



Provider Manual

PINEY WOODS 4Kids-4families

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Helping Kids & Strengthening Families

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INTRODUCTION

This Manual provides procedures for required actions and expectations of the Provider Network for Region 4 Single Source Continuum Contractor (SSCC), 4Kids4Families (4Kids).

FOSTER CARE REDESIGN AND COMMUNITY BASED CARE OVERVIEW

The redesign of the Texas foster care system is a bold system transformation that redefines public and private agencies and offers a watershed opportunity for local ownership and local decisions to be made to best achieve safety, permanency, and well-being outcomes for children and families.

The values and principles guiding the Foster Care Redesign are services that should be family driven, youth guided, trauma informed, community-based, culturally competent, individualized, provided in the least restrictive environment, and coordinated among child and family serving agencies.

The goals of Foster Care Redesign are to:

- Keep children and youth closer to home and connected to their communities and siblings.
- Improve the quality of care and outcomes for children and youth.
- Reduce the number of times children move between foster homes.

In the redesign foster care model, an SSCC is responsible for ensuring the full continuum of services in a designated geographic catchment area and therefore must have a good understanding of the strengths and needs of the community.

In 2017, the Texas Legislature directed Department of Family and Protective Services (DFPS) to expand this model to include both foster care and relative or "kinship" care and gave the SSCC sole responsibility for case management - rather than sharing that responsibility with DFPS.

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

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

On March 1, 2023, Arrow Child and Family Ministries (Arrow) was awarded the Single Source Continuum Contract (SSCC) for Region 4. Region 4 is made up of the following counties: Anderson, Bowie, Camp, Cass, Cherokee, Delta, Franklin, Gregg, Harrison, Henderson, Hopkins, Lamar, Marion, Morris, Panola, Rains, Red River, Rusk, Smith, Titus, Upshur, Van Zandt, and Wood.

MISSION AND VISION

At 4Kids, our mission is:

"Helping Kids and Strengthening Families."

Our vision is:

"Through collaborative efforts with the community and local stakeholders, 4Kids4Families will transform the

child welfare system to create innovative solutions for children in need bringing hope and healing to children, families and society overall."

ORGANIZATIONAL STRUCTURE

4Kids, a company of Arrow dedicated to providing community-based care in Region 4, has built an effective administrative structure which maximizes available resources in key areas to deliver services to the children and families of Region 4. The executive team has extensive experience in child welfare service delivery and includes a CEO, COO, Senior Vice President of Community-Based Care, and five Directors with responsibilities for Placement, Care Management, Community Engagement, Legal Affairs, and Quality & Compliance. These individuals serve as the core 4Kids leadership team and work closely with the Provider Network to serve in the best interest of the children and families from Region 4.

A copy of the organizational chart can be found in <u>Appendix A</u>.

TRAUMA INFORMED PRACTICE

4Kids is committed to not only keeping children safe in care but also helping them heal while they are in our care. 4Kids expects that all service providers utilize a trauma informed and responsive model of care that is child and family centered, developmentally appropriate, attachment focused, and culturally and linguistically competent. It is our expectation that all Network Providers adopt a trauma informed care model that highlights the importance of relational connections as the foundation for healing from trauma and focuses on building a child's ability to self-regulate over behavioral compliance.

4Kids will utilize a variety of evidence based and evidence informed practices including Trust Based Relational Intervention (TBRI) method developed by the Karyn Purvis Institute for Child Development, the Neurosequential Models developed by Bruce Perry, and Motivational Interviewing to help bring healing to youth and families in our care. These models will be evident through a variety of the 4Kids work with Network Providers including care coordination, staff and network trainings, treatment and intervention planning, intake and placement processes, and placement disruption mitigation meetings.

DEFINITIONS

- 88F refers to the Adoptive placement Code that is paid at the time of adoptive placement for all straight adopt placements.
- 88G refers to the Adoptive Post Placement Code that is paid at the time of all adoption consummations for straight adopt and/or foster to adopt placements.
- ARD refers to "Admission, Review and Dismissal" documents produced by the ARD committee for the purposes of addressing a child or youth's special education needs.
- Capacity refers to the number of children allowed to be in a home or facility per state Minimum Standards and Texas Family Code.
- Case mining refers to the process of identifying prospective kin and fictive kin for a child in care.
- Catchment Area refers to a defined geographic region as identified by DFPS in which an SSCC has oversight of the system of care.
- CCMS refers to the Child Care Management Services program of the Texas Workforce Commission helps eligible parents with the cost of childcare.
- CEO refers to Chief Executive Officer
- Clinical consultation refers to consultation between mental health professionals or mental health

practitioners and other professionals that hold expertise and experience, to strengthen the clinical approach in pursuing a favorable outcome for the client.

- CoBRIS refers to the Community Based Resource Information System or a web-based software solution designed for child welfare organizations and will be utilized by 4Kids to manage daily operations.
- COO refers to Chief Operating Officer
- Court of competent jurisdiction refers to a specified family court that, as determined by the suit affecting parental relationship to the child, has jurisdiction over all matters regarding the child unless otherwise provided by the Family Code.
- Emergency Placement refers to when DFPS makes a referral to 4Kids for a child who is in immediate need of paid foster care placement and services, and is not currently served. This process, therefore, will be used for all emergency removals, as well as any child requiring immediate paid foster care placement and services.
- Family finding refers to the process of locating the identified kin and fictive kin for a child/youth in care.
- Full Individual Evaluation (FIE) refers to an assessment of the child/youth's abilities to determine his/her eligibility and needs for special education services.
- Heart Gallery refers to a traveling photographic and audio exhibit created to find forever families for children in foster care. There are 13 regional heart galleries throughout Texas.
- HSEGH refers to the Health, Social, Educational, and Genetic History report that provides the child's information to prospective adoptive families.
- Individualized Education Program (IEP) refers to a statement of present levels of academic achievement and functional performance.
- Individualized Family Service Plan (IFSP) refers to a written document and process that a group of professionals create to ensure favorable outcomes for a child's early intervention program.
- IMPACT refers to DFPS computer application system.
- LGBTQIA2S+ refers to the Child Welfare Information Gateway webpage definition including information about serving lesbian, gay, bisexual, transgender, and questioning (LGBTQ) Intrasex, Asexual, Two Spirited identifying youth, including resources for LGBTQ+ youth in out-of-home care and resources offering support and guidance for LGBTQ+ youth and their families.
- Non-Emergency Placement refers to when DFPS makes a referral to 4Kids for a child already in DFPS conservatorship who is moving to a paid foster care placement with a 4Kids' Network Provider. For Example, a child who needs to move from a fictive kin placement to paid foster care.
- Protected Health Information (PHI) refers to health information that includes any of the 18 elements identified by HIPAA.
- Personally Identifiable Information (PII) refers to any information that permits the identity of an individual may be applied either directly or indirectly.
- Point of entry refers to an area of the state in which the child was brought into care.
- Scorecard refers to a provider tally outlining their outcomes and outputs based on contract evaluation audits.
- Section 504 refers to a division of the Individuals with Disabilities Education Act (IDEA) that provides protections for students with disabilities that may or may not fall under special education in the State of Texas.
- Solution-Based communication refers to a goal-oriented communication, which focuses on the solution rather than the problem. It emphasizes strengths and resources and how these can be utilized to achieve a positive outcome.
- Support services refers to services that include support to help families resolve safety issues and reduce future involvement with DFPS and/or improve placement stability and increase permanency for a child/ youth in care such as counseling, therapeutic interventions, behavioral health services, psychoeducation,

physical health, and financial assistance.

- Title 4-E or Title IV-E of the Social Security Act refers to a federal funding stream to states for costs related to the provision of foster care, including costs related to legal representation of DFPS, parents, and children.
- Trauma informed practice refers to a trauma informed and responsive model of care that is child and family centered, developmentally appropriate, attachment focused, and culturally and linguistically competent. It highlights the importance of relational connections as the foundation for healing from trauma and focuses on building a youth's ability to self-regulate over behavioral compliance.
- Utilization Review (UR) refers to the process of making sure services are being used appropriately and efficiently to meet the identified needs of the client to ensure client progress.
- Wraparound services refers to a comprehensive, holistic, youth and family driven way of responding when children or youth experience behavioral challenges. These services put the child/youth and family at the center.

REGION 4 RECRUITMENT AND CAPACITY

PROVIDER WORKGROUPS

4Kids believes that supporting and strengthening a network of providers can produce better outcomes for children and families. As such, the SSCC actively engages Network Providers to participate in the successful implementation of the contract and achievement of contract outcomes. Network Providers convene monthly to review provider data in relation to capacity building and service provision. The goal being to generate discussion around strategies Network Providers are implementing to serve children in Region 4 successfully.

Additionally, on a quarterly basis the network and community stakeholders convene to review Scorecard outcomes data, discuss opportunities for improvement, analyze trends and forecasts, and conduct open discussions about strategies to create a common understanding and expectation of quality performance in Region 4.

4Kids may create workgroups within the Provider Network to address specific needs and issues pertinent to Region 4. Providers are encouraged to actively participate in workgroups as applicable and partner with the network to develop strategies and plans that will result in improved outcomes for children.

LEGACY TRANSFERS

Legacy Placements is the term used for children who were not originally referred to as 4Kids, but rather placed in their current placement setting by DFPS. These legacy placements will transition to 4Kids for placement management over the course of several months. This transfer of existing clients (referred to as "Legacy") into the Provider Network is simply an administrative change in the record and not a physical placement change for the youth. 4Kids will transition children in the Legacy system who are being served by the 4Kids Provider Network within 6 months of the "go live" date beginning in November 2023. Legacy Transition will be completed no later than April 30, 2024.

The transition plan and schedule governs when the child is transitioned to 4Kids in IMPACT. DFPS staff will be notified by the community-based care administrator via email prior to their children being moved from a legacy placement to placements within the 4Kids Network. 4Kids will work with Network Providers to transfer Legacy placements with a percentage of Providers transitioning legacy placements each month until the transition is complete. This will happen in accordance with the transition plan and schedule negotiated with DFPS. This plan will be made available to Network Providers prior to November 1, 2023.

4Kids will work with each Network Provider as well as representatives with DFPS to ensure that transfers are made in the IMPACT system and that a secondary worker assignment is made to the appropriate 4Kids Care Coordinator. 4Kids Intake Specialists and Care Coordinators will work with each Network Provider to get all State required documents completed and signed.

4Kids recognizes that a percentage of children in the legacy system are in placements outside the SSCC catchment area. Through data gathered from the Provider Network and DFPS, 4Kids will establish the number of children from Region 4 SSCC Catchment Area who are outside the SSCC boundaries in foster care and kinship placement. 4Kids will develop a transfer plan for this population that may include contracting with non-Region 4 SSCC Catchment Area providers for continued care, if the provider or caregiver is in good standing, the continued placement provides stability, and is in the child's best interest.

ETHICAL FAMILY TRANSFER PROCESS

Building new capacity is an integral part of the network's success. New capacity brings more opportunities for successful placement of youth that require out-of-home care. During the term of the provider's contract with the SSCC, and up to 1 year after the contract ends, no verified family of the network will be contacted by staff, volunteers, subcontractors, or any affiliated entities of another network provider to recruit or transfer to that provider agency. This standard applies even when one organization is planning to close its operations or is placed on placement hold by Residential Child Care Regulation (RCCR) and wishes to release its homes to other agencies. In such situations, the closing organization may request that 4Kids send a list of Network Providers and contact information to affected foster families for families to make their own contact and decision for transferring their licensure.

If a verified family contacts another agency to seek a transfer or submits an application to change verification, the agency contacted must inform the family about this Ethical Family Transfer process and direct the family to meet with their licensing agency to discuss concerns and provide time for resolution. The contacted agency must also inform the originating agency about the contact within five (5) business days of contact. After this is completed, the agency may not have further contact with the requesting family for a minimum of 30 days, or until they have received a Consent for Release of Information and transfer summary from the sending agency.

Foster families and network providers are encouraged to contact 4Kids at <u>4Kids4Families.org</u> if families are solicited directly or indirectly to make a transfer to another Network Provider. 4Kids has a number of remedies it may consider, as necessary, when a pattern of unethical practice is identified. The success of the Provider Network relies on a sense of trust and cooperation between providers within the network.

ASSESSING, CONDUCTING AND MANAGING PLACEMENTS REFERRALS AND PLACEMENTS

4Kids and the Network Provider will operate under the philosophy; "A child's first placement should be the best placement." We will have a joint understanding of the negative impacts of placement disruption for children in substitute care and will seek to continue to implement best practices to support effective placements in the most appropriate/least-restrictive environment possible. When threats of placement stability are identified, 4Kids and Network Providers will utilize a wraparound approach of organizational responsiveness and oversight with increased intervals of supervision to ensure placements remain most appropriate and are stabilized. 4Kids includes an Intake and Placement Department responsible for accepting, assigning, managing, and tracking incoming

referrals from the DFPS. The Director of Placement will oversee the staffing and scheduling of our Intake and Placement Department. The Intake and Placement Department will provide the capacity to accept referrals from DFPS for residential child-care 24 hours per day, 7 days per week, 365 days per year (24/7/365). 4Kids' policy is to accept all referrals (No Reject) made by DFPS and continue to meet the individual needs of the children referred (No Eject) until DFPS determines the individual no longer requires 4Kids services.

4Kids and the Network Providers will continue to prioritize building capacity for youth who require a higher level of care and/or have specialized needs to prevent children from being unable to be placed in a licensed facility. All efforts will be made to work with the Network Providers to ensure due diligence in placement searches for children in need.

Region 4 DFPS staff will work directly with 4Kids upon determining that a child in DFPS conservatorship requires placement in a paid foster care setting. New referrals for paid foster care placements begin November 1, 2023. All new placement requests will be referred to 4Kids as of this date.

DILIGENT SEARCH FOR RELATIVES/FICTIVE KIN

4Kids believes that at the forefront, connections with relatives and fictive kin relationships should be maintained as much as safety of the child will allow. With that perspective, the placement team and permanency units will provide case mining, family finding, and other child specific recruitment techniques to identify, locate and seek opportunities for placements for youth in the network. 4Kids Network Providers will continually work with the SSCC to look towards options that allow for placement into a family setting with kinship and other fictive kin opportunities. Additionally, 4Kids will have an emphasis on family finding activities for children that are ages 11 and up that traditionally have a more difficult time finding permanency. This work will be conducted using childspecific recruitment activities, in partnership with the Wendy's Wonderful Kids Program.

PLACEMENT PROCESS

For all referrals 4Kids will utilize CareMatch[™] to determine the best placement option for a child. For all placement requests, the 4Kids Intake Specialist will contact a Network Provider if one of their families and/or their agency is identified as a potential best match placement option for the child. The Network Provider will need to ensure the 4Kids Intake and Placement Department has updated contact information for staff that are responsible for making placements during business hours as well as after-hours and weekends. The Network Provider is responsible for being available for placement and intake calls 24/7/365. The availability and timely responsiveness of the Network Provider will be considered by 4Kids during its annual renewal and Network Provider evaluation process. Network Providers that do not intend to admit emergency placements such as Residential Treatment Centers may have more restrictive placement and admission process.

Upon notification from 4Kids to the Network Provider that a family and/or agency has been identified as a potential best match placement, the Network Provider must respond back to the 4Kids Intake Specialist with the family's and/or agency's acceptance or non-acceptance of the placement within the following timeframes:

- For emergency placements, within one (1) hour of notification of placement need.
- For non-emergency placements, within one (1) business day of notification of placement need.

4Kids may be contacting several agencies at one time due to the timeframes involved in making placements. So an initial contact does not guarantee placement will be made with your family and/or agency. The best match identified within the above timeframes will be a consideration in 4Kids' final decision of placement

recommendation to DFPS.

The goal will be to place the youth within 50 miles of their home of origin or home where they will be living when they discharge from care. The Intake Specialist will gather the information about placement options, review the placement option with Network Providers, and assess their current capacity and dynamics.

Each child in a sibling group will be assessed for their individual needs, but also the needs of the sibling group so siblings can remain in care together when possible. If their needs differ greatly and require different types of specialized services, maintaining sibling connections will be prioritized as placement decisions are considered.

Note: Separation of siblings in care requires DFPS Program Director approval and documented reason for separation and a visitation plan/schedule for separated siblings.

Once the process for DFPS approval has been completed, 4Kids' Intake Specialist will work together with the Network Provider case manager, the family/agency and DFPS to determine placement date/time and transportation arrangements. The DFPS caseworker and/or 4Kids staff, Network Provider case manager, and caregiver must be present to receive the child at the time of placement.

At the time of placement, the 4Kids Intake Specialist will ensure that all required documents are completed and signed to include 4Kids Placement Authorization form, DFPS Placement Authorization (Form 2085FC), Medical Consenter (Form 2085B), Education Decision-Maker (Form 2085E), and the Child Sexual History Report (Attachment A). In addition, 4Kids will assist in ensuring that the required placement documents that need DFPS signature are completed as well.

4Kids will provide the Network Provider case manager with additional placement documents as soon as they are received to assist with the daily care of the child.

PRE-PLACEMENT STAFFING

A Pre-Placement Staffing may occur for non-emergency moves and placement changes to ensure all interested parties to the child have an opportunity to share and discuss relevant child information in support of 4Kids' search for the best possible placement option. The pre-placement staffing seeks to share all relevant information about a child or youth who requires a non-emergency placement or placement change. The pre-placement staffing will be coordinated and facilitated by either DFPS or 4Kids depending on who requested the placement change. The Network Provider case manager and current caregiver will be invited and will be expected to attend either in person or by phone as well as representatives from DFPS and 4Kids. Former caregivers may be invited, if it is determined they have information critical to decisions being made. The Network Provider is responsible for transportation of the child to all pre-placement staffings.

In addition, children over the age of 10 will be invited and are expected to attend unless it is therapeutically contraindicated. If they cannot or choose not to attend, their voice in the decision making and planning should be represented by either the Network Provider case manager, the caregiver(s), or DFPS.

4Kids, DFPS, and the Network Provider case manager will share, and exchange copies of all external documentation gathered thus far related to the child or youth's needs, including but not limited to birth certificates, social security cards, medical/dental reports or records, school records, assessments, evaluations, and so on.



PLACING CHILDREN WHO HAVE HABILITATIVE OR PRIMARY MEDICAL NEEDS

After a placement has been recommended by 4Kids, and approved by DFPS for children who have Habilitative or Primary Medical Needs (PMN), DFPS will coordinate a telephone staffing with the chosen caregivers, the Network Provider case manager, medical staff (if applicable), DFPS Well-Being Specialist, DFPS Supervisor and Program Director, Regional DFPS Nurse, and STAR Health staff to:

- Discuss the specific needs of the child.
- Discuss the expectations of placement.
- Develop a plan to move the child and establish services in the new placement.

The DFPS Education Specialist should be included in the staffing, as appropriate. If possible, the staffing should occur prior to the child arriving in their new placement, but no later than two (2) business days after the child's placement. It will be the responsibility of the Network Provider case manager to ensure the services for the child are implemented timely as outlined in the plan.

In the event the child requires institutional placement, DFPS and 4Kids will work together when requesting and consider a placement for the child in the following:

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

The current Network Provider case manager and caregiver(s) should work collaboratively with 4Kids and DFPS as we are carefully assessing the child's specific needs and attempting to exhaust all least restrictive placement options before recommending the child's placement in one of these institutions. Placing a child in a certain institution should only take place when no other less restrictive placement is available that can meet the child's needs. The Network Provider case manager and caregiver(s) will have important information about the child to assist in this assessment. In addition, the Network Provider case manager should ensure the child is informed and prepared for this transition.

PLACING A CHILD/YOUTH WITH A VERIFIED KINSHIP CAREGIVER

When 4Kids receives a referral for a kinship caregiver to be licensed for paid foster care or for adoption of a Region 4 child, the Director of Community Relations, or designee, will provide a list of Network Providers for the kinship caregiver to choose from. Once the Network Provider has completed the verification process with the kinship caregiver, and upon submission to CLASS, the agency should enter the family in the Texas Provider Gateway (TPG). Once the kinship caregiver is approved in CLASS, the Network Provider should notify 4Kids at intake@4kids4families.org immediately so that the placement of the child can be entered as the same date as the home's approval date if already residing in the kinship home. If the child does not already reside in the kinship home, then 4Kids and DFPS will determine an official start date for the child's placement in the foster home and follow the relevant placement process. Foster care maintenance payments to a verified kinship caregiver (foster home) begin once DFPS and 4Kids have completed the relevant placement process.

FOSTER HOME PROFILES

4Kids will require our Network Providers to keep information up to date in the Texas Provider Gateway (TPG). The standard home profile used for matching purposes will be utilized for all homes where a 4Kids child is to be placed. This profile has information regarding the family such as location of the home, demographics of the parents, type of family (basic, therapeutic, etc.), capacity (openings and placements), parent preferences of age range and sex, quality indicators for the family (utilizes trauma informed principles, structured home environment, one parent stays at home, advocates for education, facilitate transportation or visits, etc.), and behaviors the family feels comfortable working with/preferred (home accepts LGBTQIA+ youth, etc.). When changes occur within a foster home or residential placement, it is imperative that the TPG is updated as soon as possible. Utilizing a "live" system that accurately identifies available placement options throughout Region 4 will allow Intake Specialists to make placement decisions, which reflect the best interests of the child. By utilizing real time placement information, 4Kids will identify the most appropriate placement early in the process, so the best match can be made.

All foster homes will be expected to operate within their licensed capacity. However, when 4Kids and the Network Provider assess a foster family and determine they can temporarily handle increased capacity, a plan including RCCR and DFPS will be developed to allow a variance to accommodate siblings to be placed in the same home even if it results in the home being over the licensed capacity. Placing siblings together reduces stress and behavioral issues in most cases and reduces the trauma for children of being removed from their families. This variance will allow these children to remain together. Not all cases will support this concept and each case must be individually evaluated to determine the capability of the home and foster parents as well as the needs of the children.

CHILD PLACED IN SAME HOME AS CHILD IN DFPS LEGACY SYSTEM

4Kids understands the importance of continuity of placement and service provision for every child in the system of care, regardless of their point of entry into foster, relative, or kinship care and whether they are new placements or legacy children managed prior to transition by DFPS. At the same time, 4Kids recognizes the possibility a new placement may enter a home where there is a legacy child and the impact this may create for the child, youth, and family.

4Kids will gather information about the child(ren) already in the home from the Network Provider and the child(ren) to be placed in the home from DFPS and any previous Providers. Information about the child(ren) will guide the placement decision (such as safety concerns, sexualized behaviors, aggression, PMN, disabilities, age difference among placements, self-harm, runaway behaviors, homicidal ideations, etc.). 4Kids will continually review the appropriateness of the child's placement and make efforts to work with the Provider to preserve the current placement. Our joint goal will be to minimize placement disruptions of a child in care. To that end, no child's placement will be disrupted solely due to the SSCC transition of legacy children.

Placement and ongoing placement supervision will carefully consider each child's assessed needs and Service Plan, along with existing data in CareMatch[™] and the caregiver's Home Study. The Home Study documents household/caregiver information such as location of the home, demographics of the parents, type of family (basic, therapeutic, etc.), capacity (openings and placements), parent preferences of age range and sex, quality indicators for the family utilizing Trust Based Relational Intervention (TBRI), structured home environment, employment status, capacity to advocate for education, facilitate transportation or visits, behaviors the family feel comfortable working with/preferred, whether the home accepts LGBTQIA+ youth, etc. The 4Kids Intake Specialist will discuss any concerns or questions with the prospective caregiver and will conclude that there are no issues that preclude placement prior to recommending placement. 4Kids and Network Provider will jointly develop a placement plan that the caregivers will follow to address any concerns and support placement (that may include modifications to the structure of the home, schedules, etc.). In some cases, it may be determined that the caregivers cannot provide the necessary environment and parenting capacity.

In the event that the child cannot be placed in the home, this shall not be construed as a reason to discontinue placement of legacy children and the home shall be considered for other children. This is in recognition of the fact that placements will always be in the best interest of children and meet individual care needs. All decisions will be documented in the case record.

When children are placed into a Region 4 home by a different SSCC, another in-state organization, or through Interstate Compact on the Placement of Children (ICPC), 4Kids will take steps to ensure there is collaboration between service providers engaged with the caregiver and children/youth to ensure all children and youth receive exceptional care.

VISITATION & COMMUNICATION

Prompt visitation between children/youth and their parents is critical to ensuring more timely permanency occurs. The Network Provider will respect the right of both children and their parents to have visitation if behavior remains safe throughout. It is the Network Provider's responsibility to transport the child(ren) to the first visit after removal from parental custody. The first visit should take place within five (5) calendar days of removal pending approval by the court and DFPS. 4Kids, in collaboration with DFPS and Network Providers, will identify a visitation plan with family members and any siblings in care, if placed separately. DFPS will provide 4Kids access to documentation of the Approved Visitation Plan. The Network Provider will arrange and provide transportation as needed.

Whenever siblings are placed in different foster homes or facilities, 4Kids will attempt to place the siblings in close proximity to facilitate more sibling contact. We will also work to maintain connections when siblings are not placed together by utilizing the same therapist and to set up respite between the families. The Network Provider case manager must ensure sibling contact is maintained at a frequency that is in the best interest of the child and within DFPS guidelines and requirements.

Contact is required at a minimum face-to-face weekly if the siblings in care are placed within 100-miles of each other, unless it is determined that face-to-face contact is not in the best interest of the child/youth. If the siblings in care are placed more than 100 miles apart, contact between the siblings occurs via phone, facetime, or other electronic means at least weekly.

In addition, 4Kids and the Network Provider will work to maintain connections for youth in care who have a family member, **other than siblings or parents**, identified by their DFPS worker as a significant family contact.

ACCESS TO CHILDREN

The Network Provider will permit access to all children referred to them by the SSCC; to DFPS, its employees, its designees, and properly identified individuals appointed by a court of competent jurisdiction (volunteer or Court Appointed Special Advocates (CASA), guardian's ad litem, and attorney ad litem).

All parties will exercise their right of access in a reasonable manner and attempt to plan and coordinate all

necessary visits with children in cooperation with the Network Provider and in a manner that minimizes disruption of the care of the children/youth placed with the Network Provider.

This section will not be construed as prohibiting DFPS, or its designee, from making unannounced visits to the Network Provider's facilities or to a foster home verified by a Child Placing Agency (CPA) or a Residential facility. To determine whether an individual is appropriately appointed by a court of competent jurisdiction, a Network Provider or caregiver should:

- Review for a valid court order if such individual is an employee of CASA, and
- Review for a valid court order and a notification letter of volunteer assignment and acceptance clarifies the individual's appointment to the Child if such individual is a CASA volunteer, or
- Review to ensure the individual is named on the Child's Contact List as part of the child's placement paperwork.

If Network Provider or caregiver cannot readily determine the identity or authority of an individual appointed by a court of competent jurisdiction, then the Network Provider or caregiver should obtain approval from the child's case worker or chain of command prior to granting the individual access to the Child.

PLACEMENT STABILITY

4Kids believes every child is entitled to placement stability. We understand placement disruptions negatively impact the child emotional, behavioral, and physical health as well as their ability to develop and maintain healthy relationships. Through policy and in practice, 4Kids and the Network Providers will integrate best practice, evidence-based models of care, such as wraparound and trauma-informed interventions, to maintain and preserve placements in the least restrictive settings. 4Kids' Intake Department will track all placement changes, while Permanency Specialist and/or Care Coordinators will review a child's response to services and assist in authorizing services to support stability.

4Kids understands the importance of on-going placement management to prevent placement disruption. In most cases, 4Kids and the Network Providers will be able to identify potential disruptions at the supervisory level and implement interventions, training, and other supports as necessary to enhance placement stability. Examples of possible actions to prevent placement disruption include family planning, care management interventions, and training opportunities for the resource family/caregivers. 4Kids seeks to expand opportunities for supporting placements with new evidence-based practice and innovative research as the SSCC Network Administrator. When a child is having behavior problems and is at-risk of disrupting placement, the Network Provider case manager will consult with their clinical staff to review interventions and strategies and develop a child and family centered placement stability plan when appropriate. These plans will focus on providing support, additional training and coaching, and increased monitoring. The Network Provider case manager may also consult with 4Kids Care Management Department for clinical consultation and additional support to ensure placement stability.

DISCHARGE REQUESTS

4Kids considers a discharge successful when it is planned, to a less restrictive setting, or when reunification with family occurs. Network Providers will be responsible for implementing interventions to prevent unplanned disruptions. However, if a child/youth is out of control, is a danger to themself or others, and cannot be helped through additional supervision and support in their current placement, the Network Provider will request a placement change through the 4Kids Intake Department in compliance with their Network Provider Services Agreement. Prior to requesting the removal of a child, the Network Provider case manager will be required to

provide documentation on the <u>DFPS Form 2109</u> defining efforts to maintain placement over the last 30-days as well as participate in the development and implementation of a transition plan appropriate to the child's best interests.

DISRUPTION MITIGATION

Preventing disruptions starts in the caregiver licensing process when the Network Provider emphasizes the importance of first and only placement until permanency is achieved. Placement disruptions are further traumatizing to the youth in foster care. When placements disrupt, therapeutic progress is stalled, previous gains in self-esteem and self-regulation are lost, and the ability to develop secure attachments is damaged. 4Kids will work diligently with the Provider Network to minimize any placement disruptions.

To develop a system of care that is committed to placement stability, Network Providers are responsible for implementing practices that lead to highly committed and well-prepared caregivers. This includes practices such as providing trauma informed care training that accurately prepares caregivers for the intense needs of traumatized and neglected youth, frequent supportive home visits and contact with caregivers to ensure all needs are being met promptly, building a web of resources and interventions that support both the youth in care and their caregivers.

A key to mitigating risk of placement disruption is responding quickly to needs and concerns as they arise. Each service provider will be expected to make contact within 72 hours after the initial placement to ensure the caregiver has all needs addressed and that appropriate referrals are being made to ensure the child or youth has needed services. Within 14 days of placement a CANS will be completed on every age- appropriate child and all required referrals will be made to support identified needs. All service providers will be expected to provide crisis support through both technology and in-person 24/7, 365 days a year.

4Kids expects Network Providers to utilize local mobile crisis services as a method of preventing psychiatric hospitalizations as these tend to be a major factor in placement disruptions.

All service providers as a contracting requirement with 4Kids must develop a Disruption Mitigation Plan that includes trauma-responsive de-escalation strategies, crisis intervention techniques, emergency behavioral interventions, and a continuum of increasing support services for families and children. 4Kids will review each service provider's Disruption Mitigation Plan annually as part of the contract monitoring process and evaluate its effectiveness. Providers with a high number of disruptions will be required to develop a corrective action plan to better address challenges with placement stability. 4Kids will analyze both service provider and individual child data in the areas of serious incidents, citations, deficiencies, and respite utilization on a quarterly basis and address any concerning trends with the service provider and work collaboratively toward solutions. Collaborative solutions may include but are not limited to 4Kids providing clinical consultation about the specific behavioral needs of a child, additional training for caregivers, or resources for the home or facility.

When a child is at risk of having their placement disrupt any treatment team member, including Network Providers, caregivers, CASA, ad Litem, or 4Kids worker, can request a Disruption Mitigation Committee meeting to discuss the challenges that need to be addressed in an effort to retain or stabilize the placement by emailing care@4kids4families.org. The 4Kids Care Coordination team will be responsible for coordinating and scheduling the Disruption Mitigation Committee meeting. Each treatment team member is expected to engage in this meeting with the goal of maintaining and supporting the current placement. Provider case managers, foster families/caregivers and supervisors will be expected to attend any Disruption Mitigation Committee meetings held for a youth in their care.

Network Providers should request a Disruption Mitigation Committee meeting from 4Kids whenever the following risks are identified:

- Child's behavior is escalating without any relief.
- Caregivers are increasingly negative about the child and state that "nothing is working."
- The caregiver doesn't have the skills to meet the needs of the child and/or expectations are too high.
- Comments from other professionals working with the child indicate that caregiver(s) appear to be stressed by the child's placement.
- The child is showing some evidence of being disruptive and/or unsafe with other children in the home.
- The family/community does not have resources readily available to them to meet the needs of the child including respite services.
- Day care or educational settings are threatening to expel the child due to behaviors.
- Child have been hospitalized or admitted to intensive outpatient psychiatric services.
- Child is exhibiting a pattern of running from the home and/or the facility.
- Child physically injures or sexually acts out with another child in the home/facility.
- Caregivers verbalize some uncertainty about being able to maintain the placement.

In an effort toward placement disruption mitigation by ensuring effective safety planning and therapeutic intervention are in place, the Network Provider will email 4Kids at <u>care@4kids4families.org</u> within 12 hours of the following occurrences:

- Serious property damage,
- Arrest of child,
- Child admitted to hospital due to physical injury/critical illness,
- Use of a restraint on a child in care,
- Runaways who return,
- Child caught with illegal paraphernalia (ie drugs, alcohol, weapon) on their person or in their room,
- Any Fight that occurs at the residence, facility or school,
- A child is suspended or expelled from school,
- A child is charged with a misdemeanor or given a ticket, and/or
- Any other incident or occurrence that is causing a risk to placement stability

Network Providers will be responsible for following through and supporting all recommendations made by the Disruption Mitigation Committee. These recommendations may include interventions such as additional psychological or neurological testing, increased therapeutic and/or behavioral health services, additional educational support, medication adjustments, and/or psychiatric interventions. Network providers will also be responsible for providing respite as needed to prevent caregiver burnout.

It is expected that Network Providers provide adequate support to caregivers and give enough time for the interventions to be deemed successful before submitting a discharge notice. While it is preferable that Disruption Mitigation Committee meetings and placement stabilization processes are put in place prior to any discharge notices being submitted, 4Kids is aware at times the disruption mitigation processes will happen concurrently with an active discharge notice. It is the expectation of 4Kids that Network Providers engage fully with disruption mitigation processes throughout the entire placement regardless of any discharge notifications being submitted.

DISCHARGE PLANNING

Discharge planning will begin for every child on the day of placement. Positive permanency is always the goal and may occur as family reunification, PMC to family, adoption, and as a last resort youth may age out of care. The Network Provider, foster care parents, and when appropriate the child, will identify any "unmet" needs the child has and develop goals to facilitate a smooth transition into permanency prior to the child being discharged from services. The Network Provider will provide information to the 4Kids Case Care Coordinator and DFPS caseworker about the child's discharge plan and any aftercare needs. The Network Provider will ensure that the child is able to discharge from care with all their own belongings.

SERVICE PLANNING AND DELIVERY

OVERVIEW

Child service planning and service delivery is a collaborative and inclusive process between 4Kids, the Network Provider, the child and the family that focuses on developing and reviewing plans to meet the individualized and unique needs of the child, choosing services that are individualized for each child in care, appropriate documentation of service delivery, and the results to ensure the services are continuing to benefit the child. Service planning with children will occur with all children placed within the 4Kids network. All children 5 years of age and older will participate in service planning when appropriate.

Child's service plans must be developed with children in accordance with Texas Family Code timeframes and applicable Licensing Standards.

SERVICE PLAN MEETING PROCESS

Child service plans will be developed through service plan meetings. Primary and concurrent permanency goals provided by DFPS for the child will be reviewed at each service planning meeting. DFPS will coordinate the Family Group Conference (FGC) and facilitate all preliminary, initial, and subsequent service planning meetings.

The Single Child's Plan of Service form will be utilized for Initial and subsequent Service planning in Region 4. Whenever possible, sibling groups will have combined service plan meetings, which may require additional time allotted for the meeting.

Timeframes:

The preliminary service plan is required to be completed within 72 hours. However best practice and 4Kids prefers Network Providers complete this at the time of placement, unless it is not clinically appropriate due to the child's needs such as late-night emergency placement or extreme dysregulation of a child. If the preliminary service plan is not completed at placement a <u>supervision plan</u> will need to be put in place until the preliminary service plan can be completed.

The initial service plan meeting will be held on or before the 30th day of placement after the child is removed from their home of origin and will be coordinated by the Network Provider case manager.

The Network Provider Case Manager will ensure that all service plan reviews are completed according to the timeframes listed below.

For children who are designated as childcare services (Basic and Moderate):

4Kids4Families Provider Manual

• Reviews will be completed within 180 days following the prior plan.

For children and youth who are designated as treatment services (Moderate, Specialized, Intense, Intense+, TFFC and CSC):

• Reviews will be completed within 90 days following the prior plan.

Child Service Plans will be updated or reviewed more frequently when a child's circumstances change, or significant events occur that dramatically alter the child or youth's needs.

Coordination:

The Network Provider case manager will ensure the coordination of all service planning meeting logistics, including:

- scheduling with participants a meeting date and time,
- ensuring that all service planning meetings will be hosted in a venue that allows for maximum participation either in-person or through virtual technology,
- all relevant participants are invited to the meeting, and
- coordination with 4Kids staff to ensure barriers to parent and/or family member participation are mitigated (i.e., transportation needs).

4Kids will ensure that the Network Provider Case Manager knows how to contact the parents and other adults significant to the child or youth in care.

Participants:

Service planning meeting participants will be invited, at a minimum:

- The child's parents and the parents' attorney, who must be invited when the parents have been invited,
- Child(ren) who are at least 5 years old or older,
- Family members,
- Current caregiver,
- Network Provider case manager,
- 4Kids Care Coordinator,
- Legal representatives (CASA, ad litem, etc.),
- Other relevant professionals (therapists, school liaisons, etc.), and/or
- Other persons identified in the case who can contribute to service planning with the child.

NOTIFICATION REQUIREMENTS

All participants must be notified of the service planning meeting in writing at least 14 days in advance of the meeting. Documentation of this notification must be maintained in the child's record of truth.

PARTICIPATION AND IMPLEMENTATION

It is required, that at a minimum, a 4Kids staff member, DFPS worker, Network Provider case manager, current caregiver, and child, if appropriate, participate in the service planning. Once the service planning meeting has been conducted, the Network Provider case manager will complete the service plan and submit it to their supervisor for approval within 10 days. Once approved, the Network Provider case manager will submit a copy of

the service plan to the Texas Provider Gateway (TPG) and send it to the DFPS case worker and the foster parents if applicable.

CHILD AND FAMILY ASSESSMENT REQUIREMENTS (CANS)

To ensure placement stability, 4Kids will require the Child and Adolescent Needs and Strengths assessment (CANS) to be completed on every child age 3+ within 30 days of placement and that all recommended services be accessed within 30 days of placement. This will help ensure that support services and therapeutic interventions are in place and readily available to families, promoting placement stability. The CANS recommendations are expected to be incorporated into the child's service plan and aid in the development of the child's goals.

A child's initial and annual CANS assessment must be completed by a STAR Health provider. The Network Provider will refer the child at initial placement to a STAR Health provider within 3 days of placement to meet the 14-day requirement for an initial CANS. Any CANS completed outside of the initial or annual CANS will be completed by the Network Provider case manager who is certified in CANS.

The CANS must be reviewed and approved by the Network Provider's Treatment Director or Supervisor. 4Kids will ensure Network Providers staff must complete the online CANS training and pass a test demonstrating competency to be certified to administer the CANS assessment tool. To maintain the CANS certification, Network Provider's staff must retrain and retest annually. It is the Network Provider's responsibility to ensure staff who administer the CANS maintain their certification annually. This will be monitored by the Quality and Compliance Specialist.

CANS assessments are to be completed on the following schedule:

BASIC: ANNUALLY. MODERATE, SPECIALIZED, INTENSE, INTENSE+, TFFC AND CSC: EVERY 90 DAYS.

Additionally, if a child is placed as a subsequent placement and does not have a current CANS within the last 90 days, the Network Provider must complete a CANS assessment. At discharge, if the child does not have a current CANS within the last 60 days, the Network Provider must complete a CANS assessment.

All CANS will be submitted to 4Kids through the TPG if completed by the Network Provider. If completed by a STAR Health provider, the CANS will be submitted through the eCANS system and pulled by 4Kids.

RIGHTS OF CHILDREN AND YOUTH IN CARE

Network Providers will:

Ensure all children have been given a written copy of the DFPS Rights of Children in Foster Care at the time of placement and at the time of any placement change to a new foster home or facility.

- Support the rights listed in the DFPS Rights of Children in Foster Care,
- Not deny or restrict, through action or policy, any of the rights listed in the DFPS Rights of Children in Foster Care,
- Provide services to children who are deaf or hard of hearing that ensure effective communication,
- Make reasonable efforts to ensure services provided to children and families are offered in the individual's primary language, and

• Deliver services in a manner that is relevant to the culture of children and families served.

LEVEL OF CARE (LOC)

For each emergency removal, 4Kids Intake and Placement staff will assign a level of care based on information provided by DFPS, removal affidavit, and any other available documentation. Subsequent placements will be assigned a level of care (LOC) based on Youth For Tomorrow (YFT) assessment.

4Kids will make every effort to place children into the least restrictive, most family-like setting. Shelters are utilized only when a least restrictive placement is not immediately available. The Placement Authorization sent by 4Kids represents our agreement regarding the placement arrangements and rate of pay. If a Network Provider believes any of this information is not what was agreed upon prior to placement, they must respond to the sender immediately for clarification.

To maintain a child's LOC, the Network provider must utilize the YFT process already established in Texas. Information should be submitted to YFT as required on the Network Provider's schedule of review with YFT and the determination of continued LOC will be returned to the Network Provider. To obtain an increase or decrease in LOC, the Network Provider should submit an unscheduled review packet to YFT following their current procedures.

UTILIZATION REVIEW PROCESS

4Kids will strive to serve children in the least restrictive setting while ensuring their needs are met. Care management staff will track children in Residential settings to identify the services that are being provided to meet that child's needs and identify a target date for the child's move into a less restrictive setting. Care management staff will coordinate with residential Network Providers to identify the target date and develop a plan for what the child will need in a less restrictive setting when the child is able to transition.

TRANSPORTATION

As outlined in the Network Provider Services Agreement, it is the responsibility of Network Providers to ensure their caregivers/foster parents transport to all scheduled/required visits and appointments; to include family visits, medical/dental/vision appointments, therapy/counseling appointments, educational/life skills trainings, etc. If a caregiver/foster parent is unable to transport, it is the responsibility of the Network Provider to arrange for alternative transportation.

The SSCC will only provide transportation on a case-by-case basis and only after due diligence has been done on the part of the Network Provider. If a Network Provider is unable and/or unwilling to ensure transportation will occur, the Network Provider Director must contact the 4Kids at transportation@4kids4families.org to explain the circumstances and request that 4Kids transport. If a caregiver/foster parent is unwilling or refuses to transport, and the Network Provider does not have a backup transportation plan in place, 4Kids may place that foster home or agency on hold or restrict the types of placements the foster home is able to take.

RESEARCH/STUDIES

Children and families referred to 4Kids or the Network Provider for services will not participate in research and/ or studies without the prior written approval of DFPS. In the case of a child being approved for participation/ inclusion in a clinical research study or trial, 4Kids will be provided proof the study or trial has Institutional Review Board approval from a recognized entity.



MEDICAL SERVICES

MEDICAL/DENTAL/VISION/HEARING SERVICES

All children must receive all required medical/dental care as prescribed by a medical or dental professional. A person consenting to medical care for a child must participate in each appointment set for the child with the healthcare provider. Texas Family Code §266.004(i) The Network Provider is responsible for transportation of the child to all medical, dental, vision, and behavioral healthcare appointments. Participation must be in person or, if it is appropriate and acceptable to the provider, by telephone or telemed. The level of participation depends on the nature of the medical care the child is receiving; the medical consenters must attend in person any appointments when a child may be prescribed psychotropic medications. Healthcare providers may have varying requirements for participation. Medical consenters must discuss with healthcare providers their expectations for participation.

Documentation of all appointments must be completed on the <u>DFPS medical/dental form (K-905-2403)</u> and maintained in the child/youth's record of truth.

BEHAVIORAL HEALTH SERVICES

Network Providers must access all medical, dental, vision, hearing and behavioral healthcare services for children in substitute care referred to Network Providers by the SSCC through a STAR Health Network Provider. The Network Providers must access Medicaid through STAR Health for Medicaid Covered Behavioral Health Services unless the court orders mandate alternative care. If a child or youth has a need that there is no Star Health provider available to facilitate, the Network Provider will coordinate service with 4Kids staff. A Care Coordinator will assist the Network Provider in locating services as needed. When community resources are not available for Behavioral Health Services and/or Medicaid does not cover the services, the Network Provider and 4Kids will coordinate to ensure the child receives the needed services.

3 IN 30 REQUIREMENTS

Following the initial removal and placement into 4Kids, children/youth are required to complete three (3) medical/behavioral health exams, known as the 3in30 exams. These exams consist of:

- A 3-Day exam based on the child's needs and/or abuse and neglect history may be determined by DFPS that they require a medical exam within 3 business days of them entering care. Caregivers and 4Kids will be notified of this requirement upon placement. Providers are expected to comply with this requirement to ensure the youth in their care are checked for injuries or illnesses and get any treatments they need. The 3-Day Medical Exam is an added medical screening and does not replace the Texas Health Steps Medical Checkup and vice versa.
- A Child and Adolescent Needs and Strengths (CANS) Assessment: Within 14 days of placement children ages 3-17must get a CANS Assessment. (see previous information regarding requirements for subsequent CANS assessments)
- A 30-day TX Health Steps Medical Exam [Texas Health Step Medical Checkup/Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Checkup]: Within 30 days of placement children must see a doctor for a complete EPSDT check-up with lab work.

If the child is PMN, the medical exam must be completed within 24 hours of placement if there is no medical exam previously completed within the prior 30 days (hospitalization documentation can count for this required exam).

Network Providers must follow the Texas Health Steps Medical Checkup Periodicity Schedule for infants, children, and adolescents for subsequent medical, dental, vision, hearing requirements and/or physicians orders.

Note: This must be a Texas Health Step Medical Checkup billed correctly in Star Health to be considered complete. 4Kids will assess a penalty to Network Providers for any Texas Health Steps Medical Checkup/Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Checkup that is not completed as per the required timeframe.

PSYCHOTROPIC MEDICATIONS AND CONSENT

The Network Provider case manager or designee must ensure that all caregivers and/or employees who serve as medical consenters for a child who is prescribed psychotropic medications facilitate an office visit with the prescribing physician, physician assistant, or advanced practice nurse in the STAR Health Network at least once every 90-days to allow the practitioner to:

- appropriately monitor the side effects of the drug,
- determine whether the drug is helping the child achieve the treatment goals, and
- determine whether continued use of the drug is appropriate.

For all children receiving psychotropic medication, the Network Provider case manager must provide DFPS and 4Kids with documentation addressing the following:

- that the child has been provided appropriate psycho-social therapies, behavior strategies, and other non-pharmacological interventions, and
- and that the child has been seen by the prescribing physician, physician assistant, or advanced practice nurse in the STAR Health Network at least once every 90-days.

In the event that a residential staff member is designated as the medical consenter for a child/youth, the Network Provider case manager must ensure that the staff member has notice and is able to attend in person any appointments where psychotropic medication may be prescribed and all medication review appointments.

The Network Provider is responsible for ensuring that any medical consenter representing the provider has the most up to date DFPS training and documentation in their record to function in this capacity. Network providers are aware that they can request a psychotropic medication utilization review if needed through DFPS.

EDUCATION

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SCHOOL ENROLLMENT AND ECI (EARLY CHILDHOOD INTERVENTION)

Educational stability will be a critical factor when identifying foster care placements. It is the expectation that Network Providers will ensure children are enrolled in and attend an accredited Texas Public School within three (3) days of placement, unless an exception has been granted in writing by the child's DFPS conservatorship worker and DFPS Education Specialist (e.g., for private schooling, charter school, homeschooling, or temporary school absence due to physical or mental condition).

When a child over the age of three is placed in a residential facility, rather than a home, the Network Provider must provide written notice to the school district within three (3) calendar day from when the child is placed and

enroll the child in pre-k programming.

Children between three (3) and five (5) years of age will attend a pre-kindergarten program offered through the local public-school district or an early childhood education program offered through Head Start unless an exception has been granted from the child's DFPS Conservatorship worker and DFPS Education Specialist. If such a program is not available and an exception has been granted, the 4Kids will assist the Network Provider in locating a program.

Network Providers will also ensure preschool age children will be provided access to appropriate early childhood education programs (ECI). For each child who is younger than three years of age, the Network Provider must provide written notice to the local ECI program no later than the third calendar day after the date a child is placed. For this written notice, the Network Provider should reference the Texas Education Code §29.012.

VERIFICATION OF ENROLLMENT

Within five (5) calendar days of the child's school enrollment into an accredited Texas public school or an ECI program, verification of the enrollment will be provided, by the Network Provider, to the DFPS Conservatorship worker, and 4Kids, and documentation of such notification will be recorded in the child's record. All verifications will be provided through the TPG. In compliance with the Texas Education Code §29.012, the Network Provider will notify the school district in which the school is located for all children three (3) years of age or older.

EDUCATION PORTFOLIO

A current/accurate Education Portfolio is essential to monitor a smooth transfer if the child must move from one school to another which includes proper educational placement and services, and ongoing monitoring of a child's academic progress. The Network Provider will ensure copies of all required documentation (e.g., report cards transcripts, standardized tests scores, school withdrawal documentation, immunization records, medication needs, correspondence to and from the school, copy of the birth certificate) are included in the portfolio, with original legal documentation being maintained in the child's case file with DFPS. The Network Provider will ensure the Education Portfolio is reviewed and updated as needed on a monthly basis and documentation is reflected in the child's record.

SPECIAL EDUCATION

For children receiving special education or Section 504 services, additional documentation will be maintained (e.g., ARD meetings, results of FIE, IEP updated annually, current IFSP, documentation of services provided under Section 504, and Individual Transition Plan or Summary of Performance (9th – 12th grade). Network Provider case managers will coordinate with DFPS to ensure copies of needed documents are submitted to the child's school within 30 days of enrollment (if a change in school occurs). The Education Portfolio will be updated as needed monthly and discussed during monthly visits with the caregiver/facility.

MONITORING EDUCATIONAL PROGRESS

Including biological parents and foster caregivers in the educational process of children contributes to educational success. However, the roles of caregivers in the educational process can be confusing. In many cases, biological parents maintain decision-making rights even after children are removed from the home. It is important to empower the biological parent as an educational advocate. The role of a caregiver is equally important in the educational processes, specifically if a child has a disability and an Individual Education Plan. To address the complexities of these roles 1) Network Provider case managers will be trained to provide parents with enhanced

information concerning their participation in their child's education; 2) Foster parents will be able to mentor biological parent's participation; and 3) The caregiver will be provided with information pertaining to their roles and responsibilities if assigned to act as a surrogate parent.

Parents will be invited to all meetings concerning educational progress and transportation will be facilitated when needed.

POST-SECONDARY EDUCATIONAL AND VOCATIONAL ACTIVITIES

Please refer to the Transitional Living section of this manual for information regarding Post-Secondary Educational and Vocational activities.

DAILY CARE

CLOTHING REQUIREMENTS

The Network Provider will ensure that each child placed in care will have adequate clothing that is clean, in good repair, fits the child and is appropriate for the season. The agency will document at admission, and quarterly that the child has clothing that meets this criteria. This documentation will be placed in the child's record of truth.

ACTIVITIES AND NORMALCY

The Network Provider will ensure that every child has opportunities to participate in indoor, outdoor, school, community, cultural, and religious or spiritual activities, including unsupervised activities that are:

- Developmentally and/or Age-Appropriate,
- Varied,
- Interactive with peers, and/or
- Of interest to the Child.

The Network Provider ensures that the caregiver/staff supervises these activities according to Minimum Standards and the child/youth's service level requirements. The Network Provider ensures that the caregiver uses a "reasonable and prudent parent standard" to decide whether a child may participate in an unsupervised activity and intervenes, as necessary, to reduce the risk of injuries. There is no exception for participation in Normalcy activities. This expectation applies to all children.

The Network Provider must offer, or ensure that the caregiver and staff offers, age-appropriate activities suitable for the child's level of maturity and age, including activities not listed in the child's service plan. Activities can include, but are not limited to:

- Participating in academic and non-academic extracurricular activities at school,
- Visiting with friends or attending regular social events,
- Working at a job, or
- Volunteering in the community.

BEHAVIOR MANAGEMENT

The Network Provider ensures that the caregiver and/or staff uses appropriate authority and discipline practices, demonstrating trauma-focused techniques, to set limits for behavior and help the child develop the capacity for self-control. 4Kids recognizes that effective behavior support and management practices must be proactive and



preemptive to minimize the need for restrictive interventions. While utilizing a trauma informed approach, a culture that promotes respect and positive behavior can support healing and help children and youth manage their own behaviors and prevent crisis situations that could result in restrictive intervention. The Network Provider will ensure its staff and caregivers follow HHSC Minimum Standards. The purpose of a behavior intervention approach is to develop and maintain an environment that supports positive and constructive behaviors of children in care, use restraints safely, appropriately, and effectively, and eliminate or reduce physical injuries and any other negative side effects on the child's behavior or emotional development resulting from the restraints.

Network Providers will examine the frequency, patterns, and effectiveness of the restraints used for children, and specific strategies to reduce the need for use of restraints for all children in care. Physical discipline or punishment is prohibited.

A child's possessions must be free of unreasonable searches and unreasonable removal of personal items.

DAYCARE SERVICES

4Kids requires Network Providers notify us within 30 days of new foster parents being verified who will potentially need daycare reimbursement, or within 30 days of expiration of existing daycare reimbursement authorization (every six (6) months from original authorization). The Network Provider case manager will submit the following documents to <u>4Kids4Families.org</u>:

- Foster Child Care Referral Form,
- <u>Foster/Relative & Other Designated Caregiver Daycare Verification (Form K-908-1809)</u> In cases where the foster parents are still in the process of being verified, the child information would not be filled in, but the rest of the form must be filled out entirely with signature, which can be done electronically),
- Any supporting documentation: Three (3) months of employment verification for each caregiver showing an average of 32-hours of work per week during the three (3) month period. If the caregiver has started a new job and does not have three (3) months of employment verification, a letter from the employer is acceptable, and
- If the foster parent is self-employed, a DFPS form 1806 for proof of income.

The 4Kids Daycare Coordinator will receive these referrals through our automated system and forward requests to CCMS on the same day they are received. 4Kids will not be approving for eligibility but will simply be reviewing the packet for accuracy prior to forwarding the information on to CCMS. Once CCMS receives the referral from the 4Kids Daycare Coordinator, they will contact the foster parents directly to obtain any additional needed documents for review. Foster parents will have up to 15 days to submit documentation to CCMS. If the foster parent does not comply within 15 days, the referral will be inactive and a new referral will have to be made by the Network Provider case manager to the <u>4Kids4Families.org</u> website as above.

CCMS will review the documentation, determine the family's eligibility based on the criteria above and submit the signed Foster Child Care Referral Form along with all documentation to the <u>4Kids4Families.org</u> website within five (5) days of receipt of all requested documentation from the foster parent or within five (5) days of 4Kids's referral to CCMS if all of the appropriate documentation was already attached. "If CCMS denies the request: The 4Kids Daycare Coordinator will review the reasons for denial, determine if a waiver would be appropriate and submit the waiver request to DFPS within one (1) business day of notification from CCMS. "If the family is approved whether by CCMS review or by DFPS waiver: The 4Kids Daycare Coordinator will ensure that the family's approval is documented for potential future placements where daycare reimbursement is needed. 4Kids will notify the Network Provider's case manager of final family approval or denial by email.

Determination of foster child eligibility:

Once a child has been identified and accepted for placement in a foster home and the placement occurs, the 4Kids Daycare Coordinator will make a referral to DFPS for approval for specific child(ren) to receive daycare reimbursement.

The 4Kids Daycare Coordinator will forward the above completed Foster/Relative & Other Designated Caregiver Daycare Verification (Form 1809) and will fill in the specific children's information. Within ten (10) days of this referral, daycare approval should be received.

COURT PROCESS

OVERVIEW

The Network Provider will comply with all court orders regarding the provision of paid foster care and/or purchased services for children, youth, and families served by the Network Provider. Services court-ordered outside of the purchase of service criteria of this agreement will be reviewed by 4Kids and the Network Provider to determine the rate of payment and parameters of services to be provided on a case-by-case basis.

4Kids views the understanding of court orders and the judicial process as very important for staff as well as foster caregivers and Network Provider case managers. If necessary, foster parents or caregivers, and Network Provider case managers will attend court hearings and provide child the opportunity to attend the court hearing related to their case. 4Kids believes that a youth's voice should be heard by the court system.

Court orders will be reviewed and documented in the following: Intake Assessments, the Child's Individual Plan of Service, Monthly Contact Notes, Permanency Planning Documentation, and Foster Parent Progress notes when appropriate. There will be continued monitoring of court requirements, such as visitations, permanency goals addressed in the Child's Individual Plan of Service, and 4Kids contact with the Network Provider and/or foster family to ensure that court requirements are followed.

COURT HEARINGS/CHILD PARTICIPATION:

DFPS will notify the Network Provider case manager of all upcoming court hearings. The Network Provider case manager must ensure child attend court hearings unless excused by the presiding judge prior to the court hearing, it has been determined that court attendance is not developmentally or clinically appropriate for the child, or their location is unknown because of AWOL. If it is determined that it is not in the child's best interest to attend a court hearing, this must be documented in the child's record and approved by your DFPS conservatorship supervisor in writing as soon as DFPS is notified by the court.

The child's court attendance may occur via video conference and/or teleconference when appropriate and approved by the court. Attendance at an Adversary Hearing (14-day hearings) is not generally expected unless the child's attendance is requested by the child's attorney ad litem. If the child is expected to attend, the Network Provider is responsible for transportation to all court hearings.

The Network Provider must identify and ensure attendance of the most appropriate staff (i.e., the Network Provider case manager) with personal knowledge of the case at all court hearings unless excused by the presiding

judge. The Network Provider must also attend all other court preparation meetings as requested by 4Kids, CASA, attorney ad litem or other members of the judiciary team. The Network Provider case manager must notify the 4Kids Permanency Specialist or Care Coordinator who will be attending court within two (2) business days of receiving notification of the court hearing. If an emergency court hearing is scheduled, then the Network provider will share the attendee list as soon as possible. The date and times of future court hearings announced during court proceedings are considered by 4Kids to be formal notice to the Network Provider. Whoever is present (the Network Provider case manager or caregiver) must notify the other parties by the next business day.

The Network Provider case manager will also notify 4Kids' Director of Legal Affairs immediately of any service of legal process (i.e., subpoena, summons, or discovery notices) delivered to the Network Provider agency, employees, caregiver, or child/youth related to the child's court case by submitting the information to <u>4Kids4Families.org</u>. The Network Providers are expected to comply with all judicial orders and/or subpoenas directed to them by competent legal authority.

COURT DOCUMENTATION REQUIREMENTS

Network Providers are responsible for ensuring information is shared promptly with 4Kids and the DFPS case worker when required for court hearings.

ADOPTION SERVICES

RECRUITMENT

During Stage One of community-based care implementation, DFPS conservatorship staff will continue to be responsible for all legal and court activities including: termination of parental rights, all court hearings, giving or withholding consent to adoption and waiving service to adoption hearings, authorization for and authorization of post-adoption subsidies and services. 4Kids will assume all recruitment activities, both general and community level as well as child specific recruitment. Match parties, community events and community partners, such as Heart Gallery, will be implemented to ensure children are matched with family connections. 4Kids is also engaged with the Dave Thomas Foundation/Wendy's Wonderful Kids program to focus on youth ages eleven and older that traditionally are difficult to find matched adoptive placements.

HOME STUDIES

Home studies are completed by Network Providers that are approved and contracted for foster care and adoption services. 4Kids will refer any family interested in adoption to the provider network and work to match families with agency type and geographical location for services. Should the family be interested in kinship services, 4Kids will review all DFPS documents and ensure that the assigned Network Provider has all appropriate documentation to complete a thorough assessment of the home.

ADOPTION INQUIRIES

As 4Kids receives inquiries to the SSCC for interest in foster care and adoption in Region 4, 4Kids will refer to Network Providers that can accept referrals based on their license and contract. The 4Kids adoption team will collect information from the interested party and will ensure that the family applicant is sent to appropriate Network Providers.

HOME SELECTION AND STAFFING

The 4Kids adoption staff will coordinate and host a selection staffing with DFPS, CASA, ad litem, guardian

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ad litem, Network Provider case manager, and current foster parents, as appropriate. 4Kids is responsible for collection and presentation of home studies for children that are free for adoption. Documentation will be sent to the respective 4Kids adoption staff member. Home studies collected will be sent to the relevant parties for review and feedback prior to the selection staffing. A decision regarding the selection of a family will be made during the staffing. Once an adoptive home is approved, the 4Kids team will provide all appropriate redacted information to the prospective family (i.e. psychological evaluation, service plans, HSEGH, etc.) once received from DFPS. When the prospective family agrees to proceed with the adoption process, DFPS will ensure timely receipt of the redacted record to 4Kids. If an adoptive home selection is denied, 4Kids will continue diligent recruitment of adoptive homes to find a match for the child.

PRESENTATION STAFFING

After the prospective family has reviewed the child's case file, 4Kids will convene a Presentation Staffing with the selected prospective family, current family or placement representative, CASA, ad litem, guardian ad litem, and DFPS team. The staffing is an opportunity for the prospective family to ask questions, for the current family to discuss the child's daily care, and for the attendees to collectively develop an appropriate transition plan. Supports needed to make transitioning successful will be reviewed and a plan for implementation developed accordingly. If the prospective family elects to not accept a child, the Network Provider must contact 4Kids by close of business the following business day.

PLACEMENT PROCESS

When placement of the child with the adoptive family is determined, 4Kids will work with the current placement and new placement on a plan to successfully move the child to their new home. Special care will be taken to assure that the child and Network Provider have ample time to ensure the child is able to say appropriate good-byes or to complete services as needed.

ADOPTIVE PLACEMENT SERVICE REQUIREMENTS

Placement stability, and eventual permanency for the child, is critical during the adoptive placement process. Needed supports and services are reviewed with the family, and 4Kids will work closely with the Network Provider to oversee the placement and monitor for success or change of any potential service needs. The Network Provider is responsible for managing all services (including but not limited to monthly post-placement supervision) to prepare and support adoptive placements. The Network Provider will provide documentation of these services to 4Kids for inclusion in their adoption record. During Stage I of CBC, DFPS conservatorship staff will provide monthly supervision of children who are placed with adoptive families until consummation is achieved and DFPS is dismissed as the child's conservator.

POST-ADOPTION SERVICES

Ensuring post-adoption services is a vital part of the 4Kids network. Any child adopted through the 4Kids system is eligible for post-adoption services through adoption subsidies and Title 4-E funding. Post-adoption services are procured and implemented through formal contractual relationships with 4Kids and selected Network Providers. Post-adoption services will reimburse the Network Provider for the services according to the agreed upon terms. Identified needs for post-adopt services will be conducted for specific needs of the Region 4 community. These include, but are not limited to, post-adoption support groups for youth and parents, respite, and residential childcare placement in emergency situations.

TRANSITIONAL LIVING SERVICES

OVERVIEW

4Kids recognizes that youth ages 14-21 need extensive support to prepare for adulthood as they have typically experienced significant trauma, multiple placements, and transitions while in care, which lead to learning gaps, a lack of preparatory experiences, and having a smaller support group to help them with this transition.

4Kids and the Network Provider will work together to prepare older youth in DFPS conservatorship who are transitioning from substitute care to adulthood. 4Kids understands youth must be prepared for adulthood. 4Kids will serve and support foster youth as they begin their journey to independence by developing life skills and creating community connections capable of supporting youth as they transition from care to independence. 4Kids will utilize a multidisciplinary approach involving the youth, family, Network Providers, and natural supports including biological families, churches, and community partnerships. The Network Provider will ensure youth 16+ years of age obtain a Driver's License or State ID (efforts to obtain will be documented in the client record) as part of the youth's preparation for adulthood.

To provide the highest level of support possible, 4Kids has dedicated Permanency Specialists who are certified as Youth Achievement Specialist (YAS) assigned to all youth in substitute care 14 years or older. YAS workers have specific training that highlights the following:

- Unique needs of youth in substitute care,
- Long term needs of young adults exiting the child welfare system,
- Local and statewide support services available to youth,
- Benefits eligible to youth and young adults,
- The requirements of all laws and regulations as they pertain to youth ages 14+, and
- Partnership with and expectations of Preparation for Adult Living Skills(PALS) and Supervised Independent Living (SIL) programs and contractors.

4Kids believe in the philosophy of "nothing about us without us." YAS workers are responsible for ensuring these youth are participating members of all treatment planning and goal setting meetings, their voices and opinions are taken into account before placement decisions are made, they have access to all required documents as set forth in The Preventing Sex Trafficking and Strengthening Families Act of 2014, they are having age-appropriate opportunities per the Chafee Program, and they have official documentation confirming they were in foster care before they age out per the Family First Prevention Services Act.

YAS workers are responsible for guiding youth through decision making, developing, and monitoring transitional plans that may include supervised independent living, extended foster care, trial independence, return to care, and secondary education or vocation programs. YAS workers are active participants in helping 4Kids complete youth satisfaction surveys, contracts, and quality assurance audits for all PALs and SIL programs.

TRANSITION PLAN DEVELOPMENT

During the service planning meeting immediately following the youth's 14th birthday, the transition plan will be created. The transition plan will be enhanced over time until the youth leaves substitute care or ages out of care. The plan must address the issues that are important for the youth as he or she leaves care and enters the adult world. DFPS, 4Kids Youth Achievement Specialist (YAS) worker, and the Network Provider will work together to initiate the discussion and development of the youth's transition plan. At the first service plan meeting following the youth's 14th birthday the Transitioning to Successful Adulthood section will be addressed. The youth will

have the opportunity to invite anyone in their support system to all Circles of Support and service planning meetings.

DFPS, 4Kids YAS worker, and Network Provider will:

- Ensure Transitioning to Successful Adulthood section of the Child Plan of Service is discussed and developed with the youth during all service plan meetings following the youth's 14th birthday.
- Inform the youth that a Family Group Decision Making (FGDM) staff member will further discuss Circle of Support with them when he or she turns age16.

DFPS Worker, 4Kids YAS worker, Network Provider will:

• Continue to discuss and document the Transitioning to Successful Adulthood section of the Child Plan of Service and progress with the youth over time during face-to-face visits, subsequent service planning meetings, and Circle of Support (COS).

During the 90 days before the youth ages out of care, whether at 18 or a later age in extended foster care, the 4Kids YAS worker will provide the youth with assistance and support in developing a transition plan that:

- Includes specific options on housing, health insurance, education, local opportunities for mentors and continuing support services, and work force supports and employment services.
- Includes information about the importance of designating another individual to make health care treatment decisions on behalf of the youth if they became unable to participate in such decisions and the youth does not have, or does not want, a relative who would otherwise be authorized under state law to make such decisions.
- Provides the youth with the option to execute a health care power of attorney, health care proxy, or other similar document recognized under state law; and
- Is as detailed as the youth may elect.

Requests for assistance in transitional plan development for youth who are placed in but not legally from the catchment area should be coordinated with the youths Primary DFPS Case Worker.

CIRCLE OF SUPPORT (COS) MEETINGS

Circles of Support (COS) will be coordinated and facilitated according to current DFPS policy after a youth turns 16. 4Kids YAS worker, Permanency Specialist, and Network Provider case manager will work jointly to engage youth, family, and other caring adults in the COS or subsequent service planning meetings. 4Kids and the Network Provider will work with the youth, the caregivers, and other significant individuals to identify caring adults and other lifelong connections that can be sustained once the youth transitions to adulthood. The Network Provider case manager must participate in the COS or subsequent service planning meeting and will also ensure the youth attends. If the youth declines a COS, a subsequent service planning meeting will be scheduled instead. The Network Provider case manager will discuss the elements of the transition plan with the youth and record discussion in the service plan document (i.e., goals, strengths, fears, etc.). The Network Provider case manager will continue to discuss and document the transition plan and progress with the youth overtime during face-to-face visits, subsequent service planning meetings.

PREPARATION FOR ADULT LIVING SKILLS (PALS)

Contracting PAL service providers will be expected to provide a full array of services, including but not limited to ensuring that Independent Living Skills Assessments are conducted utilizing the Casey Life Skills Assessment, providing Independent Living Skills Training that is engaging and youth centered, and providing support services to youth that are meeting individualized needs such as vocational training, GED classes, driver's education, or counseling. PALS service providers will also be responsible for providing case management services while the youth is receiving financial assistance, including aftercare, room and board assistance, and transitional living allowances.

4Kids will ensure the development and delivery of PAL training utilizing the curriculum topics established by DFPS. As part of the delivery of PAL training, within 30-days of new placements and/or when the youth turns 14 and or a child comes into care that meets this age criteria, the Network Provider is responsible for completing the Ansell Casey Life Skills Assessment (ACLSA), submitting it to the Texas Provider Gateway (TPG) for review by 4Kids staff, and sharing/discussing it's interpretation with the youth and caregiver. The ACLSA will identify the youth's strengths, needs, and goals, which must be documented in the youth's service plan.

4Kids will refer youth for PAL Life Skills Training no later than the youth's 16th birthday; the Network Provider must ensure youth attend PAL services. If the Network Provider has a youth that is eligible for PAL services that has not been identified, the Network Provider must let 4Kids know through the Texas Provider Gateway (TPG) as soon as possible to ensure that there is no further lapse in services being delivered.

The Network Provider case manager must work with the caregiver and PAL staff to ensure that youth are made available and have transportation to participate in PAL services including the following:

- the completion of PAL training;
- the provision of identified services to youth to assist with their transition to adulthood; and
- assistance with applying for and securing services to aid in their transition to adulthood.
- This may be accomplished by partnering with a Targeted Case Management Provider.

The Network Provider case manager will document youth's progress and status of PAL Life Skills Training as well as experiential life skills learning in the child's service plan. The Network Provider is responsible for transportation of the youth to all life skills and experiential training/activities.

Network Providers must ensure for all children that caregivers:

- 1.1. Teach Basic Living and Social Skills.
- 1.2. Maximize opportunities for learning with Experiential Life Skills Activities.
- 1.3. Provide access to Experiential Life Skills Activities provided by community resources.
- 1.4. Promote the ability to appropriately care for themselves and function in the community.
- 1.5. Assist youth ages 14 or older who have a source of income to establish a savings plan and,
 - 1.5.1. If available, a savings account to manage independently.

1.6. Assist youth ages 18-22 years of age who have a source of income to obtain a savings or checking account with a Financial Institution (in accordance with Texas Finance Code §201.101).

1.7. Provide access to age-appropriate normalcy activities, which are suitable for the child's level of maturity and age, including activities not listed in the Child's Plan of Service.

1.7.2. Network Providers must train caregivers and use a "Reasonable and Prudent Parent Standard" to decide whether a child may participate in an unsupervised activity.

1.8. Assist youth ages 16 and over to obtain a Driver's License or state ID.

1.8.1. Ensure the following are made available to facilitate driver's license fee waiver/residency requirements:

1.8.1.1. A DFPS foster child driver license fee waiver letter;

1.8.1.2. A Texas Department of Public Safety Texas residency affidavit which is completed and signed by the child;

1.8.1.3. for Children under age 18, a representative to accompany the child to the Department of Public Safety (DPS) driver license office to provide acceptable proof of residency; and

1.8.1.4. Inform children who have applied for a drivers license of the need to notify DPS of change of address within 30 days of a change in placement.

1.9. Network Provider will identify and provide the identified services to youth to assist with their transition from substitute care to adulthood.

1.10. Network Provider will assist youth with applying for and securing services that will aid in their transition to adulthood; and

1.11. Network Providers may partner with Targeted Case Management providers to ensure the youth has adequate exposure to Life Skills activities.

Credit Checks for Children

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Every child in the conservatorship of DFPS age 14-1 will receive a copy of their consumer credit report annually. In addition to ensuring that a child's credit is checked, and any discrepancies are found and disputed, the 4Kids YAS worker or PALS service provider is also required to share the credit report with the child, provide the child with a copy, explain what the credit report means, and explain the importance of maintaining good credit.

EXTENDED FOSTER CARE/RETURN TO CARE

4Kids and the Network Provider will work together to identify children for either Extended Care or Return to Extended Care programs. The Network Provider case manager will ensure that participation in the Extended Care or Return to Extended Care programs will be discussed and planned with the child during regularly scheduled service planning meetings during the child's COS or Transition Plan Meeting, or upon the child's request. If youth is eligible for Extended Care or Return to Extended Care, the Network Provider case manager will assist the youth in completing the <u>Voluntary Extended Foster Care Agreement (Form 2540)</u> within 30 days prior to the youth's 18th birthday, when this is not possible, no later than the 30th day after the youth's 18th birthday and provide the completed form to the 4Kids YAS worker. If approved, the Network Provider case manager will ensure that the youth is assisted in maintaining necessary documentation for the Extended Care program. If a caregiver or Network Provider becomes aware of a child who is interested and eligible for Return to Extended Care the same process will be followed.

The Network Provider will maintain documentation such as school transcripts or pay stubs to demonstrate any such youth 18-22 years of age is qualified to remain in Extended Foster Care or Return to Care. Network Provider must notify 4Kids if a youth no longer meets eligibility criteria for Extended Foster Care or Return to Care.

Note: Young Adults who desire to return to Extended Foster Care during their 6 or 12 months (determined by court order) Trial Independence period (Trial Independence begins once they leave paid foster care) are considered to be in Extended Foster Care. Young Adults who desire to return to Extended Foster Care after their

Trial Independence period are considered Young Adults in return to Extended Foster Care.

Return to Care

If youth has left care and chooses to return to care, youth must contact the DFPS PAL Caseworker to start the process to return to care. The DFPS caseworker will run required checks before referring to 4Kids for placement. The DFPS case worker will assist the youth in completing the Voluntary Extended Foster Care Agreement.

Planned & Unplanned Discharge from Extended or Return to Extended Foster Care

As a voluntary program, discharge from Extended or Return to Extended Foster Care can occur:

- When the young adult completes Extended or Return to Extended Foster Care goals,
- When the young adult loses Extended or Return to Extended Foster Care eligibility, or
- At the request of DFPS, foster caregiver, Network Provider, or the youth.
- All discharges are expected to be planned.

Planned Discharge

A planned discharge occurs when:

- The youth is due to complete goals for participation in Extended or Return to Extended Foster Care; or
- Eligibility for Extended or Return to Extended Foster Care is scheduled to end.

Within 90 days before planned discharge

4Kids, DFPS, and the Network Provider will:

- Schedule a service planning meeting or COS with the youth and other important adults.
- Work together to coordinate the type of meeting with the Network Provider or DFPS staff.

*FGDM Staff will document the meeting if it is a COS.

*DFPS Worker will document the meeting in IMPACT under Permanency Planning Meetings if it was a staffing.

Upon discharge, DFPS Worker will work with the Network Provider and 4Kids to ensure the youth has received all personal records and documents including:

- Birth certificate,
- Social Security card,
- Texas Identification card or driver's license,
- Savings account information,
- Medicaid card,
- Education records and transition portfolio,
- Personal pictures or keepsakes, and
- Printed medical records from Health Passport.

Unplanned Discharge

An unplanned discharge from Extended Foster Care or Return to Extended Foster Care occurs when:

• Youth's behavior or noncompliance with Extended or Return to Extended Foster Care eligibility results in the foster caregiver or Network Provider submitting a discharge notice and another foster care placement

cannot be found.

• Youth leaves the placement before the planned end date.

4Kids, DFPS, and Network Provider will work together to prevent and address unplanned discharges from Extended and Return to Extended Foster Care.

*Note: If 4Kids receives a discharge notice from a Network Provider for a youth in extended foster care, 4Kids will follow the Placement Change Process before implementing the unplanned discharge process.

Actions to Prevent an Unplanned Discharge

The following process outlines DFPS and 4Kids responsibilities when an unplanned discharge is identified for a youth in extended or return to extended foster care.

4Kids will schedule and convene a discharge staffing within one (1) day of learning about the unplanned discharge, when possible, with:

- Youth,
- Current caregiver,
- DFPS Worker and supervisor,
- PAL Coordinator and supervisor,
- 4Kids YAS Worker,
- Attorney Ad Litem, if assigned, and
- Other individuals who are interested and important to the youth.

During the staffing:

- Review the reasons for the unplanned discharge,
- Review extended and return to extended foster care eligibility requirements,
- Discuss the benefits and parameters to remaining in current placement,
- Review services provided and determine if adding additional services may alleviate the situation resulting in the unplanned discharge,
- Discuss the implications of leaving foster care or continued non-compliance with voluntary extended foster care agreement,
- Identify short-term and long-term goals and tasks,
- Based on the youth's current eligibility status and commitment to abide by placement parameters, develop a recommendation regarding the young adult's discharge from Extended or Return to Extended Foster Care,
- Discuss the discharge process and schedule a discharge date, if applicable,
- Set the next staffing date to follow up on the young adult's progress to meeting the requirements of extended or return to extended foster care, if applicable,
- Document the notes from the staffing and encourage the youth's signature, if possible, or
- Continue to search for placement (paid and non-paid) for the youth for 30 days after initial discharge staffing.

SUPERVISED INDEPENDENT LIVING (SIL)

Supervised Independent Living (SIL) placement settings are living arrangements offered through the extended



foster care program that allow young adults to reside in a less restrictive, nontraditional foster care setting while continuing to receive casework and support services to become independent and self-sufficient. At the youth's 17th birthday, the Permanency Case Manager in coordination with the 4Kids Independent Living Specialist, will provide information regarding SIL to the young adult. 4Kids may coordinate a meeting with the Network Provider case manager and the young adult to provide information to the youth about their SIL options. To be eligible for SIL, youth must be able to live independently in a setting with minimal to no supervision. Through conversations with the young adult and the initial assessment, the young adult will be placed in the setting which best meets his or her needs. To maintain placement in the SIL program, youth must comply with the voluntary extended foster care agreement. Youth can move through the settings offered based on behaviors, enhancement of skills, or overall progress made in the youth's current setting.

Network Providers should assist youth in identifying a Targeted Case Management provider who can assist with attaining independent living skills and resources.

DFPS case workers and 4Kids YAS worker maintain documentation of the youth's progress in case notes as well as in the subsequent service planning meetings, which will be filed in the young adult's record. If the youth choose SIL services either in Region 4 or outside of Region 4, the SIL request is sent to 4Kids by emailing the signed voluntary extended care form, SIL application and a copy of the young adult's application for placement to 4Kids. The 4Kids staff will review the application for appropriateness for the youth to be eligible to be placed in a SIL setting and will make the necessary referrals to Providers that will be able to meet the youth's needs. The 4Kids YAS worker contacts the DFPS worker with the decision to refer the youth to a SIL placement and the Network Provider's decision on accepting or denying the youth's request for placement. When 4Kids receive SIL approval from the Network Provider, the Network Provider, 4Kids and DFPS will coordinate the transfer of youth to the SIL placement.

NATIONAL YOUTH IN TRANSITION DATABASE (NYTD)

DFPS will take the lead in identifying youth (ages 17, 19, and 21) who participate in surveys for the National Youth in Transition Database (NYTD). DFPS will inform 4Kids of the youth who will participate in NYTD surveys via email with subject line of "NYTD Survey Participant" if assistance is needed to complete the survey. 4Kids will assist DFPS in obtaining NYTD surveys from identified youth. Youth must be allowed to take the NYTD survey on their own without assistance from others. 4Kids will maintain current contact information for youth placed within their provider network and inform DFPS when updated information becomes available. Youth will need to have an active e-mail account. The 4Kids will need to ensure that the Network Provider is meeting this requirement.

AFTERCARE AND FOLLOW-UP

4Kids and the Network Provider value the importance of seeing our youth not just age out of the foster care system, but age into a new community full of opportunities and life as a young adult. Before the youth discharges from foster care, an aftercare plan will be developed by the Network Provider case manager along with the 4Kids YAS worker focusing on the youth's preferences and independent living needs. The after-care plan will include a termination of service evaluation and assessment of "unmet" needs. Together, the 4Kids facilitated support system and youth will devise goals and objectives meeting the "unmet" needs to monitor an on-going structure for a smooth discharge and transition into adulthood.

TRAINING REQUIREMENTS

4Kids is committed to cultivating a network that is unified by a culture of care that is trauma-informed, fosters innovation, and produces improved outcomes for children. The network's training plan is designed to further the strategic growth of the Region 4 Provider Network. Training opportunities are built upon the following purposes:

- To maintain ongoing and consistent contractual and network accreditation requirements, standards, and practices,
- To mitigate risk and ensure the safety and well-being of employees, youth, and caregivers within the Provider Network,
- To encourage a culture of learning that supports continued growth and development network-wide,
- To equip Network Providers with skills and knowledge rooted in evidence-based practice to improve outcomes for kids,
- To prepare the network for future needs, fostering retention and stability, and
- To promote a unified network rooted in shared mission and values.

The network training plan offers network providers and foster parents with opportunities to develop essential knowledge and skills to serve effectively in Region 4. The SSCC expects that each Network Provider will ensure that their staff and caregivers/foster parents have the minimum required trainings for state licensing requirements and national accreditation (if applicable), to perform all duties as expected in the SSCC Contract, Network Provider Services Agreement, and Provider Manual.

Additionally, 4Kids will support each Network Provider in their participation of additional training to facilitate best practices, philosophy, and the mission of Community-Based Care within Region 4.

Network training and development is a vital part of 4Kids' comprehensive strategy to support quality improvement. Training will be tracked and monitored, closely in alignment with performance management.

Training requirements are outlined in the Network Training Plan attached as an appendix (<u>Appendix B</u>). Additional 4Kids training opportunities will be posted on the 4Kids website <u>4Kids4Families.org</u>.

RISK MANAGEMENT AND REPORTING

OVERVIEW

Immediately, but no later than 24-hours after knowledge of serious incidents, licensing investigations, licensure board reports and investigations, suspected fraud or fraud investigations, and violations that occur within Network Provider's business, the Network Provider must notify 4Kids in writing:

- For serious incident reports involving children in care, Network Providers will submit a written incident report via the Texas Provider Gateway (TPG), which 4 Kids will access and serve as the written notification.
- For all other notifications, the Network Provider will submit the report to 4Kids by emailing it to care@4kids4families.org.

The Network Provider must have operational procedures and mechanisms in place to ensure their staff are knowledgeable of and respond immediately to conditions or situations that may pose a threat to child safety.

Network Providers are to immediately report knowledge of or suspicion of abuse, neglect, or exploitation of a

child to 4Kids and directly to the Texas Abuse Hotline at (800) 252-5400 or online at http://www.txabusehotline.org. Additionally, Network Providers will report these allegations to 4Kids utilizing the procedures outlines in the Serious Incident Reporting section of this manual. Please see this section for additional information.

4Kids will promptly report any suspected case of abuse, neglect, or exploitation to the appropriate authority as required by the Texas Family Code, Chapter 261. All reports must be made within twenty- four (24) hours of the discovery of abuse, neglect, or exploitation.

SERIOUS INCIDENT REPORTING

Serious incidents are to be handled in a manner that preserves the placement, assures continuity of care, and ensures ongoing safety and trauma responsive care for the child/youth and provides for improved skills for the family facility. Network Providers are mandatory reporters and must report and document serious incidents involving a child in their care.

Any incident that fits the criteria for mandatory reporting must be reported to 4Kids within the timeframes set by RCCR. Network Providers must refer to **HHSC Minimum Standards for Child Placing Agencies/General Residential Operations, Subchapter D, Reporting Serious Incidents and Other Occurrences.** The reports must be made to the entities outlined in this section, and reporting and documentation must be within the specified timeframes. Upon receiving notification of an incident regarding a child, the Network Provider will determine whether the incident demands mandatory reporting to authorities other than 4Kids.

The following incidents are to be reported to 4Kids immediately after safety is assured by calling the phone number listed on the 4Kids website:

- Death of a child,
- Child is in a life-threatening situation,
- A significant change in a child's medical condition,
- Psychiatric Hospitalization,
- A child who is missing from care and placed on the Amber Alert system returns to care,
- Natural disasters where children are displaced, and
- Serious Incidents such as:
 - Suicide Attempts.
 - Injuries requiring medical treatment including psychiatric hospitalization.
 - Runaway incidents.
 - A caregiver/staff member or child contracts a communicable disease.
 - Commission of a Crime, including those committed by youth or crimes occur at a home or facility in which youth are placed.
 - Allegations of abuse, neglect or abusive treatment
 - A child's abuse, neglect, or exploitation.
 - Allegation and/or confirmed child-on-child physical and/or sexual abuse.

All incidents are required to be documented within 24 hours in the Texas Provider Gateway (TPG).

A Serious Incident Report should be completed for each contact made in the case of a presumed emergency or crisis situation. This report must include the following and be submitted to 4Kids within 24 hours via Texas

Provider Gateway (TPG):

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- Name of child involved in the incident or crisis, including gender, date of admission, and age,
- Name and contact information for where child is placed, including name, address, and phone number,
- Developmental and chronological age of child(ren) involved in the incident,
- Date and time of the incident or crisis,
- Date report was completed,
- Date, time, and method of notification made to 4Kids and Licensing,
- Nature of the incident,
- Interventions/actions taken by 4Kids and Network Provider,
- Names of witnesses and health professionals,
- Resolution of incident, including findings and treatment recommendations, and
- Notation as to whether mandatory reporting is required and was completed.

Network Providers will notify their assigned 4Kids Permanency Specialist as soon as possible, but no later than 24 hours, in the event of a crisis or emergency. In the event the Permanency Specialist is not responsive within 30 minutes, Network Provider should leave a message and submit the incident report within 24 hours. At a minimum, Network Providers will submit a written incident report to 4Kids via Texas Provider Gateway or 4Kids website within 24 hours of the incident.

Upon receiving the immediate notification of an incident, 4Kids will contact Network Provider to review the course of action taken by the Network Provider and to determine as a team if further interventions are needed. This might include a corrective action plan, additional wraparound support services, or training.

All incident reports will be available to DFPS for their review. Any incident reporting of an injury, runaway, missing child, or increased threat to the safety of a child will be reported immediately to DFPS. 4Kids will work in partnership with RCCR on any investigation that results from a Network Provider's incident report.

4Kids will identify trends by Network Providers and the Network collectively. If a trend is identified in a specific area, 4Kids will assist with the formation of a workgroup to address improvement in that specific area.

MEDIA INQUIRIES AND HIGH-PROFILE SITUATIONS

If there is media involvement, in any capacity, with a child placed within the 4Kids network, the Network Provider must inform 4Kids via the <u>4kids4families.org</u> website. This includes both positive and negative media involvement.

Even if a media request has not been made, the following situations require immediate notification to 4Kids, along with other required reporting:

- The abuse, injury, or death of a child who is referred or placed within the 4Kids network.
- A child who is referred to or placed within the 4Kids network has been involved in a situation that may garner media attention in the future.
- Any allegation of abuse or mismanagement, either by a foster family recruited by a 4Kids Network Provider, a provider staff member, or agency.

In the case of a situation occurring involving one of the above scenarios, the following process will take place:

- The Network Provider will contact 4Kids via the 4kids4families.org website.
- 4Kids Senior Vice-President of Community-Based Care will work with the Network Provider leadership, 4Kids leadership, and Arrow's Chief Philanthropy Officer to develop a communications plan.
- All staff from 4Kids, Arrow, and Network Provider will follow the agreed upon plan in all media interactions and any other communications.

EMERGENCY PREPAREDNESS AND RESPONSE PLAN (EPRP)

To maintain the physical safety of staff and clients, 4Kids and all Network Providers will require an EPRP that includes clear steps to address safety and services for children and youth in foster care and caregiver families.

All employees and contractors within the system of care are required to undergo training regarding disaster recovery procedures and demonstrate their role ensuring Network Provider continuity and safety for children and caregivers. The 4Kids EPRP will also address a response in situations when our staff and Network providers' employees may also be affected by the disaster.

The information held within the EPRP lays out a plan of action and lists responsibilities and tasks for 4Kids personnel in the event of a disaster striking Piney Woods, the state, portions of it or anywhere in the United States where any Piney Woods child, youth, or young adult is placed. 4Kids personnel will follow 4Kids Emergency Preparedness and Response Plan.

4Kids will ensure that all licensed kinship/fictive kinship placements, licensed foster/adoptive homes, and all general residential operations have a current EPRP for each Piney Woods child placed in the 4Kids network.

SOLUTION-BASED COMMUNICATION

CASE CONFLICTS AND APPEALS

There may be times when 4Kids and a Network Provider may not agree on a case decision or what should happen with a child or family. Solution-based communication and collaboration will be used in these situations. The safety and best interest of the child must always be paramount in making the case decision and finding a solution to a barrier or disagreement. 4Kids and Network Providers must ensure continuity of services, as defined by DFPS, to the child or family affected while seeking to resolve case-specific disputes.

The following section outlines the protocol to resolve case disagreements between 4Kids and Network Providers. There also may be times when 4Kids and the Network Provider may not agree on a case decision made by DFPS. In those cases, 4Kids and DFPS will follow a similar conflict resolution process as outlined in the Joint Operations Manual (JOM).

Step 1:

- 4Kids and Network Provider staff and supervisors will work together to resolve case specific issues informally. This will be done through an objective, solution-driven discussion or meeting.
- If a mutually agreeable solution is not achieved in three (3) business days, those involved will notify the other individuals of the plan to involve their chain of command. The disputed issue will be escalated, in writing, to the Director level at 4Kids and the next level within the Network Provider for resolution.
- A meeting will be scheduled with 4Kids and the Network Provider to discuss the issue and come to an

agreement. An uninvolved third party may be solicited to listen to the issue and assist in coming to a solution. If an agreeable solution is not achieved during the meeting, it will be escalated to Step 2.

• If the dispute is not satisfactorily resolved in Step 1, it will be elevated to Step 2.

Step 2:

- If the dispute is not satisfactorily resolved in Step 1, it will be elevated in writing to 4Kids's Sr. VP of Community-Based Care with a subject line of "Solution-Based Communication." Supporting documentation will be sent to the Sr. VP of Community-Based Care. As part of the review, the philosophy and goals of community-based care will be reviewed and used as a guideline for ultimate resolution. The Network Provider must ensure continuity of services for the child or family involved while seeking to resolve the case-specific dispute.
- The issue will be resolved at this level and a final decision will be distributed back to the requesting staff via email within five (5) business days with supporting points for the decision.

COMPLAINTS AND CONCERNS

4Kids employ a consumer affairs approach to complaints and concerns. Any consumer/client, Network Provider, DFPS employee, or community stakeholder can submit a complaint or concern directly to 4Kids via the website, <u>4Kids4Families.org</u>. The 4Kids Director of Community Relations will receive submitted complaints and concerns and will ensure that the matter is addressed in a timely manner. The Community Relations department will work to help solve problems, let parties understand their rights, answer questions, and help with resources.

Complaints related to service provision or instances in which a child believes their rights have been violated will be directed to the Director of Quality & Compliance via the website, <u>4Kids4Families.org</u>. 4Kids will collaborate with the child and Network Provider, listening, seeking to understand, and resolving the concern as appropriate. The Network Provider must ensure continuity of services to the child or family affected while seeking to resolve client complaints.

CONFLICTS OF INTEREST

A conflict of interest refers to a conflict, or the appearance of a conflict, between the private interest and official responsibilities of a person in a position of trust.

Employees, non-employees, Board members, and advisory group members have the responsibility to avoid conflicts of interest, or even the perception, between personal interests and those of 4Kids by avoiding relationships or activities that may impair their ability to make objective and fair decisions when performing their job or role. Company property, information, or business opportunities may not be used for personal gain. Employees, non-employees, Board members, and advisory group members must disclose real and apparent conflicts of interest and refrain from participation in any decisions on matters that involve a real or apparent conflict of interest.

Employees with a potential conflict-of-interest must contact HR and non-employees must contact their 4Kids Sponsor and await resolution before engaging in any activity, transaction, or relationship that might give rise to a conflict of interest.

Procedures involving Board members and advisory committee members can be referenced in 4Kids Financial and Ethical Conflict of Interest policy and procedures.

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For Network Providers and community partners, should a potential, actual, or perceived conflict of interest arise, the party must notify 4Kids immediately via the <u>4Kids4Families.org</u> website. The Sr. VP of Community-Based Care will investigate and notify the party of the resolution.

QUALITY IMPROVEMENT AND CONTRACT MANAGEMENT

OVERSIGHT OF NETWORK PROVIDERS

4Kids embraces a culture of improvement and is committed to continually assessing child, family, and community needs to provide effective services that promote individual and system-wide impact. 4Kids holds the SSCC and Network Providers accountable to foster innovation, work cross-functionally to solve problems, and learn from our experiences. The process relies on a network culture that is proactive, innovative, and supports continuous learning. 4Kids's approach is outcome driven, data informed, and performance based. As the SSCC, 4Kids will implement a network-wide outcomes measurement system that will allow evaluation of network performance via measurable data and a contract monitoring process that evaluates contract terms, performance expectations, outcomes, and outputs both on an individual Network Provider level and for the region as a whole. Our process will allow 4Kids to hold ourselves and those we partner with accountable for financial, quality, and outcome measures that promote child safety, well-being, and permanency.

Network Providers will be held accountable through performance-based subcontracts. As such, Network Provider performance will be evaluated and monitored regularly in relation to contract outcomes, regular and timely submission of data and information for youth served and foster homes/facilities within the network, compliance with applicable HHSC minimum standards, and compliance with 4Kids policies as outlined in this Provider Manual.

To ensure all Network Providers maintain regulatory and statutory compliance, quality improvement functions are centralized through the Quality & Compliance (Q&C) department in 4Kids, which is dedicated to overseeing contract performance and compliance. The Q&C department is committed to supporting Network Providers in meeting performance standards and improving outcomes. Each Network Provider will receive at minimum an annual audit evaluating all contract terms and a quarterly scorecard of their outcomes and outputs. Additional support may be provided through improvement plans, training, referral for resources, or conflict resolution.

4Kids's quality improvement process helps identify issues or problems that affect program outputs and outcomes. Quality Improvement Plans (QIPs) are implemented to support Network Providers in addressing challenges and build upon strengths. 4Kids's approach is based upon the identification of expected performance goals and outcomes, development and implementation of measurable objectives that tie to those goals and outcomes, utilization of tools to measure those objectives, continuous evaluation of data and, subsequently, the identification of additional changes that will drive continued improvement.

4Kids will utilize monthly Network Provider calls, quarterly network scorecard meetings, and direct communication with individual Network Providers to communicate and address system performance. Reports will be reviewed individually with Network Providers, but also aggregately reviewed in network meetings and shared with DFPS as needed or required. Areas for growth and deficiencies can be collaboratively addressed in a network setting to support the network in learning how to meet needs and performance targets from successful providers.

Enrollment for a Network Provider occurs when the Network Provider has been approved by 4Kids and DFPS, a

subcontract has been executed, and the Network Provider has been entered into the 4Kids Provider Network in IMPACT. Each Network Provider is assigned a Q&C Specialist who will serve as their contact for contract and performance-related issues.

ON-SITE MONITORING REVIEW

The Q&C department develops and manages a monitoring schedule for each Network Provider based on licensing compliance history. 4Kids will partner with other SSCCs and will participate in the joint monitoring plan, utilizing the joint monitoring tool that has been developed and maintained by current SSCC holders. Monitoring reviews will measure compliance with internal agency procedures, state and federal regulatory requirements, targeted performance measures, and accreditation standards. They serve as an opportunity to examine trends, identify barriers to service delivery, and incorporate feedback for outcome improvement.

On-site monitoring reviews may be either announced or unannounced as determined by the Q&C Specialist. 4Kids will notify the Network Provider of an on-site monitoring visit via email or phone call at least 24 hours prior to most visits occurring. 4Kids reserves the right to make unannounced visits during normal business hours. Upon scheduling the monitoring visit with the Network Provider, the Q&C department will provide written notification requesting required information prior to the scheduled visit.

The monitoring review process may include a review of the following components:

- Policies and procedures,
- Records, including child, caregiver/foster family, and personnel,
- Interviews with staff or child; and
- Physical site.

The Network Provider should be prepared to make available the following:

- Policy and Procedure Manual,
- Personnel records,
- Foster Home records,
- Child records,

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- Financial records,
- RCCR history and documentation,
- Data entry process/requirements; and
- Other pertinent information requested by 4Kids.

At the time of the monitoring visit, the Q&C Specialist will conduct an entrance meeting with the Network Provider to discuss the purpose, scope, and activities planned for the review. The Q&C Specialist will require a private space to review records and conduct interviews. During the review if a safety concern is apparent, it will be addressed with the Network Provider immediately and will require immediate action and intervention.

When the monitoring review is completed, the Q&C Specialist will review the preliminary results with the Network Provider during an exit meeting. Within 30 days of the exit meeting, a final monitoring report will be provided to the Network Provider documenting the findings of the monitoring review and outlining a request for a Quality Improvement Plan, as needed. If the Network Provider disagrees with the monitoring report, they must respond in writing to the Director of Q&C within five (5) business days of receiving the final monitoring report.

4Kids will respond in writing within five (5) business days with a final decision. Quality Improvement Plans (QIP) will be due to the Q&C Specialist within 30 days of receipt of the final monitoring report. The Q&C Specialist will review the Quality Improvement Plan and notify the Network Provider if it has been accepted or if revisions are needed. Following acceptance, 4Kids will follow-up during the next monitoring review, or at intervals outlined in the QIP, to ensure progress has been made. The Q&C Specialist will work in collaboration with the Network Provider to ensure that they can be successful in meeting the requirements outlined in a QIP or corrective action plan.

When a Network Provider does not demonstrate efforts toward fulfilling the QIP, including repeated or ongoing deficiencies, a more formal Corrective Action Plan may be warranted. In such cases, a specific time and duration for the plan will be outlined with the Network Provider and regular, consistent follow-up monitoring reviews will occur until the contract is brought into an acceptable level of compliance.

PERFORMANCE MEASURES, DATA COLLECTION, AND REPORTING PERFORMANCE MEASURES AND OUTCOMES

4Kids believes Community-Based Care provides an opportunity to significantly improve outcomes for our Region 4 youth and their families. DFPS will monitor the performance, services, and deliverables of the SSCC. 4Kids will monitor the Network Provider on all services and deliverables within the SSCC contract.

The Network Providers will work in partnership with 4Kids to improve outcomes and overall well-being for youth as it relates to the Federal Child and Family Service Review (CFSR), HHSC, and DFPS outcomes as outlined below. Additional outcomes may be measured at the discretion of 4Kids and as outlined in the subcontractor agreement.

Goal	Performance Measure Performance measure 1-9 apply to CBC Stage 1. Performance measures 1-10 apply to CBC Stage II.						
Safety	Children/youth are safe from abuse and neglect.						
Placement Stability	Children/youth have stability in their placements.						
Least Restrictive Setting	Children/youth are placed in the least restrictive environment.						
Maintaining Connections	Children/youth are placed in their home communities.						
	Children/youth are placed with their siblings.						
	Children/youth are placed with kin.*						
Preparation for Adulthood	Youth age 16 and older obtain a driver's license or Texas identification card.						
	Youth turning 18 complete Preparation for Adult Living (PAL) training.						
Participation in Decisions	Children/youth attend court hearings.						
Turnover*	Case worker turnover rate is maintained or improved.						

*The Kinship and Turnover performance measures are added in Stage II CBC.

REQUIRED DATA

Network Providers are required to submit timely and accurate data to 4Kids regarding the following:

- Child related data such as assessments, demographics, health information, medical records, Plan of Service, and other service-related information as required.
- Critical/Serious incident information that should include follow ups and actions taken resulting from the incident.
- Resource Home information including address, contact information, household members and demographics, preferences on child characteristics for placement, and placement capacity.
- Daily bed vacancies.
- Additional data points pertinent to Network Provider performance (PMET), outcome metrics, and/or quality of care as deemed necessary by 4Kids.
- All appropriate records relating to the services required by services agreement, the SSCC contract, or applicable law, rule, or regulation.

A detailed list of the data sets required for submission by Network Providers can be found at the website <u>4Kids4Families.org</u>.

METHODS OF DATA SUBMISSION

Network Providers are required to use 4Kids' web-based software system, the Texas Provider Gateway (TPG), as the primary method for submitting child and resource home data (as outlined in Required Data) to 4Kids. Data may be submitted to the TPG through the following methods, to be chosen by the Network Provider:

- Direct data entry into 4Kids' web-based software systems via direct login; or
- Automated uploads of data batches sourced from the Network Provider's internal software systems using an Application Programming Interface (API).
- A combination of direct entry and automated uploads may be used so long as all required fields and data elements are submitted in a timely and accurate manner.

Network Providers opting to submit data to the TPG via API integration should perform uploads at least once daily, excluding weekends and holidays. Network providers may perform uploads more frequently if they choose to do so, or if requested by 4Kids. Network Providers electing to use automated data batch entry are also responsible for configuring their internal systems to capture and upload data in the required format. Contact info@fiveptg. com for more information.

TEXAS PROVIDER GATEWAY (TPG):

The Texas Provider Gateway (<u>https://texasprovidergateway.org/</u>) is a secure web-based software system that acts as a single hub for Network Providers to submit data to SSCC agencies. As such, Network Providers who contract with multiple SSCC's can submit data to multiple SSCC's from one location.

Each Network Provider must identify at least one internal technical contact who will serve as the organization's Security Administrator. This role will be responsible for the following functions:

- creating new users,
- modifying user permissions,
- performing password resets,
- and ending user accounts for those who separate from the Network Provider.

Each Network Provider employee responsible for data entry in the TPG should have their own unique login.

4Kids will provide support for Network Providers related to the TPG through scheduled trainings/webinars, written guides, and ad hoc technical assistance requests submitted to <u>4Kids4Families.org</u>. Support contacts can also be located on the home page of the TPG upon logging in.

Other Methods of Submission and Security:

4Kids may request additional data sets for submission outside of the TPG. Network Providers should take care in ensuring that all data submitted is done in a manner that protects confidentiality and preserves data security. If data submission is requested by 4Kids outside of the TPG, 4Kids will utilize their website, <u>4Kids4Families.org</u> for these submissions.

At no point are Network Providers to submit data containing PHI or PII via unsecured methods such as unencrypted email or SMS/RCS messaging.

CANS:

In keeping with state requirements, the Child and Adolescent Needs and Strengths (CANS) Assessment must be entered in the statewide eCANS system (<u>http://ecans.org</u>) if being completed by an approved eCANS provider. All other completed CANS should be submitted via the Texas Provider Gateway.

DATA COLLECTION AND REPORTING

Network Providers shall be responsible for:

- Forwarding to 4Kids on a timely basis all appropriate records relating to the services required by this manual, service agreement(s), the SSCC contract, or applicable rule, law, or regulation as outlined in Required Data.
- Preparing and attending to, in connection with the Services, all reports, claims, and other correspondence necessary or appropriate under the circumstances. Such documentation shall include, without limitation, the reports and other documentation listed throughout this Provider Manual.

4Kids will utilize all state required systems as well as the TPG database, and our internal CoBRIS and CareMatach system to collect and validate client information. Using these data systems, 4Kids will generate reports that are used to manage and track performance across the system of care. Additional data and information sources will include, but are not limited to:

- Internally and externally produced QI reports (such as DFPS monitoring reports, RCCR letters, and financial audits).
- Incident reports.
- Exit interviews, satisfactions surveys, grievances, and client complaints.
- Case management, case staffing, and utilization management data.
- Internal and external meeting minutes.

4Kids is committed to the utilization of data and resulting analytics to evaluate performance, measure outcomes, and drive the overall improvement of the system of care. As such, the data collection outlined within this Provider Manual will be reviewed and validated for quality, scrubbed to ensure accuracy and normalization, and finally used for analytics to provide insights for the Quality Improvement cycle.

4Kids has identified and defined outcomes for Network performance, along with the data elements required to evaluate those outcomes and drive improvement efforts. Data collection measurement tools will continue to be developed to analyze and communicate the strengths and weaknesses within a service, program, or administrative department.

4Kids will develop and maintain data intelligence resources to inform all levels of the community-based care model as outlined here:

State Reporting:

4Kids utilizes reports based on Network Provider data and internal SSCC data to provide the state/DFPS with metrics as required by the SSCC contract. For those metrics provided by the state, 4Kids will use internal reports to review measures between quarterly reviews and reconcile discrepancies. Furthermore, 4Kids may use supplemental reporting to provide the state with additional insight on region/system trends in order to best reflect the status and needs of the network.

Network Provider Performance:

4Kids provides ongoing monitoring of individual Network Provider performance through the Quality and Compliance/Quality Improvement process. Reports developed from Network Provider data submissions and other data collection methods will be used as analytic resources during the process. Scorecards will be provided to individual Network Providers during the review and monitoring process(es) to equip Network Providers to improve outcomes, drive performance, and inform decisions. These reports will also equip 4Kids in assessing compliance with contractual expectations. 4Kids may offer access to these scorecards and other metrics through Provider dashboards available via online portals.

Network-Wide Performance:

As a part of the quality improvement process, 4Kids will hold regular performance review meetings to examine outcomes and network trends across the entire system of care. Data submissions by Network Providers will be used to develop reporting resources for these comprehensive network meetings and equip parties with information on contractor performance, compliance with contract obligations, client outcomes, and guiding performance improvement initiatives across the region.

INFORMATION TECHNOLOGY

TECHNICAL CONTACT

Each Network Provider must specify a technical contact, a person familiar with program operations and relevant technology systems used within the organization. The technical contact's responsibilities include the following:

- serve as liaison between the Network Provider and 4Kids technical staff,
- request the creation and deactivation of user accounts for 4Kids software systems,
- respond to periodic reports verifying the Network Provider's active user accounts,
- request training and support for the Network Provider's staff in the use of 4Kids's software systems, and
- report technical problems related to 4Kids software systems.

This technical contact may be the same or in addition to the technical/security administrator for the TPG as outlined in "Methods of Data Submission".



SUPPORT

4Kids provides periodic webinars and on-site training for Network Providers. Recorded webinars, manuals, & other useful information is posted on the 4Kids website <u>4Kids4Families.org</u>.

During business hours, 4Kids provides support at <u>4Kids4Families.org</u> to assist Network Providers with technical issues related to 4Kids software.

REQUESTING ACCESS TO 4KIDS SYSTEMS

Network Providers needing access to the Gateway for the first time need to choose an administrator for the agency and provide the following to <u>4Kids4Families.org</u>.

- The full name of the individual, and
- The individual's email address

Once the Network Provider has a Gateway administrator, that person will be able to create additional logins for the Network Provider. Note that the Network Provider is responsible for ensuring that each authorized user is appropriately trained on the protection of confidential information per contract requirements. The Network Provider's Gateway administrator is responsible for deactivating logins to the Gateway when an employee is terminated or transferred.

SECURING COMMUNICATION

Prior to transmitting confidential information by email, Network Providers are responsible for ensuring that their email system utilizes Transport Layer Security (TLS) to provide an encrypted channel of communication between email servers. TLS is an attractive alternative to third-party email encryption systems, because encryption occurs automatically in the background without requiring the receiving party to log into a third-party system to access the email. If a Network Provider is not certain whether their email system uses TLS, they should check with their IT (Information Technology) professionals for assistance. 4Kids will accept emails through third- party encryption services but has a strong preference for using TLS instead.

Network Providers are also responsible for ensuring the privacy of communications received by Fax. DFPS and 4Kids require physical security around fax machines to prevent unauthorized access to confidential information. 4Kids encourages the use of secure digital faxing services, which deliver faxes to a secure email account.

FINANCE AND BILLING PROCEDURES

4Kids follows the process outlined in the Network Provider service agreement for payments and payment disputes. Questions that arise should be forwarded to the 4Kids provider portal for appropriate routing.

RATES AND PAYMENT TERMS

4Kids pays Network Providers based on the level of care approved by 4Kids staff. Rates for the LOC can be found in the Network Provider service agreement. These payments include, but are not limited to, the daily rates and fees for foster care, exceptional foster care, SIL, PALS, and adoption services.

Network Provider payments are generated from data and documentation provided by the Network Provider. 4Kids does not require Network Providers to submit a bill or invoice for payment of services. 4Kids does require Network Providers to submit certain service delivery documentation in the TPG to initiate payment. Network Provider capacity, placement, and discharge data is captured directly in the TPG which integrates with the 4Kids website and 4Kids' billing and payment systems. Network Providers are responsible for timely and accurate data entry within 72 hours of a placement change event. 4Kids conducts data integrity checks between the 4Kids website and the state systems, to ensure data accuracy in the systems. Any data discrepancies identified during these reviews are researched, resolved, and corrected in the appropriate system. The state system, IMPACT, and case documentation will be used to verify data discrepancies for payment adjustments and recoupments. Payment adjustments or recoupments will be processed on the next regular Network Provider payment.

Network Providers are responsible for timely review and for designating a primary contact to receive, review, and approve payment adjustments/discrepancies in the Network Provider portal (CoBRIS). Payments are initiated monthly by electronic funds transfer (EFT)/direct deposit. Payments are issued within a reasonable timeframe of payment from DFPS to 4Kids for the placement and no later than 10 calendar days of 4Kids' receipt of funds from DFPS. Payment reports are available in the Network Provider portal (CoBRIS). Network Providers may log payment discrepancies in the Network Provider portal (CoBRIS) for review, reconsideration, and resolution.

FOSTER CARE SERVICE PAYMENTS

4Kids pays Network Providers for foster care services at the fee-for-service rates shown in Exhibit C of the Network Provider services agreement. Network Providers receive payment for each night of service a child is in a preauthorized placement. 4Kids pays Network Providers for the calendar day of placement, but not for the calendar day of discharge or placement change.

Initial Payment for Foster Care Services

New placements - Network Providers are paid by 4Kids for all new placements that have been referred by 4Kids beginning November 1, 2023.

Legacy transfers - Network Providers are paid by 4Kids, for Region 4 legacy placements beginning on the date the legacy children are transferred into the 4Kids network.

4Kids does not process payments for any foster care services for children for whom 4Kids has not yet issued a placement agreement.

Upon notification of the following circumstances, 4Kids may authorize payment for up to 14 days for foster care bed-holds:

- Psychiatric hospitalization,
- Medical facility hospitalization,
- Respite care, summer camp, or other trip,
- Runaway,

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- Unauthorized placement,
- Temporary placement/visit in own home,
- Locked facility, jail, juvenile detention center, and/or
- Short-term substance abuse placement

Payments to the Network Provider for foster care during a child's absence are made only if each of the following conditions are met and comply with Texas Administrative Code (TAC) Title 40 Chapter 7, Subchapter C,

Continuation of Foster Care Payments During Absences from Care (<u>40 TAC §700.323</u>), DFPS <u>Child Protective</u> <u>Services Handbook, Section 4280, Temporary Absence from Paid Placement</u> and any other applicable state and federal statues, laws, and rules :

- Network Provider plans to return the child to the same placement at the end of the absence.
- Network Provider agrees to reserve space for the child's return for as long as payments are made in the child's absence.
- Network Provider has approval or a request to hold the placement for a child from DFPS and/or 4Kids. Unless otherwise approved, foster care payments for the same child will not be made to multiple provider's during the child's absence. No foster care payments on behalf of the foster child will be made if foster care payments are made to any other provider for the same foster child during the foster child's absence.
- Network Provider ensures the placement facility is providing emotional support via active participation in the treatment, meeting the child's concrete needs, having frequent and regular face-to-face contact, facilitating family visits, communicating regarding the child's progress and discharge plan.
- Payments for temporarily absent children and youth must be approved by DFPS (specifically, a regional program administrator), if the absence is between 15 and 30 days.

4Kids will not pay Network Providers for days of foster care when children reside in the following non-DFPS paid placements:

- Psychiatric hospital once acute care ends,
- Nursing home placement,
- Intermediate care facilities for persons with intellectual disabilities or developmental disabilities (ICF/ IDD),
- State supported living centers,
- Placed with a non-licensed relative caregiver,
- Pre-consummated adoptive placement Texas Youth Commission facility,
- Texas Juvenile Justice Department facility, or
- Texas State Hospitals.

Extended Foster Care Service Payments

4Kids pays Network Providers for Extended Foster Care Services, which also includes Supervised Independent Living Services. Extended Foster Care Services are paid based on the fee schedule included in the Network Provider services agreement. Rates for Supervised Independent Living vary based on living arrangement. The fees for these services are included in the Network Provider services Agreement.

In order to pay Network Providers for Voluntary Extended Foster Care or Return to Foster Care Services and Supervised Independent Living Services, the following conditions must be met:

1. Extended Foster Care agreement signed by the youth must be on file with 4Kids.

2. Network Provider must be able to provide documentation on a periodic basis demonstrating that the youth is:

2.1. Regularly attending high school or enrolled in a program leading toward a high school diploma or GED up to the youth or young adult's 22nd birthday.

2.2. Regularly attending an institution of higher education or a post-secondary vocational or technical program up to the youth or young adult's 21st birthday. The youth can remain in care to complete vocational-technical training classes regardless of whether the Youth or young adult received a high school

diploma or GED certificate.

2.3. Actively participating in a program or activity that promotes or removes barriers to employment up to the youth or young adult's 21st birthday.

2.4. Employed for at least 80 hours per month up to the youth or young adult's 21st birthday.

2.5. Incapable of doing any of the above due to a documented medical condition up to the youth or young adult's 21st birthday.

2.6. Accepted for admission to a college, or vocational program that does not begin immediately. In this case, the youth or young adult's eligibility is extended three and a half months after the end of the month in which the youth or young adult receives his/her high school diploma or Graduate Equivalency Diploma (GED) certificate.

Exceptional Care Services

Exceptional Care is used to secure placement for children and youth with exceptional needs that cannot be met appropriately through use of the foster care rate. DFPS will authorize use of exceptional care days of care using a validation process in instances when:

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

Services that are ordered by the court and fall outside the provider services agreement will be reviewed by 4Kids and the Network Provider on a case-by-case basis to determine rate of payment and parameters of services to be provided.

ADOPTION SERVICE PAYMENTS

4Kids pays Network Providers for adoption placement services. The fees for these services are included in the Network Provider services agreement Exhibit C. All required documents for payments are submitted in the Texas Provider Gateway (TPG). Required documents must be received by 4Kids within 30 days from the date of service. For adoption placement services, the date of service is the date of the adoptive placement as shown on the DFPS adoptive placement agreement. For adoption post-placement services, the date the adoption decree or final adoption order is signed by the judge.

For all adoption placement and post-placement services conducted within the 4Kids network, the DFPS caseworker will issue a Form 2054 directly to 4Kids via email at <u>adoption@4kids4families.org</u>. Within 10 business days of receiving the DFPS Form 2054, 4Kids will issue a service authorization in the Network Provider portal (CoBRIS).

Within 10 business days of the adoption placement or post-placement event, submit the following documents in the Texas Provider Gateway (TPG) for payment on the next regular payment cycle:

Checklist for Adoption Placement Services Payment

• Copy of the signed DFPS Service Authorization Form 2054 (with a date of adoptive placement within the

period of the begin Date and the Termination Date and correct 88F service code)

• Copy of the approved and signed DFPS Adoptive Placement Agreement for each child

Checklist for Adoption Post-Placement Services Payment

- Copy of the signed DFPS Service Authorization Form 2054 (with a date of adoptive placement within the period of the begin Date and the Termination Date, correct 88G service code)
- Copy of the approved and signed DFPS Adoptive Placement Agreement for each child
- Copy of the file stamped petition for adoption (stamp must be on first page)
- Copy of the signed and notarized court report for the adoption proceedings (notarization required)
- Copy of the adoption decree signed by the judge (signature required)

Preparation for Adult Living (PAL) Service Payments

4Kids pays Network Providers for PAL. The fees for these services are included in the Network Provider services agreement Exhibit C. All required documents for payments and confirmation of service delivery are submitted in the TPG.

Minimum Pass-Through Requirements

4Kids monitors its Child Placing Agency Network Providers annually for compliance with the minimum passthrough rate. 4Kids will select a sample of placements to be reviewed and Network Provider must provide documentation for payment calculations along with proof of payment.

PAYMENT DISPUTE RESOLUTION

Network Providers should reconcile payments from 4Kids to the Network Provider's records. If any discrepancies are noted, the Network Provider will need to initiate the following dispute resolution process within 30 days of receiving payment. Initial payment disputes will be researched by 4Kids within 30 days of written notice of the discrepancy. Network Providers may be asked to provide additional written documentation. Payment will not be issued for verbally authorized services. Payment decisions from the initial payment dispute will be documented in the Network Provider portal (CoBRIS) and the dispute closed or appealed for reconsideration at the Network Provider's request within 10 days. All reconsiderations will be approved by exception or denied by 4Kids' authorized staff within 10 days of the request. Final resolution resulting from the discrepancy reconciliation process will be documented in the Network Provider portal (CoBRIS). Adjustments will be made in the next regular payment cycle with any recoupments deducted from any balance due.

RETURN OF FUNDS

Overpayments from 4Kids to Network Provider that are detected by 4Kids will be automatically offset and deducted in subsequent payments to Network Provider. Payment reports will include any adjustments and offset details. In the event an overpayment is not fully collected within 30 days, and at the discretion of 4Kids, interest may be charged at then-current rates on all outstanding balances. If Network Provider or an independent auditor or agent of Network Provider discovers an overpayment has been made by 4Kids to Network Provider, Network Provider shall notify 4Kids and repay the overpayment immediately, in accordance with the Uniform Terms & Conditions, within ten (10) days of discovery, without prior demand from 4Kids. Failure to remit overpayments shall be a material breach of the Network Provider services agreement. Absent prompt repayment of an overpayment known to or discovered by Network Provider, 4Kids may unilaterally deduct overpayments, plus interest, made to Network Provider from monies owed to Network Provider.

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In compliance with the Prompt Payment Act of the Texas Government Code, 4Kids will pay interest on late payments not issued within 30 days of the end of the service month. This does not include incorrect or missing payments due to critical information, such as authorization, placement, or discharge documentation not furnished by Network Provider.

Monitoring Financial Viability

4Kids may monitor the financial viability of Network Providers when it deems appropriate to do so. Network Provider must provide financial statements, audit reports, risk assessments, or other attestations or certifications upon request via the Network Provider portal (CoBRIS).

APPENDIX A: 4KIDS ORGANIZATIONAL STRUCTURE



APPENDIX B: 4KIDS NETWORK TRAINING PLAN

Topic	Tier 1	Tier 2	Tier 3	Tier 4	Caregivers	Notes
Adverse Childhood Experiences (ACEs)	Upon Hire	Upon Hire	Upon Hire		Pre-Service	
Agency Orientation	Upon Hire	Upon Hire	Upon Hire	Upon Hire	Pre-Service	
Client Rights & Grievances	Upon Hire	Upon Hire	Upon Hire			
Communicable Diseases					Pre-Service	
Compassion Fatigue/Secondary Traumatic Stress	Upon Hire	Upon Hire	Upon Hire		Pre-Service	1 hour
Cultural Competency	Upon Hire	Upon Hire	-		Upon Hire	3 hours
Role in Supporting Reunification	Upon Hire	Upon Hire			Pre-Service	319493
Suicide Prevention, Intervention, and Postvention	Upon Hire	Upon Hire	Upon Hire		Pre-Service	
Texas Provider Gateway: Intro & Use for Data Integrity	Upon Hire	Upon Hire	oponinie		Prevenue	
Transportation & Car Seat Safety	Upon Hire	Upon Hire			Pre-Service	If serving children developmentally or chronologically < Age 9
Abuse Prevention (Adult and Peer)	Pre-Service	Pre-Service	Pre-Service		Pre-Service	is serving conversion beverupmentally or conversion granty vidge 3
Administering Psychotropic Medication (DFPS)			Pre-Service			19 analizabla
	Pre-Service	Pre-Service	-	-	Pre-Service	If applicable
CPR - Pediatric	Pre-Service	Pre-Service	Pre-Service		Pre-Service	Trans 1.2. O berrar
Emergency Behavior Intervention (EBI)	Pre-Service	Pre-Service	Upon Hire		Pre-Service	Tiers 1-3: 8 hours Caregivers: 8 hours for CPA without EBI; 16 hours for CPA with EBI/Treatment/GRO
Emergency Preparedness & Disaster Recovery	Pre-Service	Pre-Service	Pre-Service	Pre-Service	Pre-Service	
First Aid - Pediatric	Pre-Service	Pre-Service	Pre-Service		Pre-Service	
General Pre-Service	Pre-Service	Pre-Service			Pre-Service	8 hours
Human Trafficking	Pre-Service	Pre-Service	Pre-Service		Pre-Service	5 hours
Initial Trauma Informed Care	Pre-Service	Pre-Service	Pre-Service		Pre-Service	6 hours
Medical Consent Training for Caregivers (DFPS)	Pre-Service	Pre-Service	Pre-Service		Pre-Service	
Medication Administration Training	Pre-Service	Pre-Service	Pre-Service		Pre-Service	
Recognizing & Reporting Child Sexual Abuse (DFPS)	Pre-Service	Pre-Service	Pre-Service		Pre-Service	
Reporting Suspected Abuse or Neglect of a Child (DFPS)	Pre-Service	Pre-Service	Pre-Service		Pre-Service	
Safe Sleeping (SIDS, Shaken Baby Syndrome/AHT, and Brain Development)	Pre-Service	Pre-Service			Pre-Service	
Trauma Informed Care (DFPS)	Pre-Service	Pre-Service	Pre-Service		Pre-Service	2 hours
TX Health Steps Training					Pre-Service	5 (1997)
Water Safety	Pre-Service	Pre-Service			Pre-Service	
	Within 90 days of	Within 90 days of	Within 90 days of	Within 90 days of	TTC POTING	
Confidentiality & Cybersecurity	employment	employment	employment	employment		1 hour must be Cybersecurity
Normalcy (DFPS)	Within 90 days of employment	Within 90 days of employment	Within 90 days of employment		Pre-Service	2 hours
Emergency Behavior Intervention (EBI) (Refresher)	Semi-Annually	Semi-Annually	compregnance		Semi-Annually	
	(GRO only)	(GRO only)			(GRO only)	4 hours
Emergency Behavior Intervention (EBI) (Recertification)	Annually (GRO only)	Annually (GRO only)			Annually	4 hours for CPA; 8 hours for Treatment/GRO
Abuse Prevention (Adult and Peer) (Refresher)	Annually	Annually	Annually		Annually	A reaction of the month of the anticity of the
Administering Psychotropic Medication (DFPS) (Refresher)	Annually	Annually	-		Annually	If applicable
Compassion Fatigue/Secondary Traumatic Stress (Refresher)	Annually	Annually	Annually		Annually	1 hour
Confidentiality & Cybersecurity (Refresher)	Annually	Annually	Annually	Annually	Annuary	1 hour must be Cybersecurity
Cultural Competency (Refresher)	Annually	Annually	Annualy	Annualy	Annually	3 hours
						3 11/0/13
Emergency Preparedness & Disaster Recovery (Refresher)	Annually	Annually	Annually	Annually	Annually	3 hours
Human Trafficking (Refresher) Madical Concept Tableion for Conseilurer (DCDS) (Defective)	Annually	Annually	Annually		Annually	3 hours
Medical Consent Training for Caregivers (DFPS) (Refresher)	Annually	Annually	Annually		Annually	4.6
Normalcy (DFPS) (Refresher)	Annually	Annually	Annually		Annually	1 hour
Recognizing & Reporting Child Sexual Abuse (DFPS) (Refresher)	Annually	Annually	Annually		Annually	
Reporting Suspected Abuse or Neglect of a Child (DFPS) (Refresher)	Annually	Annually	Annually		Annually	
Suicide Prevention, Intervention, and Postvention (Refresher)	Annually	Annually	Annually		Annually	

Transportation & Car Seat Safety (Refresher)	Annually	Annually			Annually	If serving children developmentally or chronologically < Age 9
Trauma-Informed Care (DFPS) (Refresher)	Annually	Annually	Annually		Annually	2 hours
Role in Supporting Reunification (Refresher)					Annually	
CPR - Pediatric (Recertification)	Based on	Based on	Based on		Based on	
	certification period	certification period	certification period	•	certification period	
First Aid - Pediatric (Recertification)	Based on	Based on	Based on		Based on	
	certification period	certification period	certification period	•	certification period	



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