unit in conducting monitoring and investigations, and shall provide information required to verify compliance with rules.
10. Foster parents shall maintain absolute confidentiality of private information about each foster child and the birth family.
11. The foster parents shall give advance notice to the agency of any major changes that affect the life and circumstances of the foster family, whenever possible.
12. Foster parents shall keep a life book for each foster child that includes:
   a. Periodic photographs of the child;
b. A record of the child’s memberships, activities, and participation in extra-curricular school or church activities.

200.9 Monitoring & Re-evaluation

1. The agency shall monitor the foster home at least quarterly for continued compliance with licensing standards for foster homes. This does not apply to foster homes for infants in short term foster care awaiting adoptive placement. Before a child can be placed in such a foster home, a monitoring visit shall be done within the three (3) months prior to placement. An annual re-evaluation is required.

2. The child placement agency shall conduct an annual re-evaluation of the foster family home. Any foster home that does not substantially comply with the standards for approval shall not be approved for placement until compliance is achieved.

3. If the foster family experiences any major life changes (e.g., marriage, divorce, separation, health problems, death, change of residence, change of household composition), the child placement agency shall re-evaluate the home at that time.

4. The agency shall keep signed and dated documentation of quarterly monitoring visits and annual re-evaluations in the foster home record.

200.10 Visitation

The standards in 200.10 do not apply to children in short term foster care awaiting adoptive placement.

1. The agency shall develop a visitation plan that specifies when and how visits will occur between the child and the parents.

2. The child placement agency shall carry out the visitation plan to meet the terms of the plan.

3. Foster parents shall allow foster children and their families to communicate by mail and by phone according to the child’s case plan.

200.11 Agency Responsibilities

1. The agency shall provide the foster parents with the information necessary to provide adequate care to each foster child, including the child’s health, reason for entering care, probable length of placement, and siblings. As additional information is obtained by the caseworker, it shall be promptly shared with the foster parents.

2. The agency shall provide foster parents with instructions for contacting agency personnel any time.
3. An agency caseworker shall visit the child in person at least monthly while the child is in foster care.

4. The agency shall ensure that each child in foster care has a medical exam at least annually.

5. The agency shall include foster parents in case planning for each child, and shall provide a copy of the current case plan and visitation plan.

6. The child placement agency shall remain legally responsible for the supervision and decision making regarding foster children. Foster parents have daily responsibility for the care of the children.

7. The child placement agency shall have a written plan that provides for timely reimbursements to foster parents for costs of care and fees for services.

8. If the child placement agency receives a complaint of non-compliance with licensing standards, the agency shall investigate to learn if the foster home remains in compliance.

9. A written report of complaint investigations, including findings and any corrective action, shall be maintained in the foster home record.

10. The agency shall maintain a record for each foster family that contains all information and documentation required by licensing standards.

11. The agency shall prepare a closing summary, including reasons, if the home closes.
270. Therapeutic Foster Care

In addition to all requirements in Section 100 and Section 200.1 through 200.11, the following standards shall be met in order to be licensed as a Therapeutic Foster Care Agency:

270.1 Therapeutic Foster Home Capacity

1. The number of children placed in one therapeutic foster home shall not exceed two (2).

2. Before placing more than one (1) child in a home, the agency shall consider extraordinary problems/needs of each child (e.g., violent behavior, sexual offenses, seizure disorders). Justification of the appropriateness of placing a child in a home with another child shall be documented.

270.2 Staffing Requirements, Staff Training & support

1. Primary responsibilities of program staff shall include treatment planning, leadership of the treatment team, case management, clinical and administrative supervision, twenty-four (24) hour crisis intervention, and discharge planning.

2. The therapeutic foster care agency shall employ a Clinical Director who shall be clearly responsible for implementation of treatment planning and service delivery. The Clinical Director shall be qualified by a master's degree in a human service field, shall have two years' experience in placement or treatment, and shall be a licensed mental health professional (LCSW, LPC, LMFT, Ph.D., psychologist, psychiatrist, etc.).

3. The therapeutic foster care agency shall employ at least one caseworker who shall coordinate the implementation of the treatment plan. The caseworker shall be qualified by a bachelor’s degree in a human service field, or shall be a mental health paraprofessional, and shall be supervised by the Clinical Director.

4. All casework staff shall be trained in crisis prevention and intervention, CPR, and First Aid within the first sixty (60) days of employment.

5. All casework staff shall be provided with eight (8) hours of orientation, either prior to employment or within the first week of employment, which shall provide an overview of the following areas:
   a. The agency's policies and procedures;
   b. The client's rights, including confidentiality;
   c. How to handle medical and non-medical emergencies;
   d. The caseworker’s clinical limitations;
   e. How to document clinical information in the child's and family's records.
f. General information regarding commonly prescribed medications and their side effects.

6. The agency shall provide twenty-four (24) hour on-call crisis intervention support to supplement that provided by the caseworker.

### 270.3 Therapeutic Foster Parent Responsibilities

1. The therapeutic foster parents shall be provided with a written list of duties clearly detailing their responsibilities.

2. Therapeutic foster parents shall be responsible for implementing in-home treatment strategies specified in each child’s treatment plan.

3. Therapeutic foster parents shall keep a written record, updated at least weekly, of each child’s behavior and progress toward treatment goals.

4. The physical health of the therapeutic foster parents shall be equal to the stress inherent in the care of special needs children, as evidenced by the physician’s statement.

### 270.4 Therapeutic Foster Parent Training

1. Therapeutic foster parents shall be trained in crisis prevention and intervention.

2. Prior to the placement of children in their home, therapeutic foster parents shall complete at least thirty (30) hours of skill-based preservice training consistent with the agency’s treatment methodology and the needs of the population served.

3. Each therapeutic foster parent shall complete at least twenty-four (24) hours of skill based training annually, excluding CPR and First Aid.

### 270.5 Medications

1. The agency shall have an intervention policy that is non-medical, unless a specific medical condition is indicated.

2. When psychotropic medications are prescribed by a physician they shall be used in concert with other interventions.

### 270.6 Service Delivery

1. The agency shall ensure that professional or casework staff visit with the child face-to-face at least once per week during the first three months after the child’s placement with the agency, and at least every other week thereafter.

2. No caseworker shall be responsible for managing more than twelve (12) children’s cases.
3. The agency shall have a written program description that is available to residents and parents/guardians. The following information shall be included:
   a. Program philosophy and mission;
   b. Services and treatment modalities;
   c. Treatment planning procedures;
   d. Behavior management program and expectations of each child;
   e. Admission, exclusion, and discharge criteria;
   f. Aftercare services.
4. The agency shall keep documentation that includes:
   a. Prior treatment documents and intake information;
   b. Assessments;
   c. Master treatment plan;
   d. Treatment plan review;
   e. Daily observations;
   f. Medication and physician’s instructions, if applicable;
   g. Therapy progress notes.
5. If family involvement is contraindicated, the agency shall make reasonable efforts to identify acceptable substitutes and shall include them in the therapeutic process.
6. The agency shall establish procedures for hearing children’s grievances, and shall ensure that each child understands the process.
7. Records for each child shall be kept for five (5) years from the date of discharge.
8. The agency shall document information regarding the rate of reimbursement, including “difficulty of care” payments, paid to foster parents for each child placed in the foster home.
300. Child Placement Agencies: Adoptions

In addition to all standards in Section 100, the following standards shall be met:

300.1 Selection of Adoptive Home
1. The agency shall select the home that is in the best interest of each child, the least restrictive possible, and is matched to the child’s physical and emotional needs. The placement shall be based on an individual assessment of each child’s needs.
2. The agency shall place children only in approved adoptive homes. All adoptive homes shall be approved prior to placement.
3. The Adoption Agency must have a foster care license in order to place children in short-term foster care while awaiting an adoptive placement.

300.2 Approval Process of Prospective Homes
1. In a two-parent home, the husband and wife shall be joint applicants, shall each actively participate in the approval process, and shall provide verification to the social worker or agency conducting the home study that they have been married at least two (2) years.
2. The agency shall ensure there is a completed home study for each prospective adoptive family to determine if they should be approved as an adoptive home.
3. The social worker or agency conducting the home study shall have at least two (2) visits in person with the prospective adoptive family during the initial approval process. One of the visits shall be in the home of the prospective adoptive family.
4. The worker shall have a separate, face to face interview with each prospective adoptive parent.
5. The caseworker shall interview each age-appropriate member of the household in person.
6. Each member of the adoptive household shall have a physical exam within six (6) months prior to the approval by the social worker or agency conducting the home study, and annually thereafter until placement to ensure that no person has a health condition or disability that would interfere with the family’s ability to care for a child.
7. The agency shall notify applicants in writing within sixty (60) days of completion of the final home visit concerning the acceptance, reason for further delay, or denial of their application.
300.3 Contents of the Home Study

The adoptive home study shall contain the following information, current to within one (1) year prior to each adoptive placement: The home study shall be approved only by the social worker or agency conducting the home study.

1. The family’s motivation for adoption and the desired characteristics of the child or children to be adopted.

2. Each family member’s attitudes toward adoption.

3. Attitudes of the applicants toward the birth parents(s), including parent search issues.

4. Resolution of any infertility issues.

5. The mental health, emotional stability, and maturity of the applicants.

6. The physical health of all household members, including a physician’s statement to the social worker or agency conducting the home study that a medical exam was performed.

7. The financial status and stability of the family, including proof to the social worker or agency conducting the home study of income and employment.

8. At least three (3) confidential personal references on the family. The references do not need to be updated unless this is a new adoption in the family or there have been significant changes.

9. The family’s ability to cope with stress, loss, and crisis.

10. Adjustment and well-being of any minors residing in the home.

11. The family’s child-caring skills and willingness to acquire additional skills.

12. The family’s discipline practices.

13. Religious affiliation.


15. An assessment of the safety of the home, including all water hazards, dangerous pets, and firearm safety. All firearms shall be maintained in a secure, locked location.

16. A statement in the home study narrative or an addendum that the adoptive parents report to the social worker or agency conducting the home study that they have or have not been denied approval as an adoptive home in the past, and if so, why.

17. A statement regarding the availability and results from criminal records and child maltreatment central registry checks, dated to within one (1) year prior to placement.

18. The stability of the adoptive family and their marriage, if applicable, shall be discussed and determined to be appropriate.
19. A recommendation regarding adoption, including the age, sex, characteristics, and special needs of children best served by this family.

20. If the adoptive family experiences any major life changes (e.g., marriage, divorce, separation, health changes, change of residence, change of household composition), the social worker or agency shall re-evaluate the family prior to placement of a child. An additional home visit is required if there has been a change of residence.

300.4 Services to the Adoptive Parents

1. The agency shall provide services to the adoptive applicants to help them make an informed decision about adoption.

2. The agency shall provide a written statement of exclusion (e.g., single parents, unwed couples), if applicable, to adoptive applicants before a home study is conducted.

3. The following information (if available) shall be provided to adoptive parents regarding the child being considered for adoption:
   a. Specific and accurate information about the needs and characteristics of the child.
   b. The health/medical history of the child and the child’s biological family.
   c. The health status of the child at the time of placement.
   d. Genetic and social history of biological relatives, including:
      - Medical history
      - Health status, if alive
      - Cause of and age at death, if deceased
      - Height, weight, eye and hair color
      - Levels of education and professional achievement
      - Ethnic origins
      - Religion.

4. The agency caseworker shall ensure that at least two (2) face to face post-placement visits are made within six (6) months after the placement of the child. One of the visits shall be in the home of the adoptive family.

5. The agency shall have a plan for caring for children in case the placement disrupts before the issuance of a decree of adoption.

6. The agency shall offer supportive services to the adoptive family for at least six (6) months following placement.
300.5 Services to Birth Parents

If the agency is providing casework services to either birth parent, the following services shall be offered:

1. An intake study completed within thirty (30) days after the client’s decision to work with the agency.
2. Obstetrical care during pregnancy, birth, and up to six (6) weeks after birth.
3. Counseling for both parents that shall include the following:
   a. Information, rights, options, and obligations regarding the adoption process.
   b. Issues related to grief and loss.

300.6 Birth Parent Records

The agency may elect to keep birth parent records and the child’s records in the same file. If the agency has provided casework services to the birth parents, the following information shall be kept in a confidential file:

1. The parents’ case plan, including any reviews/updates.
2. All correspondence with the birth parents.
3. All signed documents between the agency and the birth parents.
4. Documentation of all casework services provided before and after the adoption, current to within one (1) month of occurrence.

300.7 Adoptive Family Records

The agency shall keep a confidential case record for each family that received a child for adoption. The record shall contain:

1. The application to adopt;
2. The completed home study;
3. Criminal Record checks and Child Maltreatment Central Registry checks;
4. A copy of the information given to the adoptive parents regarding the child they received;
5. Copies of all legal documents concerning the adoption.

300.8 Record Maintenance

1. The agency shall maintain a permanent file on any adoption finalized, which shall be accessed according to Arkansas law.
2. If the agency establishes or contracts with a Mutual Consent Voluntary Adoption Registry, it shall be maintained according to Arkansas law.
400. Residential Child Care Facilities

In addition to all standards in Section 100, the following standards shall be met:

400.1 Admission

1. The facility shall establish that all persons referred for admission are under the age of eighteen (18) years at the time of admission. Residents who remain in the program after reaching age eighteen (18) years shall continue to be subject to the facility’s behavior management program.

2. Except an emergency shelter, the facility shall admit a child under age six (6) years only if that child is a part of a sibling group of whom one child is age six (6) years or older, or if it is the summer before the child is eligible to enter first grade. Exception is also made for the infant child of a mother who is admitted to the facility.

3. Emergency shelters may admit children for a maximum of ninety (90) days.

4. When a child under the age of six (6) years is in care, the facility shall evaluate the continued appropriateness of the placement every ninety (90) days and document the evaluation in the child’s record.

5. If a facility has been inactive for more than six (6) months, the Licensing Unit shall be notified before children are taken into care.

400.2 Personnel

1. Each facility shall employ child caring staff who shall be responsible for ensuring the proper care, treatment, safety, and supervision of the children in care at the facility.

2. There shall be a staff/child ratio of at least 1:9 during waking hours and at least 1:12 during sleeping hours. If any child is under age six (6) years, the ratio shall be at least 1:7 at all times. Only staff who directly supervise children shall be counted in this ratio. Staff members own children shall be counted in the ratio. Psychiatric facilities see Section 500.

3. Agencies that mix children requiring different levels of supervision shall maintain the most intensive staff/child ratio.

4. Child caring staff shall be at least twenty-one (21) years old and have a high school diploma or the equivalent.

5. Assistant child caring staff shall be at least nineteen (19) years old, have a high school diploma or the equivalent, and be under the direct supervision of regular staff.
6. All child caring staff and each member of a houseparent’s family older than twelve (12) years shall receive a Mantoux skin test for tuberculosis upon entry to the program and every three years thereafter, as long as test results remain negative. Staff and houseparent family members with a positive skin test must provide documentation from a physician every two years certifying that they are free from communicable tuberculosis.

### 400.3 Staff Training

1. All direct care staff shall be trained in crisis intervention strategies.
2. No staff shall be allowed to participate in a physical restraint until properly trained to do so. Psychiatric facility staff shall be certified in physical intervention.
3. All direct care staff shall have thirty (30) hours of job related in-service or workshop training each year. First aid, CPR, and in-service training at the facility may be included. Part-time staff shall have at least fifteen (15) hours of job related in-service or workshop training each year.
4. At least one (1) staff currently certified in CPR and First Aid must be able to immediately respond to an emergency.

### 400.4 Personal & Medical Care

1. The facility shall provide each child with adequate and nutritious food.
2. The facility shall ensure that each child has sufficient sleep for his/her age and physical condition.
3. Each child shall have a medical exam at least annually. Health exams need not be repeated during the year if a child moves from one facility or agency to another, provided the results of the exam are available to the receiving facility or agency.
4. Each child shall be instructed in good grooming and personal hygiene habits.
5. Each child shall be provided with his/her own clothing that is clean, well fitting, seasonal, and appropriate to age and sex, unless otherwise directed by a physician.
6. All medications shall be administered to children by staff according to medical instructions. Psychiatric facilities see Section 500.
7. The dispensing of all medications shall be logged.
8. Medications belonging to children shall be returned to the parent or custodian upon discharge. Psychiatric facilities see Section 500.
9. When psychotropic medications are prescribed by a physician, they shall be used in conjunction with other treatment interventions.
10. The facility shall notify a child’s parent(s) or legal guardian and law enforcement immediately after the child is discovered to have run away, and promptly upon the child’s return.

11. The parent or guardian shall be promptly notified of any serious illness or injury.

400.5 Education, Work, & Training

1. The facility shall teach each child the daily living tasks required as a part of living in a group setting, and shall assign only light chores that are age-appropriate.

2. The facility shall safeguard money earned by each child, and shall ensure that each child’s earnings are available to that child under staff supervision for personal use.

3. The facility shall not allow a child’s outside employment, chores, or extracurricular activities to interfere with the child’s time for school, sleep, family visits, or case plan activities.

4. The facility shall not use a child as a substitute for staff.

5. No child shall be allowed to operate machinery or dangerous equipment without proper adult supervision.

400.6 Grounds

1. The grounds of the facility shall be kept clean and free of safety hazards.

2. The facility shall provide sufficient outdoor recreation space and age-appropriate play equipment to meet the needs of each child in care.

3. Swimming pools shall be inspected and approved annually by the Arkansas Department of Health.

400.7 Buildings

1. All buildings used by children or staff shall be inspected and approved annually for fire safety as required by authorized fire inspection officials.

2. All buildings used by children or staff shall be inspected and approved annually for health and sanitation as required by the Arkansas Department of Health.

3. All buildings shall comply with local zoning ordinances and land use requirements where those exist.

4. All buildings shall comply with building codes in effect at the time the building was converted to use as a child care facility.

5. All buildings and furnishings shall be maintained in a safe and clean condition.

6. There shall be no more than twelve (12) children in a sleeping unit. Sleeping units sharing the same building shall be separated by a wall, kitchen, dining room, or
other such area that gives a sense of separation. This does not apply to psychiatric treatment facilities.

7. All parts of buildings used as living, sleeping, or bath areas shall have a heating and ventilation system that keep the temperature a minimum of 65 degrees.

8. The facility shall provide a living area that has at least thirty-five (35) square feet of floor space per child. The dining area and indoor recreation area may be included in this space.

9. The facility shall provide a dining room.

10. The facility shall have a kitchen.

### 400.8 Sleeping Arrangements

The facility shall provide bedrooms for the children that meet the following requirements:

1. There shall be no more than four (4) children per bedroom.

2. There shall be at least fifty (50) square feet of floor space per child in each bedroom.

3. No child age four (4) years or over shall share a bedroom with a child of the opposite sex.

4. Each child shall have a separate bed with a mattress, sheets, pillow, pillowcase, and adequate cover, all in good condition.

5. Beds shall be positioned to ensure all children can easily exit the room in case of emergency.

6. No child under the age of six (6) shall occupy a top bunk.

7. Bedding shall be changed at least weekly, more often if needed.

8. Each child shall have an area to store personal belongings.

9. Staff sleeping quarters shall be separate from children’s sleeping rooms.

10. Room arrangements shall be based on characteristics of the individual resident to ensure the safety of each child.

11. Facilities that admit adult clients shall provide sleeping arrangements to ensure separation of adults from children.

### 400.9 Bathrooms

The facility shall provide bathrooms for the children that meet the following requirements:

1. There shall be a separate toilet, bathtub or shower, and sink for each six (6) children.

2. There shall be an adequate supply of hot and cold running water.
3. The bathroom shall be clean and sanitary.
4. There shall be separate bath and toilet facilities for boys and girls.
5. There shall be an adequate supply of soap, towels, and tissues.

400.10 Health & Safety

1. The facility shall have an operable telephone or comparable communication system.
2. The facility shall have a continuous supply of clean drinking water. If the water source is not a municipal system, the source must be approved by the Arkansas Department of Health.
3. A private sewage/septic system shall be approved by the Arkansas Department of Health.
4. There shall be operational smoke detectors near the cooking area, heating units, and within ten (10) feet of each bedroom.
5. A portable chemical fire extinguisher shall be kept in the cooking area of each building.
6. There shall be an emergency evacuation plan diagramed and posted in each building used by children.
7. Fire drills shall be practiced each month, and severe weather and other appropriate emergency drills shall be practiced quarterly. A record of drills shall be maintained, showing date and time of day of the drill, number of participants, and length of time required to reach safety. Each newly admitted child shall be instructed in emergency procedures during orientation.
8. All medications shall be kept securely locked.
9. The facility shall have proof of current rabies vaccinations for all household pets.

400.11 Transportation

1. The facility shall have its own transportation available.
2. Any vehicles used to transport children shall be maintained in compliance with motor vehicle laws, and be insured.
3. Children shall be transported only by a staff person possessing a valid driver’s license.
4. Children shall be transported only while wearing safety belts, or in child safety seats, according to Arkansas law.
500. Psychiatric Residential Treatment Facilities

In addition to all standards in Sections 100 and 400, the following standards shall be met:

500.1 Licensing Approval & Monitoring

1. A multi-disciplinary team shall assist the Licensing Specialist in the initial study for advisory purposes. The team shall include a licensed mental health professional in the appropriate field.

2. At the discretion of the Licensing Unit, a multi-disciplinary team may be asked to assist the Licensing Specialist during monitoring visits for advisory purposes.

3. All applicants for a Psychiatric Residential Treatment Facility license after January 1, 2000 shall obtain a Permit of Approval (POA) from the Arkansas Health Services Agency prior to submitting an application or change of status request to the Child Welfare Agency Review Board.

500.2 Personnel

The agency shall employ:

1. A physician licensed by the Arkansas State Medical Board who has experience in the practice of psychiatry.
2. A Director of Nursing/Nurse Manager who is licensed in Arkansas as a Registered Nurse;
3. A Program Director who has at least a master’s degree in a human services field and is licensed in Arkansas as a mental health professional;
4. One or more therapists having at least a master’s degree in a human services field and licensed as mental health professionals;
5. Child caring staff who are at least twenty-one (21) years of age and have a high school diploma or the equivalent;
6. The staff/child ratio shall be at least 1:6 during waking hours and at least 1:8 during sleeping hours. Only staff who directly supervise children shall be counted in this ratio.
500.3 Program

1. The agency shall have a written program description that is available to residents and parents or guardians. The following information shall be included:
   a. program philosophy and mission;
   b. services and treatment modalities;
   c. treatment planning procedures;
   d. behavior management program and expectations of each child;
   e. levels and privileges (if applicable);
   f. admission, exclusion, and discharge criteria;
   g. aftercare services.

2. The agency shall keep documentation that includes:
   a. prior treatment documents and intake information;
   b. assessments;
   c. master treatment plan;
   d. treatment plan review;
   e. daily behavioral observations;
   f. medication and physician’s orders;
   g. therapy progress notes;
   h. physician notes.
   i. nursing summaries.

3. The agency shall establish safeguards to limit access to records by authorized individuals only.

4. The agency shall have written policies and procedures for family therapy, family visitation, and therapeutic passes subject to progress, treatment and physician’s orders.

5. If family involvement is contraindicated, the agency shall make reasonable efforts to identify acceptable substitutes and shall include them in the therapeutic process.

6. The agency shall establish and post a written list of children’s rights.

7. The agency shall establish a procedure for hearing children’s grievances, and shall ensure that each child understands the process.

8. Records for each child shall be kept for five (5) years from the date of discharge.
500.4 Behavior Management

1. The agency shall have a written policy governing the use of behavior control measures with children, including physical, mechanical, or chemical restraints and seclusion rooms.

2. Chemical restraints shall be used only if so ordered by a physician.

3. Seclusion or mechanical restraints shall be used only if ordered by a physician, clinically qualified registered nurse, or other licensed independent practitioner. The agency may authorize other qualified, trained staff members who are not licensed independent practitioners to initiate the use of seclusion or restraint before an order is obtained from the licensed independent practitioner. The following licensed independent practitioners, if clinically qualified, may be approved by the agency to order seclusion or restraints or to conduct the face-to-face assessments required following such order: licensed certified social worker, licensed marriage and family therapist, licensed psychological counselor, licensed Ph.D. psychologist, licensed professional counselor, licensed professional associate counselor, or other licensed mental health professional. The licensed professionals shall work under the supervision and/or review of the agency medical director.

4. Each written order for a physical restraint or seclusion is limited to two (2) hours for children ages nine (9) to seventeen (17) years, or one (1) hour for children under age nine (9) years. A physician, clinically qualified registered nurse or other authorized licensed independent practitioner must conduct a face-to-face assessment of the child within one (1) hour after the initiation of the ordered intervention.

5. The original order may only be renewed in accordance with these limits for up to a total of twenty-four (24) hours. After the original order expires, a physician, clinically qualified registered nurse or other authorized licensed independent practitioner must see and assess the child before issuing a new order.

6. Staff shall search each child before placement in seclusion, and all potentially hazardous items shall be removed.

7. Staff shall visually check each child in seclusion or restraints at least every fifteen (15) minutes, and shall document each check.

500.5 Health Care Services

1. The agency shall have a written policy for conducting health and related exams and assessments upon admission.

2. All controlled substances shall be kept under double lock.

3. Medication shall be dispensed in accordance with state and federal laws.
4. The agency shall have a written plan for prescribing, receipt, storage, dispensing, and accounting for all medications, including medications in the client’s possession at the time of admission.

5. Disposal of unused medications and contaminated medical supplies shall follow established medical procedures.

6. Any stimulant or psychotropic medicine requiring intra-muscular injection shall be administered only by a physician, registered nurse, or LPN.

7. The agency shall require medical representation at major treatment staffings on each child.

500.6 Building Requirements

1. Seclusion rooms shall meet the following criteria:
   a. At least thirty-five (35) square feet of floor space;
   b. Sufficient lighting, with a shatterproof, recessed light fixture beyond reach of the child;
   c. A door able to be opened from the outside at all times without use of a key or a removable locking device;
   d. A door with a shatterproof observation window;
   e. Located reasonably near to the staff work area.

2. The facility shall be designed, constructed, and furnished to reduce the risk of suicide and assault including, but not limited to:
   a. Light fixtures that are recessed or abut to the ceiling;
   b. No wooden or wire hangers;
   c. No metal flatware or kitchen utensils;
   d. Non-breakable windows or an alarm system that would signal when a child has left the facility without permission;
   e. No exposed electrical wires, cords, chains, or ropes;
   f. Sturdy, well-constructed furniture that cannot be broken for use as a weapon or means of self-inflicted injuries;
   g. No exposed open electrical outlets.
600. Sexual Offender Programs

In addition to all standards in Section 100, and standards in Section 200, 400 and/or 500, as applicable, the following standards shall be met:

600.1 Licensing Approval & Monitoring

1. A multi-disciplinary team shall assist the Licensing Specialist during the initial study for advisory purposes. This team shall include a licensed mental health professional.

2. At the discretion of the Licensing Unit, a multi-disciplinary team may be asked to assist the Licensing Specialist during monitoring visits for advisory purposes.

600.2 General Requirements

1. A sexual offender program shall not be located within one thousand (1000) feet of an elementary school, day care center, or day care family home.

2. The agency shall have written policies governing the supervision and monitoring of children on the grounds and in the community, including direct visual or auditory monitoring of moderate or high risk offenders (based on 600.3.3.d).

3. The agency shall have a written philosophy of public safety and a policy describing procedures to ensure public safety.

4. The staff/child ratio shall be at least 1:6 during waking hours and at least 1:8 during sleeping hours.

5. The agency shall have a written plan providing for appropriate supervision of all children, including allowance for diminished supervision in accordance with each child’s progress.

6. Twenty-four (24) hour awake supervision is required for residential child care programs and psychiatric residential treatment programs.
600.3 Admission

1. The agency shall have written policies regarding description of the target population, admission/exclusion criteria, and discharge criteria.

2. The agency shall have a written policy describing sexual offender risk levels it will accept for admission, and therapeutic interventions it will utilize for each risk level.

3. Intake information shall include:
   a. description of the offense;
   b. psychosexual assessment;
   c. relapse risk factors;
   d. treatment precautions;
   e. progress indicators;
   f. discharge summary from previous offender-specific treatment;
   g. justification for recommended level of treatment.

600.4 Personnel

1. The Program Director or Clinical Director (the person supervising casework services) shall meet all other requirements, plus have not less than forty (40) hours of sexual offender treatment training and a minimum of two (2) years of sexual offender treatment experience. Certification as a sexual offender treatment trainer may be substituted for the required experience.

2. Direct care staff shall have a minimum of ten (10) hours of sexual offender treatment training within sixty (60) days of their employment.

600.5 Staff Training

All direct care staff shall have at least ten (10) hours of sexual offender training annually, which may be included in the required thirty (30) hours of annual training (Section 403.3).
600.6 Program

1. The agency shall offer a written program description that includes treatment tasks appropriate to the previously identified needs of the individual client (see Section 603.3), including but not limited to:
   a. acknowledgement of offense;
   b. cognitive distortions;
   c. cycle of abuse;
   d. human sexuality;
   e. sexual arousal patterns;
   f. victim empathy;
   g. social skills development;
   h. relapse prevention;
   i. community registration.

2. If treatment services are contracted, there shall be evidence of participation by the contracted therapist in treatment planning reviews and individualized program implementation.

600.7 Sleeping Arrangements

1. Two (2) children in Sexual Offender programs shall not share a bedroom. Temporary arrangements for two (2) children sharing a bedroom shall be permitted due to census fluctuations or specialized treatment interventions.

2. Room arrangements shall be based on characteristics of the individual residents to ensure the safety of non-offender and/or low risk residents.
700. Independent Living

In addition to all standards in Sections 100, 200 and/or 400 as applicable, the following standards shall be met:

Agency Responsibilities

1. The agency shall have a residential or placement license in good standing.

2. The agency shall have written policies and procedures specific to the Independent Living program, which shall include written rules of conduct and potential consequences for rule violations.

3. The agency shall assign a specific caseworker to each youth in the Independent Living program who will be responsible for delivery of all treatment services to the youth according to the case plan.

4. A case plan must be completed and entered into the youth’s record showing a goal of Independence and indicating all persons responsible for services to be provided.

5. The case plan or accompanying documents shall show a complete budget for the youth. This budget shall be developed jointly by the youth and the caseworker.

6. The case plan, or accompanying documents, shall include written rules of conduct for the youth and shall include, but not limited to an agreement to abide by all federal, state and local laws including curfew ordinances.

7. Written policies shall include emergency and crisis intervention procedures, including the youth’s 24-hour ability to contact the agency.

8. The assigned caseworker shall visit the youth in the youth’s residence not less than once per month. This visit and observations shall be documented in the case record.

9. The agency shall ensure that agency personnel or qualified volunteers visit the youth in the youth’s residence at least once each week and this visit shall be documented in the case record.
Eligibility Requirements

To be eligible for placement into an out-of-home independent living program, the youth must:

1. Be evaluated by the caseworker or administrative staff to determine that placement in the Independent Living program does not present a health or safety risk to the youth or the community.

2. Be at least 16 years of age.

3. Must be 17 years of age to live in an off campus residence.

4. Have been assessed in basic life-skills, including, but not limited to:
   a) money management
   b) food management
   c) personal appearance
   d) personal hygiene/health/birth control
   e) housekeeping
   f) transportation
   g) emergency and safety skills
   h) knowledge of community resources
   i) interpersonal skills
   j) legal skills
   k) housing
   l) educational planning
   m) job-seeking and job maintenance skills

5. Be actively engaged in an educational program such as high school, GED, or post-secondary education including college or vocational training. If the youth has completed all educational requirements according to state law, he/she must be employed or actively involved in a supervised job search program.
**Living Unit / Health / Safety**

1. The living unit shall be accessible to community resources, including public transportation if necessary.

2. The living unit shall be clean and free of safety hazards. The safety assessment shall include all potential water hazards, such as swimming pools, hot tubs, ponds and nearby lakes or streams.

3. Each living unit shall have operable toilet, hygienic kitchen and other standard features for independent living. Any exceptions (e.g. laundry arrangements) shall be noted in the case plan or accompanying documentation.

4. There shall be operational smoke alarms within ten (10) feet of the kitchen and each bedroom.

5. There shall be a chemical fire extinguisher in the cooking area of the living unit and the youth shall be instructed in its use.

6. The living unit shall have an operable telephone or the youth shall be provided with an alternative means of emergency communication (e.g. cell phone).

7. Any pets shall be approved by the caseworker and shall have rabies vaccinations as required by law.

8. No firearms, dangerous weapons, or illegal substances shall be permitted in any living unit.

9. If the participating youth is the parent of a child living in his/her care, the parent shall have current CPR/First Aid certification and an approved child care plan.

10. Each living unit shall be occupied by members of the same gender.

11. Overnight guests must have prior approval of the caseworker and cannot include unrelated members of the opposite gender.
Appendix

The Child Welfare Agency Licensing Act

Statutes
This subchapter shall be known as the "The Child Welfare Agency Licensing Act."


Research references
RESEARCH REFERENCES


Statutes
As used in this subchapter:
(1) "Adoptive home" means a household of one (1) or more persons which has been approved by a licensed child placement agency to accept a child for adoption;
(2) "Adverse action" means any petition by the Division of Children and Family Services of the Department of Health and Human Services before the Child Welfare Agency Review Board to take any of the following actions against a licensee or applicant for a license:
   (A) Revocation of license;
   (B) Suspension of license;
   (C) Conversion of license from regular status to provisional status;
   (D) Imposition of a civil penalty;
   (E) Denial of application; or
   (F) Reduction of licensed capacity;
(3) "Alternative compliance" means a request for approval from the Child Welfare Agency Review Board to allow a licensee to deviate from the letter of a regulation provided that the licensee has demonstrated how an alternate plan of compliance will meet or exceed the intent of the regulation;
(4) "Board" means the Child Welfare Agency Review Board;
(5) "Boarding school" means an institution that is operated solely for educational purposes and that meets each of the following criteria:
   (A) The institution is in operation for a period of time not to exceed the minimum number of weeks of classroom instruction required of schools accredited by the Department of Education;
(B) The children in residence must customarily return to their family homes or legal guardians during school breaks and must not be in residence year round, except that this provision does not apply to students from foreign countries; and

(C) The parents of children placed in the institution retain custody and planning and financial responsibility for the children;

(6) "Child welfare agency" means any person, corporation, partnership, voluntary association or other entity or identifiable group of entities having a coordinated ownership of controlling interest, whether established for profit or otherwise, that engages in any of the following activities:

(A) Receives a total number of six (6) or more unrelated minors for care on a twenty-four-hour basis for the purpose of ensuring the minors receive care, training, education, custody, or supervision, whether or not there are six (6) or more children cared for at any single physical location;

(B) Places any unrelated minor for care on a twenty-four-hour basis with persons other than themselves; or

(C) Plans for or assists in the placements described in subdivision (a)(6)(B) of this section;

(7) "Child placement agency" means a child welfare agency, not including any person licensed to practice medicine or law in the State of Arkansas, who engages in any of the following activities:

(A) Places a child in a foster home, adoptive home, or any type of facility licensed or exempted by this subchapter;

(B) Plans for the placement of a child into a foster home, adoptive home, or any type of facility licensed or exempted by this subchapter; or

(C) Assists the placement of a child in a foster home, adoptive home, or any type of facility licensed or exempted by this subchapter;

(8)(A) "Class A violation" means violations of essential standards, including those governing fire, health, safety, nutrition, staff-to-child ratio, and space.

(B) Operation of an unlicensed child welfare agency shall also be a Class A violation unless specifically exempted as provided in this subchapter;

(9) "Class B violation" means any other violations of standards that are not Class A violations;

(10) "Division" means the division within the Department of Health and Human Services that shall be designated by the Director of the Department of Health and Human Services to administer this subchapter;

(11) "Emergency child care" means any residential child care facility that provides care to children on a time-limited basis, not to exceed ninety (90) days;

(12) "Exempt child welfare agency" means any person, corporation, partnership, voluntary association or other entity, whether established for profit or otherwise, who otherwise fits the definition of a child welfare agency but that is specifically exempt from the requirement of obtaining a license under this subchapter. Those agencies specifically exempt from the license requirement are:

(A) A facility or program owned or operated by an agency of the United States government;
(B) Any agency of the State of Arkansas that is statutorily authorized to administer or supervise child welfare activities. In order to maintain exempt status, the state child welfare agency shall state every two (2) years in written form signed by the persons in charge that their agency is in substantial compliance with published state agency child welfare standards. Visits to review and advise exempt state agencies shall be made as deemed necessary by the Child Welfare Agency Review Board to verify and maintain substantial compliance with the standards;

(C) A facility or program owned or operated by or under contract with the Department of Correction;

(D) A hospital providing acute care licensed pursuant to § 20-9-201 et seq.;

(E) Any facility governed by the Arkansas State Hospital Board or its successor;

(F) Human development centers regulated by the Board of Developmental Disabilities Services pursuant to § 20-48-201 et seq.;

(G) Any facility licensed as a family home pursuant to § 20-48-601 et seq.;

(H) Any boarding school as defined in this section;

(I) Any temporary camp as defined in this section;

(J) Any state-operated facility to house juvenile delinquents or any serious offender program facility operated by a state designee to house juvenile delinquents. Those facilities shall be subject to program requirements modeled on nationally recognized correctional facility standards that shall be developed, administered, and monitored by the Division of Youth Services of the Department of Health and Human Services;

(K) Any child welfare agency operated solely by a religious organization that elects to be exempt from licensing and which complies within the conditions of the exemption for church-operated agencies as set forth in this subchapter;

(L) The Division of Developmental Disabilities Services of the Department of Health and Human Services; and

(M) Any developmental disabilities services waiver provider licensed under § 20-48-208 or § 20-48-601 et seq.;

(13) "Foster home" means a private residence of one (1) or more family members that receives from a child placement agency any minor child who is unattended by a parent or guardian in order to provide care, training, education, custody, or supervision on a twenty-four-hour basis, not to include adoptive homes;

(14) "Independent living home" means any child welfare agency that provides specialized services in adult living preparation in an experiential setting for persons sixteen (16) years of age or older;

(15) "Minimum standards" means those rules and regulations as established by the Child Welfare Agency Review Board that set forth the minimum acceptable level of practice for the care of children by a child welfare agency;

(16) "Provisional foster home" means a foster home opened for no more than six (6) months by the division for a relative of a child in the custody of the Division of Children and Family Services after it:
(A) Conducts a health and safety check, including a central registry check and a criminal background check or a check with local law enforcement, of the relative's home;

(B) Performs a visual inspection of the home of the relative to verify that the relative will meet the standards for opening a regular foster home;

(17) "Psychiatric residential treatment facility" means a residential child care facility in a nonhospital setting that provides a structured, systematic, therapeutic program of treatment under the supervision of a psychiatrist, for children who are emotionally disturbed and in need of daily nursing services, psychiatrist's supervision, and residential care but who are not in an acute phase of illness requiring the services of an inpatient psychiatric hospital;

(18) "Relative" means a person within the fifth degree of kinship by virtue of blood or adoption;

(19) "Religious organization" means a church, synagogue, or mosque or association of same whose purpose is to support and serve the propagation of truly held religious beliefs;

(20) "Residential child care facility" means any child welfare agency that provides care, training, education, custody, or supervision on a twenty-four-hour basis for six (6) or more unrelated minors;

(21) "Substantial compliance" means compliance with all essential standards necessary to protect the health, safety, and welfare of the children in the care of the child welfare agency. Essential standards include, but are not limited to, those relating to issues involving fire, health, safety, nutrition, discipline, staff-to-child ratio, and space;

(22) "Temporary camp" means any facility or program providing twenty-four-hour care or supervision to children which meets the following criteria:

(A) The facility or program is operated for recreational, educational, or religious purposes only;

(B) No child attends the program more than forty (40) days in a calendar year; and

(C) The parents of children placed in the program retain custody and planning and financial responsibility for the children during placement; and

(23) "Unrelated minor" means a child who is not related by blood, marriage, or adoption to the owner or operator of the child welfare agency and who is not a ward of the owner or operator of the child welfare agency pursuant to a guardianship order issued by a court of competent jurisdiction.


Publisher notes
A.C.R.C. Notes. Acts 1995, No. 1162, § 3, provided: "All powers vested in the State Hospital Board and Arkansas Youth Services Board are hereby transferred by type one transfer to the DHS State Institutional System Board, and any reference to the State Hospital Board or the Arkansas Youth Services Board contained in the Arkansas Code of 1987 Annotated, shall be deemed to refer to the DHS State Institutional System Board."
Pursuant to § 1-2-207, this section is set out above as amended by Acts 2005, Nos. 1766 and 2234. Subdivisions (22) and (23) of this section were also amended by Acts 2005, No. 874, § 2, to read as follows: "(22) 'Provisional foster home' means a foster home opened for no more than six (6) months by the Division of Children and Family Services of the Department of Human Services for a relative of a child in the custody of the division after the division conducts: (A) A health and safety check, including a central registry check and a criminal background check or check with local law enforcement, on the relative and the relative's home; and (B) A visual inspection of the home of the relative; (23) 'Relative' means a person within the fifth degree of kinship by virtue of blood or adoption."

Amendments. The 2005 amendment by No. 1766 added "or" in (2)(E); inserted present (12)(L), (12)(M), (16) and (18); and redesignated the remaining subdivisions accordingly.


Statutes
(a)(1) There is created the Child Welfare Agency Review Board to serve as the administrative body to carry out the provisions of this subchapter.

(2) The board shall have the authority to promulgate rules and regulations to enforce the provisions of this subchapter.

(b) The board may also identify and implement alternative methods of regulation and enforcement which may include, but not be limited to:

(1) Expanding the types and categories of licenses issued for programs falling within the definition of "child welfare agency", as may be required by changes in the types of child welfare programs that may occur, and to promulgate separate regulations for each category of license as it may deem proper;

(2) Using the standards of other licensing authorities or compliance-reviewing professionals as being equivalent to partial compliance with board-promulgated rules, when those standards have been shown to predict compliance with the board-promulgated rules; and

(3) Using an abbreviated inspection that employs key standards that have been shown to predict full compliance with the rules.

(c)(1) The division is designated as the governmental agency charged with the enforcement of the provisions of this subchapter.

(2) Only the division, licensees, agencies specifically exempted by this subchapter, and applicants for a license shall have standing to initiate formal proceedings before the board, except where otherwise provided by law.

(d) When any person, corporation, partnership, voluntary association or other entity shall be found to operate or assist in the operation of a child welfare agency which has been licensed by the board or has had the license denied, revoked, or suspended by the board, and therefore has been ordered to cease and desist operation in accordance with the provisions of this subchapter, the board shall have the right to go into the circuit court in the jurisdiction in which the
child welfare agency is being operated and upon affidavit secure a writ of injunction, without bond, restraining and prohibiting the person, corporation, partnership, voluntary association or other entity from operating the child welfare agency.

(e)(1) The Arkansas Administrative Procedure Act, § 25-15-201 et seq., shall apply to all proceedings brought pursuant to this subchapter.

(2) The Arkansas Rules of Civil Procedure and the Arkansas Rules of Evidence shall also apply to adverse action hearings.


Statute text
(a) The Child Welfare Agency Review Board shall consist of Arkansas residents who shall be qualified as follows:
   (1) The director of the division or his or her designee;
   (2) One (1) representative from a privately owned, licensed child placement agency with expertise in foster care;
   (3) One (1) representative from a privately owned, licensed child placement agency with expertise in adoptions;
   (4) Two (2) representatives from licensed residential child care facilities;
   (5) One (1) representative from a licensed psychiatric residential treatment facility;
   (6) One (1) representative from a licensed emergency shelter; and
   (7) One (1) representative from the public at-large.

(b) Members shall be appointed by the Governor for four-year terms expiring on March 1 of the appropriate year, except that in making initial appointments, one (1) of the members representing licensed child placement agencies and the member representing the public at large shall serve for two (2) years and two (2) of the members representing residential facilities shall serve for three (3) years.

(c) Members of the board shall serve without compensation, but each member of the board shall be entitled to reimbursement for expenses for necessary meals, lodging, and mileage in attending board meetings, to be payable from funds appropriated for the maintenance and operation of the division.

(d) The members of the board shall select a chair from among its voting membership.


Publisher notes
Amendments. The 2001 amendment, inserted "his or her" in (a)(1); substituted "his or her designee, as a nonvoting ex officio member" for "his designee" in (a)(8); and substituted present (d) for the former, which read: "The division representative on the board shall serve as chair and shall only vote in the event of a tie."
The 2003 amendment deleted (a)(8) and made related changes.

Cross References. Compensation of state boards, § 25-16-901 et seq.


Statutes
(a)(1) The Child Welfare Agency Review Board shall promulgate and publish rules and regulations setting minimum standards governing the granting, revocation, refusal, and suspension of licenses for a child welfare agency and the operation of a child welfare agency.

(2) The board may consult with such other agencies, organizations, or individuals as it shall deem proper.

(3)(A) The board shall take any action necessary to prohibit any person, partnership, group, corporation, organization, or association not licensed or exempted from licensure pursuant to this chapter from advertising, placing, planning for, or assisting in the placement of any unrelated minor for purposes of adoption or for care in a foster home.

(B) The prohibition against advertising shall not apply to persons who are seeking to add to their own family by adoption.

(b) The board may amend the rules and regulations promulgated pursuant to this section from time to time, in accordance with the rule promulgation procedures in the Arkansas Administrative Procedure Act, § 25-15-201 et seq.

(c) The board shall have exclusive authority to promulgate rules and regulations that:

(1) Promote the health, safety, and welfare of children in the care of a child welfare agency;

(2) Promote safe and healthy physical facilities;

(3) Ensure adequate supervision of the children by capable, qualified, and healthy individuals;

(4) Ensure appropriate educational programs and activities for children in the care of a child welfare agency;

(5) Ensure adequate and healthy food service;

(6) Include procedures for the receipt, recordation, and disposition of complaints regarding allegations of violations of this subchapter, of the rules promulgated under this subchapter, or of child maltreatment laws;

(7) Include procedures for the assessment of child and family needs and for the delivery of services designed to enable each child to grow and develop in a permanent family setting;

(8) Ensure that criminal record checks and central registry checks are completed on owners, operators, and employees of a child welfare agency as set forth in this subchapter;

(9) Require the compilation of reports and making those reports available to the Division of Youth Services of the Department of Health and Human Services when the board determines it is necessary for compliance determination or data compilation;
Appendix: The Child Welfare Agency Licensing Act

(10) Ensure that a child placement agency:
(A) Treats clients seeking or receiving services in a professional manner, as defined by regulations promulgated pursuant to this section; and
(B) Provides clients seeking or receiving services from a child placement agency that provides adoption services with the phone number and address of the Child Welfare Agency Licensing Unit of the Department of Health and Human Services where complaints can be lodged;

(11) Require that all child welfare agencies that provide adoption services fully apprise in writing all clients involved in the process of adopting a child of the agency's adoption program or services, including all possible costs associated with the adoption program; and

(12) Establish rules governing retention of licensing records maintained by the division.

(d)(1) Provided that the health, safety, and welfare of children in the care of a child welfare agency are not endangered, nothing in this subchapter shall permit the board to promulgate or enforce any rule that has the effect of:
(A) Interfering with the religious teaching or instruction offered by a child welfare agency;
(B) Infringing upon the religious beliefs of the holder or holders of a child welfare agency license;
(C) Infringing upon the right of an agency operated by a religious organization to consider creed in any decision or action relating to admitting or declining to admit a child or family for services;
(D) Infringing upon the parent's right to consent to a child's participating in prayer or other religious practices while in the care of the child welfare agency; or
(E) Prohibiting the use of corporal discipline.

(2)(A)(i) A child welfare agency that articulates a sincerely held religious belief that is violated by a specific rule promulgated by the board shall notify the division in writing of the belief and the specific rule that violates the belief.

(ii) The division may then file a petition before the board seeking to enforce the rule.

(B)(i) The division shall bear the burden of showing that the health, safety, or welfare of children would be endangered by the exemption, and if the board so finds by a preponderance of the evidence, the board shall render a finding of fact so concluding.

(e) The board shall issue all licenses to child welfare agencies upon majority vote of board members present during each properly called board meeting at which a quorum is present when the meeting is called to order.

(f)(1)(A) The board shall have the power to deny an application to operate a child welfare agency or revoke or suspend a previously issued license to operate a child welfare agency.

(B) The board may deny, suspend, or revoke a child welfare agency license or issue letters of reprimand or caution to a child welfare agency if the board finds by a preponderance of the evidence that the applicant or licensee:
(i) Fails to comply with the provisions of this subchapter or any published rule or regulation of the board relating to child welfare agencies;

(ii) Furnishes or makes any statement or report to the division that is false or misleading;

(iii) Refuses or fails to submit required reports or to make available to the division any records required by it in making an investigation of the agency for licensing purposes;

(iv) Refuses or fails to submit to an investigation or to reasonable inspection by the division;

(v) Retaliates against an employee who in good faith reports a suspected violation of the provisions of this subchapter or the rules promulgated under this subchapter;

(vi) Fails to engage in a course of professional conduct in dealing with clients being served by the child placement agency, as defined by regulations promulgated pursuant to this section;

(vii) Demonstrates gross negligence in carrying out the duties at the child placement agency; or

(viii) Fails to provide clients involved in the process of adoption of a child with correct and sufficient information pertaining to the adoption process, services, and costs.

(2) Any denial of application or revocation or suspension of a license shall be effective when made.

(g) The board shall review the qualifications of persons required to have background checks under this subchapter.

(h)(1) The board may grant an agency's request for alternative compliance upon a finding that the child welfare agency does not meet the letter of a regulation promulgated under this subchapter but that the child welfare agency meets or exceeds the intent of that rule through alternative means.

(2)(A) If the board grants a request for alternative compliance, the child welfare agency's practice as described in the request for alternative compliance shall be the compliance terms under which the child welfare agency will be held responsible.

(B) Violations of those terms shall constitute a rule violation.

(i)(1)(A) The board shall have the authority to impose a civil penalty upon any person violating any provisions of this subchapter and any person assisting any partnership, group, corporation, organization, or association in violating any provisions of this subchapter, except that the imposition of civil penalties shall not apply to agencies that have been granted a church-operated exemption pursuant to this subchapter.

(B)(i) The board may impose a civil penalty upon any person, partnership, group, corporation, organization, or association not licensed or exempt from licensure as a child welfare agency in the State of Arkansas pursuant to this subchapter that advertises, places, plans for, or assists in the placement of any unrelated minor for purposes of adoption or for care in a foster home.
(ii) The prohibition against advertising does not apply to persons who are seeking to add to their own family by adoption.

(2) The board shall have the discretion to impose a civil penalty pursuant to this section when the board determines by clear and convincing evidence that the person sought to be charged has violated this subchapter or the rules promulgated thereunder willfully, wantonly, or with conscious disregard for law or regulation.

(3) The board may impose civil penalties as follows:

(A)(i) Class A violations as defined in this subchapter shall be subject to a civil penalty of five hundred dollars ($500) for each violation, with each day of noncompliance constituting a separate violation.

(ii) In no event shall the board impose civil penalties of more than two thousand five hundred dollars ($2,500) for Class A violations occurring in any one (1) calendar month; and

(B)(i) Class B violations as defined in this subchapter shall be subject to a civil penalty of one hundred dollars ($100) for each violation with each day of noncompliance constituting a separate violation.

(ii) In no event shall the board impose civil penalties of more than five hundred dollars ($500) for Class B violations occurring in any one (1) calendar month.

(4) If any person upon whom the board has levied a civil penalty fails to pay the civil penalty within sixty (60) days of the board's decision to impose the penalty, the amount of the fine shall be considered to be a debt owed the State of Arkansas and may be collected by civil action by the Attorney General.

(j)(1)(A) The board shall notify the applicant or licensee of the division's petition for adverse action in writing and set forth the facts forming the basis for the request for the adverse action.

(B) This notice shall offer the licensee the opportunity for a predeprivation adverse action hearing to determine if the adverse action should be taken against the licensee or applicant.

(2) Nothing in this section shall prevent the division or the board from closing a child welfare agency on an emergency basis if emergency closure is immediately required to protect the health, safety, or welfare of children, in which case the licensee shall be entitled to a postdeprivation adverse action hearing.

(k)(1) Adverse action hearings shall comply with the Arkansas Administrative Procedure Act, § 25-15-201 et seq.

(2)(A) Within ten (10) business days after rendering a decision, the board shall forward to the applicant or licensee a written findings of fact and conclusions of law articulating the board's decision.

(B) The board shall also issue an order that the applicant or licensee cease and desist from the unlawful operation of a child welfare agency if the adverse action taken was revocation or suspension of the license or denial of an application.

(l)(1) If, upon the filing of a petition for a judicial review, the reviewing court determines that there is a substantial possibility that the board's decision against the licensee or applicant may be reversed, the circuit court may enter a stay
prohibiting enforcement of a decision of the board, provided that the court articulates the facts from the adverse action hearing record which constitute a substantial possibility of reversal.

(2)(A) Thereafter, the court shall complete its review of the record and announce its decision within one hundred twenty (120) days of the entry of the stay.

(B) If the court does not issue its findings within one hundred twenty (120) days of the issuance of the stay, the stay shall be considered vacated.

(m) All rules and regulations promulgated pursuant to this section and all public comment received in writing by the division in response shall be made available for review by the Senate Committee on Children and Youth and the Subcommittee on Children and Youth of the House Committee on Aging, Children and Youth, Legislative and Military Affairs, and by the Governor or his or her designee from among the Governor's staff.

(n)(1)(A) The validity or application of any rule or regulation promulgated by the board under authority of this subchapter shall be subject to remedies provided by law for obtaining declaratory judgments at the suit of any interested person instituted in the circuit court of any county in which the plaintiff resides or does business or in the Pulaski County Circuit Court.

(B) However, the board must be named a party defendant and the board must be summoned as in an action by ordinary proceedings.

(2) If a juvenile is found to be maltreated due to the acts or omissions of a person other than the parent or guardian of the juvenile, the court may enter an order restraining or enjoining the person or facility employing that person from providing care, training, education, custody, or supervision of juveniles of whom the person or facility is not the parent or guardian.

(3)(A) If the person or facility other than the parent or guardian of the juvenile found to be maltreated was not subject to this subchapter, the court may order the person or facility to obtain a license from the board as a condition precedent to the person or facility providing care, training, education, custody, or supervision of juveniles of whom the person or facility is not the parent or guardian.

(B) If the court so orders, this subchapter shall thereafter apply to the person or facility subject to the court order.

(o)(1) The Department of Health and Human Services shall maintain a website accessible to the general public that contains information on child placement agencies.

(2) The website shall contain:

(A) The name, phone number, and address of all child placement agencies licensed by the board;

(B) Information on each child placement agency, specifically if the license is in good standing, if the license has ever been revoked or suspended, or if any letters of caution or reprimand have been issued by the board; and

(C) The name and contact information for a person in the unit who handles complaints about child placement agencies.
Appendix: The Child Welfare Agency Licensing Act

§ 9-28-406. Division enforcement duties.

Statutes

(a) The division shall advise the Child Welfare Agency Review Board regarding proposed rules and regulations. The division shall obtain comments from the board prior to initiating the rule promulgation process.

(b)(1) The board is authorized to make an inspection and investigation of any proposed or operating child welfare agency and of any personnel connected with that agency to the extent that an inspection and investigation are necessary to determine whether the child welfare agency will be or is being operated in accordance with this subchapter and the rules and regulations promulgated by the board.

(2) The board may delegate this authority to any agencies of the State of Arkansas whom the board deems proper.

(c)(1) The division or any other public agency having authority or responsibility with respect to child maltreatment shall have the authority to investigate any alleged or suspected child maltreatment in any child welfare agency, whether licensed or exempt.

(2) Nothing contained in this section shall be construed to limit or restrict that authority.

(d)(1) The division shall assist licensees and applicants in complying with published rules and regulations by issuing advisory opinions regarding matters of rule compliance when so requested.

(2) The procedure for issuing advisory opinions shall be as follows:

(A) Any licensee or applicant for a license may submit a written request for an advisory opinion on whether or not a practice in any planned or existing child welfare agency complies with the rules promulgated pursuant to this subchapter. The division must respond to the request in writing within twenty (20) business days of receiving the request. If the division’s response is that the subject of the request would not comply with published standards, the division shall suggest an
alternative practice which in its opinion would comply with published standards when it is possible to do so; and

(B) A written opinion required in subdivision (d)(2)(A) of this section is binding on the division as a declaratory order if the applicant or licensee has acted in reliance on the opinion. Notwithstanding the foregoing, in no event shall the advisory opinion be binding on the board if the compliance issue that is the subject of the advisory opinion is presented to the board for review.

(e)(1) The division shall issue corrective action notices following inspections of child welfare agencies as provided in subdivision (e)(1) of this section.

(2) If the division finds that a child welfare agency has failed to comply with an applicable law or rule and this failure does not imminently endanger the health, safety, or welfare of the persons served by the program, the division shall issue a corrective action notice to the child welfare agency. The corrective action notice must require the licensee to outline a corrective action plan. The division’s corrective action notice shall contain:

(A) A factual description of the conditions that constitute a violation of the law or rule;

(B) The specific law or rule violated; and

(C) A reasonable time frame within which the violation must be corrected.

(3)(A) If the child welfare agency believes that the contents of the division’s corrective action notice are in error, the welfare agency may ask licensing authorities to reconsider the parts of the corrective action notice that are alleged to be in error. The request for reconsideration must be in writing, delivered by certified mail, specify the parts of the corrective action notice that are alleged to be in error, explain why they are in error, and include documentation to support the allegation of error.

(B) The division shall render a decision on the request for reconsideration within fifteen (15) working days after the date the request for reconsideration was received. The licensee’s request for reconsideration and supporting documentation shall be retained by the division and made a part of the licensee’s record.

(4) If upon reinspection, the division finds that the licensee has corrected the violation or violations specified in the corrective action notice, the division employee shall indicate this correction and the date the correction was verified in the licensee’s file. If upon reinspection, the division finds that the licensee has not corrected the violations specified in the corrective action order within the required time frame, the division may in its discretion petition the board to impose appropriate adverse action against the licensee. In the case of an applicant for a license, if the applicant has not corrected the violations in a previously issued corrective action notice, the division may recommend denial of the application for a child welfare agency license.


(a)(1) It shall be unlawful for any person, partnership, group, corporation, association, or other entity or identifiable group of entities having a coordinated ownership of controlling interest to operate or assist in the operation of a child welfare agency that has not been licensed by the Child Welfare Agency Review Board from licensing pursuant to this subchapter.

(2) This license shall be required in addition to any other license required by law for all entities that fit the definition of a child welfare agency and are not specifically exempted, except that no nonpsychiatric residential treatment facility or agency licensed or exempted pursuant to this subchapter shall be deemed to fall within the meaning of § 20-10-101 for any purpose.

(3) Any child welfare agency capacity licensed or permitted by the board as of March 1, 2003, whether held by the original licensee or by a successor in interest to the original licensee, is exempted from:

(A) Obtaining any license or permit from the Office of Long-Term Care of the Division of Medical Services of the Department of Health and Human Services;

(B) Obtaining any permit from the Health Services Permit Agency or the Health Services Permit Commission to operate at the capacity licensed by the board as of March 1, 2003; and

(C) Obtaining any permit from the agency or the commission to operate at any future expanded capacity serving only non-Arkansas residents unless a permit is required by federal law or regulation.

(4) Any further expansion of capacity by a licensee of the board shall require a license or permit from the office and the agency unless the bed expansion is exempted under subdivisions (a)(3)(A)-(C) of this section.

(5)(A) Subdivisions (a)(3) and (4) of this section shall be construed to include a child welfare agency that is licensed or permitted by the Child Welfare Agency Review Board as a residential facility as of March 1, 2003, if the licensee then met and continues to meet the following criteria:

(i) The licensee is a nonhospital-based residential facility that specializes in providing treatment and care for seriously emotionally disturbed children under eighteen (18) years of age who have co-occurring substance abuse and psychiatric disorders;

(ii) The licensee possesses accreditation from at least one (1) of the following national accreditation entities:

(a) The Commission on Accreditation of Rehabilitation Facilities;

(b) The Council on Accreditation of Services for Families and Children; or

(c) The Joint Commission on Accreditation of Healthcare Organizations;

(iii) The licensee is licensed by the Bureau of Alcohol and Drug Abuse Prevention or its successor; and

(iv) The licensee is operating a nontraditional program that is approved by the Department of Education.

(B)(i) Licensees described in subdivision (a)(5)(A) of this section shall be eligible for reimbursement by the Arkansas Medicaid Program under the same methodology and at the same reimbursement rates as residential treatment
facilities that do not specialize in treating children with co-occurring substance abuse and psychiatric disorders.

(ii) However, Medicaid payments shall be reduced by payments received from other payers in connection with Medicaid-covered care and treatment furnished to Medicaid recipients.

(b)(1) It shall be unlawful for any person to falsify an application for licensure, to knowingly circumvent the authority of this subchapter, to knowingly violate the orders issued by the board, or to advertise the provision of child care or child placement when not licensed under this subchapter to provide those services, unless determined by the board to be exempt from licensure under this subchapter.

(2) Any violation of this section shall constitute a Class D felony.

(c)(1) Any person, partnership, group, corporation, organization, association, or other entity or identifiable group of entities having a coordinated ownership of controlling interest, desiring to operate a child welfare agency shall first make application for a license or a church-operated exemption for the facility to the board on the application forms furnished for this purpose by the board.

(2) The division shall also furnish the applicant with a copy of this subchapter and the policies and procedures of the board at the time the person requests an application form. The child welfare agency shall submit a separate application for license for each separate physical location of a child welfare agency.

(d)(1) The division shall review, inspect, and investigate each applicant to operate a child welfare agency and shall present a recommendation to the board whether the board should issue a license and what the terms and conditions of the license should be.

(2) The division shall complete its recommendation within ninety (90) days after receiving a complete application from the applicant. A complete application shall consist of:

(A) A completed application form prepared and furnished by the board;

(B) A copy of the articles of incorporation, bylaws, and current board roster, if applicable, including names and addresses of the officers;

(C) A complete personnel list with verifications of qualifications and experience;

(D) Substantiation of the financial soundness of the agency's operation; and

(E) A written description of the agency's program of care, including intake policies, types of services offered, and a written plan for providing health care services to children in care.

(e)(1) The board shall issue a regular license which shall be effective until adverse action is taken on the license if the board finds that:

(A) The applicant for a child welfare agency license meets all licensing requirements; or

(B) The applicant for a child welfare agency license meets all essential standards, has a favorable compliance history, and has the ability and willingness to comply with all standards within a reasonable time.

(2) The board may issue a provisional license which shall be effective for up to one (1) year if the board finds that the applicant meets all essential standards
but the applicant requires more frequent monitoring because the applicant's ability or willingness to meet all standards within a reasonable time has not been favorably determined. The board shall at no time issue a regular or provisional license to any agency or facility that does not meet all essential standards.

(f)(1) A license to operate a child welfare agency shall apply only to the address and location stated on the application and license issued, and it shall be transferable from one (1) holder of the license to another or from one (1) place to another.

(2) Whenever ownership of a controlling interest in the operation of a child welfare agency is sold, the following procedures must be followed:
   (A) The seller shall notify the division of the sale at least thirty (30) days prior to the completed sale;
   (B) The seller shall remain responsible for the operation of the child welfare agency until such time as the agency is closed or a license is issued to the buyer;
   (C) The seller shall remain liable for all penalties assessed against the child welfare agency that are imposed for violations or deficiencies occurring before the transfer of a license to the buyer;
   (D) The buyer shall be subject to any corrective action notices to which the seller was subject; and
   (E) The provisions of subsection (a) of this section, including those provisions regarding obtaining licenses or permits from the office and regarding obtaining any permits from the Health Services Permit Agency or the commission shall apply in their entirety to the new owner of the child welfare agency.

(g) If the board votes to issue a license to operate a child welfare agency, the license must be posted in a conspicuous place in the child welfare agency and must state at a minimum:
   (1) The full legal name of the entity holding the license, including the business name, if different;
   (2) The address of the child welfare agency;
   (3) The effective date and expiration date of the license;
   (4) The type of child welfare agency the licensee is authorized to operate;
   (5) The maximum number and ages of children that may receive services from the agency, if the agency is not a child placement agency; and
   (6) The status of the license, whether regular or provisional; and
   (7) Any special conditions or limitations of the license.

(h)(1) 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)(i) To the child's parent, guardian, or custodian.
(ii) 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;

(iii) The licensee or state agency may redact counseling records, psychological or psychiatric evaluations, examinations, or records, drug screens or drug evaluations, or similar information concerning a parent if the other parent is requesting a copy of a record;

(E) To the child;

(F)(i) 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.

(ii) "Health care providers" includes doctors, nurses, emergency medical technicians, counselors, therapists, mental health professionals, and dentists;

(G) 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;

(H)(i) To foster parents, the foster care record for foster children currently placed in their home.

(ii) However, information about the parents or guardians and any siblings not in the foster home shall not be released;

(I)(i) To the board.

(ii) However, at any board meeting no information which identifies by name or address any protective services recipient or foster care child shall be orally disclosed or released in written form to the general public;

(J) To the Division of Youth Services of the Department of Human Services, including child welfare agency licensing specialists;

(K) For any audit or similar activity conducted in connection with the administration of any such plan or program by any governmental agency which is authorized by law to conduct the audit or activity;

(L) Upon presentation of an order of appointment, to a court-appointed special advocate;

(M) To the attorney ad litem for the child;

(N) For law enforcement or the prosecuting attorney at the discretion of the licensee or state agency and if deemed to be in the best interest of the child;

(O) To circuit courts, as provided for in the Arkansas Juvenile Code of 1989, § 9-27-301 et seq. ;

(P) In a criminal or civil proceeding conducted in connection with the administration of any such plan or program;

(Q) For purposes directly connected with the administration of any of the state plans as outlined at 42 U.S.C. 671(a)(8), as in effect January 1, 2001;

(R) For the administration of any other federal or federally assisted program which provides assistance, in cash or in kind, or services, directly to individuals on the basis of need; or

(S)(i) To individual federal and state representatives and senators and their staff members with no redisclosure of information.
(ii) No disclosure shall be made to any committee or legislative body of any information which identifies by name or address any recipient of services; or

(T) To a grand jury or court upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury.

(2) 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 board;

(E) To the Division of Children and Family Services of the Department of Human Services, including child welfare agency licensing specialists;

(F) To law enforcement or the prosecuting attorney upon request;

(G) To a grand jury or court upon a finding that information in the record is necessary for the determination of an issue before the court or grand jury;

(H)(i) To individual federal and state representatives and senators and their staff members with no redisclosure of information.

(ii) No disclosure shall be made to any committee or legislative body of any information that identifies by name or address any recipient of services.

(I) To the attorney ad litem and court-appointed special advocate, the home study on the adoptive family selected by the department to adopt the juvenile.

(3)(A) 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.

(B) Any person disclosing information in violation of this subsection shall be guilty of a Class C misdemeanor.

(i) Foster parents approved by a child placement agency licensed by the Department of Human Services shall not be liable for damages caused by their foster children nor shall they be liable to the foster children nor to the parents or guardians of the foster children for injuries to the foster children caused by acts or omissions of the foster parents unless the acts or omissions constitute malicious, willful, wanton, or grossly negligent conduct.


Publisher notes
A.C.R.C. Notes. Acts 2005, No. 888, § 1, provided: "Child welfare agencies operating as residential facilities providing treatment to children with co-occurring substance abuse and psychiatric disorders are covered by the amendment of Arkansas Code §§ 9-28-407(a) and Arkansas Code § 20-8-107(c) by Act 1285 of 2003 so long as they were providing such care on or before March 1, 2003, and also meet the requirements of this act."
Amendments. The 1999 amendment rewrote (a).
The 2001 amendment by No. 1211 redesignated former (h) as present (h)(1); in present (h)(1), inserted "including both foster care and protective services records" and made related changes, and added "to the extent permitted by federal law and only" to the end; redesignated former (h)(1) as present (h)(1)(A); redesignated former (h)(2) as present (h)(1)(B), added "For adoptive placements" to the beginning and made related changes; redesignated former (h)(3) as present (h)(1)(C) and made minor punctuation changes; and added (h)(1) through (h)(3).
The 2001 amendment by No.1800 redesignated former (a)(3)(1) and (a)(3)(2) as present (a)(3)(A) and (a)(3)(B); and in present (a)(3)(B), inserted "Permit" twice.
The 2003 amendment by No. 1157 added (h)(1)(D)(iii); in (h)(1)(S)(i), inserted "and their staff members"; added (h)(1)(T); in (h)(2)(E), substituted "Children and Family Services of the Department of Human Services" for "Youth Services"; and added (2)(G) and (2)(H).
The 2003 amendment by No. 1166 substituted "circuit" for "juvenile" in (h)(1)(O).
The 2003 amendment by No. 1285, in (a)(3), substituted "March 1, 2003" for "1999" and deleted "the requirements of law" from the end; in (a)(3)(B), inserted "to operate at the capacity licensed by the board as of March 1, 2003; and"; added (a)(3)(C) and (a)(4); and made minor stylistic changes.
The 2005 amendment by No. 888 added present (a)(5).
The 2005 amendment by No. 1766 added (h)(2)(I) and made related changes.
The 2005 amendment by No. 2234 deleted "(8)" following "§ 20-10-101" in (a)(2); in (a)(3), inserted "capacity" and "whether held by the original license or by a successor in interest to the original licensee"; in (b), inserted the subdivision designations and substituted "from licensure under this subchapter" for "therefrom" in present (b)(1); inserted the subdivision designations in (c); substituted "division" for "Division of Medical Services" throughout (c) and (d); in (d), inserted the (1) and (2) designations; redesignated former (d)(1)-(5) as present (d)(2)(A)-(E); and, in present (d)(2), substituted "shall" for "must"; and rewrote (f).

Research references

RESEARCH REFERENCES


§ 9-28-408. Church-related exemption.

Statutes
(a) Any church or group of churches exempt from the state income tax levied by § 26-51-101 et seq. when operating a child welfare agency shall be exempt from
obtaining a license to operate the facility by the receipt by the Child Welfare Agency Review Board of written request therefor, together with the written verifications required in subsection (b) of this section. A written request shall be made by those churches desiring exemption to the board, which is mandated under the authority of this subchapter to license all child welfare agencies.

(b)(1) In order to maintain an exempt status, the child welfare agency shall state every two (2) years in written form signed by the persons in charge that the agency has met the fire, safety, and health inspections and is in substantial compliance with published standards that similar nonexempt child welfare agencies are required to meet.

2) Visits to review and advise exempt agencies shall be made as deemed necessary by the board to verify and maintain substantial compliance with all published standards for nonexempt agencies.

3) Standards for substantial compliance shall not include those of a religious or curriculum nature so long as the health, safety, and welfare of the child are not endangered.

(c)(1) Any questions of substantial compliance with the published standards shall be reviewed by the board.

2) Final administrative actions of the board shall be pursued by either party in the court of competent jurisdiction in the resident county of the facility under review.

3) Challenge to the constitutionality or reasonableness of any regulation or statute may be made prior to any appeal under the Arkansas Administrative Procedure Act, § 25-15-201 et seq.

(d) As used in this section, the term "substantial compliance" and the term "is being operated in accordance with this subchapter" shall each mean that a church-operated exempt or a nonexempt child welfare agency is being operated within the minimum requirements for substantial compliance as promulgated by the board. It is the intent and purpose of this section that the term "substantial compliance" be applicable to all child welfare agencies.


Statute text
(a)(1) Each of the following persons in a child welfare agency shall be checked with the child maltreatment central registry in his or her 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, for reports of child maltreatment in compliance with policy and procedures promulgated by the Child Welfare Agency Review Board:

(A) An employee having direct and unsupervised contact with children;
(B) A volunteer having direct and unsupervised contact with children;
(C) A foster parent and all household members age ten (10) years and older;
(D) An adoptive parent and all household members age ten (10) years and older;

(E) An owner having direct and unsupervised contact with children; and

(F) A member of the agency’s board of directors having direct and unsupervised contact with children.

(2) The board shall have the authority to deny a license or church-operated exemption to any applicant found to have any record of founded child maltreatment in the official record of the registry.

(3)(A) Any person required to be checked under this section who is found to have any record of child maltreatment in the official record of the registry shall be reviewed by the owner or operator of the facility in consultation with the board to determine appropriate corrective action measures which would indicate, but are not limited to, training, probationary employment, or nonselection for employment.

(B) The board shall also have the authority to deny a license or church-operated exemption to an applicant who continues to employ a person with any record of founded child maltreatment.

(4) All persons required to be checked with the registry under this subsection shall repeat the check every two (2) years, except that adoptive parents who reside in Arkansas shall repeat the check every year pending court issuance of a final decree of adoption, at which point repeat checks shall no longer be required.

(b)(1) Each of the following persons in a child welfare agency who has lived in Arkansas continuously for six (6) years or more shall be checked with the Identification Bureau of the Department of Arkansas State Police for convictions of the offenses listed in this subchapter in compliance with policy and procedures promulgated by the board:

(A) An employee having direct and unsupervised contact with children;

(B) A volunteer having direct and unsupervised contact with children;

(C) A foster parent and all household members age sixteen (16) years and older;

(D) An owner having direct and unsupervised contact with children; and

(E) A member of the agency’s board of directors having direct and unsupervised contact with children.

(2)(A) The owner or operator of a child welfare agency shall maintain on file, subject to inspection by the board, evidence that Department of Arkansas State Police criminal records checks have been initiated on all persons required to be checked and the results of the checks.

(B) Failure to maintain that evidence on file will be prima facie grounds to revoke the license or church-operated exemption of the owner or operator of the child welfare agency.

(3) All persons required to be checked with the Department of Arkansas State Police under this subsection shall repeat the check every five (5) years, except that adoptive parents shall not repeat the check after court issuance of a final decree of adoption in the adoption case for which the check was obtained.

(4) Adoptive parents shall complete background checks as required by law.
(c)(1) In compliance with federal law and regulations and with policy and procedures promulgated by the board, each of the following persons in a child welfare agency who has not lived in Arkansas continuously for the past six (6) years shall be checked with the Federal Bureau of Investigation for convictions of the offenses listed in this subchapter:

(A) An employee having direct and unsupervised contact with children;
(B) A volunteer having direct and unsupervised contact with children;
(C) A foster parent and all family members age sixteen (16) years and older;
(D) An owner having direct and unsupervised contact with children; and
(E) A member of the agency's board of directors having direct and unsupervised contact with children.

(2)(A) The owner or operator of a child welfare agency shall maintain on file, subject to inspection by the board, evidence that the Federal Bureau of Investigation's criminal records checks have been initiated on all persons required to be checked and the results of the checks.

(B) Failure to maintain that evidence on file will be prima facie grounds to revoke the license or church-operated exemption of the owner or operator of the child welfare agency.

(d)(1) Each person required to have a criminal records check under this subchapter shall complete a criminal records check form developed by the Department of Health and Human Services and shall sign the form that contains the following under oath before a notary public:

(A) Certification that the subject of the check consents to the completion of the check;
(B) Certification that the subject of the check has not been convicted of a crime and if the subject of the check has been convicted of a crime, contains a description of the crime and the particulars of the conviction;
(C) Notification that the subject of the check may challenge the accuracy and completeness of any information in any report and obtain a prompt determination as to the validity of the challenge before a final determination is made by the board with respect to his or her employment status or licensing status;
(D) Notification that the subject of the check may be denied a license or exemption to operate a child welfare agency or may be denied unsupervised access to children in the care of a child welfare agency due to information obtained by the check which indicates that the subject of the check has been convicted of, or is under pending indictment for, a crime listed in this subchapter; and
(E) Notification that any background check and the results thereof shall be handled in accordance with the requirements of Pub. L. 92-544.

(2) The owner or operator of the child welfare agency shall submit the criminal records check form to the Identification Bureau for processing within ten (10) days of hiring the employee, who shall remain under conditional employment until the registry check and criminal records checks required under this subchapter are completed.

(3) Nothing in this section shall be construed to prevent the board from denying a license or exemption to an owner or preventing an operator or
employee in a child welfare agency from having unsupervised access to children by reason of the pending appeal of a criminal conviction or child maltreatment determination.

(4) In the event a legible set of fingerprints as determined by the Department of Arkansas State Police and the Federal Bureau of Investigation cannot be obtained after a minimum of three (3) attempts by qualified law enforcement personnel, the board shall determine eligibility based upon a name check by the Department of Arkansas State Police and the Federal Bureau of Investigation.

(5)(A) An owner or operator of a child welfare agency shall not be liable during a conditional period of service for hiring any person required to have a background check pursuant to this subchapter who may be subject to a charge of false swearing upon completion of central registry and criminal records check.

(B)(i) Pursuant to this subchapter, false swearing shall occur when a person while under oath provides false information or omits information that the person knew or reasonably should have known was material.

(ii) Lack of knowledge that information is material is not a defense to a charge of false swearing.

(C) For purposes of this subchapter, false swearing is a Class A misdemeanor.

(e)(1) Except as provided in subdivisions (d)(2) or (h)(1) of this section, no person who is required to have a criminal check under subdivision (b)(1) or (c)(1) of this section shall be eligible to have direct and unsupervised contact with a child in the care of a child welfare agency if that person has pleaded guilty or nolo contendere to, or has been found guilty of, any of the following offenses by any court in the State of Arkansas or of any similar offense by a court in another state or of any similar offense by a federal court unless the conviction was vacated or reversed:

(A) Capital murder as prohibited in § 5-10-101;
(B) Murder in the first degree as prohibited in § 5-10-102 and murder in the second degree as prohibited in § 5-10-103;
(C) Manslaughter as prohibited in § 5-10-104;
(D) Negligent homicide as prohibited in § 5-10-105;
(E) Kidnapping as prohibited in § 5-11-102;
(F) False imprisonment in the first degree and false imprisonment in the second degree as prohibited in §§ 5-11-103 and 5-11-104;
(G) Permanent detention or restraint as prohibited in § 5-11-106;
(H) Battery in the first degree, battery in the second degree, and battery in the third degree as prohibited in §§ 5-13-201, 5-13-202, and 5-13-203;
(I) Aggravated assault as prohibited in § 5-13-204;
(J) Assault in the first degree and assault in the second degree as prohibited in §§ 5-13-205 and 5-13-206;
(K) Terroristic threatening in the first degree and terroristic threatening in the second degree as prohibited in § 5-13-301(a) and (b);
(L) Any sexual offense as prohibited in § 5-14-101 et seq.;
(M) Permitting abuse of a child as prohibited in § 5-27-221;
(N) Endangering the welfare of a minor in the first degree and endangering
the welfare of a minor in the second degree as prohibited in §§ 5-27-203 and 5-
27-204;
(O) Contributing to the delinquency of a minor as prohibited in § 5-27-205;
(P) Engaging children in sexually explicit conduct for use in visual or print
medium, transportation of minors for prohibited sexual conduct, use of a child or
consent to use of a child in sexual performance, and producing, directing, or
promoting sexual performance by a child as prohibited in §§ 5-27-303, 5-27-305,
5-27-402, and 5-27-403;
(Q) Incest as prohibited in § 5-26-202;
(R) Interference with visitation as prohibited in § 5-26-501;
(S) Interference with custody as prohibited in § 5-26-502;
(T) Engaging in conduct with respect to controlled substances as prohibited
in § 5-64-401;
(U) Distribution to minors as prohibited in § 5-64-406;
(V) Public display of obscenity as prohibited in § 5-68-205;
(W) Prostitution as prohibited in § 5-70-102;
(X) Promoting prostitution in the first degree, promoting prostitution in the
second degree, and promoting prostitution in the third degree as prohibited in §§
5-70-104, 5-70-105, and 5-70-106;
(Y) Computer child pornography as prohibited in § 5-27-603;
(Z) Computer exploitation of a child in the first degree as prohibited in § 5-
27-605(a);
(AA) Criminal attempt, criminal complicity, criminal solicitation, or criminal
conspiracy as prohibited in §§ 5-3-201, 5-3-202, 5-3-301, and 5-3-401 to commit
any of the offenses listed in this section;
(BB) Any felony or any misdemeanor involving violence, threatened violence,
or moral turpitude; and
(CC) Any former or future law of this or any other state or of the federal
government which is substantially equivalent to one (1) of the aforementioned
offenses.

(2)(A) Any person who is required to have a criminal check under subdivision
(b)(1) or (c)(1) of this section who pleads guilty or nolo contendere to, or is found
goody of, any of the offenses listed in subdivision (e)(1) of this section, unless the
conviction is vacated or reversed, shall be absolutely disqualified to be an owner,
operator, volunteer, foster parent, adoptive parent, member of an agency's board
of directors, or employee in a child welfare agency during the period of his or her
confinement, probation, or parole supervision.

(B) Except as provided in subdivision (h)(1) of this section, any person who
is required to have a criminal check under subdivision (b)(1) or (c)(1) of this
section who pleads guilty or nolo contendere to, or is found guilty of, any of the
offenses listed in subdivision (e)(1) of this section, unless the conviction is
vacated or reversed, shall be presumed to be disqualified to be an owner,
operator, volunteer, foster parent, adoptive parent, member of an agency's board
of directors, or employee in a child welfare agency after the completion of his or
her term of confinement, probation, or parole supervision. This presumption can be rebutted in the following manner:

(i) (a) The applicant must petition the board to make a determination that the applicant does not pose a risk of harm to any person.

(b) The applicant shall bear the burden of making such a showing; and

(ii) The board in its discretion may permit an applicant to be an owner, operator, volunteer, foster parent, adoptive parent, member of an agency's board of directors, or an employee in a child welfare agency notwithstanding having been convicted of an offense listed in this section upon making a determination that the applicant does not pose a risk of harm to any person served by the facility. In making this determination, the board shall consider the following factors:

(a) The nature and severity of the crime;
(b) The consequences of the crime;
(c) The number and frequency of crimes;
(d) The relation between the crime and the health, safety, and welfare of any person, such as:
   (1) The age and vulnerability of victims of the crime;
   (2) The harm suffered by the victim; and
   (3) The similarity between the victim and persons served by a child welfare agency;
(e) The time elapsed without a repeat of the same or similar event;
(f) Documentation of successful completion of training or rehabilitation pertinent to the incident; and
(g) Any other information that bears on the applicant's ability to care for children or any other relevant information.

(C) The board's decision to disqualify a person from being an owner, operator, volunteer, foster parent, adoptive parent, member of an agency's board of directors, or an employee in a child welfare agency under this section shall constitute the final administrative agency action and shall not be subject to review.

(f)(1) No foster child in the custody of the Department of Health and Human Services shall be placed in the home of any foster or adoptive parent if the criminal records check reveals a felony conviction for:
   (A) Child abuse or neglect;
   (B) Spousal abuse;
   (C) A crime against children, including child pornography; or
   (D) A crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery.

(2) No foster child in the custody of another state agency who is placed in Arkansas shall be placed in any home if the criminal records check reveals a felony conviction of an adult in the home for:
   (A) Child abuse or neglect;
   (B) Spousal abuse;
   (C) A crime against children, including child pornography; or
(D) A crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery.

(g)(1) No foster child in the custody of the Department of Health and Human Services shall be placed in the home of any foster or adoptive parent if the criminal record check reveals a felony conviction for physical assault, battery, or a drug-related offense if the offense was committed within the past five (5) years.

(2) 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 any adult in the home for physical assault, battery, or a drug-related offense if the offense was committed within the past five (5) years.

(h)(1) For purposes of this section, an expunged record of a conviction or plea of guilty or nolo contendere to an offense listed in subdivision (e)(1) of this section shall not be considered a conviction, guilty plea, or nolo contendere plea to the offense unless the offense is also listed in subdivision (h)(2) of this section.

(2) Because of the serious nature of the offenses and the close relationship to the type of work that is to be performed, the following shall result in permanent disqualification:

(A) Capital murder as prohibited in § 5-10-101;

(B) Murder in the first degree as prohibited in § 5-10-102 and murder in the second degree as prohibited in § 5-10-103;

(C) Kidnapping as prohibited in § 5-11-102;

(D) Rape as prohibited in § 5-14-103;

(E) Sexual assault in the first degree and second degree as prohibited in §§ 5-14-124 and 5-14-125;

(F) Endangering the welfare of a minor in the first degree and endangering the welfare of a minor in the second degree as prohibited in §§ 5-27-203 and 5-27-204;

(G) Incest as prohibited in § 5-26-202;

(H) Arson as prohibited in § 5-38-301;

(I) Endangering the welfare of incompetent person in the first degree as prohibited in § 5-27-201; and

(J) Adult abuse that constitutes a felony as prohibited in § 5-28-103.


Publisher notes
Amendments. The 1999 amendment added (f) and (g).
The 2001 amendment rewrote the section.
The 2003 amendment added present (e)(1)(Y) and (e)(1)(Z) and redesignated former (e)(1)(Y) through (e)(1)(AA) as present (e)(1)(AA) through (e)(1)(CC).
The 2005 amendment by No. 1766, in (e)(1), substituted "subdivisions (d)(2) or (h)(1)" for "subdivision (d)(2)" and inserted "unless the conviction was vacated or reversed"; substituted "degree" for "degrees" in (e)(1)(F); inserted "unless the conviction is vacated or reversed" in (e)(2)(A); in (e)(2)(B), inserted "Except as provided in subdivision (h)(1) of this section," and "unless the conviction is
vacated or reversed”; inserted the (e)(2)(B)(i)(a) and (b) and (e)(2)(B)(ii)  
designations; deleted "served by the facility and is therefore qualified to serve in  
a child welfare agency" in present (e)(2)(B)(i)(a); substituted "to be an owner,  
operator, volunteer, foster parent, adoptive parent, member of an agency’s board  
of directors, or an employee in a child welfare agency” for "to serve in a child  
welfare agency" in (e)(2)(B)(ii); substituted "any person" for "persons served by a  
child welfare agency" in (e)(2)(B)(i)(a); substituted "to be an owner, operator,  
volunteer, foster parent, adoptive parent, member of an agency’s board of directors, or an employee in a child welfare agency" for "to serve in a child welfare agency" in (e)(2)(B)(i)(a); substituted "any person" for "persons served by a child welfare agency" in (e)(2)(B)(i)(a); substituted "to be an owner, operator, volunteer, foster parent, adoptive parent, member of an agency’s board of directors, or an employee in a child welfare agency" for "to serve in a child welfare agency" in (e)(2)(B)(ii); substituted "any person" for "persons served by a child welfare agency" in (e)(2)(B)(ii); substituted "from being an owner, operator, volunteer, foster parent, adoptive parent, member of an agency’s board of directors, or an employee in a child welfare agency under" for "serving in a child welfare agency pursuant to" in (e)(2)(C); and added (h).

The 2005 amendment by No. 1923 substituted "subdivisions (d)(2) or (h)(1)" for "subdivision (d)(2)" in (e)(1); added "and" at the end of (e)(2)(B)(ii)(d)(2); substituted "from being an owner, operator, volunteer, foster parent, adoptive parent, member of an agency’s board of directors, or an employee in a child welfare agency under" for "serving in a child welfare agency pursuant to" in (e)(2)(C); and added (h).


Research references

RESEARCH REFERENCES

UALR L.J.
Survey of Legislation, 2003 Arkansas General Assembly, Criminal Law,  
Computer Crimes, 26 UALR L.J. 361.