



**A R K A N S A S
D E P A R T M E N T O F
HUMAN
SERVICES**

Division of Children & Family Services Internal Procedures

WE CARE. WE ACT. WE CHANGE LIVES.

03/2025

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SECTION 100 - ORGANIZATION AND ADMINISTRATION

Internal Procedure 100: Division Organizational Structure

10/2022

The Division of Children and Family Services (DCFS) Director has management and administrative responsibilities for the Division. The DCFS Director supervises the Assistant Director of Administrative Services, a Program Administrator, and the DCFS Deputy Director who oversees all other DCFS Assistant Directors.

An Assistant Director supervises each of the following sections: Administrative Services, Field Operations, Prevention and Reunification, Infrastructure and Specialized Services, Mental Health and Therapy Services, and Placement Supports and Community Outreach. These sections are described below.

ADMINISTRATIVE SERVICES

Administrative Services oversees the Eligibility Unit which is responsible for the agency's IV-E eligibility determinations and assistance with opening and maintaining all Medicaid services for clients in foster care. Administrative Services also oversees the agency's Comprehensive Child Welfare Information System (CCWIS) -- ARFocus -- development.

FIELD OPERATIONS

Field Operations provides administrative leadership and guidance to DCFS staff throughout all seventy-five (75) Arkansas counties. Counties are grouped into ten (10) service delivery areas, each with an Area Director. The Assistant Director of the Office of Field Operations directly supervises the ten (10) Area Directors and a Program Administrator.

Each Area is comprised of the following counties:

- AREA I: Benton, Carroll, Madison, Washington
- AREA II West: Sebastian
- AREA II East: Crawford, Franklin, Johnson, Logan, Scott, Yell
- AREA III: Clark, Garland, Hot Springs, Howard, Montgomery, Perry, Pike, Polk, Saline
- AREA IV: Columbia, Hempstead, Lafayette, Little River, Miller, Nevada, Ouachita, Sevier, Union
- AREA V: Baxter, Boone, Conway, Faulkner, Marion, Newton, Pope, Searcy, Van Buren
- AREA VI: Pulaski
- AREA VII: Bradley, Calhoun, Cleveland, Dallas, Grant, Jefferson, Lincoln, Lonoke, Prairie
- AREA VIII: Clay, Craighead, Fulton, Greene, Izard, Lawrence, Mississippi, Randolph, Sharp
- AREA IX: Cleburne, Crittenden, Cross, Independence, Jackson, Poinsett, Stone, White, Woodruff
- AREA X: Arkansas, Ashley, Chicot, Desha, Drew, Lee, Monroe, Phillips, St. Francis

Each area further has at least one Program Administrator and Program Coordinator who directly support his or her Area Director in area administration. Each county is generally comprised of at least one supervisor (FSW County Supervisor/FSW Supervisor) as well as Family Service Workers (FSWs), Program Assistants, and other support staff. Each position has a job title that has a set of minimum qualifications established by the Department of Finance and Administration, Office of Personnel Management. Positions may then be further defined based on job functions developed

by a direct supervisor (e.g., FSW functional roles include but are not limited to investigators, caseworkers, resource workers, and adoption specialists; support staff functional roles include but are not limited to program assistants, transitional youth coordinators, health service workers and clerical staff).

PREVENTION AND REUNIFICATION

Prevention and Reunification focuses on support to families in their homes in an effort to prevent initial entry into foster care as well as to re-entry through focus on reunification services and supports. It provides reviews, coaching, and technical assistance to field staff in the following areas.

- **Children's Trust Fund**
The Arkansas Children's Trust Fund within the Prevention and Reunification Unit is responsible for overseeing the DCFS Child Abuse Prevention Program, which focuses on primary prevention services. The Children's Trust Fund oversees several primary prevention initiatives such as All Babies Cry, the DCFS Parent Advisory Council, and the Baby and Me WIC Clinic Project.
- **Child and Adolescent Needs and Strengths (CANS)/Family Advocacy Support Tool (FAST) Assessments**
The Child and Adolescent Needs and Strengths (CANS) is the assessment tool completed with families involved in foster care cases. The Family Advocacy Support Tool (FAST) is the assessment tool completed with families for supportive and protective services cases. The CANS/FAST Unit ensures that these family assessment tools are completed with model fidelity, to include utilizing them as communication tools with the family and other stakeholders. To this end, the CANS/FAST Unit conducts a random sample of quality assurance reviews of CANS and FAST assessments each week and conducts CANS/FAST trainings on an as needed basis. This unit also oversees the distribution of CANS/FAST coupons and monitors CANS/FAST certifications.
- **Citizen Review Panels**
Citizen Review Panels (CRPs) are federally mandated through the Child Abuse Prevention and Treatment Act (CAPTA). Funding for CRPs is provided through DCFS, but the panels are comprised of citizens within the community who are passionate about improving the lives of children and families in Arkansas and strengthening the child welfare system. There are currently three CRPs in Arkansas that cover the following counties: Garland, Yell, Pope, Johnson, and Logan.
- **Differential Response**
The Differential Response (DR) Program responds to allegations of low-risk child maltreatment. Families that have allegations that are diverted from the traditional investigative pathway to the DR Program are provided with short-term services designed to keep children from entering foster care.
- **Child Protective Services (Investigations)**
The Child Protective Services Unit provides oversight and monitoring of DCFS child maltreatment investigations and staff statewide. Family Service Worker (FSW) Investigators respond to allegations of child abuse and neglect that have been accepted through the Arkansas Child Abuse Hotline. During the investigation, FSW Investigators conduct health and safety assessments of the children and must show a "preponderance of evidence" to substantiate (determined to be true) the allegation(s). This unit also oversees child fatality and near fatality reviews to develop recommendations and actions designed to prevent such occurrences in the future.

- **Team Decision Making**
Team Decision Making (TDM) is a collaborative teaming process with families, their informal and formal supports, and DCFS to come up with a plan to safely keep children in the home. TDM is designed to help build on families' strengths, protective factors, and community supports to keep children safely in the home when immediate safety may be mitigated.
- **In-Home Services**
The In-Home Services Unit provides oversight and programmatic planning for DCFS protective service cases (PS cases) and supportive service cases (SS cases) throughout the State of Arkansas. This unit is responsible for contracts that are community-based and designed to increase the strength and stability of families, to include those families who have recently reunified to prevent re-entry into care. There are several services/programs offered to DCFS clients through the In-Home Unit including counseling, Intensive In-Homes Services, Triple P (in-home parenting), and SafeCare. The main goals of the In-Home Services Unit are to improve the practice of frontline workers, strengthen and expand services throughout the State of Arkansas that allow children to remain safely at home and improve the lives of the families with whom we work, and increase support for families during and after reunification if removal occurred. The In-Home Services Unit is also responsible for monitoring Permanency Safety Consultations.
- **Safety Organized Practice**
The Safety Organized Practice (SOP) Unit oversees the implementation, sustainability, and fidelity to Safety Organized Practice in Arkansas. In addition to managing associated contracts for SOP implementation and training, the SOP Unit also assists with direct training initiatives such as SOP Deep Dives, develops support tools and resources, provides coaching and technical assistance, and is responsible for continuous quality improvement (CQI) efforts related to SOP.

INFRASTRUCTURE AND SPECIALIZED PROGRAMS

Infrastructure and Specialized Programs oversees and provides support to the following units:

- **Policy**
The Policy Unit has the responsibility for developing, revising, promulgating, and distributing division policies, procedures, publications, and forms. Various Federal and State Laws govern DCFS, and this unit is responsible for monitoring, updating and developing regulations to maintain compliance with these laws.
- **Professional Development**
The purpose of the Professional Development Unit is to coordinate and monitor the title IV-E training contracts with the University Partnership and oversee Child Welfare Stipend program. The unit also provides title IV-E fiscal support for DCFS staff attending training events.
- **Planning and Practice Improvement**
The Planning Unit's mission is to engage in comprehensive, broad-based program planning with a goal of improving child welfare services in Arkansas. This unit oversees all federally required plans and reports submitted to the federal Children's Bureau.
- **Transitional Youth Services**
The Transitional Youth Services (TYS) Unit works with teens in foster care ages 14-21 to teach them basic life skills as they transition to adulthood. The program encourages youth to remain in school until graduation from high school and will then assist them with their post-secondary educational needs and training, other programs designed to remove barriers to employment, and/or entry into the workforce. This includes oversight of the Education and

Training Voucher Program, Supervised Independent Living, LifeSet, and the DCFS Driving and Car Insurance Reimbursement Program for youth in foster care.

- Education

The Education Unit advocates for children in the child welfare system to help them overcome barriers to education and ensures compliance with state and federal laws inclusive of Every Student Succeeds Act and Fostering Connections. The Education Unit works closely with field staff and foster parents regarding the identification, implementation, and monitoring of Individual Education Plans (IEPs) and Section 504 Education Plans for children in foster care.

MENTAL HEALTH AND THERAPY SERVICES

The DCFS Mental Health and Therapy Services Unit provides support and consultation to DCFS field staff regarding children with behavioral, emotional, and mental health needs. This unit oversees the agency's Qualified Residential Treatment Programs (QRTS) contracts and includes Clinical Specialists who assist local staff with discharge planning for youth placed in a variety of residential treatment settings. The DCFS Mental Health and Therapy Services Unit does not provide direct mental health services for clients.

PLACEMENT SUPPORT AND COMMUNITY OUTREACH

Placement Support and Community Outreach Programs focuses on ensuring placements are safe and stable, recruiting and retaining resource homes, and supporting all placement providers so that they have the means to provide quality, individualized care and services to the children placed with them. Placement Support and Community Outreach includes:

- Adoptions/Guardianship

DCFS helps by providing a full range of adoption services, from finding families to adopt to keeping a voluntary adoption registry. Services are also available to birth parents who chose to place their newborns for adoption. Legal guardianships supported by a subsidy are also available to qualifying relatives who have been opened as an approved foster home for a relative child for at least six months.

- Foster Care

Foster parent support is a critical role in this unit which is achieved through working with foster parents to address concerns to supporting them in ensuring they have the tools they need to meet the needs of the children placed in their homes. The Foster Care Unit also manages foster home board payments, serves as the agency point of contact for Private License Placement Agencies, and assists in guiding resource staff regarding foster and adoptive home approval questions. This unit also processes foster parent and volunteer travel and maintains responsibility for the RAVE texting program and the online Foster and Adopt Provider Portal.

Interstate Compact for the Placement of Children

The Interstate Compact Placement of Children (ICPC) Unit assist in moving children in need of foster care placement or adoption across state lines. When a child requires foster care or adoptive placement outside the resident state, DCFS shall use the ICPC process.

- Specialized Services

The Specialized Services Unit provides technical assistance to local county offices requiring help in locating and/or finding placements for children with emotional and/or behavioral problems. This unit oversees the state's Emergency Shelter and Therapeutic Foster Care contracts as part of this work in addition to routinely working with acute, sub-acute, and other medical providers. The services are provided through contracts with private providers

or medical providers. This unit also provides support to the local county staff with the Developmental Disabilities Services (DDS) waiver process for children in state custody.

- Centralized Inquiry

Centralized Inquiry processes initial online applications for traditional resource parents as well as the initial paperwork for applicants, to include background checks, before assigning resource applicants to the field for the completion of the resource parent approval process.

Financial and administrative functions related to DCFS are provided to the Division through the shared-services model at the DHS Executive Staff level. There are DHS Chiefs for each of the following areas:

- Finance
- Information Technology (IT)
- Human Resources
- Legal Counsel
- Security and Compliance
- Legislative & Intergovernmental Affairs
- Communications & Community Engagement.

CHILDREN'S REPORTING AND INFORMATION SYSTEM (CHRIS)

The Children's Reporting and Information System (CHRIS), Arkansas's State Automated Child Welfare Information System (SACWIS), is administered by the Office of Systems and Technology (OST) within DHS. CHRIS provides Arkansas with a single, integrated system to help staff and management in providing more effective and efficient operations within the functions of the child welfare system. CHRIS is accessible (desktop and 24-hour remote access) and supports the full scope of services provided by the Division. It serves as a centralized source to store information (e.g., client, legal and service information) and manage workloads. The information system also meets DCFS' needs surrounding federal reporting federal financial participation requirements, including those required for the Adoption and Foster Care Analysis and Reporting System (AFCARS). For data management, OST has moved from individual data warehouses to a consolidated warehouse with a decision support system and is working on dashboard capabilities for all Divisions.

CONTINUOUS QUALITY IMPROVEMENT

To determine the effectiveness of programs in improving outcomes for children and families, the DCFS Director also oversees a two-prong continuous quality improvement endeavor through the Service Quality and Practice Improvement Unit and DCFS Data Management and Analysis Program. Both are operated via contracts.

The Service Quality and Practice Improvement Unit conducts Quality Services Peer Reviews (QSPR). The QSPR is a monitoring tool used to evaluate the quality of the child welfare system in Arkansas. It is modeled after the federal Child and Family Services Review (CFSR) tool and, as such, also focuses on safety, permanency, and well-being outcomes for children and families.

The Data Management and Analysis Program compiles, analyzes, and reviews data of several reports as well as measures the outcomes each area achieves for its service population. Reports include but are not limited to the Compliance Outcome Report and Annual Report Card.

Internal Procedure 101: Response to Secondary Trauma of Staff

10/2022

Secondary Trauma is the emotional duress that results when an individual hears about the first-hand trauma experiences of another. For child welfare staff the essential act of listening to trauma stories may take an emotional toll that compromises professional functioning and diminishes quality of life.

Common symptoms of secondary trauma include:

- Absenteeism
- Anger
- Chronic fatigue
- Detachment
- Emotional exhaustion
- Fearfulness
- Intrusive thoughts
- Poor concentration
- Physical illness
- Sadness
- Second guessing

Supervisors play an important role in recognizing signs of secondary trauma and providing support for their staff.

The Supervisor's role includes:

- Recognizing and identifying when secondary trauma may be impacting job performance of a staff member;
- Having an open discussion with the worker about how they feel about the job, difficulties with which they may be struggling, and how are they coping with their stress;
- Providing support and encouraging staff to take advantage of available options such as Employee Assistance Program (EAP) or therapy services through a local provider using their insurance;
- Asking the worker what types of support the supervisor can provide to them and their co-workers to mitigate the stress; and
- Immediately notifying the Area Director if a major crisis has occurred locally that impacts multiple staff and following-up with affected staff within 24 hours to provide support and ensure emotional needs are being met.

Secondary trauma can occur when an event happens in the field that is difficult for staff to manage. Some examples (this is not an exhaustive list) may be:

- Death of a child in foster care (staff that are most connected to child and have been working with child will be most affected)
- Death of infant/child involved in open investigation or in-home services case
- Multiple deaths in short period of time – could be combination of work and personal related deaths
- Staff observe and/or intervene in a violent attack
- Court experiences/ personal experience or observed stressful experiences
- Death of co-worker

When a traumatic event affects multiple staff the County Supervisor will report the incident to the Area Director who will report to the Assistant Director of Field Operations or designee.

- The Assistant Director of Field Operations or designee will consult with the Assistant Director of Mental Health and Therapy Services.
- The Assistant Director of Mental Health and Therapy Services will reach out to and coordinate with local mental health providers to provide crisis intervention services for the affected staff. The purpose of crisis intervention is to assist staff in coping with trauma that results from a crisis and identify staff who need follow-up support.
- Staff who require additional support following the crisis intervention should be referred to the EAP or other therapy services paid by other insurance, depending on their preference.

Internal Procedure 103: State Vehicle Safety Program for Employees

08/2024

All drivers operating a state vehicle or private vehicle on State Business shall participate in the Arkansas State Vehicle Safety Program (ASVSP). The document is located on DHS Share under DHS policy 1004. As stated in the ASVSP guidelines, State Agencies may impose additional or more stringent requirements than those included in the Arkansas State Vehicle Safety Program.

Anytime an employee receives a traffic violation and/or has an accident that occurs on state business or on personal time, the employee must report to his/her supervisor within 24 hours of occurrence or by the next working day after a weekend or holiday. The ticket will be forwarded to DCFS Personnel Unit. Personnel will send the employee a form to complete. Personnel will run a Driver's License check to access current points. New traffic violation points will be added to current points to determine course of action. If the traffic violation results in the employee needing to take some type of action (example: defensive driving) and/or requires discipline to be administered **AND** the employee is disputing the ticket for the traffic violation, the Area Director will work with personnel to determine next steps until the ticket is officially placed on the employees record or dismissed. If because of the driving record, the employee is unable to perform DCFS driving duties, the driving privileges may be revoked, or employment terminated.

Any action that involves child safety such as driving without proper safety restraints will automatically result in a review by the DCFS Director and can be considered as grounds for termination regardless of the driver's total number of driving violation points.

DCFS will not furnish a driver to transport employees while driving on state business.

If an employee receives 10-13 points on the Traffic Violation Report (TVR)

Driving privileges for the employee will remain suspended pending completion of the required administrative action listed below:

- A legible copy of the ticket issued for any violation will be submitted to DCFS Personnel Unit.
- The employee must participate in a Defensive Driving course at their own expense. The course must be completed within two (2) weeks and may be taken online; however, the course may not be completed during work hours, unless approved. Upon completion, a copy of the signed certificate must be provided to DCFS Personnel Unit.
- The defensive driving certificate will be submitted to personnel and approved by the division Director or designee before resuming driving on state business.
- If in a state vehicle and not transporting:
 - The supervisor will issue a counseling statement stressing the importance of the State Vehicle Safety Program as it relates to the employee's driving privileges. A copy of the counseling statement must be provided to DCFS Personnel Unit.
- If in personal vehicle and not transporting:
 - Discipline is not required; however, a fact finding may be opened, if needed.

If an employee receives 14-17 points on the Traffic Violation Report (TVR)

Driving privileges for the employee will remain suspended pending completion of the required administrative action listed below:

- A legible copy of the ticket issued for any violation will be submitted to DCFS Personnel Unit.

- Authorization to drive on state business shall be suspended for no less than five (5) working days.
- The employee must participate in a Defensive Driving course at their own expense. The course must be completed within two (2) weeks and may be taken online; however, the course may not be completed during work hours, unless approved. Upon completion, a copy of the signed certificate must be provided to DCFS Personnel Unit.
- The defensive driving certificate will be submitted to personnel and approved by the division Director or designee before resuming driving on state business.
- If in a state vehicle and not transporting:
 - The supervisor will consult with HR to start a fact finding with a recommendation resulting in a written warning stressing the importance of the State Vehicle Safety Program as it relates to the employee's driving privileges.
- If in personal vehicle and not transporting:
 - Discipline is not required; however, a fact finding may be opened, if needed.

If an employee receives 18-23 points on the Traffic Violation Report (TVR)

Driving privileges for the employee will remain suspended pending completion of the required administrative action:

- A legible copy of the ticket issued for any violation will be submitted to DCFS Personnel Unit.
- Authorization to drive on state business shall be suspended for no less than ten (10) working days.
- The employee must participate in a Defensive Driving course at their own expense. The course must be completed within two (2) weeks and may be taken online; however, the course may not be completed during work hours, unless approved. Upon completion, a copy of the signed certificate must be provided to DCFS Personnel Unit.
- The defensive driving certificate will be submitted to personnel and approved by the division Director or designee before resuming driving on state business.
- If in a state vehicle and not transporting:
 - The supervisor will consult with HR to start a fact finding with a recommendation resulting in a five (5) day suspension without pay. The supervisor must stress the importance of the State Vehicle Safety Program as it relates to the employee's driving privileges. Note: The five (5) days of suspension will not count towards the ten (10) days of suspended driving privileges listed above.
- If in personal vehicle and not transporting:
 - Discipline is not required; however, a fact finding may be opened, if needed

If an employee receives over 24 points on the Traffic Violation Report (TVR)

Driving privileges for the employee will remain suspended pending completion of the required administrative action:

- A legible copy of the ticket issued for any violation will be submitted to DCFS Personnel Unit.
- The supervisor will consult with HR to start a fact finding with a potential recommendation of termination.
- If termination is not recommended, we must follow all guidelines outlined in the Arkansas State Vehicle Safety program. The document is located on DHS Share.
 - Authorization to drive on state business shall be suspended for no less than twenty (20) working days. **Authorization shall be reinstated only after evaluation and approval by the State Insurance Commissioner.**

- The employee must participate in a Defensive Driving course at their own expense. The course must be completed within two (2) weeks and may be taken online; however, the course may not be completed during work hours, unless approved. Upon completion, a copy of the signed certificate must be provided to DCFS Personnel Unit.
- The defensive driving certificate will be submitted to personnel and approved by the division Director or designee before resuming driving on state business.

DUI

Driving privileges for the employee will remain suspended pending completion of the required administrative action listed below:

- A legible copy of the ticket issued for any violation will be submitted to DCFS Personnel Unit.
- If driving is a requirement for performing job duties, a DWI/DUI whether or not this action occurs while in the performance of job duties, will automatically result in termination without prejudice regardless of the driver's total number of driving violation points.
- The supervisor will consult with HR to start a fact finding with a recommendation resulting in termination.
- If driving is not a requirement for performing job duties
 - The supervisor will consult with HR to start a fact finding with a potential recommendation of termination.
 - If termination is not recommended, we must follow all guidelines outlined in the Arkansas State Vehicle Safety program. The document is located on DHS Share.
 - Authorization to drive on state business shall be suspended for drivers who receive a **TICKET** for Driving While Intoxicated (DWI), Driving Under the Influence (DUI), or any type of Driving Without a License. [Authorization may be reinstated only after evaluation and approval by the State Insurance Commissioner.](#)
 - The employee must participate in a Defensive Driving course at their own expense. The course must be completed within two (2) weeks and may be taken online; however, the course may not be completed during work hours, unless approved. Upon completion, a copy of the signed certificate must be provided to DCFS Personnel Unit.
 - The defensive driving certificate will be submitted to personnel and approved by the division Director or designee before resuming driving on state business.

Expired Driver's License

Driving privileges for the employee will remain suspended pending completion of the required administrative action listed below:

- Employee must obtain a valid driver's license within two (2) business days and cannot drive on state business until the license has been renewed.
- All fees must be paid. Once proof has been provided, the license will need to be re-run to verify through DMV.

Suspended Driver's License

Driving privileges for the employee will remain suspended pending completion of the required administrative action listed below:

- The supervisor will consult with HR to start a fact finding. Discipline will be case by case depending on the reason for the suspended driver's license.

- If termination is not recommended, we must follow all guidelines outlined in the Arkansas State Vehicle Safety program. The document is located on DHS Share
 - Shall not be permitted to drive on State Business for the duration of the suspension or the revocation. Authorization will be reinstated only after evaluation and approval by the Agency Director. Drivers with restricted permits may be authorized to drive on State Business as allowed by the restricted permit and only with the Agency Director approval.
 - The employee must provide proof of satisfied judgment and payment of reinstatement fee.
 - The license must be valid and any fees paid.
 - The employee must participate in a Defensive Driving course at their own expense. The course must be completed within two (2) weeks and may be taken online; however, the course may not be completed during work hours, unless approved. Upon completion, a copy of the signed certificate must be provided to DCFS Personnel Unit.
 - The defensive driving certificate will be submitted to personnel and approved by the division Director or designee before resuming driving on state business.
 - Once proof has been provided, the license will need to be re-run to verify through DMV.

At Fault Accident While Transporting

State Agencies are responsible for reporting all claims and accidents immediately to:

BXS Insurance

Monday through Friday 8:00am - 4:30pm Claims Reporting:

501-664-7705 or 1-800-358-7741

After Hours and Holiday Claims Reporting:

501-664-9252

Driving privileges for the employee will remain suspended pending completion of the required administrative action listed below:

- If the employee receives a ticket for any moving violation or at fault accident with passengers (including DCFS client and/or employees) in a vehicle while performing state business, the supervisor will consult with HR to start a fact finding with a recommendation resulting in a three (3) day suspension without pay. The supervisor must stress the importance of the State Vehicle Safety Program as it relates to the employee's driving privileges.
- The employee must participate in a Defensive Driving course at their own expense. The course must be completed within two (2) weeks and may be taken online; however, the course may not be completed during work hours, unless approved. Upon completion, a copy of the signed certificate must be provided to DCFS Personnel Unit.
- The defensive driving certificate will be submitted to personnel and approved by the division Director or designee before resuming driving on state business.
- Per DHS policy 1087, under Three Levels of Drug Testing to be Used:
 - Reasonable Cause or Suspicion Test: All employees are subject to reasonable cause drug and alcohol screening due to a reasonable cause or suspicious behavior. Any DHS employee involved in an accident while on DHS business that causes property damage, and/or an injury to the employee or others will be tested.
 - Under Reasonable Suspicion Drug or Alcohol Testing Process:

- Reasonable cause to suspect a violation of the rules may be established by any of the following:
 - A workplace accident, property damage, or an accident involving a DHS vehicle.
 - Ticket for Moving Violation While Transporting

Driving privileges for the employee will remain suspended pending completion of the required administrative action listed below:

- If the employee receives a ticket for any moving violation or at fault accident with passengers (including DCFS client and/or employees) in a vehicle while performing state business, the supervisor will consult with HR to start a fact finding with a recommendation resulting in a three (3) day suspension without pay. The supervisor must stress the importance of the State Vehicle Safety Program as it relates to the employee's driving privileges.
- The employee must participate in a Defensive Driving course at their own expense. The course must be completed within two (2) weeks and may be taken online; however, the course may not be completed during work hours, unless approved. Upon completion, a copy of the signed certificate must be provided to DCFS Personnel Unit.
- The defensive driving certificate will be submitted to personnel and approved by the division Director or designee before resuming driving on state business.

Internal Procedure 105: Vehicle and Passenger Safety

01/2013

DCFS staff (paid and volunteer) will operate motor vehicles (state-owned or privately owned used on state business) in a safe manner, observing all traffic laws and making allowances for road and weather conditions. They will also promptly report to their supervisor any accident or traffic violation in which they are involved.

Seat belts will be used in accordance with Arkansas law at all times by drivers and passengers of state vehicles and private vehicles used for state business.

Children who are less than six years old AND who weigh less than 60 pounds will be properly restrained in an approved child passenger safety seat. If a child is at least six years old OR at least 60 pounds in weight, a standard lap/shoulder seat belt will provide sufficient restraint and safety.

Smoking is prohibited in all vehicles and enclosed areas owned, leased or operated by the State of Arkansas, its agencies and authorities. In accordance with A.C.A. 20-27-1903 smoking is prohibited in any motor vehicle in which a child who is under the age of 14 is a passenger. However, as second-hand smoke is detrimental to the health of all children, DCFS staff and volunteers may not smoke in a state vehicle OR in a private vehicle when a child who is in foster care or receiving other services from the Division is present.

Internal Procedure 107: On-Call Standby Duty

11/2023

On-call standby duty is assigned during nights, weekends, holidays, or other situations without regular staff coverage. On-call standby duty may apply to Program Assistants and Family Service Workers (FSWs) (hereinafter referred to as frontline field staff) as well as supervisors. DCFS county leadership will provide employees who are required to be on-call standby with a schedule of the time and date that the employee will be designated as on-call standby duty.

The following requirements apply to employees when designated as on-call standby:

- A. Employees designated as on-call standby staff will be paid 20% of their base, hourly wage during their designated on-call standby time under 1202 Wage Type.
- B. When an employee is designated as on-call standby during a state holiday, the employee will receive holiday pay as well as the 1202 Wage Type for the hours in which he or she is designated as on-call standby.
- C. Unless otherwise advised, the employee is not required while assigned to on-call standby duty to remain at his or her official workstation. However, the employee must remain available by phone or text while offsite and respond to any call or message within fifteen (15) minutes. The on-call standby employee must also have access to state email and the Division's information management system as needed.
 - 1) An employee who fails to respond within fifteen (15) minutes when contacted by phone or text may have his or her on-call standby pay rescinded and is subject to disciplinary action in accordance with DHS Employee Discipline Policy 1084.
 - a) DCFS will take into consideration any failing equipment or other malfunctions when determining disciplinary action.
- D. Staff designated as on-call standby must also return to a designated work site upon notification of the need within the specified response time.
 - 1) A designated work site is defined as any location in which an employee is conducting emergent official business in which face-to-face interaction with clients or stakeholders takes place for fifteen (15) minutes or more.
- E. The employee must remain free of the influence of alcohol or illegal drugs. In addition, the employee should not take any over the counter or prescription drug that adversely affects his or her ability to safely and effectively perform his or her job duties. If an employee has a medical condition and has concerns about complying with this requirement, the employee should consult with the DCFS Human Resources Liaison.
- F. An employee cannot be designated as the on-call standby employee for more than forty-eight (48) hours within any seven (7) day period (this is any rolling, seven (7) day period, not only a standard Sunday through Saturday work week).
 - 1) In the event that extenuating circumstances require an employee to be designated as on-call standby for more than forty-eight (48) hours within a seven (7) day period, the Area Director will contact the Assistant Director of Field Operations or designee.
- G. If the employee has a conflict and is unable to be on-call during his or her assigned time, it is the employee's obligation to pre-arrange for a replacement to cover the employee's on-call standby shift and then request approval from the applicable supervisor or designee of the change.
 - 1) An employee who fails to find a replacement will not be paid for on-call standby duty and is subject to disciplinary action in accordance with DHS Employee Discipline Policy 1084.

- H. DCFS will identify positions and employees who are required or may be required as a condition of employment to be assigned on-call standby duty to work outside of the employee's regular shift.
 - 1) Once DCFS identifies these positions, employee will be notified in writing that the essential functions of his or her job requires the employee to maintain an on-call standby status on either an intermittent or regularly scheduled basis.
 - 2) The employee's position description will also be updated accordingly.
- I. For travel-related reimbursement please see DCFS Internal Procedure 110: Travel Related to Official Business.

107.1 On-Call Standby Requirements Specific to Frontline Field Staff

When a frontline field staff is designated as on-call standby, that employee will be the staff person who carries the on-call phone or has the on-call line forwarded to his or her state-issued phone. Any amount of time spent responding to phone calls, voicemails, texts, emails, or working from a state-issued laptop or through Remote Desktop Control will be paid under the 1202 Wage Type. Frontline field staff will enter assigned 1202 Wage Type hours into EASE.

Frontline field staff designated as on-call standby who must leave his or her residence or other location to respond to emergent official business in which face-to-face interaction with clients or stakeholders takes place for fifteen (15) minutes or more will key ATTN. Such response will be for emergency purposes (as opposed, for example, to catch up on home visits) and require pre-approval from the on-call supervisor.

For each incident in which an employee designated as on-call standby is required to leave his or her residence or other location to respond to emergent official business, ATTN will be entered for a minimum of two (2) hours even if the actual time spent on emergent official business is less than two (2) hours. Travel time to and from the location in which face-to-face interaction with clients and stakeholders takes place will also be keyed as ATTN. The frontline field staff person will inform his or her supervisor when the ATTN duties end during the on-call standby shift.

ATTN will only be keyed when an employee is on emergent official business and in fifteen (15) minute increments. 1202 Wage Type and ATTN time will not be paid for the same time period.

The first forty (40) hours of ATTN time entered within the work week will be paid at the employee's regular rate of pay. Any ATTN hours entered by an employee for more than forty (40) hours in one week (Sunday-Saturday) is considered overtime which will be paid at a rate of time and a half (1 ½). All ATTN hours are documented by the employee in EASE and approved by the employee's supervisor in EASE. Supervisors are responsible for ensuring time entries are correct before approving. Please see DCFS Internal Procedure 108: Overtime and Flex Time for more information.

For frontline field staff serving an on-call standby shift during a state holiday, the employee will key both HLDY for the hours of 08:00-16:00 as well as the 1202 Wage Type for the hours in which he or she is designated as on-call standby during the holiday. If at any point the employee must respond to official business in which face-to-face interaction with clients or stakeholders takes place for fifteen (15) minutes or more during the state holiday, the employee will key ATTN for that response time rather than HLDY. Any time keyed as ATTN on a state holiday (between the hours of 8:00-16:00) will result in the employee banking those same number of hours as HLDY for use at another time.

107.2 On-Call Standby Requirements Specific to Supervisors

A supervisor assigned to on-call standby is expected to be available to and support the FSW who is the designated on-call standby staff. A supervisor will only receive the pay differential under the 1202 Wage Type for the hours in which he or she is designated as on-call standby.

However, if a supervisor designated as on-call standby must leave his or her residence or other location to respond to emergent official business in which face-to-face interaction with clients or stakeholders takes place for fifteen (15) minutes or more, the supervisor must first obtain Area Director or designee approval. If approved, the supervisor will be paid under the 1303 Wage Type for those hours during which face-to-face interaction with clients or stakeholders takes place and associated travel time. The supervisor will also notify the Area Director or designee when the 1303 duties end during the on-call standby shift.

For each incident in which a supervisor designated as on-call standby is approved to leave his or her residence or other location to respond to emergent official business as described above, 1303 Wage Type will be entered for a minimum of two (2) hours even if the actual time spent on official business is less than two (2) hours.

A supervisor serving an on-call standby shift who leaves his or her residence or other location to respond to emergent official business as described above will be paid straight time for the onsite work.

If a supervisor is assigned to serve as on-call standby during a state holiday, that employee will key into EASE both HLDY for the hours of 08:00-16:00 as well as the 1202 Wage Type for the hours in which he or she is designated as on-call standby during the holiday. If a supervisor serving an on-call standby shift during a state holiday must respond to official business in which face-to-face interaction with clients or stakeholders takes place for fifteen (15) minutes or more during the state holiday, the supervisor will key 1303 Wage Type for that response time.

Supervisors will claim both 1202 and 1303 Wage Types by keying time in EASE. The direct supervisor will review and approve the timesheet in EASE.

Scenarios

- A. FSW Sarah is the on-call standby employee for Tuesday evening. FSW Sarah stays at the office from 4:30 p.m.-7:00 p.m. to work a placement crisis that started earlier in the day. While at her home, FSW Sarah responds to a phone call at 9:00 p.m. from a resource parent not related to the previous incident and is on the phone with that resource parent until 9:30 p.m. At 1:00 a.m. FSW Sarah receives a call from local law enforcement that a youth who has been missing has been picked up. The youth ran from the local QRTP provider who has agreed to allow the youth to come back. FSW Sarah picks the youth up from the police station, returns the youth to the QRTP placement provider, and returns home at 3:00 a.m. Time keyed for FSW Sarah for Tuesday afternoon through Wednesday morning will be:

16:30-19:00	ATTN
19:00-1:00	1202 Wage Type
1:00-3:00	ATTN
3:00-8:00	1202 Wage Type

- B. FSW Susie is the designated standby on-call employee on Thursday evening. She receives a call at 6:00 p.m. requiring her to come pick up a sibling group of six. FSW Susie calls the on-call standby Supervisor Beth to ask permission to call one other non-exempt employee – FSW John -- to assist with transportation and locating placement. Supervisor Beth approves and also comes to the office to assist with making sure children are fed and to help locate placement. FSW Susie leaves her home at 6:15 p.m. and calls FSW John from her car on the way to meet the children. FSW John receives the request at 6:15 p.m. and leaves for the office at 6:30 p.m. Supervisor Beth leaves her home for the office at 6:15 p.m. New placement is secured for all siblings by midnight. FSW Susie arrives home at 12:30 a.m. FSW John arrives home at 12:45 a.m. Supervisor Beth arrives home at 1:00 a.m. Time keyed for Thursday evening into Friday morning for these employees will be:

FSW Susie

16:30-18:15 1202 Wage Type

18:15-00:30 ATTN

00:30-8:00 1202 Wage Type

FSW John

18:15-00:45 ATTN

No 1202 Wage Type keyed because he was not the designated on-call standby employee for the county on this evening.

Supervisor Beth

16:30-18:15 1202 Wage Type

18:15-1:00 1303 Wage Type

1:00-8:00 1202 Wage Type

- C. FSW Ben is assigned a Priority I investigation at 3:00 p.m. on Monday. FSW Ben discusses the information in the narrative with his supervisor, Callie. Neither FSW Ben nor Supervisor Callie are designated as on-call standby that evening, but they decide it will be best for FSW Ben to initiate the investigation that afternoon given the information from the hotline. FSW Ben removes the children at 5:00 p.m. on Monday and brings them back to the office. Supervisor Callie supports him in calling identified relatives. An aunt is identified as a possible provisional placement. At 7:15 p.m. they contact FSW Olivia who is the Resource Worker assigned as on-call standby for the area for that evening. FSW

Olivia leaves her home at 7:30 p.m. to travel to the aunt's home to conduct a visual inspection. FSW Olivia arrives back at her home at 10:30 p.m. FSW Ben places the children with the aunt at 10:45 p.m. and arrives at his home at 11:30 p.m. Time keyed for these employees for Monday afternoon will be:

FSW (Investigator) Ben

13:00 (return from lunch)-23:30 ATTN

Supervisor Callie

No 1202 or 1303 Wage Type keyed since Supervisor Callie was not the designated on-call standby supervisor for this evening.

FSW (Resource Worker) Olivia
16:30-19:30 1202 Wage Type
19:30-22:30 ATTN
22:30-8:00 1202 Wage Type

- D. FSW Annie is scheduled as the standby on-call employee from Saturday @ 08:00-Sunday @ 12:00. At 14:00 on Friday, FSW Annie learns that her father has passed away. FSW Annie asks her friend FSW Jane to cover for her, and FSW Jane agrees. When FSW Annie reaches out to her Supervisor Tom to let him know about the change, Supervisor Tom knows that FSW Jane has already served as standby on-call -for 48 hours within this same seven (7) day period (FSW Jane had already served as standby on-call on the preceding Sunday starting at 08:00 through 08:00 Tuesday morning since that preceding Monday was the President's Day holiday), so does not allow FSW Jane to cover but does arrange for FSW Lee to cover instead.

FSW Lucy served as the on-call standby employee on Veteran's Day. Her on-call standby schedule for Veteran's Day was Wednesday from 8:00 a.m.-Thursday 8:00 a.m. Lucy was called out by law enforcement on Veteran's Day to assist with a child welfare issue. She left her home on Wednesday at 3:00 p.m. to travel to the scene and returned home at 6:00 p.m. She received no other calls on Veteran's Day.

On Thursday afternoon at the office, FSW Lucy receives a call about a placement disruption of two siblings on her caseload at 3:00 p.m. FSW Lucy picks up the children and works to find another placement until leaving them at a new resource home at 8:00 p.m. and returning to her home by 8:30 p.m. FSW Lucy is not the standby on-call employee for Thursday evening. FSW Lucy asks permission from her supervisor to flex out the additional four hours from Thursday evening on Friday morning, which is approved.

Finally, FSW Lucy served as the on-call standby employee on Friday from 4:30 p.m.-Saturday @ 8:00 a.m. On Friday night, FSW Lucy receives one call at 7:30 p.m. Friday evening from a placement provider, which lasted 1.5 hours. Time keyed for Wednesday-Friday for FSW Lucy will be:

Wednesday 8:00-15:00	HLDY + 1202 Wage Type
Wednesday 15:00-18:00	ATTN
Wednesday 18:00-Thursday 8:00	1202 Wage Type
Thursday 8:00-12:00 and 12:30-20:30	ATTN
Friday 12:30-16:30	ATTN
Friday 16:30-Saturday 8:00	1202 Wage Type

FSW Lucy will bank 1.0 hours of HLDY time since the last 1.0 hours of the Veteran's Day holiday she had to enter ATTN for being on the scene of an incident at the request of LLE (rather than HLDY).

- E. An employee drives from West Memphis to Little Rock to place a child. After placing the child, the employee conducts personal business in Little Rock. ATTN will not be keyed while on personal business. ATTN will resume when the employees is back en route to West Memphis.

Internal Procedure 108: Overtime and Flex Time

11/2023

The hours of 8:00 a.m.-4:30 p.m. constitute official business hours for the State of Arkansas. However, the nature of child welfare often requires staff to be available as needed after official business hours, including on weekends and holidays. Frontline staff may claim overtime, if necessary, if it is preauthorized by his or her supervisor via the Office of Personnel Management's (OPM) Authorization to Work Overtime form. Supervisors will carefully consider any overtime requests and make decisions that will balance meeting the needs of children and families involved with the child welfare system and ensuring staff safety and well-being.

DCFS supervisors who are assigned their own caseloads as the primary worker in the Division's information management system may also claim up to a maximum of ten (10) overtime hours per pay period as allowed by OPM. Supervisors include staff with the OPM job titles of:

- DHS Program Coordinator
- Family Service Worker Clinical Specialist
- Family Service Worker County Supervisor
- Family Service Worker Supervisor

In order for a DCFS supervisor to claim overtime, the following criteria must be met:

- A. The supervisor is covering a caseload for an FSW who is out on leave for one (1) week or more and that caseload cannot be absorbed by another FSW or FSWs due to office vacancies; or,
- B. The supervisor is assigned as primary for at least five (5) or more cases, referrals, or providers;
- C. For supervisors who carry providers on their caseload that are not resource home providers (e.g., TYS Sponsors, hospitals, etc.) those providers that are not resource homes will not count toward the minimum of five (5) assigned cases, referrals, or providers that qualify a supervisor to claim overtime.

Other exceptional circumstances may be considered on a case-by-case but must receive approval from the Assistant Director of Field Operations or designee before a supervisor claims overtime for any activities outside of those described in items A and B above.

For a supervisor to work overtime, his or her supervisor must also preauthorize the request via the Office of Personnel Management's Authorization to Work Overtime form. The OPM Authorization to Work Overtime form must provide clear justification as to why the overtime is needed and detail specific, casework-related duties that will be completed while working overtime. Once again, supervisors will carefully consider any overtime requests and make decisions that will balance meeting the needs of children and families involved with the child welfare system and ensuring staff safety and well-being. The respective Area Director will have final approval of the OPM Authorization to Work Overtime form for supervisors claiming overtime (to include both unit and county supervisors).

The continued need for supervisors carrying caseloads to claim overtime will be evaluated by both DCFS and OPM prior to the beginning of each new state fiscal year (SFY). Staff will be notified by no later than July 1 of each year as to whether the supervisors who are assigned caseloads may claim overtime for the upcoming SFY.

Both frontline staff and supervisors are encouraged to flex time when appropriate but must ensure sufficient office coverage and no outstanding responsibilities of the staff member who is requesting flex time.

Supervisors are also expected to actively support staff who are on-call or otherwise working outside of official business hours by routinely checking the state-issued phone for texts, calls, and emails, being able to access supervisor inbox and other Division information management system functions and assisting with finding placement.

108.1: Request for Overtime Documentation and Review

11/2023

Staff who are eligible for overtime will:

- A. Complete the Authorization to Work Overtime form and receive approval of said form prior to working overtime.
 - 1) The form will provide summary of the work that is requiring overtime to include applicable case numbers for verification purposes.
- B. Retain a copy of submitted and approved Authorization to Work Overtime forms for his or her own records.
- C. Ensure all time is keyed in military time when entered into EASE and use the ATTN wage type code for overtime hours.
 - 1) This requirement to key time into EASE also applies to supervisors who are carrying caseloads and approved to work overtime.

The supervisor of the staff approved to work overtime will:

- A. Compare the Authorization to Work Overtime form to what is keyed by staff in EASE.
 - 1) It is imperative that supervisors closely review dates and times that are keyed in EASE.

Internal Procedure 109: Remote Work

07/2023

The Division of Children and Family Services (DCFS) recognizes the benefits of a remote work option for its staff as well as the need to balance a remote work privilege with the inherently people-centered work conducted by DCFS. Specific client needs and the overall value of the Division to work collectively and urgently toward safety, permanency, and well-being of the families it serves will always supersede the need for an employee to maintain his or her approved remote work schedule. Employees who are approved for remote work shall produce and complete job assignments at the same level as working in the office during normal business hours.

The purpose of this internal procedure is to establish additional requirements and expectations as it relates to remote work options for DCFS staff. This internal procedure must be read in conjunction with the DHS Remote Work Arrangement Policy.

109.1 Eligibility Requirements

08/2024

To be eligible for a remote work arrangement for DCFS, supervisors must determine that workflow and service will not be negatively impacted. Further, employees must meet all the following criteria, in addition to those laid out in the DHS Remote Work Arrangement Policy:

- Have an established pattern of regular work attendance, including having an established pattern of requesting annual leave in advance;
- Have been in his or her current position for at least one quarter when the remote work request is made;
- Not be on leave restriction or any reduced work schedule; and,
- Have received an overall rating of Solid Performer (3) or above on their last PGCS evaluation.
 - Employees who received an overall PGCS rating of Needs Development (2) may request a formal mid-point evaluation from his or her supervisor to assess if performance within the last six (6) months has sufficiently improved to warrant consideration for a remote work schedule if all other eligibility requirement have been met.
- Completion of Foundations Training for Family Service Workers (FSWs).
 - During weeks in which new FSWs are participating in Concentrations Training, the FSW will forfeit any approved remote work schedule during Concentration Training weeks. The FSW may not be assigned additional remote workdays in subsequent weeks to make up time that the FSW was in training on what would typically be a remote workday.
- Completion of New Program Assistant (PA) Training for PAs.
- Completion of New Supervisor Training for any newly hired Supervisors.

109.2 Available Remote Work Times

07/2023

All standing remote work schedules are pre-selected and pre-approved. In addition, no DCFS employee may work remotely for more than sixteen (16) hours each week. Two (2) continuous hours is the smallest increment that can be requested for a pre-approved remote work schedule on a given

day. If the employee does not need all two (2) hours of an approved remote work increment, they may come into the office at any point during that two (2) hour increment.

Sixteen (16) hours of remote work per week is not guaranteed. Rather, the number of remote work hours approved for each employee will be contingent on specific office and client needs.

When approving remote work schedules, supervisors will ensure sufficient office coverage Monday through Friday from 8:00 a.m.-4:30 p.m.

- Sufficient office coverage is defined as having at least one (1) DCFS employee scheduled to be in the office, with the recognition that employees who are scheduled to be in the office may not physically be in the office for the entirety of 8:00 a.m.-4:30 p.m. workday due to official business such as court, home visits, transports, etc.
- If there is not someone physically in the office due to court or other DCFS commitments such as visiting clients or local law enforcement emergencies, DCFS shall notify the County Administrator of who can be contacted for emergency assistance.
 - PAs and FSWs who are the scheduled in-person office staff will notify their supervisor when these situations occur. That supervisor is the DCFS staff person who will then notify the County Administrator.
 - Supervisors who are the scheduled in-person office staff will notify their respective Area Director when these situations occur, but the supervisor is then the DCFS staff person who will notify the County Administrator.
- Remote work will not negatively impact the workers ability to ensure compliance with monthly client visits and family time for foster care cases.

Each DCFS Assistant Director for Central Office and Area Director, as applicable, will select at least one (1), standing day each week in which his or her entire team is scheduled to be in the office (i.e., no approved remote work on the selected day). The applicable Assistant Director or Area Director has flexibility to determine how this requirement will be implemented for their respective oversight area.

Finally, all remote work schedules must include at least a 30-minute lunch break.

109.3 Remote Work Requirements

07/2023

The vast majority of services provided by DCFS require direct contact with clients and stakeholders in order to be effective. As such, the following requirements apply:

- All home visits and family time will be in-person (i.e., not conducted over a virtual platform). This includes any home visits or supervised family time sessions that must occur while an employee is otherwise scheduled to work remotely. Failure to comply may result in loss of remote work privilege.
- Exceptions to the requirement that all home visits and family time be in person are:
 - There is documentation that a virtual meeting is necessary due to a client being actively diagnosed with COVID-19, the flu, or RSV.
 - The client is incarcerated at a detention or treatment facility that does not permit in-person visits.
 - Other extenuating circumstances approved by the Unit Supervisor.

- Said approval and associated justification for any other extenuating circumstances that warrant a home visit or family time to occur over a virtual platform will be documented by the County Supervisor as an “Other” contact in the Division’s information management system.
 - Failure to provide this documentation for extenuating circumstances that warrant a home visit or family time to occur over a virtual platform may be grounds for disciplinary action.
- DCFS staff facilitating or participating in Team Decision Making meetings will do so in person.
- Family Team Meetings and Transitional Team Meetings are encouraged to be in person when feasible for all involved parties.
- If an employee is approved for a remote work schedule there may be portions of the day that still require the employee to work outside the home or other approved, off-site workstation. Examples include but are not limited to:
 - Initiating an investigation that requires a 24-hour response time or a Differential Response that indicates the need for an expedited response;
 - Making home visits conducive to the family’s and/or provider’s schedule;
 - Facilitating or participating in a Team Decision Making meeting;
 - Conducting an in-home consultation visit (IHC) conducive to the provider’s schedule;
 - Supervising family time as required by court order or as otherwise conducive to the family’s schedule;
 - Testifying or otherwise attending court as required.
 - In situations in which an employee is approved for remote work but is then asked to come into the office or conduct other official business outside of his or her remote workstation, the employee may claim ATTN for the drive time to the office or other official business site.
- Field training for new Family Service Workers (FSWs) will continue to be a primarily in-person activity. As such, field training activities will not take place on any day an FSW is approved for remote work.

Given these requirements, remote workdays will largely be used to enter documentation in the Division’s information management system(s) via VPN, develop and edit court reports, case plans, etc. Supervisors are expected to track work productivity based on entries into the Division’s information management system as well as other communication with the employee throughout the day (phone calls, email, text, etc.).

109.4 Remote Work Administration and Responsibilities

07/2023

Remote work program administration is the responsibility of the DCFS Director/designee or respective Assistant Directors, as applicable, in Central Office and of Area Directors for field staff. These management roles will make approval decisions of remote work schedules based on recommendations from their program administrators, managers, and supervisors, as applicable. Employee supervisors will review and submit requests for remote work, changes to remote work, revocations of remote work to the DCFS Director/designee, appropriate Assistant Director or Area Director, as applicable, for final approval.

Employee supervisors are responsible for making recommendations regarding their employees' participation in a remote work schedule and for ensuring day-to-day compliance with approved work schedules. Before a supervisor approves an electronic remote work request using the online form, the supervisor must request a file check from the DCFS HR Liaison.

For any issues related to serving on-call or working overtime, please refer to DCFS Internal Procedure 107: On-Call Standby Duty and DCFS Internal Procedure 108: Overtime and Flex Time, respectively.

109.5 Enrollment in a Remote Work Schedule

07/2023

All requests to begin a remote work schedule must be approved in writing using the Department of Human Services Remote Work Arrangement Policy Application and Agreement prior to beginning the schedule. The approval will be maintained in the employee's file with the supervisor and a copy maintained by the applicable Assistant Director or Area Director.

109.6 Changes to a Remote Work Schedule

07/2023

Once an employee is approved to participate in the Remote Work Schedule program, changes to the schedule may only be made by submitting a request in writing and receiving approval from the DCFS Director/designee or applicable Assistant Director or Area Director. No more than one change may be made per calendar quarter.

Once a schedule is assigned, weekly and daily schedules cannot be changed to avoid using leave.

109.7 Suspending/Revoking a Remote Work Schedule

07/2023

The employees' supervisor may, if circumstances warrant, recommend suspension and/or revocation of an employee's remote work schedule if it is determined that:

- Demands of the job warrant the traditional schedule to support the mission of the Division. For example, an employee's remote work schedule may be suspended during the time an audit is being conducted to support the auditor's work schedule, a Quality Services Peer Review onsite week, a mandated training, or to ensure office coverage during another employee's planned and approved leave.
- The employee has established a pattern of unacceptable work performance or behavior.
- Valid client or stakeholder complaints are received regarding an employee on a remote work schedule related to untimely responses or missed customer service standards.
- An employee's remote work does not comply with the approved remote work schedule.

Supervisors will maintain documentation on any and all established patterns. Supervisors may recommend, and the DCFS Director, Assistant Director, Area Director, or designee, as applicable, may approve, reinstatement of the FWS, as long as all eligibility criteria are met.

109.8 Remote Workstation, Technology, and Supplies

07/2023

For remote work, employees will have a workspace that is free from distraction. Employees are expected to focus on work during scheduled hours. As such, while working remotely, employees will not be the responsible or primary caregiver of others during the approved work schedule.

In addition, the employee must ensure that all information including verbal conversations and meetings are confidential and not overheard by non-DHS employees. The employee is also responsible for ensuring any paperwork with client personal identifying information (PII) or client private health information (PHI) is kept confidential and not accessible to others who may be in the home or otherwise around the employee's remote workstation.

Using Remote Desktop or VPN will protect an employee's personal information. However, if work is saved to files on a personal computer, including screen shots, the employee's computer could be subject to FOIA inspection and available to have a subpoena issued for its contents.

Similarly, the memory of an employee's personal printer could be subject to FOIA and subpoenas. Employees approved to work remotely will only save documents to the DHS H: or U: drives -- never to a home desktop. In addition, employees are prohibited from forwarding emails to a personal email account.

Further, using a personal phone for Department purposes could result in an employee's call log and voicemails subject to FOIA inspection.

109.9 Travel

07/2023

If an employee scheduled for remote work must travel on official business to ensure child safety or otherwise meet a family's needs, the shortest distance to the destination will be claimed as required by the DHS Administrative Procedures Manual Chapter 304. If the shortest distance is from the official workstation, the official workstation address will be listed in the TRIPS travel claim as the starting point. If the shortest distance is from the employee's residence and the employee departs from his or her residence, then the employee's residential address will be listed as the starting point on the TRIPS travel claim.

For situations in which an employee is only scheduled to work remotely for part of the day and has scheduled home visits or other official business for the remainder of the day, the employee is still required to search for a state car in TRIPS if the shortest distance to those activities is from the employee's official workstation.

EXAMPLE: An employee's official station is in Little Rock, AR and her residence is in Bryant, AR. The employee is working remotely from home per her approved remote work schedule. However, the employee has to testify in court in Hot Springs. In TRIPS, she will claim mileage from Bryant (home residence) to Hot Springs and back to Bryant, because that is the shortest distance. The next week, the same employee is working remotely but is called to pick up child from a disrupted placement in Searcy. For this entry in TRIPS, the employee will claim travel from Little Rock, AR (official station) to Searcy, AR and back to Little Rock only.

Internal Procedure 110: Travel Related to Official Business

07/2022

In-state travel is an inherent part of many Division of Children and Family Services (DCFS) job duties. There are three types of DCFS travel, each of which is paid through a different funding source when staff request travel reimbursement for driving a privately-owned vehicle due to a state car being unavailable:

- Regular Travel (e.g., transporting children and parents to visits, staffings, court, etc.);
- Medicaid Travel (e.g., transporting children to Medicaid-covered services such as PACE evaluations and well-child check-ups);
- Training Travel (e.g., mandated staff training or continuing education opportunities staff elect to attend with the appropriate supervisory approval).

DCFS staff must drive state vehicles, as available, when performing job duties. Staff are required to carpool when traveling to the same destination, as appropriate. All state car requests must be submitted through the Department of Human Services (DHS) Travel Reservation and Integrated Payment System (TRIPS) fleet management tab.

When a state car is not available, DCFS staff members are eligible for reimbursement of mileage when operating private vehicles for state business and are required to submit reimbursement requests according to DCFS Internal Procedure 110: Travel Related to Official Business and DHS Administrative Procedures Manual, Chapter 304. Mileage is automatically calculated based on the exact addresses entered into the TRIPS online application. If staff members carpool, only the staff member driving his or her personal vehicle is eligible to claim travel for carpool mileage. DCFS staff and volunteers utilizing privately-owned vehicles to travel on official state business are responsible for the maintenance, operational costs, accidents, insurance, fines, towing charge, etc. associated with use of the privately owned vehicle.

Travel reimbursement requests must be made in accordance with DHS Administrative Procedures Manual, Chapter 304: Travel Reimbursement. DCFS staff and volunteers in violation of DCFS Internal Procedure 105: Vehicle and Passenger Safety are subject to disciplinary action, to include ineligibility for travel reimbursement, as appropriate. Violation of DCFS Internal Procedure 110: Travel Related to Official Business may result in administrative review in accordance with DHS Policy 1084. Further instructions on completing travel can be obtained from the DHS TRIPS Training videos located [here](#).

Travel reimbursement must be completed through the online TRIPS for the appropriate travel type: regular, Medicaid, or training. Paper travel reimbursement requests will not be accepted unless TRIPS is unavailable.

Documentation of travel must be completed as a contact in the Division's information management system prior to the supervisor approving travel reimbursement requests. Staff are not eligible for overtime to complete travel reimbursement request. When approving travel reimbursement requests, supervisors will review and compare contacts in the Division's information management system for accuracy.

See DHS Administrative Procedures Manual, Chapter 304 for requirements regarding the starting point from which mileage reimbursement must be claimed as well as requirements regarding claiming:

- Daily mileage in excess of 500 miles; and,
- Travel completed outside of normal business hours (holidays and/or weekends).

Incidental costs (as defined in the DHS Administrative Procedures Manual, Chapter 304) claimed must be supported with receipts submitted to the travel supervisor or designee by uploading them in the associated TRIPS travel reimbursement request. Receipts for meals purchased out-of-pocket (not by p-card) for wards of the state must have the client's identification number written at the top of the receipt.

Travel reimbursement requests must be submitted to the appropriate travel supervisor or designee within thirty (30) calendar days of the initial travel date. Employees who do not submit travel reimbursement requests within thirty (30) calendar days of the initial travel date may be subject to disciplinary action. In addition, travel reimbursement requests submitted more than thirty (30) days after the initial travel date will be assigned to the appropriate Area Director for approval.

Pre-approval for out-of-state travel must be requested through the DHS TRIPS online application. The employee provides justification for the travel and uploads support documents such as a letter of invitation or conference agenda. The pre-approval in TRIPS must be part of the travelers request for travel reimbursement. In-state travel necessitating overnight stays require prior authorization from the traveler's Area Director.

The Division may cover lodging expenses for staff if the staff member must stay in the official business destination for more than one (1) day and if that official business destination is fifty (50) miles or more from the employee's home and official workstation. Employees may secure lodging the night before the official business assignment if the associated official business destination is one hundred (100) miles or more from the employee's home and official workstation.

For lodging expenses that are coupled with out-of-pocket expenses for which the traveler is requesting reimbursement, the hotel receipt/folio containing the full legal name of the traveler according to the AASIS vendor record for said traveler must be submitted via TRIPS. Hotel folios for all overnight stays (out-of-state and within Arkansas) must be signed by the traveler (using the traveler's full legal name as it appears on the hotel folio, which must match the traveler's full legal name as reflected in AASIS).

For lodging paid through the agency's Business Travel Account (BTA) credit card, the folio must:

- Reflect a "0" balance;
- Be returned to DCFS Central Office with the traveler's original, legible signature that matches the name printed at the top of the folio (which in turn must match the full legal name of the traveler according to the AASIS vendor record for said traveler).

For lodging that will be paid through an established purchase order with the agency (e.g., hotel stays associated with New Worker Training), the folio may reflect a balance greater than "0" and does not have to be submitted to DCFS Central Office. However, the signed folio must still be uploaded with other documentation in TRIPS.

Travelers who pay for out-of-pocket payments expenses during the same travel episode in which lodging is direct billed to the agency or paid via established purchase orders and wish to request

reimbursement for the out-of-pocket expenses related to travel must submit the reimbursement requests via TRIPS.

Travel supervisors are responsible for verifying state car availability, authenticating the documented allowable expenses as official state business, being fiscally responsible by requiring carpooling, ensuring the expenses claimed are in compliance with established guidelines, and also ensuring that all travel reimbursements and required supporting documentation are completed accurately prior to approving travel reimbursement requests. Travel supervisors must be aware that they electronically validate the Certification of Unavailability of a State Vehicle for all online travel reimbursement requests when they approve an online travel reimbursement request through TRIPS.

Refer to DHS Administrative Procedures Manual, Chapter 304: Travel Reimbursement for further information on allowable travel related reimbursements and requirements.

110.1 Reimbursement for Regular Travel Expenses Details

07/2022

DCFS staff will:

- A. Request a state vehicle through the TRIPS fleet management online application or arrange to carpool with another employee who has already secured a state vehicle via TRIPS.
 - 1) If it was determined that the use of the state vehicle or carpooling was not practical, a private vehicle may be used but TRIPS must have record that a request for a state vehicle was made or a documented and approved emergency exception must be noted in the TRIPS travel reimbursement request.
- B. Complete all contacts in the Division's information management system prior to submitting a request for travel reimbursement for date of travel.
- C. Enter the applicable case ID number for the travel episode in the "Notes" section of the online travel reimbursement request.
- D. Complete and submit the online travel reimbursement request to travel supervisor or designee within thirty (30) calendar days of travel occurring.
 - 1) Any travel reimbursement request submitted thirty (30) days after the initial travel date in the travel episode must be submitted or reassigned to the appropriate Area Director for review and approval.
- E. Submit all travel reimbursement requests in accordance with DHS Administrative Procedures Manual, Chapter 304: Travel Reimbursement including, but not limited to:
 - 1) Mileage, if applicable.
 - 2) Meals, if applicable.
 - a) If meals for wards of the state were purchased out-of-pocket by the employee rather than via a p-card, then the meal expense for the ward of the state will be captured as an "incidental" expense in TRIPS and require the original receipt with client's identification number written at the top of the receipt.
 - b) Meals for staff are according to actual reimbursement and are not to exceed the allowable per diem. These reimbursement requests are captured under meal expenses in TRIPS and itemized receipts must be uploaded along with the meal reimbursement request.
 - c) If a receipt is not itemized, the traveler will not be reimbursed for that meal expense.

- d) Traveler may only be reimbursed for his or her meals.
- e) Itemized receipts that include alcoholic beverages will not be reimbursed.
- f) If an employee chooses to purchase alcohol after business hours as part of his or her meal, the alcoholic beverage must be placed on a separate ticket so that any itemized receipt submitted for reimbursement does not include alcoholic beverages.
- 3) Hotel stays, if applicable (via agency Business Travel Account credit card, purchase order, or reimbursed).
- 4) Incidentals, if applicable.

The Travel Supervisor or designee will:

- A. Verify no state vehicle or carpooling option was available for use or that use of the state vehicle or carpooling was not practical prior to authorizing use of a personal vehicle for state business.
- B. Verify each travel date claimed is legitimate state business by ensuring contacts in the Division's information management system have been entered for each travel episode and approving each contact prior to approving travel reimbursement requests.
- C. Verify that the applicable case ID number has been entered in the "Notes" section for each travel episode and that necessary documentation has been attached to the travel reimbursement request per DHS Administrative Manual, Chapter 304: Travel Reimbursement.
- D. Approve travel within fourteen (14) calendar days of receipt.
- E. Verify via review of receipts that:
 - 1) Actual expenses are claimed;
 - 2) Receipts are itemized;
 - 3) Receipts are only for meals for the employee (i.e., verify number of guests on the receipt).
 - 4) No alcoholic beverages are listed on the itemized receipt submitted for reimbursement purposes; and,
 - 5) Expenses do not exceed allowable per diem.

110.2 Reimbursement for Medicaid Travel Expenses Details

07/2022

DCFS staff will:

- A. Request a state vehicle through the TRIPS fleet management online application or arrange to carpool with another employee who has already secured a state vehicle via TRIPS.
 - 1) If it was determined that the use of the state vehicle or carpooling was not practical, a private vehicle may be used but TRIPS must have record that a request for a state vehicle was made or a documented and approved emergency exception.
- B. Select the radio button for Medicaid travel on the travel reimbursement request and enter child's Medicaid number in the appropriate field.
- C. Complete all contacts in the Division's information management system prior to submitting a request for travel reimbursement for date of travel.
- D. Complete and submit travel reimbursement request to travel supervisor or designee within thirty (30) calendar days of travel occurring.

- 1) Any travel reimbursement request submitted thirty (30) days after the initial travel date in the travel episode must be submitted or reassigned to the appropriate Area Director for review and approval.
- E. Submit all travel reimbursement requests in accordance with DHS Administrative Procedures Manual, Chapter 304: Travel Reimbursement including, but not limited to:
- F. Ensure each travel date and episode claimed is loaded miles (Medicaid eligible client is in the vehicle) and upload completed CFS-352: Episodic (or other documentation from the medical provider's office that provides verification that the appointment took place) to the travel reimbursement request for each medical, dental, optometry, or mental health appointment.

The Travel Supervisor or designee will:

- A. Verify Medicaid travel is the appropriate travel type selection.
- B. Verify each travel date claimed is legitimate state business by ensuring contacts have been entered for each travel episode and approving each contact in the Division's information management system prior to approving the travel reimbursement request.
- C. Verify necessary documentation has been attached to the travel reimbursement request per DHS Administrative Manual, Chapter 304: Travel Reimbursement.
- D. Verify each travel date and episode claimed is loaded miles (Medicaid eligible client is in the vehicle) and completed CFS-352: Episodic for each medical, dental, optometry, or mental health appointment is uploaded for each travel episode.
- E. Approve travel within fourteen (14) calendar days of receipt.

110.3 Reimbursement for Training Travel Expenses Details

07/2023

DCFS staff will:

- A. Request a state vehicle through the TRIPS fleet management online application or arrange to carpool with another employee who has already secured a state vehicle via TRIPS.
 - 1) If it was determined that the use of the state vehicle or carpooling was not practical, a private vehicle may be used but TRIPS must have record that a request for a state vehicle was made or a documented and approved emergency exception.
- B. Select "General Business" as the reason for travel episode, unless directed otherwise by DCFS Training Program Coordinator or designee.
- C. Complete and submit the online travel reimbursement request to travel supervisor or designee within thirty (30) calendar days of travel occurring.
 - 1) Any travel reimbursement request submitted thirty (30) days after the initial travel date in the travel episode must be submitted or reassigned to the appropriate Area Director for review and approval.
- D. Submit all travel reimbursement requests in accordance with DHS Administrative Procedures Manual, Chapter 304: Travel Reimbursement including, but not limited to:
 - 1) Mileage, if applicable.
 - 2) Expenses for meals, if applicable
 - a) Meals for staff are according to actual reimbursement and are not to exceed the allowable per diem. These reimbursement requests are captured under meal expenses in TRIPS and itemized receipts must be uploaded along with the meal reimbursement request.
 - b) If a receipt is not itemized, the traveler will not be reimbursed for that particular meal expense.

- c) Traveler may only be reimbursed for his or her meals.
- d) Itemized receipts that include alcoholic beverages will not be reimbursed. If an employee chooses to purchase alcohol after business hours as part of his or her meal, the alcoholic beverage must be placed on a separate ticket so that any itemized receipt submitted for reimbursement does not include alcoholic beverages.
- 3) Hotel stays, if applicable (via agency Business Travel Account credit card, purchase order, or reimbursed).
- 4) Incidentals, if applicable.
- 5) Upload training or conference certificate for each day of training or conference.

The Training Travel Supervisor or designee will:

- A. Verify each travel date claimed is legitimate state business by ensuring prior authorization of training or conference occurred and daily agenda is attached.
- B. Verify necessary documentation has been attached to the online travel reimbursement request per DHS Administrative Manual, Chapter 304: Travel Reimbursement.
- C. Approve travel within fourteen (14) calendar days of receipt.
- D. Verify via review of receipts that:
 - 1) Actual expenses are claimed
 - 2) Receipts are itemized
 - 3) Receipts are only for meals for the employee (i.e., verify number of guests on the receipt)
 - 4) No alcoholic beverages are listed on the itemized receipt submitted for reimbursement purposes; and,
 - 5) Expenses do not exceed allowable per diem.

Internal Procedure 115: Gas Cards for Clients

07/2023

The Division recognizes the gas cards can be a critical support to families struggling with transportation issues, particularly as it relates to them attending court and other case plan-related services.

To access gas cards for clients, the FSW will:

- A. Complete the CFS-496: Assessment for Income Assistance and DHS-1914: Requisition to purchase a gas card for clients.
- B. Send the above paperwork to FSW Supervisor for approval.
- C. If the gas card request is approved by all levels of chain of command described below, purchase a gas card or designate another colleague to purchase the gas card.
 - 1) This is a card specific to a gas station: e.g., Shell, Exxon, Valero, Circle K, Casey's.
 - 2) Do not purchase a Visa, Mastercard, Wal-Mart, or other type of gift card.
- D. Secure any gas cards not immediately distributed to clients in a locked location in the county office.

The purchaser of the gas card will:

- A. Ensure a CFS-035: Gas Card Chain of Custody form is completed as required by the Arkansas Office of State Procurement.
 - 1) A separate chain of custody form will be completed for each card purchased.
- B. Make a copy of the gas card (front and back) to send with the CFS-035: Gas Card Chain of Custody form and p-card paperwork to the DCFS Finance Unit for audit purposes.
- C. Document in a contact in the Division's information management system when the gas card is given to the client.
- D. Submit all p-card paperwork including the CFS-035: Gas Card Chain of Custody form to the area Financial Coordinator for processing within two (2) business days of purchase.
- E. Secure any gas cards not immediately distributed to clients in a locked location in the county office.

The FSW Supervisor or designee will:

- A. Review and approve or deny, as appropriate, the gas card request.
- B. If approved, send the request to the Area Director or designee.
- C. If denied, inform the FSW of the denial and reasons for denial.

The Area Director or designee will:

- A. Review and approve or deny, as appropriate, the gas card request.
- B. If approved, send the request to the Area Financial Coordinator.
- C. If denied, inform the FSW Supervisor of the denial and reasons for denial.

The Area Financial Coordinator will:

- A. Submit the request to the Central Office Finance Unit for approval to purchase.
- B. Process all related p-card paperwork related to the gas card purchase upon receipt.

Internal Procedure 120: Graduated Caseload

10/2022

To reasonably acclimate new staff to the role of a Family Service Worker (FSW), the Division of Children and Family Services (DCFS) requires that all new FSWs follow the Division's graduated caseload requirements outlined below. Beyond these basic requirements, each Area Director may establish additional parameters specific to his or her area needs as approved by the Assistant Director of Field Operations or designee. The state and area-level graduated case load requirements are intended to promote a safe learning culture aimed at retention while also allowing supervisory discretion based on a particular FSW's knowledge, skills, and abilities.

Area Directors and their supervisors will keep a copy of their approved graduated caseload criteria and distribute to their new staff as they are hired. The area-specific graduated caseload procedures will also be shared with applicable classroom and field training staff for the area.

Milestone	Max Number of Cases (Gradually Assigned)
Week 2 on the job	Up to 10 Secondary may be assigned. <ul style="list-style-type: none">• Secondary assignment to cases while under graduated caseload are generally expected to become the new worker's primary case over time.• Staff under the graduated caseload are not to be assigned secondary to a case and then required to work the case as the primary worker with no support from seasoned staff.
Foundations	Up to three (3) primary cases may be assigned. <ul style="list-style-type: none">• There must be sufficient supervisory and/or FSW colleague support to assist the FSW who is still in training.• Primary cases must be assigned during different weeks to ensure incremental assignment and adjustment.• Any secondary case assignments will remain at a maximum of 10 throughout Foundations.• No new case assignments will be made when the FSW is actively in training.

Upon completion of Foundations Training, the supervisor will follow his or her Area Director's graduated caseload procedures. Such procedures and corresponding assignments under those procedures will consider that the FSW will still have three (3) full weeks of training remaining (i.e.,

Concentrations) during which time the FSW will not be able to conduct any work on cases during training days nor be expected to conduct work on cases after the training class ends each day.

When determining case assignments within the parameters above, the following requirements and considerations will also be implemented:

- Cases will be gradually assigned in small increments rather than assigned all at once to reach the maximum allowed (e.g., assign one or two cases at a time every few weeks).
- No case assignments will be made when the FSW is actively in classroom training.
- All FSWs must have at least one foster care case (secondary or primary) assigned until reaching one (1) year of employment. This requirement applies to all FSWs including Differential Response workers, Investigators, and Protective Services workers to allow them to receive field training.
- FSWs will not go on-call by themselves until completing the Investigation Concentration and shadowing an experienced staff person while on-call. However, staff participating in NST will not be on-call (even for shadowing purposes) on evenings preceding days they are actively attending class. This includes resource staff even though resource and adoption staff are not otherwise required to follow graduated caseload procedures.
- In addition to reaching each training milestone, new staff must have shadowed an experienced worker during the same activities prior to them doing so independently.
- Supervisors will assess a new FSW's capability to handle additional cases rather than assign based on the crisis of the day.
 - Part of the supervisor's assessment of the new worker will occur during weekly face-to-face case consultation.
 - The supervisor's assessment will consider feedback from the field trainer and classroom trainer.
- When assigning a mix of primary and secondary after the FSW completes Foundations, maintain a ratio of no more than 50% primary cases until the worker has completed all three Concentrations.

Re-hires who are exempted from New Staff Training (NST) and FSWs who work as Resource Workers or Adoption Specialists do not fall under the graduated caseload requirements. Waivers to the graduated caseload for any other FSWs who are not re-hires exempted from NST, Resource Workers, or Adoption Specialists may be granted based on previous child welfare experience or other extraordinary circumstances if approved by the Assistant Director of Field Operations or designee.

Internal Procedure 121: Career Ladder for Family Service Workers

09/2023

The Division of Children and Family Services (DCFS) offers a career ladder for Family Service Workers (FSWs) in an effort to ensure retention of knowledgeable and experienced frontline case management staff. There are three potential steps within the FSW career ladder as described below.

121.1 Entry Level

All FSWs will begin employment with DCFS at the designated entry rate for a GS06 position as established by Arkansas Office of Personnel Management with the following exceptions:

- A. The individual has been promoted or transferred from another position within Arkansas state government;
- B. The individual is being promoted or transferred from within DCFS; or,
- C. The individual is a rehire returning at exit rate salary.

121.2 Training Graduate Level

Once a full-time FSW has completed all New Staff Training (NST) Foundations and Concentrations Units, his or her training records and casework to date will be reviewed by the DCFS Assistant Director of Field Operations or designee and the DCFS Director or designee to determine successful completion of NST. These records will be reviewed in the month that follows the final date of NST completion. Once successful completion of NST has been determined, the full-time FSW will receive a 7% pay increase, not to exceed the established midpoint amount, to take effect within approximately thirty (30) calendar days of the determination.

The exception to a full-time FSW moving into the Training Graduate level of the FSW Career Ladder upon completion of NST is if the full-time FSW is under:

- A. A fact finding;
- B. Probation because of a disciplinary action; or,
- C. A program improvement plan (PIP) related to a disciplinary action.

If a fact finding does not result in any disciplinary action, the full-time FSW may request consideration for entry into the Training Graduate level of the FSW Career Ladder once the fact finding is closed. The full-time FSW may request this consideration by emailing FSWpromotionrequest@dhs.arkansas.gov at the appropriate time with his or her supervisor carbon copied (cc'd) to that email.

If there is disciplinary action taken as a result of a fact finding, the full-time FSW is eligible to request consideration for entry into the Training Graduate level of the FSW Career Ladder six (6) months (if there are no subsequent disciplinary actions) from:

- A. The date any disciplinary action was issued as a result of the fact finding; or,
- B. If there was a probation period or PIP associated with the disciplinary action, six (6) months from the end date of the probation period or PIP.

It is the responsibility of the full-time FSW to request such consideration by emailing FSWpromotionrequest@dhs.arkansas.gov at the appropriate time with his or her supervisor carbon copied (cc'd) to that email.

121.3 Promotion to FSW Specialist

After serving in a full-time FSW position for three (3) years, a full-time FSW is eligible to request consideration for promotion to a full-time FSW Specialist (GS07) position. The three (3) years of service does not have to be consecutive to make the request for consideration, but non-consecutive service requests will be reviewed on a case-by-case basis.

The consideration request must be submitted via the CFS-021: DCFS Consideration Request for Promotion to FSW Specialist. Approval of these requests is not guaranteed. The full-time FSW requesting consideration must provide examples that concretely demonstrate how he or she has achieved proficiency as an FSW and gone beyond standard job duties to serve clients and support colleagues. This request must be supported by the full-time FSW's Area Director as well as by a recommendation from a legal stakeholder, resource parent, or community partner who can speak to the employee's exceptional work as an FSW. Once the CFS-021 is complete, the full-time FSW's Area Director will submit the form and accompanying recommendation letter to the Assistant Director of Field Operations or designee for review.

A full-time FSW may not request consideration for promotion to a full-time FSW Specialist if he or she is under:

- A. A fact finding;
- B. Probation as a result of a disciplinary action; or,
- C. A program improvement plan (PIP) related to a disciplinary action.

If a fact finding does not result in any disciplinary action, the full-time FSW may request consideration for promotion to a full-time FSW Specialist, assuming all other eligibility criteria have been satisfied, via the CFS-021: DCFS Consideration Request for Promotion to FSW Specialist once the fact finding is closed.

If there is disciplinary action taken because of a fact finding, there have been no other, subsequent disciplinary actions, and assuming all other eligibility criteria have been met, the full-time FSW is eligible to request consideration for promotion to a full-time FSW Specialist via the CFS-021 six (6) months from:

- A. The date any disciplinary action was issued because of the fact finding; or,
- B. If there was a probation period or PIP associated with the disciplinary action, six (6) months from the end date of the probation period or PIP.

Upon promotion to a full-time FSW Specialist, the employee will receive a corresponding 10% pay increase. Those promoted to a full-time FSW Specialist position will also be expected to take on more intensive assignments and additional duties to include, but not limited to, assignment to more complicated cases, serving in a leadership role as a mentor for DCFS staff, serving on workgroups at the local or state level, serving as a champion in agency implementation and training efforts, and participating as a peer reviewer in Quality Services Peer Reviews (QSPRs) or other continuous quality improvement (CQI) processes.

Internal Procedure 122: Employee Internships

01/2024

One of the guiding principles of the Arkansas “At One Table” Practice model is the pursuit of ongoing learning and professional development. To that end, DCFS supports employees pursuing degrees and certifications to further their professional development. However, the Division must also balance the pursuit of learning with successfully meeting client needs and ensuring comparable workloads for employees.

As such, DCFS staff may complete internships to satisfy degree requirements provided that internship hours completed during the standard work week are limited to no more than eight (8) hours per week. This may be distributed over several days or taken as one (1) full day out of the office for the internship. The internship schedule must be approved by the employee’s supervisor and area director before beginning the internship. The schedule must be accompanied by a clear plan outlining how the supervisor will address:

- How/when each employee will make up the hours dedicated to their internship to ensure that the employee still completes forty (40) hours of DCFS work each week
- How court will be handled if the employee has to testify during what would normally be his or her internship hours
- How on-call will be handled when the employee is completing internship hours after-hours or on the weekends (i.e., if the employee is typically a staff member who serves on the on-call rotation, the employee will have to work with his or her internship placement as it relates to on-call; employees are not exempt from on-call due to an internship).

Staff approved for a flexible schedule to complete an internship are not eligible for remote work.

Any internship must be completed with an agency or organization outside of DCFS (e.g., no internships where an FSW functionally serves as an investigator but then completes his/her internship hours within the resource unit are permitted).

When requesting approval to flex work hours to complete an internship, staff must take into consideration that the limit of eight (8) hours per week will not change even though the employee’s degree program requirements for internship hours may increase.

Internal Procedure 125: Teamwork Among Staff for Service Quality

10/2020

OVERVIEW

The Division of Children and Family Services (DCFS) will ensure that families have continuity of services throughout their involvement with DCFS regardless of the county of residence of the family or their children, or other factors that may result in the family working with multiple DCFS staff. When a case involves Division staff from multiple counties, those staff members will collaborate to ensure coordination of timely services, regular assessment of visitation schedules for parents, children, and siblings, and a smooth transfer of a case and associated services if a family relocates to another county or a child in foster care is placed in another county.

TEAMING DURING DIFFERENTIAL RESPONSE

DCFS DR staff are expected to work as a team to ensure all DRs are initiated and completed timely, including when a subject of the report resides or is temporarily located outside the initiating county. DR staff in both counties will prioritize assessments to ensure that established DR timeframes are met.

Teaming across counties during a DR may also be required when one DR Specialist or other FSW assisting with the DR has been actively working a DR or related tasks for an extended period of time and other staff are needed to assist.

TEAMING DURING INVESTIGATIONS

DCFS investigative staff are expected to work as a team to ensure all investigations are initiated and completed timely, including when an alleged victim or alleged offender resides or is temporarily located outside the initiating county. Investigations staff in both counties will prioritize interviews to ensure that established investigative timeframes are met.

Teaming across counties during an investigation may also be required when one investigator or other on-call staff member have been actively working an investigation or related tasks for an extended period of time and other staff are needed to assist with placement, other needed services, or initiating other investigations assigned from the Child Abuse Hotline.

TEAMING DURING AN OPEN CASE

For open cases, staff in the county of origin are responsible for ensuring that services are coordinated for all family members and reflected in the family's assessment, case plan, and associated court reports. Staff in the county of current residence of the family members (to include when parents and children reside in different counties) take lead on service delivery (e.g., monthly visits, transportation, purchases, etc.). However, regular communication between county of origin and resident county staff is critical for the FSW in the county of origin to update family assessments, case plans, and prepare court reports. Likewise, such communication is vital for the resident FSW to provide quality services and supports. Regular communication is defined at a minimum to include:
A thorough review of case contacts that are entered each week;

A monthly phone conversation between the FSWs in the county of origin and resident county;

Other telephone calls, texts, and emails to occur as needed to ensure quality and timely service coordination and delivery.

In addition, while the resident county FSW will typically conduct the majority of monthly home visits to the children on their caseload, the FSW in the county of origin is encouraged to make at least one

face-to-face home visit to children on his or her caseload each quarter in an effort to maintain a connection with the clients. Visits to each residence will be completed according to best practice. Further, the county of origin FSW will, at a minimum, have monthly phone or videoconference contact with the children on their caseload as age and developmentally appropriate (in addition to the quarterly face-to-face visit).

Regardless of the staff member who conducts a visit or has other types of contact with families, all staff will make safety decisions and service referrals immediately upon identification of need while keeping all other staff involved in the case abreast of any changes or needs. This applies to all staff, to include but not limited to, Family Service Workers, Transitional Youth Services (TYS) Coordinators, Health Service Workers (HSW), Supervisors, Financial Coordinators, and Program Assistants (PA).

TEAMING WITH NEW WORKERS UNDER GRADUATED CASELOAD

Staff under the graduated case load will be assigned secondary to investigations and cases as outlined in DCFS Internal Procedure 120: Graduated Caseload. Supervisors will ensure that new staff under the graduated caseload are secondary for the purposes of shadowing experienced staff and gaining knowledge of field work while also offering some assistance to the primary worker. New staff will use this time to gain knowledge in areas that include but are not limited to:

- DCFS' core values, policies, and procedures
- Local services and associated referral processes
- Engagement and rapport-building skills
- Documentation requirements.

Secondary assignment to cases while under the graduated caseload are generally expected to become the new worker's primary cases over time and as allowed under the graduated caseload assignment timeframe protocols.

Staff under the graduated case load are not to be assigned secondary to a case and then required to work the case as the primary worker with no support from seasoned staff as this thwarts the purpose of shadowing a seasoned worker to gain quality field experience.

[125.1: Details Regarding Teaming During Differential Response](#)

10/2022

The DR Supervisor from the County of Origin will:

- A. Contact the DR supervisor in the receiving county by phone or email to alert the receiving county of the assignment.

The DR Specialist will:

- A. Complete thorough Division information management system history search prior to conducting assessments (the DR Specialist conducting the assessment is the individual who will conduct the history search for the person they will assess).
- B. Assess all applicable subjects in his or her county within required timeframes.
- C. Document assessments in the Division information management system within two (2) business days of the assessment.
- D. Complete the Health and Safety Checklist in the Division information management system with information obtained during assessments he or she conducted (i.e., staff who did not complete the assessment will not complete the Health and Safety Checklist).

- E. Arrange a telephone call to occur no later than two (2) business days, but sooner if needed, as pertinent information emerges during interviews to discuss with the other FSW assisting with the DR:
 - 1) Any identified safety factors and supporting documentation (e.g., statements made by children, observations of children, caregiver statements, etc.)
 - 2) Determination of any additional children, elderly persons, or individuals with a disability or mental illness who may be at risk
 - 3) Other persons assessed, their relationship to the family, and how information provided was obtained (e.g., first-hand, hearsay, observations, etc.)
 - 4) Verification of identity of persons assessed
 - 5) Projected completion date for assessment if not completed at time of phone conference.
- F. Document the call between the FSWs (see item C above) as a contact in the Division information management system.
- G. Ensure the other DR Specialist has a copy of any hard file information related to the DR within two (2) business days after receipt.
- H. When a DR is transferred from one county to another and the child who is the subject of the report or any other children believed to reside in the home where the report originated have not been seen, interview or observe as age-appropriate within 72 hours.

125.2: Details Regarding Teaming During Investigation

10/2022

The FSW Investigator will:

- A. Complete thorough Division information management system history search prior to conducting interviews (the FSW Investigator conducting the interviews is the individual who will conduct the history search for the person they will interview).
- B. Interview or observe, as appropriate, all applicable subjects in his or her county within required timeframes.
- C. Document interviews in the Division information management system within two (2) business days of the interview.
- D. Complete the Health and Safety Assessment (including Health and Safety Checklist, Safety Planning, and Investigation Risk Assessment) in the Division information management system with information obtained during interviews he or she conducted (i.e., staff who did not complete the interview will not complete the Health and Safety Assessment).
- E. Arrange a telephone call to occur no later than two (2) business days, but sooner if needed, as pertinent information emerges during interviews to discuss with the other FSW assisting with investigation:
 - 1) Any identified safety factors and supporting documentation (e.g., statements made by children, observations of children, caregiver statements, etc.)
 - 2) Determination of any additional children, elderly persons, or individuals with a disability or mental illness who may be at risk
 - 3) Provisions of the protection plan if one has been implemented
 - 4) Other persons interviewed, their relationship to the family, and how information provided was obtained (e.g., first-hand, hearsay, investigator observations, etc.)
 - 5) Verification of identity of persons interviewed
 - 6) Projected completion date for investigation if it is not completed at time of phone conference.

- F. Document the call between the FSWs (see item C above) as an investigation contact in the Division information management system.
- G. Ensure the other investigator has a copy of any hard file information related to the investigation within two (2) business days after receipt.
- H. When an investigation is transferred from one county to another and the victim or any other children believed to reside in the home where the report originated have not been seen, interview or observe as age-appropriate within 24-72 hours.

125.3: Details Regarding Teaming During an Open Case Involving Clients in Multiple Counties 10/2022

The Supervisor of the County of Origin FSW will:

- A. Notify (telephone or email) the supervisor of the resident county FSW prior to placing or moving clients.
- B. Within twenty-four (24) hours following the above notification:
 - 1) Assign the resident county FSW on the Assign/Transfer screen in the Division information management system to include:
 - a) County of origin FSW's cell number
 - b) Summary of services needed (e.g., Transitional Youth Services, encumbrances, visitation frequency, transportation, educational needs, drug screen requirements, etc.).
 - 2) Ensure all contact information is correct in the client demographics screens in the Division information management system.
 - 3) Schedule and conduct a phone conference with the FSW from each county and the resident county supervisor to develop a written family visit plan, as applicable, for the family detailing:
 - a) The date and logistics for the first family visit (ensuring visitation occurs per court order), fictive kin, and siblings visit, as applicable.
 - i. The first parent-child visit after a removal should occur within two (2) business days of placement change.
 - b) Weekly schedule for subsequent family visits;
 - c) Description of who is providing transportation for family visits;
 - d) Location of family visits;
 - e) Supervision requirements for family visits and details of person responsible for providing supervision, as applicable;
 - f) Contingency plan in event of cancellation by the family or the Department (i.e., who will call whom to ensure everyone, including but not limited to resource parents, is aware of the cancellation and plans for making up the missed visit.
 - i. Rescheduled visits need to be rescheduled within the same week if possible and must adhere to all court orders.
 - 4) Communicate all scheduled requirements for the family (e.g., court hearings, educational testing, medical appointments, TYS needs, Health Service Worker needs, drugs screening, counseling appointments) with emphasis on transportation requests of resident county.
- C. Monitor FSW contact in all cases with involvement from multiple counties:
 - 1) Facilitate stability for the client by ensuring each client is assigned and meets regularly with the same FSW, whenever possible and appropriate.

- 2) Monitor home visits in Safe Measures to ensure FSW contact occurs by the 20th of each month and that quality home visits are being completed and documented.
- 3) When a home visit has not been documented by the 20th of the month, email the applicable FSW and Supervisor requesting a time frame for the face to face visit to occur prior to the 30th of the month.
- 4) Monitor subsequent visits and ensure a home visit is completed prior to the end of the calendar month but in accordance with all relevant established time frames (i.e., once per week during the first month of a new placement and within thirty (30) calendar days of completed home visit on the prior month).

The Family Service Worker in the County of Origin will:

- A. Within 24 hours:
 - 1) Email Resident County FSW a list of important dates and summary of service needs for the client to include:
 - a) County of Origin FSW's cell phone number
 - b) Scheduled court dates
 - c) Scheduled staffings
 - d) Previously scheduled transportation needs (i.e., to PACE evaluations, family visits, etc.); and,
 - e) Other relevant information (e.g., approved contact list, special medical needs, supervision needs, psychological needs, educational needs, transitional youth services, etc.).
 - 2) Attend phone conference set by County of Origin FSW Supervisor.
 - 3) Create a written family visit plan for the family via Case Plan Visitation Addendum including the assigned FSW and Supervisor from each county in the conference call.
 - 4) Provide a written, signed copy of established family visit plan to parents, resource providers, and court parties within five (5) business days of change in residence.
- B. Provide Resident County FSW a copy of the current court order, current court report, signed current case plan and other case file documents, as requested or necessary.
- C. Coordinate any necessary change in PCP for a child in foster care within 24 hours of placement change.
- D. Coordinate education enrollment and transportation for educational services with appropriate parties:
 - 1) Complete CFS-384: Notification to Local Education Agency of Changes in Child Placement, Changes in Schools or Experiences of Traumatic Events and provide to the applicable school within one business day of placement change.
 - 2) Email completed CFS-384: Notification to Local Education Agency of Changes in Child Placement, Changes in Schools or Experiences of Traumatic Events to Resident County FSW within 24 hours of placement change.
 - 3) Speak with School District Foster Care Liaison and other pertinent parties to coordinate transportation services as necessary.
- E. Develop the initial case plan and subsequent changes as per Policy IV-A with input from the Resident County FSW and other staff, providers, clients, and stakeholders involved with the case.
- F. Arrange staffings as needed/required and ensure that the Resident County FSW is invited to staffings, to include a call-in option, and that all applicable case information is gathered from Resident County FSW for necessary adjustment of assessment ratings and case service planning.

- G. Conduct at least one face-to-face visit each quarter with child in foster care and/or parents if child or parents in case live outside of county of origin.
 - 1) If face-to-face is not an option, videoconferencing is acceptable.
- H. Maintain a case file including legal and medical document and other pertinent documentation and information.
- I. Provide the following to Resident County FSW by email within five (5) business days of the Resident County FSW being assigned:
 - 1) Educational records, as applicable
 - 2) Medical records, as applicable
 - 3) Completed intake packet for service requested, as applicable
 - 4) Birth Certificate copy
 - 5) Social Security Card copy
 - 6) Current court order demonstrating custodial relationship
 - 7) Immunization record

If proper documentation is not provided to enable Resident County FSW to complete the appointment, County of Origin FSW will be responsible for attending the appointment to provide the necessary information.
- J. Key case plan changes into the Division information management system as appropriate.
- K. Request Medicaid determinations/reevaluations by the DCFS Eligibility Unit and submit needed documentation.
- L. Contact the Resident County FSW a minimum of once monthly by phone or email regarding service provision or other coordination of case plan activities.
 - 1) Staff are encouraged to enter a contact into the Division information management system documenting phone call or email above that demonstrates the collaboration of service provision.
- M. Coordinate and ensure transportation is provided for parent/child and sibling visits.
 - 1) Consideration will be given to use of relative or fictive kin volunteers when appropriate.
 - 2) Consideration will also be given to transporting parents rather than children to decrease travel hardships for children.
 - 3) For any virtual visits, the DCFS staff person supervising the virtual visit will enter the contact for that visit.
 - a) For virtual visits not supervised by DCFS staff, the FSW from the County of Origin is responsible for getting updates about the visit from the parent, child, as well as any other adult involved in the visit and then entering a contact about the visit using information gathered.
- N. Complete court reports and distribute to children over the age of ten, parents, resource parents, and court parties fourteen (14) days prior to all scheduled hearings:
 - 1) Gather current information from:
 - a) Resident County FSW via contacts in the Division information management system as well as routine email and phone contacts
 - b) The following individuals, preferably via face-to-face contact (regardless of location of face-to-face contact), but minimally via phone, Skype, or similar platform:
 - i. Child
 - ii. Parents, to include non-custodial or putative father(s)
 - iii. Placement provider

- c) Service providers via direct request for written progress report or coordinated effort with Resident County FSW to obtain said report.
- 2) Request Court Report Addendum from Resident County FSW as needed.
- 3) Attach all written progress reports from service providers and Resident County FSW and written visitation plan to court report.
- 4) Provide seven (7) calendar days-notice to resource parent via CFS-343: Notification of Court Appearance for all scheduled hearings.
- 5) Provide seven (7) calendar days-notice to Resident County FSW if mandatory attendance is required for the upcoming hearing.
- O. Email notification of changes in court ordered services to Resident County FSW and Resident County Supervisor within two (2) business days of court hearing, attaching a copy of written order as available.
- P. Notify the Resident County FSW immediately of any other changes in plans for care of the child.

The Resident County Family Service Worker or other staff, as applicable will:

- A. Enter contact narrative documenting a quality home visit was completed in the Division information management system for each completed case contact within two (2) business days of contact occurring.
- B. Request medical records, educational records, personal documents, medical passport, court documents, and a phone contact list, if not already provided by County of Origin FSW within five (5) business days of resident county FSW assignment.
- C. Coordinate education enrollment and transportation for educational services with appropriate parties for youth:
 - 1) Speak with School District Foster Care Liaison and other pertinent parties to coordinate transportation services as necessary.
 - 2) Attend educational conferences as scheduled and invite resource parents to attend educational conferences.
- D. Participate in staffings and case plan development.
- E. Assist the resource home or other placement provider with implementing case plan goals by monitoring progress for each goal and making service referrals as necessary.
- F. Take lead on completing necessary paperwork for purchases and completing purchases upon receipt of approved requisitions while keeping originating county FSW apprised of purchase needs and completions.
- G. Keep County of Origin FSW informed of all progress, problems and client experiences through the Division information management system documentation and during monthly/as needed contact with County of Origin FSW.
 - 1) Issues needing immediate attention will be documented in an email to the FSW in originating county and his/her Supervisor.
- H. Coordinate with County of Origin FSW to obtain progress reports from service providers as necessary and provide electronic copy of reports to County of Origin FSW within two (2) business days of obtaining reports.
- I. Obtain a progress report from congregate care staff every month following a child's placement in a congregate care setting and forward a copy to County of Origin FSW.
 - 1) If the court orders progress reports from the placement provider, then staff will deliver a copy of the written court order by certified mail, restricted delivery, or by process server to the applicable placement provider.
- J. Notify County of Origin FSW within 24 hours of any change in the plans for care of the child.

- K. Make regular resource home visits to the child/children and residential visits to parents, as appropriate and per the approved client contact waiver and in adherence with any court orders.
- L. Enter contact narrative in the Division information management system for each completed case contact within two (2) business days of contact occurring.
- M. Assist County of Origin FSW with arranging for the parent/child/sibling visits as outlined by the written Case Plan Visitation Addendum.
- N. Complete any necessary incident reports (e.g., disruption) and provide the County of Origin FSW with a copy.

Internal Procedure 150: Ensuring Safety of Children Placed in a Child Care Institution

05/2020

In order to ensure the safety of all children and youth placed in a child care institution (CCI), including a group home, residential treatment center, qualified residential treatment program, shelter, or other congregate care setting, the Division will require any adult working in a child care institution, including a group home, residential treatment center, qualified residential treatment program, shelter, or other congregate care setting, to conduct criminal records checks, including fingerprint-based checks of national crime information databases and child maltreatment registry checks. All adults, including adults who do not work directly with children, are subject to the background check requirements when working in a CCI. Details for each type of criminal records checks and child maltreatment registry checks are outlined below. These background check requirements will be outlined in each provider's contract deliverables or memorandum of understanding with the Division of Children and Family Services (DCFS), as applicable.

150.1 Child Maltreatment Registry

05/2020

All direct and indirect child care institution (CCI) staff as well as volunteers for the CCI shall be checked with the child maltreatment registry in his or her state of residence and any state of residence in which the person has lived for the past five (5) years¹ for reports of child maltreatment. In addition, any CCI staff or volunteers having direct and unsupervised access to children will also be required to be checked with the child maltreatment registry in his or state of employment, if different from his or her state of residence, if the applicant has worked outside of Arkansas within the past five years. All applicable child maltreatment registry results must be received prior to an applicant beginning employment with the exception of (B)(3)(a) under DHS responsibilities below.

The CCI administration will:

- A. Require all employee applicants and volunteer applicants to complete the Arkansas Child Maltreatment Central Registry Check form designated by the Office of Early Childcare (OEC) and submit to the designated OEC personnel or email address for processing.
- B. Document eligible or ineligible results and dates of results for each employee into the Provider Invoice Entry (PIE) system once available.
 - 1) This documentation in PIE will ensure that if any employee ever becomes ineligible due to a lapsed background check or other issue, the DCFS information management system will automatically suspend IV-E payments to that CCI until that employee's eligibility is reinstated with updated checks.
- C. Ensure that the Arkansas Child Maltreatment Central Registry Check is completed every two years on employees and volunteers.

The Arkansas Department of Human Services will:

¹ The requirement for child maltreatment registry checks from states outside of Arkansas for indirect care staff is applied as follows: 1) For indirect care staff already employed at a CCI who had not previously had the child maltreatment registry check(s) from other states in which the indirect care staff had lived or worked, the applicable timeframe is five years prior to October 1, 2019. For those hired after October 1, 2019, the requirement is that all indirect care staff have a child maltreatment registry check in any state in which they have lived or worked for the past five years from the date of the submitted child maltreatment registry check request.

- A. For Arkansas Child Maltreatment Central Registry requests, the Office of Early Childcare (OEC) will email the requests to the Division of Children and Family Services (DCFS) Central Registry Unit for processing.
 - 1) DCFS Central Registry Unit will email the results of the Arkansas Child Maltreatment Central Registry check to OEC.
 - a) OEC will notify the designated CCI personnel whether the individual is eligible or ineligible to begin employment or volunteer services, as applicable, based on the results of the Arkansas Child Maltreatment Central Registry check per A.C.A. 9-28-409.
- B. For child maltreatment registry checks from other states, the DCFS Support Specialist or designee will complete all out of state child maltreatment registry checks, as applicable based on information from the designated Arkansas Child Maltreatment Central Registry form, per each state's applicable child maltreatment registry check procedures and communicate results back to OEC.
 - 1) If DCFS does not receive results from another state's child maltreatment registry within two weeks of submitting the request, DCFS will contact the designated personnel or unit of the other state to request an update by phone or email, as appropriate.
 - a) The exception to the above procedure is if DCFS receives notification from the other state that the state does not maintain a child maltreatment registry. In this case, DCFS will document that the other state does not maintain a child maltreatment central registry and inform OEC that OEC may notify the appropriate CCI personnel that the employee may begin employment if all criminal background checks have been received and are cleared as per A.C.A. 9-28-409.
 - i. The requirement in section 471(a)(20)(C)(i) of the Act to request a check for child abuse and neglect registry information in another State in which the prospective parent or other adult has resided in the preceding five years is inapplicable if that other State does not maintain a child abuse and neglect registry (see Child Welfare Policy Manual 8.4F, Question 21).
 - 2) If after the initial follow-up DCFS still has not received results from another state's child maltreatment central registry within one week, DCFS will make a second follow-up contact the designated personnel or unit of the other state to request an update by phone or email, as appropriate.
 - 3) If after the second follow-up DCFS still has not received results from another state's child maltreatment central registry within one week:
 - a) DCFS will inform OEC that OEC may inform the appropriate CCI personnel regarding whether the individual is eligible or ineligible to begin employment or volunteer services, as applicable, per A.C.A. 9-28-409, while also notifying the appropriate CCI personnel that DCFS was unable to secure results (to date) from the other state's child abuse registry.
 - b) DCFS Support Specialist or designee will alert the DCFS Planning Specialist or designee regarding the lack of response from the other state.
 - c) DCFS Planning Specialist or designee will contact its Children's Bureau Regional Office (RO) Liaison to notify the RO Liaison that another state or tribe with an approved title IV-E plan that maintains a registry is not responding appropriately to an information request.

150.2 State Criminal History

05/2020

All direct and indirect child care institution (CCI) staff as well as volunteers for the CCI shall be checked with the Identification Bureau of the Division of Arkansas State Police to determine if the person has pleaded guilty or nolo contendere to or has been found guilty of the offenses listed in A.C.A. 9-28-409.

The CCI administration will:

- A. Require all employee applicants and volunteer applicants to complete the Identification Bureau of the Division of Arkansas State Police form designated by the Office of Early Childcare (OEC) and submit to the designated OEC personnel or email address for processing.
- B. Document eligible or ineligible results and dates of results for each employee into the Provider Invoice Entry (PIE) system once available.
 - 1) This documentation in PIE will ensure that if any employee ever becomes ineligible due to a lapsed background check or other issue, the DCFS information management system will automatically suspend IV-E payments to that CCI until that employee's eligibility is reinstated with updated checks.

The Arkansas Department of Human Services will:

- A. For Identification Bureau of the Division of Arkansas State Police requests, OEC will process the form via the Arkansas State Police and:
 - 1) Follow the procedures in 150.3 Fingerprint-Based Federal Criminal History for employee applicants.
 - 2) Notify the appropriate CCI personnel of the eligible or ineligible results of the Identification Bureau of the Division of Arkansas State Police for volunteer applicants as per A.C.A. 9-28-409.
- B. Ensure that the Identification Bureau of the Division of Arkansas State Police check is completed every two years for employees and volunteers.

150.3 Fingerprint Based Federal Criminal History

05/2020

All direct and indirect child care institution (CCI) staff for the CCI shall submit a fingerprint-based criminal background check performed by the Federal Bureau of Investigation in compliance with federal law and regulation to determine if the person has pleaded guilty or nolo contendere to or been found guilty of the offenses listed in A.C.A. 9-28-409.

For fingerprint-based criminal history checks, the CCI administration will:

- A. Document eligible or ineligible results and dates of results for each employee into the Provider Invoice Entry (PIE) system.
 - 1) This documentation in PIE will ensure that if any employee ever becomes ineligible due to a lapsed background check or other issue, the DCFS information management system will automatically suspend IV-E payments to that CCI until that employee's eligibility is reinstated with updated checks.

For fingerprint-based criminal history checks, the Arkansas Department of Human Services will:

- A. Email the transaction number that is generated through the Identification Bureau of the Division of Arkansas State Police check for each employee back to the requesting CCI.
- 1) The CCI will provide the employee/applicant with the correct ORI and the transaction number for each employee to complete the fingerprint-based criminal background check process.
 - 2) The employee/applicant will take this information to the nearest DCFS fingerprint scanner where the information will be used to electronically submit their fingerprints. Employees/applicants should allow approximately fifteen minutes per person to complete the scanning process.
 - 3) State Police will process the requests and submit the FBI and state criminal record results to OEC through INA.
 - 4) Results will be sent by email to the requesting CCI indicating eligible or ineligible for the applicant.
- B. Fingerprint-based federal criminal history results must be received prior to beginning employment with a CCI unless there has been a declaration of a major disaster in Arkansas (or any portion of Arkansas) as designated by the Federal Emergency Management Agency (FEMA) that would allow Arkansas to request the modification or waiver allowed under the Robert T. Stafford Disaster Relief and Emergency Assistance Act from the Children's Bureau. If the Division receives approval to exercise this flexibility, DCFS staff will:
- 1) Submit fingerprint-based criminal history checks prior to the applicant's start date for employment (the exception for this submission will be if fingerprint scans cannot be conducted at all);
 - 2) Conduct all available name-based criminal background checks for CCI staff as described in sections 150.1 and 150.2 above;
 - a) If the fingerprint-based criminal history checks have been submitted and all applicable name-based criminal background checks per section 150.1 and 150.2 above deem the individual to be eligible for employment as per A.C.A. 9-28-409, then the applicant may begin employment with the CCI prior to receipt of the fingerprint-based criminal history checks.
 - 3) Complete the fingerprint-based criminal history checks pursuant to §471(a)(20)(A), (C), and (D) of the Social Security Act as soon as it can safely be conducted, in situations where only name-based checks were completed;

Section 200 - INVESTIGATIONS

Internal Procedure 200: Internal Review of Assessment Decisions

10/2022

Child welfare is a complex field due to the multitude of individual, family, and community dynamics that not only affect how families raise their children, but how child welfare staff who also come from varied backgrounds and experiences assess child and family functioning. As such, the Division of Children and Family Services (DCFS) has an internal review process for assessment decisions given that one individual may perceive an allegation of maltreatment or risks differently from another individual despite consistent training.

A DCFS Family Service Worker (FSW), supervisor, or an Office of Chief Counsel (OCC) attorney may request the Division Director or designee to allow an internal review of assessment decisions if he or she believes:

- A. A child in the custody of the Department can be returned safely to his or her home; or,
- B. A child has not been taken into the Department's custody even though the child cannot remain safely in his or her home.

No adverse action will be taken against an employee for requesting an internal review of assessment decisions as outlined in this policy and related procedures. However, employees who request an internal review of assessment decisions are not absolved from discipline for other actions, as appropriate, that fall outside of a request for an internal review of assessment decisions.

Requests for an internal review of assessment decisions will be made in writing via email to the Division Director or designee. The Division Director or designee will approve the request for an internal review of assessment decisions, as appropriate, within one (1) business day. The Division Director or designee may ask the requestor for additional information regarding the need for an internal review of assessment decisions as needed.

When the Division Director or designee grants approval for an internal review of an assessment decision, the Division Director or designee will immediately select and notify in writing via email the following staff to review the assessment decision and determine the course of action to be taken:

- A. Two (2) Area Directors who have no previous involvement with the case; and,
- B. A County Supervisor who has no previous involvement with case and who does not report to either of the selected Area Directors.

The Division Director or designee will also provide the information submitted by the requestor of an internal review of an assessment decision to the selected internal review committee.

If any of the selected Area Directors and County Supervisor cannot serve on the assessment decision internal review committee due to a conflict of interest or any other extenuating circumstance, he or she will notify the Division Director of the conflict in writing via email within twenty-four hours of the receipt of notification to serve on the internal review committee. If the Division Director or designee agrees that the selected staff member cannot serve on the assessment decision internal review committee, then the Division Director or designee will immediately, but no later than 24 hours, select and notify another staff member of an equal position in writing via email.

The selected Area Directors and County Supervisor are responsible for coordinating with each other to schedule the internal review committee meeting. Within two business days of receiving notification from the Division Director or designee to serve on the internal review committee, the selected Area Directors and County Supervisor will hold the assessment decision internal review. This committee will participate in the internal review in person at an agreed upon location or via conference call.

The committee will provide written notice via email of the date, time, location, and conference call information, if applicable, of the internal review to the:

- A. DCFS FSW, DCFS Supervisor, or OCC attorney who submitted the request for an internal review of assessment decisions
- B. FSW involved in the investigation and/or case, if different from the requestor
- C. Direct supervisor of the primary FSW involved in the investigation and/or case, if different from the requestor
- D. Local OCC attorney involved in the investigation or case, if different from the requestor
- E. Area Director of the primary FSW and his/her direct supervisor (for information purposes only)
- F. DCFS Assistant Director of Field Operations or designee (for information purposes only) and,
- G. Division Director or designee (for information purposes only).

The individual who submitted the request for an internal review of assessment decisions as well as the other field staff involved (primary FSW and direct supervisor) will attend the internal review in person or by conference call to present their positions regarding the investigation and/or case and to answer any questions the internal review committee may pose. If any of these individuals are unable to participate in the internal review, they may submit any information requested by the committee in writing prior to the internal review.

After listening to all presentations and responses to any questions, and/or reviewing any additional written information submitted regarding the assessment decision, the internal review committee will determine, as applicable, if:

- A. A child in the custody of the Department may be returned to his or her home (with court approval)
- B. The Department will take a 72-hour hold on a child determined by the internal review committee as not able to remain safely in his or her home
- C. No action will be taken.

The internal review committee will select a member of that committee to notify all appropriate individuals of their decision in writing within two (2) hours of adjournment of the internal review committee. The internal review committee will determine the timeframe in which any necessary action resulting from its decision will take place, not to exceed twenty-four hours. For situations in which the committee determines a child in the custody of the Department may be returned home, this will include notifying with the local OCC attorney to request a hearing to ask for court approval to return the child home.

200.1: Request for an Internal Review of an Assessment Decision 10/2022

The DCFS FSW, DCFS Supervisor, or OCC attorney requesting an internal review of an assessment decision will:

- A. Email the Division Director or designee and copy the Assistant Director of Field Operations or designee requesting an internal review of an assessment decision as soon as the individual has reasonable cause to believe:
 - 1) A child in the custody of the Department can be returned safely to his or her home
 - 2) A child has not been taken into the Department's custody even though the child cannot remain safely in his or her home
- B. Ensure the email requesting an internal review of an assessment decision:
 - 1) Has a subject line that reads, "SENSITIVE: Request for Internal Review of an Assessment Decision – Immediate Attention Required" and also includes the applicable county
 - 2) Is marked as "high importance"
 - 3) Includes the following information in the body of the email:
 - a) Last name of the client involved
 - b) Referral number or client ID, as applicable
 - c) Brief summary of the reason for the request

200.2: Approval or Denial of an Internal Review of an Assessment Decision and Selection of the Internal Review Committee

07/2017

The Division Director or designee will:

- A. Review the email and request additional information from the requestor, if needed.
- B. Within one (1) business day, approve the request and select and notify in writing via email the following staff to review the assessment decision and determine the course of action to be taken:
 - 1) Two (2) Area Directors who have no previous involvement with the case;
 - 2) County Supervisor who has no previous involvement with case and who does not report to either of the selected Area Directors
- C. Select an alternate internal review committee member, if necessary, upon receipt of notification that a previously selected member cannot participate due to a conflict of interest or other extenuating circumstance and immediately, but no later than 24 hours, notify the alternate selection.
- D. Forward the written email request for the internal review of an assessment decision to the selected internal review committee members.

The internal review committee members will:

- A. Confirm participation on the internal review committee of an assessment decision upon receipt of the notification from the Division Director or designee.
- B. Immediately notify the Division Director or designee if he or she will not be able to participate due to a conflict of interest or other extenuating circumstance.

200.3: Assessment Decision Internal Review Committee Duties

8/2024

The internal review committee members will:

- A. Review the following information prior to holding an internal review of assessment decisions:
 - 1) Applicable Child Abuse Hotline report

- 2) All Division information management system contacts related to the investigation and/or case
 - 3) Written request for the internal review of assessment decisions previously submitted to the Division Director or designee
- B. Determine a date, time, and location and/or conference call option for the internal review process (to be held within two (2) business days of receiving notification from the Division Director or designee to serve on the internal review committee) and notify via email the following individuals:
 - 1) DCFS FSW, DCFS Supervisor, or OCC attorney who submitted the request for an internal review of assessment decisions
 - 2) Primary FSW involved in the investigation and/or case, if different from the requestor
 - 3) Direct supervisor of the primary FSW involved in the investigation and/or case, if different from the requestor
 - 4) Local OCC attorney involved in the investigation or case, if different from the requestor
 - 5) Area Director of the primary FSW and his/her direct supervisor (for information purposes only)
 - 6) DCFS Assistant Director of Field Operations or designee (for information purposes only)
 - 7) Division Director or designee (for information purposes only)
- C. Conduct the internal review of an assessment decision at the reviewed upon time.
- D. Determine, as applicable, if:
 - 1) A child in the custody of the Department will be returned to his or her home
 - 2) The Department will take a 72-hour hold on a child determined by the internal review committee as not able to remain safely in his or her home
 - 3) No action will be taken
- E. Select a member of internal review committee to notify the following individuals of their decision in writing within two (2) hours of adjournment of the internal review committee:
 - 1) DCFS FSW, DCFS Supervisor, or OCC attorney who submitted the request for an internal review of assessment decisions
 - 2) Primary FSW involved in the investigation and/or case, if different from requestor
 - 3) Direct DCFS Supervisor of the primary FSW involved in the investigation and/or case, if different from requestor
 - 4) Local OCC attorney involved in the investigation or case, if different from the requestor
 - 5) Area Director of the primary FSW and his/her direct supervisor
 - 6) DCFS Assistant Director of Field Operations or designee
 - 7) Division Director or designee
- F. Determine the timeframe in which any necessary action resulting from the decision will take place, not to exceed 24 hours.
- G. Communicate immediately to the applicable individuals via email the tasks that will be completed because of the committee's decision to include completion of appropriate documentation in the Division information management system.

Internal Procedure 201: Out of State Records Request

08/2024

- A. Out of state records will be requested on all investigations and differential response reports if the family previously resided in another state at any time since the birth of the oldest child.
- B. The FSW or FSW supervisor will complete the out of state record request form and send it by email to the Notification Unit at Child.Investigative.Services@dhs.arkansas.gov and cc the DCFS Deputy Director.
- C. Central Office will contact the other state to request a verbal statement of any child maltreatment history and will provide the gathered information by email to the requesting FSW and FSW supervisor within three business days of receipt of the request from the field.
- D. Central office will request all hard copy records of prior investigations, differential response reports (if the other state has a DR program), and case history from the other state within three business days of receipt of the request from the field.
- E. Once the hard copy records have been received from the other state, Central Office will scan the documents into Edoctus and send a PDF file by email to the FSW and FSW supervisor within three business days of the documents being received.
- F. Central Office will track each request from the initial date the record request form was sent from the field until the records are received from the other state and sent back to the requesting FSW and FSW supervisor.
- G. Central Office will document in the Investigation Document Tracking screen in the Division information management system the date/time the records were requested and the date/time the records were sent to staff.
- H. The FSW will document in the Division information management system that out of state records were requested in the following screens:
 - Differential response- the DR contact screens
 - Investigation- the case connect screen in the narrative since this information is populated into the case if a case is opened

Internal Procedure 202: Team Decision Making™

08/19/2024

Team Decision Making™ is an evidence-informed practice with a defined protocol. It is used when a safety threat has been identified using the Division's approved SDM® safety assessment and a decision must be made about the placement of the children. An initial Team Decision Making™ (TDM) is designed to ensure all placement decisions regarding child safety are the shared responsibility of a diverse group of people.

202.1 Initial TDM Focus and Prompts

The focus of the initial TDM meeting is to ensure the safety and well-being of children while making every effort to keep their family intact. The group carefully reviews the threats to child safety, as reflected in the SDM safety assessment, and seeks to clarify relevant protective factors to build safety plans that will enable children to remain or immediately return home with appropriate support and services. When this is not possible, the team creates a plan that reflects the least restrictive option possible that will both keep the child safe and preserve and nurture the child's familial and community connections

The prompts for an initial TDM are:

- Parent action or inaction threatens a child's safety (safety threat identified)
- Possible court action sought or Judge orders child into care on a 72-hour hold
- Adoption/guardianship disruption

202.2: Team Decision Making™ (TDM) Participants and Their Roles in the Process

A. Caregiver

- 1) The caregiver who is the expert on the family and child(ren). He or she is essential to the TDM process.
- 2) The caregiver identifies and invites their support people to the meeting, with the Divisions, encouragement and support.

B. Children

- 1) Children aged 10 and over are required to be invited and encouraged and supported to attend unless a specific and credible reason exists for them not to participate.
- 2) Accommodation should be made for children to participate only in certain stages of the meeting if full attendance is not appropriate or they wish to participate in only some of the meeting.
- 3) If the child is unable to attend their voice should be represented in the meeting by the FSW. FSWs should use SOP tools such as Three Houses or Safety House to bring children's voices to the table.
- 4) Children under the age of 10 can participate in TDMs if it is in their best interest.

C. Extended family and non-related support people, including representatives from the family's community – *with the consent of the caregiver*. Parents are welcome to invite an attorney, but they will not be invited to the TDM by Division staff. If a parent attends the meeting with an attorney, the Division will request to have an OCC attorney present.

D. Professionals involved with the case (for example resource parents, service providers, MDT members, etc.).

E. DCFS Staff

- 1) The FSW who assessed the presence of a safety threat:

- a) Initiates the TDM meeting as specified in section 202.4, *Initiation of a Team Decision Making™ (TDM) Meeting Referral*.
 - b) Prepares the caregiver, other family members, and members of the family's support network for the TDM meeting as specified in section 202.5 *Preparation for the Team Decision Making™ (TDM) Meeting*.
 - c) Takes the lead in the TDM meeting to discuss the safety threats and concerns as specified in section 202.7 *Conducting the Team Decision Making™ (TDM) Meeting*.
 - d) Maintains openness and receptivity to the input of team members regarding safety, stability, and out of home placement. This includes the recognition that the results of the TDM discussion may be a plan that permits children currently in care on a 72-hour hold to safely return home before the 72-hour hold expires.
 - e) Monitors the TDM plan for safety as specified in section 202.8, *Responsibilities Following the Team Decision Making™ (TDM) Meeting*.
- 2) Supervisor of FSW who assessed the safety threat, or the Supervisor who approved the safety decision (if different):
 - a) Helps prepare the FSW for the TDM, including a pre-TDM conference as specified in section 202.5, *Preparation for the Team Decision Making™ (TDM) Meeting*.
 - b) Attends the TDM, actively participates, and supports the FSW as specified in section 202.7, *Conducting the Team Decision Making™ (TDM) Meeting*.
 - c) Maintains openness and receptivity to the input of team members regarding safety, stability, and out of home placement. This includes the recognition that the results of the TDM discussion may be a plan that permits children currently in care on a 72-hour hold to safely return home before the 72-hour hold expires.
- 3) Area TDM Scheduler
 - a) Prioritizes referrals and schedules the date, time, and location of the TDM meeting.
 - b) Manages a TDM calendar that ensures that TDMs following a removal can be conducted before the 72-hour hold expires.
 - c) Invites Division staff and service providers, and notifies them of the date, time and location of the TDM.
- 4) TDM Facilitator
 - a) Leads the group through a structured 6-stage process, focusing on child safety, and modeling respectful family engagement throughout.
 - b) Seeks to bring the group to a consensus decision regarding what plan will best balance the child's physical safety needs with the need for continuity in family relationships and assure that any placement is in the least restrictive setting possible that still ensures child safety.
- 5) Others
 - a) When a review is called by the TDM Facilitator, the Area Director or designee may be brought into the meeting as specified in section 202.9, *Review of a Team Decision Making™ Meeting Decision*.

202.3: Time Frames for Team Decision Making™ (TDM) Meetings

- A. An initial Team Decision Making™ (TDM) meeting is held in the following time frames:
 - 1) When an immediate safety plan has been put in place, a TDM meeting is held as quickly as possible but *no later* than three (3) days after a safety threat was identified and an immediate safety plan was put in place (ideally within 48 hours).
 - 2) If the children were removed from their home on an emergency basis:
 - a) Ideally, conduct the TDM within 24 hours:
 - i) If the decision at the TDM is that the child remains in an out of home placement then complete the affidavit, including that a TDM was held.
 - ii) If the decision at the TDM is to implement an immediate safety plan allowing the children to return safely to their home:
 - 1. Do not complete an affidavit of removal.
 - 2. Complete an Immediate Safety Plan and monitor according to Policy II-D: Investigation of Child Maltreatment Reports.
 - b) When the TDM cannot be completed within 24 hours:
 - i) Complete the affidavit of removal and hold submission of the affidavit to OCC until after the TDM is held within 48 hours.

202.4: Initiation of a Team Decision Making™ (TDM) Meeting Referral

- A. The FSW who assessed the presence of a safety threat or threats that necessitated the TDM:
 - 1) Initiates the referral for a TDM meeting through an email, or phone call to the TDM Scheduler within *two (2) hours* of identifying a safety threat and making a safety decision.
 - a) Uses TDM Scheduling Form (CFS-356) to provide the TDM Scheduler with the information needed for the Scheduler to complete his/her tasks. It should be sent as soon as possible.
 - b) Because fidelity to the TDM model requires the facilitator to be an objective individual with no prior role in the case, it is very important that the FSW, Supervisor or any other Division staff person does not discuss case details or provide a copy of the Immediate Safety Plan to the Facilitator before the TDM meeting. Note: The TDM Facilitator may be given information on the safety threat identified.
 - c) Notifies the family and their supports of the date/time and location of the TDM.
 - 2) Notifies and initiates TDM referrals made after hours, on weekends, or during holidays, through email. When the FSW emails the area TDM Scheduler during these situations and has not heard back by 8:00 a.m. the next business day, the FSW will contact the DCFS Facilitator Supervisor by phone or email with the referral information.
- B. The TDM Scheduler:
 - 1) Reviews the referral for basic information about the case and its urgency, collects information about any issues that may affect scheduling, such as a history or present concern around family violence, need for language interpreter, childcare needs, etc.
 - 2) Determines the need for separate TDM meetings if the referral form indicates that a family has a history of domestic violence, or if the FSW suspects such activity.

- 3) Assigns the date/time/location for the TDM and notifies Division staff and ensures they know the day, time, and location of the meeting.

202.5: Preparation for the Team Decision Making™ (TDM) Meeting

A. The FSW who assessed the safety threat and initiated the request for a TDM:

- 1) Prepares the caregiver, children, and other family members for the TDM meeting.
 - a) Informs the caregiver that they are required to attend the TDM meeting and explains the purpose and goals of the TDM meeting.
 - b) Helps the family identify people they would like to attend the TDM as their support to help plan for safety. These people may be both formal and informal support. Uses a genogram, circles of safety and support, support network grid, or ecomap to assist in identifying and developing the support network with the family.
 - c) Collects contact information for people the family plans to invite and ensures they receive an invitation to the meeting.
 - d) When an immediate safety plan is in place, explains that people who have a role in the immediate safety plan must attend and participate in the TDM meeting and gathers their contact information to invite them to the TDM meeting.
 - e) Notifies caregiver and invites children aged 10 or older, developmentally appropriate children under age 10, and members of the family's support network to the TDM meeting.
 - i. Ensures that the voices of all children are heard at the TDM meeting by using SOP tools such as Safety House or Three Houses.
 - f) Assesses the need for childcare arrangements during the meeting and works with the Scheduler to coordinate childcare arrangements.
- 2) Assesses the presence of actual or suspected domestic violence in the family, including whether either caregiver has a domestic violence safety plan in place.
- 3) Determines if there are any court orders in place relating to the safety of adults and/or children in the family.
 - a) Clarifies the current custody, placement, and contact with non-custodial parents or caregivers for the child(ren) in the family.
 - b) Determines whether there are any court orders related to domestic violence in the family.
 - c) Determines if there are any court orders related to an adult family member's access to and contact with any children in the family.
- 4) Assesses for affiliation/identification as an American Indian or Native Alaskan by any member of the family and notifies the tribe of the meeting.
- 5) Confers with their supervisor or the supervisor who approved the safety decision to prepare for the TDM meeting.

B. The Supervisor of the FSW who initiated the TDM meeting or the Supervisor who was involved in the safety decision will:

- 1) Confer with the FSW prior to the TDM meeting.
- 2) Ensure the FSW can present the safety threat(s) identified and can describe in behavioral terms the parental actions or inactions that led to the child(ren)'s safety being threatened.

- 3) Confer with the FSW to assess whether children under age ten (10) are developmentally able to understand and participate in the TDM meeting. Discuss ways to ensure the voices of all children in the family can be heard at the TDM meeting.
- 4) Ensure the pre-meeting Safety Check-In is completed as set out in section 202.6, *Safety Check-In Prior to Team Decision Making™ (TDM) Meeting*.

202.6: Safety Check-In Prior to Team Decision Making™ (TDM) Meeting

- A. When both caregivers plan to attend the TDM meeting, there is a pre-meeting Safety Check-In, regardless of whether there is domestic violence or suspected domestic violence occurring in the home.
- B. Before the TDM meeting starts the FSW who assessed the safety threat or the Supervisor who approved the safety decision conducts the Safety Check-In before the meeting.
- C. The FSW or Supervisor conducting the Safety Check-In will:
 - 1) Meet with each caregiver before the TDM meeting begins and assess their concerns for safety.
 - 2) If either caregiver expresses concerns for safety, determine:
 - a) The person(s) whom the caregiver does not feel safe around.
 - b) How best to have a conversation about the child's exposure to domestic violence.
 - c) How participants will know if the offending caregiver's behavior is escalating.
 - d) Any topics that should be avoided. Discussions about the behavior or lack of behavior that caused children to be unsafe cannot be avoided.
 - e) A mutually understood code word, statement, or signal to indicate the need to take a break or separate meeting participants.

202.7: Conducting the Team Decision Making™(TDM) Meeting

The Facilitator will:

- A. Ensure that caregivers and youth are seated first.
- B. Stay attuned to safety through all stages of the meeting.
- C. Lead the meeting using a structured process which uses a six (6) stage model.

The FSW will:

- A. Explain what prompted the meeting.
- B. Present the relevant case information/history as related to current threats to safety.
- C. Explain concerns using behaviorally specific language.
- D. Explore family strength and protective factors.
- E. Contribute and consider all options discussed at the meeting.
- F. Participate in decision making; if consensus cannot be reached, make the final recommendation.

The FSW Supervisor will:

- A. Support the FSW, participate in discussion, coach the FSW as needed and serve as a role model in the process.

202.8: Responsibilities Following the Team Decision Making™ (TDM) Meeting

- A. The TDM Facilitator will:

- 1) Immediately following the TDM meeting, debrief the meeting with the FSW and supervisor, seeking and providing feedback about the process, not about case specifics. If not possible immediately after the meeting, schedule a time to conduct the debriefing within twenty-four (24) hours.
 - 2) Input the required data into the Division's information management system for each meeting within two (2) business days.
- B. The FSW Who Initiated the Request for a TDM Meeting will:
- 1) Continue to monitor the TDM Action Plan throughout the completion of the investigation and/or until another FSW is assigned to monitor the plan.
 - 2) Update the Immediate Safety Plan (CFS-200) if needed based on the outcome of the TDM meeting.
 - 3) Enter all information in the Division's information management system including address/telephone number for family, demographics, and completed safety assessments.
 - 4) If the child was removed on a 72-hour hold and the plan is for the child to remain in the Division's custody, update the affidavit to reflect that a TDM was conducted and coordinate with OCC on filing for the Emergency Hearing.
 - 5) If a TDM Action Plan is not functioning as planned at the 14-day review, the FSW will reconvene the original support network to review and reinforce the plan with child safety as a primary focus.
 - 6) If at 30 days the TDM Action Plan is still not functioning as planned, FSW will file a 30-day petition with the courts.
- C. The Supervisor of the FSW initiating the TDM will:
- 1) Ensure the FSW implements the TDM meeting's recommendations and action steps.
 - 2) Provide feedback to the FSW and facilitator.
- D. The TDM Scheduler will:
- 1) Follow up with the FSW at 14 and 30 days to track outcomes of the TDM Plan.

202.9: Review of a Team Decision Making™ (TDM) Meeting Decision

Review of a TDM meeting decision may be requested by any Division staff person in attendance who is concerned the decision:

- 1) Leaves a child unsafe
- 2) Is not the least restrictive placement that assures safety
- 3) Violates a policy or law

The staff member requesting the review will:

- 1) Notify the entire TDM team of the intent to seek a review prior to the end of the TDM meeting.
- 2) Following the Facilitator's explanation of the review process, present a summary of the meeting and reason for the review to the TDM Reviewer (Area Director or designee)

The Facilitator will:

- 1) Notify the appropriate Area Director or designee.
- 2) Explain the review process to the TDM group (group must contain all the TDM participants).

The Area Director or designee will:

- 1) Join the meeting in person or by conference call during the meeting.
- 2) Listen to both the summary of the plan and the summary of the concerns with the plan. Determine whether adjustments need to be made to the decision.
- 3) After the review, the decision is final. All Division staff are expected to support and implement it.

Section 300- CASE WORK

Internal Procedure 300: Professionalism in the Courtroom

07/2019

Given the Division of Children and Family Services' (DCFS) duty to provide services to protect children, legal intervention becomes necessary at times causing DCFS to report information on a routine basis to Courts. Courts are by nature, formal and require specific etiquette and a high degree of professionalism. While it is understood that each judge establishes regulations for their individual courtroom, DCFS staff are expected to abide by the judges' expectations as well as the following DCFS protocols in every courtroom.

- No gum, food, or drink in the courtroom.
- No sunglasses or hats are to be worn in the courtroom.
- Cellular phones are silenced while in the courtroom and should not be used unless court related business is being conducted.
- Enter the courtroom and remain seated quietly during hearings. Talking or shuffling papers in the gallery and movement in the courtroom are distractions.
- Staff should complete and distribute court reports for hearings to parties 14 days prior to every hearing. An addendum can be completed, as necessary, prior to hearings.
- Blaming of other staff during hearings is not appropriate. All DCFS staff work for the same employer. Issues belong to DCFS, not Central Office, an individual area, county, supervisor, or FSW.
- Staff will adhere to the following dress code when entering the court room (even if only to transport a client)

The following are prohibited when appearing in court:

- A. Bare shoulders, midriff, or thighs
- B. Visible cleavage or buttocks
- C. Polo or t-shirts
- D. Jeans, capris, or leggings
- E. Open toed shoes, open toed sandals, or flip flops of any kind
- F. Sneakers or tennis shoes unless required for medical reasons
- G. Large or excessive jewelry, facial jewelry

Internal Procedure 302: Family Support Fund

08/2024

See DCFS Policy V-C: Family Support Fund regarding overarching directives related to the Family Support Fund. Specific operational instructions for staff to process these requests are outlined below.

302.1: Cash Assistance for Families Involved in In-Home Cases

08/2024

The Family Service Worker will:

- A. Complete the CFS-496: Assessment for Income Assistance to determine the basic unmet needs and appropriateness of using the fund to address the need; and,
- B. Route the CFS-496: Assessment for Income Assistance to his or her supervisor or designee for review and approval.

The Family Service Worker Supervisor or designee will:

- A. Review and approve, or deny requests;
- B. Maintain a log of approved requests using CFS-332: Income Assistance Request Log;
- C. Ensure completion of process to develop the purchase order;
- D. Monitor activities to ensure payment to service providers and management of funds; and,
- E. Obtain receipts for services rendered and maintain them in the client's hard file.

302.2: Foster Care Incidentals

08/2024

The Family Service Worker will:

- A. Assess and determine the needs of the child receiving Out-of-Home Placement Services and the appropriateness of using the fund to meet the assessed need;
- B. Gather documentation of need for the expense from the placement provider;
- C. Request the use of the fund from his or her supervisor or designee;
- D. Complete any additional paperwork required by the method of payment chosen by the Supervisor; and,
- E. Provide a receipt to the supervisor or designee within two (2) business days following the dating of the check.
 - 1) Attach receipt to CFS-333: Client Information Sheet.
 - 2) If the amount of the check exceeds the amount of the receipt, the balance must be returned to the supervisor or designee immediately.

The Family Service Worker Supervisor or designee will:

- A. Monitor the allocation to ensure funds are sufficient to meet client needs;
- B. Approve or deny the request; and,
- C. For approved requests, the Supervisor will access the Family Support Fund in one of the following ways:
 - 1) Trust Accounts, if available and ample for purchase.
 - a) Fill out the CFS-334: Foster Care Authorization for Billing for amount of purchase and submit to finance; and,

- 2) Purchase Order using the DHS-1914: Department of Human Services Requisition or P-card requisition.
 - a) Follow guidelines in the Purchase Order Manual.

Internal Procedure 306: Alternate Care

08/2024

See DCFS Policy VII-G regarding overarching directives related to alternate care for children in the custody of DHS. Specific operational procedures for staff follow below.

306.1: Normal Age Appropriate Activities

08/2024

The resource family or authorized official of a contract placement provider will:

- A. Use the reasonable and prudent parent standard in determining whether to give permission for a child living in an out-of-home placement to participate in extracurricular, enrichment, cultural, or social normal age-appropriate activities by considering:
 - 1) The child's chronological age, maturity level, physical and behavioral capacities, and cognitive and emotional developmental levels
 - 2) The potential risk factors and the appropriateness of the activity
 - 3) The best interest of the child, based on information known by the caregiver
 - 4) The importance of encouraging the child's emotional and developmental growth
 - 5) The importance of providing the child with the most family-like living experience possible
 - 6) The behavioral history of the child and the child's ability to safely participate in the proposed activity.
- B. Notify the Family Service Worker if the child will participate in an age-appropriate activity that will cause the child to be outside of the approved placement for more than twenty-four (24) continuous hours. The resource family will provide as much notice as possible, particularly for normal age-appropriate activities that require the child to be outside the approved placement for several days such as summer camps.
- C. Provide the Family Service Worker with:
 - 1) Activity location address
 - 2) Contact name at identified location
 - 3) Contact phone number
 - 4) Anticipated dates for which the child will stay at this location
 - 5) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity).

The Family Service Worker will:

- A. Assess the appropriateness of the proposed activity when notified by the resource family or the authorized official of a contract placement provider that the child in care will be outside the approved placement for more than twenty-four (24) continuous hours in order to participate in said activity.
 - 1) If the proposed activity is determined to be appropriate:
 - a) Select the Alternate Care button on the Foster Children Screen in the Division information system.
 - b) Complete the Alternate Care Screen.
 - i. If the child is already participating in the activity, this screen should be completed immediately.
 - ii. If the child has not yet begun participating in the activity, this screen should be completed prior to the start of the activity.

- c) Enter the actual end date of the activity on the Alternate Care Screen when the resource family or other placement provider confirms with the Family Service Worker that the child has returned to the resource home.
- 2) If there are concerns regarding the appropriateness of the proposed activity:
 - a) Notify the FSW Supervisor.
 - b) If the FSW Supervisor and Family Service Worker determine that the proposed activity is inappropriate, notify the resource family or authorized official of a contract placement provider that the child will not participate in the said activity.
 - c) Document notification in the Contact Screen.

The FSW Supervisor will:

- A. After receiving any notification of concerns from the Family Service Worker, hold a case conference with the worker to determine if proposed activity is appropriate.
- B. Notify the Area Director of the Family Service Worker's concern and the action taken as a result of the case conference between the Family Service Worker and the FSW Supervisor.

306.2: Babysitting

08/2024

The Family Service Worker will:

- A. Notify the County Supervisor if he or she has cause to believe that babysitting services are being used inappropriately, excessively, or if the Family Service Worker has concerns about the character or competence of the individual(s) providing baby-sitting services.
- B. Call a meeting with the resource family, if deemed appropriate by the Supervisor, to clarify the appropriate use of babysitting services.
- C. Document the meeting with the resource family in the Contacts screen.

The County Supervisor will:

- A. After receiving any notification of concerns from the Family Service Worker, hold a case conference with the worker, to determine if a meeting with the resource family or another action is needed to ensure the appropriate use of babysitting services.
- B. Notify the Area Director of the Family Service Worker's concern and the action taken as a result of the case conference between the Family Service Worker and the Supervisor.

306.3: Child Care for Children in Temporary Out-of-Home Placement

08/2024

For routine child care services, the Family Service Worker will:

- A. Complete the Child Care Referral Request Screen.
- B. Authorize services for a maximum of three (3) months.
- C. Make verbal requests to the County Supervisor for approval in an emergency, followed by a completed automated request within five (5) business days.
- D. Initiate renewals no later than the first (1st) day of the last month of the eligibility period.
- E. Notify the childcare center in writing ten (10) business days prior to last day the child will attend if the child will no longer be attending.
- F. Complete a new Child Care Referral Request if the child leaves Foster Care and enters Protective Services and child care is to continue.

- G. Complete a new Child Care Referral Request if the child has been part of a Protective Services case and enters Foster Care and Child Care is to continue.

If the child leaves the foster care or protective services program, the Division information system will automatically notify the child care system.

The County Supervisor will:

- A. Approve the Child Care Referral Request, which will then be sent automatically to Central Office for review and approval.

For non-routine child care services (e.g. when the resource parents are obtaining resource parent training), the Family Service Worker will:

- A. Assist resource parents in obtaining childcare. All other requests must receive prior approval from the Area Director.

306.4: Resource Family Support System for Children in Out-of-Home Placement 08/2024

The Resource Worker will:

- A. Review the CFS-419: Resource Family Support System Information provided by the Centralized Inquiry Unit and provide background check forms for each appropriate member of each RFSS family as follows:
 - 1) CFS-316: Request for Child Maltreatment Central Registry Check (as generated by the Arkansas Child Maltreatment Central Registry website);
 - 2) CFS-342: State Police Criminal Record Check;
 - 3) CFS-593: Arkansas State Vehicle Safety Program (ASVSP);
 - 4) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business; and
 - 5) VSP-2: Authorization to Obtain Traffic Violation Record.
- B. Complete and document visual inspection of the RFSS home.
- C. Select the Support System Button on the Provider Screen.
- D. Complete the Resource Family Support System Individual Member Tab and Required Checks Tab for all appropriate members of the Resource Family Support System.
- E. Update this information as necessary following each annual reevaluation.

The Resource Family will:

- A. Notify the Family Service Worker each time the child in care will stay with a member of the Resource Family Support System for more than twenty-four (24) continuous hours and indicate:
 - 1) With which member of the Resource Family Support System the child will be staying;
 - 2) The dates that the child will be with the identified member of the Resource Family Support System; and,
 - 3) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity).

The child's Family Service Worker will:

- A. Select the Alternate Care Button on the child's current placement screen each time a child stays with a member of the Resource Family Support System for more the twenty-four (24) continuous hours.
- B. Complete the Alternate Care Screen.
- C. Enter actual end date of stay with RFSS on the Alternate Care screen when the child returns to the regular resource family.

306.5: Respite for Children in Out-of-Home Placement

08/2024

The resource family will:

- A. Notify the Family Service Worker in advance of each time the child in care will stay with an informal respite home and indicate:
 - 1) With which informal respite home the child will stay
 - 2) The dates that the child will be with the identified informal respite home
 - 3) Date that the child returns to the home once the activity has ended (i.e., actual end date of activity)
- B. Request approval from the Family Service Worker for informal respite home stays longer than seven (7) consecutive days.
- C. Notify the Family Service Worker immediately if the child needs formal respite care in order to prevent a child's current placement from disrupting or to prevent a residential, Division of Youth Services (DYS), juvenile detention center, acute psychiatric, or similar placement.

The Family Service Worker will:

- A. For informal respite care:
 - 1) Select the Alternate Care Button on the Foster Child Screen each time a child stays with an informal respite home for more than twenty-four (24) continuous hours.
 - 2) Complete the Alternate Care Screen.
 - 3) Update the Alternate Care Screen with the actual end date when the child returns to the regular resource family.
 - 4) Request extension approval for stays in an informal respite home longer than seven (7) consecutive days from the Area Director through the Division information system.
 - 5) Notify the resource family as to whether a request for the child's placement in an informal respite home for longer than seven (7) consecutive days is approved or denied.
 - 6) Complete Alternate Care Screen accordingly.
- B. For formal respite care:
 - 1) Contact the financial coordinator to request formal respite placement for up to seven (7) days.
 - 2) If a formal respite placement is authorized and available, make necessary arrangements with the formal respite care provider (however, please note the referral form for the formal respite provider must be signed by a DCFS County Supervisor, Financial Coordinator, Area Director, or Central Office Staff) and the regular resource family.
 - 3) Select the Alternate Care Button on the Foster Children Screen each time a child stays with a formal respite placement.
 - 4) Complete the Alternate Care Screen.

- 5) Update the Alternate Care Screen with the actual end date when the child returns to the regular resource family.
- 6) If an extension is needed beyond seven (7) days, consult with Area Director as to whether it is in the child's best interest to request an extended stay in formal respite care from the designated representative in Central Office.
- 7) If the request for an extended stay in formal respite care is deemed in the child's best interest, request extension approval from the designated representative in Central Office.
- 8) Notify the resource family and financial coordinator as to whether a request for the child's placement in a formal respite placement, for longer than seven (7) days, is approved or denied.

The Financial Coordinator or designee will:

- A. Contact the appropriate provider to assess formal respite availability for up to seven (7) days.
- B. If formal respite is available, notify the Family Service Worker and encumber in PIE/CFM.
- C. If formal respite is needed for more than seven (7) days, encumber in PIE/CFM once approval from Central Office is granted.

Internal Procedure 307: Providing Information to and Gathering Information from Resource Parents

08/2024

See DCFS Policy VII-H regarding overarching directives for providing information to and gathering information from resource parents. Specific operational procedures for staff follow below.

The Family Service Worker will:

- A. Provide resource parents with copies of the case plan, health services plan and placement plan-Placement Plan Provider Information Report within five (5) calendar days of completion or revision.
- B. Provide the resource parent with the child's Social Security number, when it is required, to obtain services, care, or treatment for the child.
- C. Review and update the child's health and education records and provide copies to the resource parent at the time of placement.
- D. Provide any additional information, as it becomes available, such as a complete copy of the most recent CANS assessment and the child's case plan.
- E. Collaborate with the Office of Chief Counsel during court preparation staffings to ensure resource parents are called as witnesses as appropriate.
- F. Submit the CFS-343: Notification of Court Appearance or other form of notification (e.g., email) to resource parents within ten (10) calendar days of any review hearing to be held with respect to a child in their care.
 - 1) Regardless of method used to notify resource parents of upcoming court hearings, document when notification was provided and what method of notification was used in the Division's information management system.
- G. Provide the resource parent with a copy of a substantiated child maltreatment report on the child in their care, if requested.
- H. If a current or previously licensed resource parent requests records for a child previously placed in their home other than the social security number of that child for tax filing purposes, the FSW will consult with his or her supervisor within two (2) business days regarding if the resource parent has a legitimate need for that information.
 - 1) If the FSW Supervisor agrees that the resource parent has a legitimate need for the information, he or she will send the request to the DCFS Release of Information Coordinator for review and approval within two (2) business days of receipt of the request.
 - 2) The DCFS Release of Information Coordinator will review the request to assess if the resource parent has a legitimate need for the information and:
 - a) Approve or deny the request accordingly
 - b) Inform the FSW Supervisor and FSW of the decision within two (2) business days of receipt of the request

The resource parents will:

- A. Maintain the information shared as confidential.
- B. Use information contained in the case plan and other provided information to assist the child placed in the resource home in understanding the progress of the child's foster care case.

Internal Procedure 310: Placement in Qualified Residential Treatment Program

10/2022

Every child deserves a safe, stable family every day. Even when a child or youth must be removed from his or her biological or legal family, the Division will make every effort to place each child in a family-like setting with additional attention to keeping sibling groups in the same family-like setting whenever possible and in the best interest of all siblings. Family-like settings include provisional resource homes, regular resource homes, private licensed placement agency resource homes, therapeutic foster care homes, and other family-style care settings.

At times some youth may require a higher level of care than they can receive in a family-like setting. In such situations, the Division will collaborate with colleagues and stakeholders to determine the best level of care to meet the child's needs. These collaborative discussions will be underpinned with the understanding that after the needed treatment is received, the team will work to return the child to a family-like setting as safely and swiftly as possible.

For some youth a higher level of care may include a Qualified Residential Treatment Program (Q RTP). Youth who have a diagnosis of severe emotional disturbance and are not able to function in a family setting or who are discharging from a higher level of care such as an acute or subacute psychiatric residential treatment program but still not able to function in a family-like setting may be eligible for referral to a Q RTP.

Key elements of Q RTP providers include, but are not limited to:

- A. Adherence to an evidence-based, trauma-informed treatment model for youth with a serious emotional disturbance who cannot function in a family-like setting;
- B. Provision of treatment that engages the youth's family members to the extent appropriate (when in the best interest of the youth);
- C. Nursing staff and other licensed clinical staff on-site and available 24-hours a day as required by a Q RTP's specific evidence-based treatment model
- D. Enrollment of youth in appropriate educational setting
- E. Provision of monthly progress reports to FSW
- F. Provision of documentation for each court hearing that shows continued placement in Q RTP is in the best interest of the youth;
- G. Discharge planning and family-based aftercare support for a minimum of six (6) months after discharge which includes:
 - 1) Referral for community-based services
 - 2) Coordination of services in conjunction with the PASSE Care Coordinator
 - 3) Participation in family and permanency team staffing via telephone
 - 4) Initial contact with client, family, resource parent or other placement provider within seventy-two (72) hours of discharge
 - 5) Weekly telephone call with client and caretaker within the first (30) days after discharge and monthly thereafter.

To formally establish that a youth cannot function in a family-like setting and requires a QRTP placement, a QRTP Assessment conducted by eQHealth via the Child and Adolescent Needs and Strengths (CANS) tool and subsequent placement determination must be completed within thirty (30) calendar days of placement in a QRTP setting. The CANS is the Division's age-appropriate, evidence-based, validated, functional assessment tool to be used for QRTP placement considerations. The court of jurisdiction in the youth's case must then approve the QRTP placement within sixty (60) calendar days of placement in a QRTP.

Youth over eighteen (18) years of age may not be placed in a QRTP as an initial placement. However, youth placed in a QRTP who turn eighteen (18) years of age may remain in the QRTP placement if the youth continues to require treatment as evidenced by the youth's treatment plan and recommendations from the youth's therapist. However, DCFS will collaborate with the treatment team to ensure that once a youth turns eighteen (18), the goal is to expeditiously transition the youth to an appropriate recommended level of care. In addition, the youth must not exceed the QRTP placement timeframes outlined in 310.1 below. For youth over the age of eighteen (18) in a QRTP, the QRTP provider will also document in the program's monthly report how any youth over age eighteen (18) is currently meeting at least one of the Extended Care Requirements for that month. The monthly report will be submitted to designated staff within the DCFS Mental Health and Treatment Services Unit. Discharge planning to a family-like setting begins the day the youth is placed in QRTP placement. This includes ongoing collaboration with the QRTP provider and the youth's permanency team throughout the youth's time at the QRTP and throughout the discharge support and services facilitated by the QRTP provider.

310.1 QRTP Referral and Approval Requirements

10/2022

To determine if a youth cannot function in a family-like setting and requires placement in a QRTP to better meeting his or her needs, the Family Service Worker (FSW) will:

- A) Complete the CFS-367: Specialized Placement Application and submit to the Mental Health and Treatment Services Unit by emailing Residential.Placement.Referral@dhs.Arkansas.gov. Referral email will include:
 - 1) Completed CFS-367: Specialized Placement Referral
 - 2) Current case plan demonstrating need for QRTP
 - 3) Current CANS demonstrating need for QRTP
 - 4) Youth's placement history
 - 5) Therapy notes within the past 365 days
 - 6) Educational documents
 - 7) Psychiatric evaluation within the last 180 days
 - 8) Safety plan if applicable
 - 9) Developmental evaluation within the last 365 days
 - 10) Psychological evaluation within the last 365 days
 - 11) Discharge notes within the last 60 days
- B) Participate in a discussion with the Mental Health and Treatment Services Unit about appropriateness of QRTP placement.

- 1) If QRTP is determined to be appropriate, discuss with the Mental Health and Treatment Services Unit the potential, available QRTP placement(s) to meet the youth's specific needs.
 - 2) Placement of any youth under thirteen (13) years of age will require DCFS Director or designee approval.
- C) If placement in a QRTP occurs:
- 1) Update the placement screen in the Division information management system
 - 2) Provide written notification to the local Office of Chief Counsel attorney, child's attorney ad litem (AAL), child's Court Appointed Special Advocate (CASA), if applicable, and Parent Counsel within 72 hours of placement in QRTP preferably via CFS-300-A: AAL, CASA and Child Notification of Change in Out of Home Placement (may be emailed).
 - 3) Within forty-eight (48) hours of QRTP placement, contact eQHealth assessor to request and set QRTP Assessment meeting date, time, and location.
 - a) The QRTP Assessment meeting itself must take place within fourteen (14) business days of the assessment request.
 - b) The QRTP Assessment meeting must take place in a location convenient for the youth and the youth's family.
 - 4) Invite the following people to the QRTP meeting preferably via email for documentation purposes but the best mode of communication may be determined for each person (** denotes mandatory attendance*) and carbon copy (cc) the Mental Health and Treatment Services Unit on all email invitations for QRTP Assessment Meeting:
 - a) Youth*
 - b) Youth's parents or legal caregivers*
 - c) Other relatives in the youth or immediate family's life, if applicable
 - d) Youth's most recent placement provider prior to QRTP placement
 - e) Youth's AAL
 - f) eQHealth Assessor*
 - g) Current QRTP case manager, clinician, and/or other QRTP representative*
 - h) Any fictive kin to youth or family members or others who would qualify as supportive adults, if applicable
 - i) County of Origin Family Service Worker*
 - j) FSW Supervisor or alternate DCFS Supervisor if FSW's direct supervisor is not available
 - k) Resident County FSW, if applicable (may participate by phone)
 - l) Youth's CASA, if applicable
 - 5) Complete QRTP Assessment Meeting Screen in the case plan tab in the Division's information management system.
 - 6) Expect eQHealth Assessor's QRTP placement determination letter within 21 days of making the assessment request and forward this letter to the youth's permanency team and all other stakeholders listed above.
 - 7) Work with the Mental Health and Treatment Services Unit to appeal any QRTP placement denied as result of the eQHealth assessment within 24 hours of denial.
 - a) If the denial is upheld, collaborate with the youth's team to determine next steps for the youth. This may involve moving the youth to another safe and appropriate placement type within thirty (30) days of the denial or continuing

at the QRTP but without federal funding for that placement if approved by the Mental Health and Treatment Services Unit.

- 8) Collaborate with local OCC to ensure that a hearing is held within sixty (60) calendar days of QRTP placement.
 - a) Document need for QRTP placement in court report and in all subsequent court reports, as applicable.
- 9) Work with Mental Health and Treatment Services Unit to obtain DCFS Director approval for any QRTP placement that:
 - a) Needs to go beyond twelve (12) consecutive months or eighteen (18) non-consecutive months for youth ages thirteen (13) and older; or,
 - b) Needs to go beyond more than six (6) months for any youth under age thirteen (13) The initial requests to Mental Health and Treatment Services Unit to go beyond these timeframes must be made at least one month prior to the six, twelve, or eighteen month, as applicable, anniversary dates above.
- 10) Participate in family and permanency team meetings as part of the on-going assessment process.
- 11) Begin discharge planning to a family-like setting the day the youth is placed in QRTP placement to include, but not limited to, promptly responding to any phone, electronic, or written correspondence from the QRTP provider.

The FSW Supervisor will:

- A. Conference with FSW regarding need for QRTP placement.
- B. Support FSW through QRTP referral and placement process to include ensuring the FSW follows procedures and timeframes described above.
- C. Attend QRTP Assessment Meeting or arrange for an alternate DCFS supervisor to attend if he/she is not able to attend the QRTP Assessment Meeting.

The Mental Health and Treatment Services Unit will:

- A. Monitor the Residential.Placement.Referral@dhs.Arkansas.gov inbox for QRTP referrals.
- B. Review CFS-367 and supporting documentation to ensure QRTP is an appropriate level of care for the youth.
 - 1) If appropriate, the Mental Health and Treatment Services Unit will send CFS-367 to QRTP providers for review and placement request.
 - 2) If not appropriate, the Mental Health and Treatment Services Unit will conference with FSW and FSW Supervisor to explain and offer additional guidance.
- C. Notify FSW when QRTP placement is secured.
- D. Enter a request for a QRTP Assessment in eQSuites within two (2) business days of placement in a QRTP.
- E. Retrieve eQHealth Assessor's QRTP placement determination letter from eQSuites.
- F. Collaborate with FSW regarding any needed QRTP placement extensions beyond twelve (12) consecutive months for youth ages thirteen (13) and older (or eighteen (18) non-consecutive months for youth ages thirteen (13) and older) or beyond six (6) consecutive months for youth younger than thirteen (13) years of age and submit requests to DCFS Director, as appropriate.

The DCFS Director or designee will:

- A. Review QRTP placement extensions beyond twelve (12) consecutive months for youth ages thirteen (13) and older (or eighteen (18) non-consecutive months for youth ages thirteen (13) and older) or beyond six (6) consecutive months for youth younger than thirteen (13) years of age.
- B. Approve or deny extension requests as appropriate.

Internal Procedure 311: Placement Monitoring for Specialized Placements in PRTF, Sub-Acute, QRTP

03/2025

The Division of Children and Family Services (DCFS) recognizes youth are best served in a family setting. Placement of youth in a more restrictive setting should only be considered when their needs cannot be met in less restrictive environments. DCFS is committed to ensuring the safety and well-being of all children placed in more restrictive settings such as Psychiatric Residential Treatment Facilities (PRTFs), Sub-Acute, and Qualified Residential Treatment Programs (QRTPs).

The following is a detailed list of programs, including placement types and names. This compilation serves as a reference for staff to ensure accurate documentation and appropriate placement decisions:

Hospital/Psychiatric Residential Treatment Facilities (PRTF)

- Arkansas State Hospital
- Arkansas Children's Hospital
- Bridgeway
- Conway Behavioral
- Centers (Little Rock, Monticello)
- Courage
- Delta
- Millcreek
- Perimeter (Forrest City, NWA/Ozarks, West Memphis)
- Piney Ridge
- Pinnacle Point Hospital
- Rivendell
- Riverview
- Springwoods
- Timber Ridge
- United Methodist Behavioral Hospital
- United Methodist Children's Homes (Little Rock, Bono)
- Valley
- Vantage
- Youth Homes

Qualified Residential Treatment Programs (QRTP)

- Ouachita Children's Center
- Boys Home
- Consolidated Youth Services
- East Arkansas Youth Services
- Open Arms
- Haven

- Compact
- Vera Lloyd
- Methodist
- Fostering Change
- Dana's House
- Ridgeview
- Youth Home
- Maggie House

When a youth is placed in a specialized environment, the Primary FSW will:

- A. Make the primary placement of a youth in PRTF, Sub-Acute, or QRTP:
 - 1) Provide comprehensive and accurate information about the child during the assessment and admission phase
 - 2) Sign consents and facilitate treatment and treatment planning
 - 3) Collaborate with the facility in the development of the plan of care
 - 4) If the assigned FSW is not the one that makes the placement, an initial face to face visit between the youth and the primary FSW must occur within three (3) business days to maintain consistency and engagement
- B. Update the placement screen for the child in the Division information management system.
- C. Provide written notification of changes in placement according to Policy VII-L: Changes in Out-of-Home Placement to the following via CFS-300, CFS-300-A, text, or email, as applicable:
 - 1) The local Office of Chief Counsel attorney
 - 2) Youth's Attorney ad litem (AAL)
 - 3) Youth's Court Appointed Special Advocate (CASA)
 - 4) Parent Counsel
 - 5) The youth's biological caregivers
 - 6) The youth's siblings
- D. A second visit should be made within fourteen (14) days of the initial placement to assess the child's adjustment, engagement in their treatment plan, and immediate safety. This ensures continuity and immediate engagement.
- E. Maintain ongoing engagement with the youth and the youth's treatment team:
 - 1) Remain engaged in the treatment process and determine with the therapist at the beginning of treatment the degree and methods of engagement (e.g., phone, conversation, written reports, conferences)
 - 2) Complete weekly phone check-ins with the youth and document in the Division information management system
 - 3) Attend each appointment scheduled with a psychiatrist or physician, ensuring the youth's health and well-being are being monitored comprehensively as well as to maintain involvement in the youth's therapeutic process and support their reintegration into a family setting, if applicable

- 4) Encourage, if applicable, the youth's family members to the extent appropriate (when in the best interest of the youth) to take part in discharge planning and family therapy. (This decision should be made in coordination with the youth's therapy team.)
- F. Maintain Monthly Face to Face Visits:
- 1) Complete monthly face-to face visits with the youth in the facility to ensure consistent engagement and follow up on the treatment progress. These visits must include:
 - a) Detailed observations of the youth's physical and emotional state
 - b) Private conversations that give the youth an opportunity to express concerns or needs
 - c) Inspection of the facility to ensure it meets cleanliness, safety, and sanitation standards
 - d) Review and discussion of the youth's treatment progress, including input from facility staff and therapists
 - e) Documentation in the Division information management system to ensure thorough records are maintained
 - f) All concerns regarding youth safety must be reported to the FSW Supervisor immediately
- G. Ensure discharge planning begins at the time of admission and ensure FSW continues involvement in discharge planning throughout the placement episode.
- H. Coordinate after care plans:
- 1) Facilitate timely discharge by identifying specific placement plans as early as possible to promote a transition from one level of care to another
 - 2) Ensure compliance with all scheduled outpatient appointments

Central Office Program Managers and Program Administrators who manage contracts with these providers will, respectively:

- A. Visit each provider under their management quarterly, at minimum.

Internal Procedure 345: Trust Accounts

08/2024

The Department of Human Services (DHS), Division of Children and Family Services (DCFS), maintains Trust Accounts for children in foster care who receive Supplemental Security Insurance (SSI), Social Security Administration (SSA) Title II Benefits, Child Support, Veterans Benefits (VA), Railroad Benefits (RR), or worker's compensation. See DCFS Policy VI-J regarding overarching directives for trust accounts for children in DHS custody. Specific operational procedures for staff administering trust accounts for children in foster care follow below.

345.1 Opening a Trust Account

08/2024

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

- A. List the income source, amount, and frequency on the child's Income screen in the Division's information system.
- B. Update the child's Relationship screen in the Division's information system, if the income source is Child Support, so that an electronic referral is made to the Office of Child Support Enforcement.

The IV-E Eligibility Unit will:

- A. After thirty (30) days of the date a child enters foster care, submit a change of payee request to the appropriate agency(s) for a child receiving cash benefits who has been court ordered into foster care.
- B. Prepare appropriate forms and deliver monies received directly by the IV-E Eligibility Unit, to the DHS Accounts Receivable section for establishment of or deposit into a foster care trust account.

345.2 Closing a Trust Account

08/2024

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

- A. Exit the child from foster care in the Division's information system.
- B. Ensure the name and address of the child's custodian/legal guardian, and the relationship to the child are correct in the Division's information system.
- C. Immediately request all outstanding bills, that will be paid from a foster care trust account from providers, and forward with appropriate documentation as soon as possible:
 - 1) To the IV-E Eligibility Unit for non-P-card purchases; or,
 - 2) To the Central Office Financial Support Unit for P-card purchases.

The IV-E Eligibility Unit will:

- A. Complete forms to close out the account and send the closeout packet to the Office of Finance and Administration.
- B. Notify the Social Security Administration that the child has exited foster care so that SSA may determine the appropriate payee for the child's ongoing benefits.

345.3 Change of Payee Requests

08/2024

The FSW will:

- A. Notify the DCFS Eligibility Unit when the FSW becomes aware that a child entering care is already receiving benefits from SSA, SSI, VA, RR Benefits, Child Support, or other income.
- B. For child support, refer the child's parent(s) to the Office of Child Support Enforcement using the Relationship screen in the agency information system.
- C. Maintain a record of expenses for the child.

The DCFS Eligibility Unit will:

- A. Notify the appropriate office that the child is in the custody of DHS/DCFS:
 - 1) For Social Security benefits: Submit an SSA-11-BK: Request to be Payee form to the Little Rock Social Security Office, unless the child is placed in a provisional relative or fictive kin resource home.
 - 2) For VA benefits: Telephone or fax the VA office with the primary recipient's benefit number and advise them that DHS/DCFS requests to become the new payee.
 - 3) For RR benefits: Contact the Benefits Department of the specific, individual railroad company to advise them that DHS/DCFS requests to become the new payee.
 - 4) For Child Support: The Office of Chief Counsel will submit a copy of the court order placing the child in foster care to the Office of Child Support Enforcement (OCSE).

345.4: Requests for Trust Account Funds

08/2024

The Division staff making the purchase for the child will for all purchases:

- A. Verify funds availability in the client assets screen in the Division information system.
- B. Complete the appropriate sections of CFS-334: Foster Care Services – Authorization for Billing, indicating the amount and purpose for the funds being requested.
- C. Request approval from County Supervisor or designee and Area Director or designee.
- D. When the approved CFS-334: Foster Care Services – Authorization for Billing is received from the Financial Coordinator (see below for County Supervisor, Area Director, Financial Coordinator, and Eligibility Analyst roles), complete purchase:
 - a) Within forty-eight (48) hours of receiving approval if purchase will be made with a P-Card;
 - b) Within five (5) days of receiving approval if purchase will not be made with a P-card.
- E. Upon completion of purchase:
 - 1) For P-Card purchase:
 - a) Within three (3) business days of purchase:
 - i. Complete and sign separate P-Card Transaction Log for each transaction;
 - ii. Sign receipt and write in case number, Trust ID, and client date of birth on the receipt;
 - iii. Submit P-Card Transaction Log, copies of receipts, CFS-334: Foster Care Services – Authorization for Billing, and two (2) legible copies to the Financial Coordinator.
 - iv. Place copies of receipts and CFS-334 in the child's hard file.

- v. Complete CFS-335: Confirmation of Receipt of Goods for Child in Foster Care and submit to the Central Office Financial Support Unit.
- 2) For Non-P-Card purchase:
 - a) Within five (5) business days of purchase:
 - i. Sign receipt and enter case number, Trust ID, and client date of birth on the receipt;
 - ii. Submit copies of receipts, CFS-334: Foster Care Services – Authorization for Billing, and two (2) legible copies to Financial Coordinator; and,
 - iii. Place copies of receipts and CFS-334 in the child’s hard file.
 - iv. Complete CFS-335: Confirmation of Receipt of Goods for Child in Foster Care and submit to the Central Office Eligibility Unit.

The County Supervisor or designee will:

- A. Review completed CFS: 334: Foster Care Services – Authorization for Billing.
- B. If approved, send to Area Director or designee.
- C. If denied, return to Division staff who would have completed the purchase with reason for denial or requested changes.

The Area Director or designee will:

- A. Review completed CFS: 334: Foster Care Services – Authorization for Billing.
- B. If approved, send to CFS-334 and send justification to the Financial Coordinator.
- C. If denied, return to County Supervisor or designee with reason for denial or requested changes and include Area Financial Coordinator on the email.

The Area Financial Coordinator will:

- A. Forward the CFS-334: Foster Care Services – Authorization for Billing and justification to the Eligibility Analyst
- B. Upon completion of purchase with P-Card:
 - 1) Review P-Card Transaction Log, receipts, CFS-334: Foster Care Services – Authorization for Billing, and copies of documents from Division staff who made the purchase.
 - 2) Verify information on the receipt
 - 3) Verify purchases were made as approved on the CFS-334
 - 4) FedEx all material referenced above to the applicable Central Office Financial Support Unit Budget Specialist.
- C. Upon completion of purchase for non-P-Card Purchases:
 - 1) Review receipts, CFS-334: Foster Care Services – Authorization for Billing, and copies of documents from Division staff who made the purchase.
 - 2) Verify information on the receipt
 - 3) Verify purchases were made as approved on the CFS-334
 - 4) Send all materials referenced above to the Eligibility Analyst.

The Eligibility Analyst will:

- A. Assess the hold request.
 - 1) If the hold request is denied, notify the Financial Coordinator of the denial
 - 2) If the hold request is approved, assign Trust Account hold number (as appropriate) based on CFS-334: Foster Care Services – Authorization for Billing approvals; and

- a) Email the approved CFS-334: Foster Care Services – Authorization for Billing to the Division staff who will complete the purchase.
- B. Upon completion of purchase for non-P-Card purchase:
 - 1) Review receipts, CFS-334: Foster Care Services – Authorization for Billing, and copies of documents from Division staff who made the purchase
 - 2) Verify information on the receipt
 - 3) Verify purchases were made as approved on the CFS-334
 - 4) Verify if the vendor is already entered into the applicable system and, if not, request W-9 from the Financial Coordinator; and,
 - 5) Send all materials referenced above to the Eligibility Unit Supervisor or designee for review.

The Central Office Financial Support Unit will (for P-Card purchases):

- A. Receive email with approval and hold number from the Eligibility Specialist
- B. Place documentation in pending file for Division P-Card shopper
- C. Notify Department of Finance and Administration to request an increase in single purchase limit, if needed;
- D. Notify appropriate staff, if a transaction amount exceeds allowed amount
- E. Serve as liaison among Financial Coordinator, DFS, and Accounts Payable
- F. Prepare documents for Office of Systems and Technology (OST) to deduct purchases from Trust Account.

The Eligibility Unit Supervisor or designee will (for non-P-Card purchases):

- A. Review all material sent by Eligibility Analyst as outlined above
- B. Sign the CFS-334: Foster Care Services – Authorization for Billing for Central Office
- C. Deliver material to Accounts Payable.

Accounts Payable will (for non-P-Card purchases):

- A. Review all material sent by the Eligibility Unit
- B. Send check to vendor for goods or services.

345.5 Reporting Information Changes to the DCFS Eligibility Unit

08/2024

Status changes that affect a child in foster care's trust account will be coordinated between the DCFS Eligibility Unit and the DHS Office of Finance.

The FSW will update and keep current all placement information in the Division's information system to ensure accuracy of auto-generated reporting to the Social Security Administration:

- A. Placement changes to or from a detention, medical, or psychiatric treatment facility, or run-away status.
- B. The child exits foster care or is deceased.
- C. Errors are found on the Trust Account Report or on the assets screen in the Division's information system.

345.6 Monitoring Trust Accounts for Accuracy and Compliance with State and Federal Regulations 08/2024

- A. Review and sign each approved CFS-334: Foster Care Services – Authorization for Billing.
- B. Monitor trust account balances to ensure they do not exceed resource limits. Resource limits are:
 - 1) Two-thousand dollars (\$2,000) for Non-IV-E Foster Care Medicaid (category ninety-one (91)).
 - 2) Two-thousand dollars (\$2,000) for Foster Care EC Medicaid (category ninety-six (96)), DDS Waiver Medicaid, Foster Care Spend Down Medicaid (category ninety-seven (97)), and Supplemental Security Income (SSI category forty-five (45)), Long Term Care Medicaid.
 - 3) Ten thousand (\$10,000) for title IV-E.
- C. Carry out any trust account related responsibilities delegated by the Area Director.

The Area Director or designee will:

- A. Monitor Trust Reports for their DCFS service area, ensuring:
 - 1) Compliance with state and federal resource limits
 - 2) Accuracy of basic information (county placement, duplicate accounts, etc.)
 - 3) Necessary actions by FSWs
 - 4) Reimbursement of board payments.
- B. Monitor CFS-334: Foster Care Services – Authorization for Billings for duplicate, repeat, or unusual purchases prior to submission to the Office of Finance and Administration– General Operations Section.
- C. Monitor reports of trust funds being held or conserved for action by county staff.
- D. Ensure Trust Reports (available electronically through the Division’s information system) are used to the full extent necessary.

345.7: Information System Team Trust Account Responsibilities 08/2024

The Information System Team will:

- A. Update asset screen information with daily Trust Report data.
- B. Provide OFM with an electronic mechanism to review and approve prior to reimbursement for board payment from the trust account.
- C. Make corrections to asset screens upon notification.
- D. Provide support to resolve issues with processing of transactional data using the Trust Fund. Net application, as applicable.
- E. Reimburse contract payments from trust accounts in the same manner currently used to reimburse board payments.

345.8: DCFS Eligibility Unit Responsibilities 08/2024

The DCFS Eligibility Unit will:

- A. Assist DCFS staff with trust account related problems as needed.
- B. Assist DCFS with training its staff on new or revised trust account policies and procedures.
- C. Monitor Trust Report balances for compliance with state and federal resource limits.

- D. Monitor Trust Reports for accuracy (e.g., is the child still in care, duplicate accounts, incorrect Social Security Numbers, etc.).
- E. Monitor trust account for funds being held or conserved pending action by the Family Service Worker.
- F. Forward requests for corrections on asset screens to information system personnel for correction.
- G. Notify the Social Security Administration (SSA) of changes in their recipient's status (excluding a request to close accounts). *In accordance with Section 2126.1 of the Social Security Handbook, status changes must be reported within ten (10) days after the month in which they occur.* Changes may be reported by:
 - 1) Calling SSA, toll free, at 1-800-772-1213; or,
 - 2) Calling, writing, or visiting the Little Rock Social Security Office.
- H. Review and forward each completed non-p-card CFS-334: Foster Care Services – Authorization for Billing to the Office of Finance and Administration- General Operations Section within five (5) business days of receipt.
- I. Review each non-p-card CFS-334: Foster Care Services – Authorization for Billing returned by OFM for needed additional information, errors, etc., and coordinate with DCFS staff for corrected re-submission of the form(s) to OFM for processing.
- J. Review electronic request for trust account hold and if approved then assign a hold number.
- K. Email the hold number to the Area Financial Coordinator and the Central Office Financial Support Unit.
- L. Review and forward requests to open, close, hold, release, or update trust accounts or funds to the Office of Finance and Administration-General Operations Section electronically, if appropriate, within five (5) business days of receipt. Requests may also be submitted in writing with appropriate DCFS staff signature(s).
- M. Process Overpayment Requests received from Social Security. Overpayment requests and requests to close trust accounts will be submitted to OFM on the CFS-334: Foster Care Services-Authorization for Billing with appropriate documentation.

Internal Procedure 346: Achieving a Better Life Experience (ABLE) Accounts

02/2025

The Department of Human Services (DHS), Division of Children and Family Services (DCFS), maintains ABLE Accounts for children in foster care. Funds may be placed in ABLE Accounts to support a better life experience for those with disabilities.

346.1 Opening an ABLE Account

02/2025

The IV-E Eligibility Unit will:

- A. Determine if the child meets eligibility guidelines for an ABLE account.
- B. When appropriate, prepare documents necessary to open an ABLE account and submit documents to Ascensus.
- C. When appropriate, prepare appropriate forms and deliver to the DHS Accounts Payable.
- D. Send all necessary paperwork, and the check to Ascensus.

346.2 DCFS Transfer of an ABLE Account

02/2025

To close an ABLE account when a child returns home, is emancipated, enters a guardianship, or is adopted, the FSW will:

- A. Before exiting the child from foster care, check the asset screen to determine if the child has an ABLE account.
- B. Exit the child from foster care in the Division's information system.
- C. Ensure the name and address of the child's custodian/legal guardian, and the relationship to the child are correct in the Division's information system.
- D. Immediately report the case closure to the Eligibility Unit Designee.

The IV-E Eligibility Unit will:

- A. Send forms for completion to the caregiver of record upon exiting foster care along with a request for completed forms to be returned to the Eligibility Unit.
- B. Complete change forms to transfer the ABLE account to the designee.
- C. Send forms completed by the family and change/transfer forms completed by the Eligibility Unit to Ascensus to have the account transferred.

346.3 ABLE Account Funds

02/2025

The Division staff making the purchase for the child will:

- F. Verify the child has an ABLE account in the client assets screen in the Division information system and if an ABLE account is present:
 - 1) Contact the Eligibility Unit Designee to verify funds availability in the ABLE account (amounts in the assets screen reflect initial funds used to open the account and do not reflect current assets)
- G. Ensure any child ages fourteen (14) or older has a current, approved Transitional Life Plan, that is fully executed and includes signatures of the parties and the child.

- H. Ensure that requested expenses fall in one or more of the following categories:
 - 1) Education (private tuition, tutoring, summer program, fees, books, laptop)
 - 2) Housing (housing modifications, rent, mortgage, utilities, property taxes)
 - 3) Transportation
 - 4) Health/Prevention and Wellness (medical services and special equipment)
 - 5) Funeral and burial
- I. Complete the appropriate sections of CFS-334: Foster Care Services – Authorization for Billing:
 - 1) Indicate the amount of funds being requested
 - 2) Attach a letter indicating:
 - a) How the use of the funds to make the specific purchase will improve the quality of life for the disabled child and how the purchase relates to the child's disability
 - b) Why other funding sources are not being used for the purchase. ABLE funds cannot supplant (be used instead of) other funds such as SNAP, Medicaid, Chafee, private insurance, or SSI. If other funds are available for the same purpose, then those funds must be used to make the purchase
- J. Request approval from County Supervisor or designee and Area Director or designee.
- K. When the approved CFS-334: Foster Care Services – Authorization for Billing is received with approvals from the Financial Coordinator then:
 - 1) Complete an Agency Generated Invoice (AGI), for the desired vendor and provide to the Area Financial Coordinator for submission to the Eligibility Unit Program Administrator
 - 2) Within five (5) business days of the vendor receiving payment:
 - a) Obtain a copy of the receipt for the purchase
 - b) Sign receipt and enter case number, Trust ID, and client date of birth on the receipt
 - c) Submit copies of receipts, CFS-334: Foster Care Services – Authorization for Billing, and two (2) legible copies to the Area Financial Coordinator and Eligibility Unit Program Administrator
 - d) Place copies of receipts and CFS-334 in the child's hard file
 - e) Scan copies of receipts and CFS-334 into Edoctus
 - f) Complete CFS-335: Confirmation of Receipt of Goods for Child in Foster Care
- L. Report Information Changes to the Eligibility Unit Program Administrator when a child with an ABLE account:
 - 1) Exits foster care
 - 2) Death occurs

The County Supervisor, or designee, will:

- A. Review completed CFS: 334: Foster Care Services – Authorization for Billing
 - 1) If approved, send to Area Director or designee
 - 2) If denied, return to Division staff who would have completed the purchase with reason for denial or requested changes
- B. Supervise the ABLE account related work carried out by the Family Service Workers.
- C. Carry out any account related responsibilities delegated by the Area Director.

The Area Director, or designee, will:

- D. Review completed CFS: 334: Foster Care Services – Authorization for Billing.

- 1) If approved, send to CFS-334 and send justification to the Financial Coordinator
- 2) If denied, return to County Supervisor or designee with reason for denial or requested changes and include Area Financial Coordinator on the email
- E. Monitor ABLE Reports for their DCFS service area, ensuring:
 - 1) Compliance with state and federal limitations on supplanting funds
 - 2) Accuracy of basic information (county placement, duplicate accounts, etc.)
 - 3) Necessary actions by FSWs
- F. Monitor CFS-334: Foster Care Services – Authorization for Billings for duplicate, repeat, or unusual purchases prior to submission.

The Area Financial Coordinator will:

- A. Forward the CFS-334: Foster Care Services – Authorization for Billing and justification to the Eligibility Analyst
- B. Upon completion of purchase:
 - 1) Review receipts, CFS-334: Foster Care Services – Authorization for Billing, AGI, and copies of documents from Division staff who made the purchase
 - 2) Verify information on the receipt
 - 3) Verify purchases were made as approved on the CFS-334
 - 4) Send all materials referenced above to the Eligibility Unit Program Administrator

The Eligibility Unit Program Administrator will:

- A. Review CFS-334: Foster Care Services – Authorization for Billings for ABLE trust account hold:
 - 1) Contact Ascensus to:
 - a) Verify the purchase request meets established guidelines
 - b) Verify available funds held in the ABLE account
 - 2) If approved:
 - a) Notify Area Financial Coordinator of the approval and that a check is being sent to the vendor
 - 3) If the hold request is denied:
 - a) Notify the Area Financial Coordinator of the denial
- . Upon completion of purchase:
 - 1) Review receipts, CFS-334: Foster Care Services – Authorization for Billing, and copies of documents from Division staff who made the purchase:
 - a) Scan the documents into Edoctus
 - b) Verify information on the receipt
 - c) Verify purchases were made as approved on the CFS-334
 - 2) Monitor ABLE accounts for Accuracy and Compliance with State Regulations
 - 3) Assist DCFS field staff with:
 - a) ABLE account related problems as necessary
 - b) Training staff on new or revised ABLE account policies and procedures
 - 4) Review and forward requests to open, close, hold, release, or update ABLE accounts or funds

346.4 Outside Contributions to ABLE accounts when DCFS is the authorized organization for the account:

02/2025

When an individual or provider wishes to contribute to an ABLE account for a child in foster care the contributing party must contact the DCFS Eligibility Unit Program Administrator and provide notification of the intent to make a contribution and the contribution amount.

The Eligibility Unit Program Administrator will:

- A. Provide a pre-filled Contribution Form to the party listing:
 - 1) Child's name
 - 2) ABLE account number
 - 3) Blank line for the party to designate an amount they wish to deposit
 - 4) Mailing address to send the form and contribution check to
- B. Notify the contributing party that they need to:
 - 1) Copy the specific form, updating only the contribution amount for each deposit, and use the form for each contribution
 - 2) E-mail the Eligibility Unit Program Administrator each time a contribution is made, with the following information:
 - a) Account owner's name
 - b) Check number
 - c) Check amount
 - d) Date the check was mailed
- C. Verify in the online AR ABLE account:
 - 1) That the check was deposited into correct ABLE account
 - 2) The amount matches the information previously provided by the contributing party
- D. Work with Ascensus and the party making the contribution to resolve and discrepancies.

346.5 Death of an ABLE account owner when DCFS is the authorized organization for the account:
02/2025

The FSW will:

- A. Provide notifications of change to the parents and assigned parties to the case as required in Procedure VII-L3: Emergency Changes in Out-of-Home Placement.
- B. Follow Policy IX-B3: Child Fatality Notification.
- C. Provide notification to OCC and the Eligibility Unit via email within twenty-four (24) hours:
 - 1) Of the details of the death
 - 2) That the youth was the owner of an ABLE account and has assets that must go through probate as managed by OCC
 - 3) Costs associated with burial arrangements
 - 4) Provide any information requested in follow up within twenty-four (24) hours of the request

The Eligibility Unit will:

- A. Notify Ascensus of the death of the account owner.
- B. Notify field staff that no additional funds can be deposited or withdrawn from the account until further notice.
- C. Provide OCC with information requested to process the probate case, to include, but not limited to:
 - 1) Dollar amounts held within the ABLE account

- 2) Receive probate documents from OCC and forward probate documents to Ascensus.
- D. Manage final ABLE Account funds according to guidance from Ascensus:
- 1) 1st for any funeral, burial, or outstanding disability expenses
 - 2) 2nd for any outstanding medical bills
 - 3) If any funds remain after funeral/burial, remaining balances will be payable to the deceased's estate and sent to the entity, person, or agent listed in the legal document submitted

OCC will:

- A. Pursue a probate case on behalf of the deceased estate.
- B. Ensure the following are obtained during the probate process and are forwarded to the DCFS Eligibility Unit:
 - 1) A certified copy of the Account Owner's death certificate
 - 2) A certified legal document (small estate affidavit or probate document) that names the administrator of the estate and establishes who should be permitted to request funds from the ABLE account
 - 3) A letter of instruction that addresses:
 - a) Who the check should be made payable to
 - b) Amount of check
 - c) What the check is for:
 - i. Funeral and burial expenses
 - ii. Remaining funds in the account

Internal Procedure 350: Personal Needs Allowance for Children in Foster Care

04/2020

For children in foster care who receive Supplemental Security Income (SSI) and/or Social Security Administration (SSA -- Title II) benefits and for whom DHS is the payee of those juveniles' SSI and/or SSA benefits, there is an "SSA Personal Needs" hold type for foster care trust accounts. When DHS is the payee for an SSI or SSA/Title II beneficiary, a hold of \$30 is placed each month for those children at the time the funds are integrated into the system. The held funds may be used or saved for the beneficiary children but, if used, must be used for items permitted as "SSA Personal Needs" expenditures. Examples of personal needs expenditures include:

- Clothing: athletic shoes, bathing suits and caps, boots, disability-related adaptive clothing, gloves, hats, scarves, seasonal garments, shoe, slippers, etc.
- Convenience Items: clocks, clothes hamper, radios, stationery, TVs, wristwatches, etc.
- Health and Hygiene Items: bath scale, brushes, combs, cosmetics, cosmetic surgery, dermatology treatments, elective or cosmetic dental treatments, hairdresser/barber cost, soaps, toilet articles, etc.
- Hobby and Craft Items: art supplies, cameras, film, photo albums, etc.
- Living Area Furnishings: bedspreads, blankets, carpets, curtains, lockable chest/trunk, mirrors, pictures, pillows, posters, quilts, recliner, rocking chair, etc.
- Miscellaneous Items: magazine subscriptions, reasonably priced holiday presents for family/friends, restaurant meals, telephone expenses for call to and from out of town relative, etc.
- Therapeutic Equipment: if recommended by a doctor or appropriate therapist, and not covered by another source: book holders, crawlers, electric wheelchairs, feeding aids, hearing aids, orthopedic shoes, shower and bathroom chairs, toilet aids, walkers, etc.
- Transportation Expenses: trips to visit family or for relatives to visit patient in special cases, trips to amusement parks, State fairs, summer camps, etc.

If the funds are not spent in the month that the hold is placed, then the funds will remain on hold and the hold will be increased by another \$30 the next month if the child continues to receive SSI/SSA and DHS continues to be payee. For example, a foster child receiving \$735.00 SSI for whom DHS is payee is placed in care on January 15. The child remains in care for the full month of February. \$30 is placed on hold for February and is not spent during that month. The child remains in care during March. Provided DHS continues to receive SSI for the child for March, then the hold is increased from \$30 to \$60. At any time, the funds may be used for items permitted as "SSA Personal Needs." If the purchase is less than or equal to the SSA Personal Needs hold amount, then the CFS-334: Foster Care Services Authorization for Billing form will list the amount of the purchase up to the held amount. If the purchase exceeds the amount on hold and there are sufficient funds in the account to increase the hold, then the CFS-334 and supporting documentation will request the hold be increased to the expected amount of purchase. The hold number will appear on the

child's trust account detail in the Division's information management system, so that hold number on a CFS-334 may be used to make a purchase for one or more of the personal needs items.

All personal needs purchases will reflect an individualized evaluation of the children's situation and needs. The utilization of SSI or SSA monies to purchase items normally provided by a facility or covered under a State or Federal program is prohibited.

Internal Procedure 352: Use of State Vehicles for Youth in Foster Care to Complete Driving Skills Test

02/2024

The Department of Human Services (DHS), Division of Children and Family Services (DCFS or Division) is charged with assisting teenagers in foster care to successfully transition to adulthood. A key component to functioning well in the adult world is the ability to drive. Further, the agency is required by state and federal law to ensure that all youth aging out of foster care at 18 or older have either 1) an Arkansas driver's license; or 2) a state ID. DCFS' preference is for youth to obtain their driver's license since that is one factor that can help set the youth up for future success.

To that end, DCFS collaborates with the Arkansas Insurance Department and Arkansas Department of Finance and Administration to help support eligible youth in foster care ages 16-21 earn an Arkansas driver's license by allowing them to use state vehicles assigned to DCFS for the sole purpose of completing the driving skills test administered by the Arkansas State Police. To continue this collaboration, DCFS must request a waiver on an annual basis from the Arkansas Insurance Department to allow youth in foster care ages 16-21 to be covered under the Arkansas Multi-Agency Insurance Trust (AMAIT) Fund Vehicle Insurance Policy as a named insured. Likewise, the Division must also request a waiver each year from the Arkansas Department of Finance and Administration for this population to be considered a named insured under the Arkansas State Vehicle Safety Program.

To mitigate risks, youth must complete a driver's education course prior to scheduling his or her driving skills test with the Arkansas Department of Public Safety.

Once a driver's education course is successfully completed, the youth's county of origin caseworker or assigned Transitional Youth Services Coordinator must submit to the DCFS Transitional Youth Services (TYS) Program Manager or designee:

- A. Documentation verifying successful completion of a driver's education course
- B. CFS-388: Application and Agreement to Participate in the DCFS Foster Care Driving and Car Insurance Reimbursement Program
- C. A written assessment that the youth does not pose any safety issues that would make it imprudent for him or her to use a state car for this purpose. Examples of information to consider in this assessment include:
 - 1) Behavior and placement history over the last six (6) months
 - 2) Any recent changes in medication

Upon written approval from the TYS Program Manager or designee, the youth and his or local team will collaborate to schedule an appointment for a driving skills test through the Department of Public Safety. The DCFS staff person who will transport the youth to the scheduled driving skills test is responsible for reserving a state vehicle through TRIPS. That DCFS employee must drive the state

vehicle to and from the driving skills test without exception. The youth may only be a driver in a state vehicle during the driving skills test when a Department of Public Safety employee is also in the vehicle.

Internal Procedure 355: Supporting Pregnant and Parenting Youth in Out-of-Home Placements

08/2024

The Division of Children and Family Services (DCFS) is charged with helping young adults in out-of-home placements transition to adulthood. While we hope that young adults in the custody of DCFS will delay pregnancy and fatherhood until adulthood, we know this will not always be the case. As such, part of helping these young adults transition to adulthood will include preparing them for parenthood.

For a young woman in foster care who is pregnant, the Family Service Worker (FSW) in collaboration with the Transitional Youth Services (TYS) Coordinator, will ensure she applies for Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) benefits. These staff will also search out a childbirth class as well as an infant CPR/First Aid class within close proximity to the youth's placement and enroll her in the classes preferably between twenty-four (24) and thirty-two (32) weeks of pregnancy. If the youth is interested in doula services, the Division can also cover the costs of those services to a certified doula. If the youth is interested in breastfeeding, the FSW and YYS Coordinator will also try to locate a breastfeeding class in the area for the youth to attend. The Division will cover all costs for these classes. The FSW and YYS Coordinator will also share and review safe sleep materials with the youth prior to the infant's arrival.

The Transitional Youth Services (TYS) Unit in Central Office conducts Safety Baby Showers (using the Arkansas Children's Hospital Injury Prevention Center curriculum) for all females and males in foster care prior to the arrival of the infant. The youth's FSW or YYS Coordinator will contact the YYS Unit when the pregnant youth is approximately six (6) to seven (7) months along in the pregnancy to schedule a Safety Baby Shower. The YYS Unit will work with local staff to schedule a Safety Baby Shower for that youth in the youth's placement county. The YYS Unit will facilitate the Safety Baby Shower and provide the decorations but will need assistance from local staff in finding a location in that community (preferably not the DHS office) to hold the baby shower. The YYS Unit will need assistance in purchasing the refreshments as well as working with the youth to identify invitees. The father of the infant is encouraged to participate in the Safety Baby Showers unless there are documented safety concerns or other extraordinary circumstances. If it is the father of the child who is in foster care, a Safety Baby Shower can also be provided.

Young women in foster care who are pregnant are also highly encouraged to participate in a home visiting program if one is available in her county that meets her specific needs. The programs that are geared toward expectant mothers and continue to support mom and baby after the baby's arrival are the Nurse Family Partnership and Healthy Families America. More information about home visiting can be found on the Arkansas Home Visiting Network website (<http://www.arhomevisiting.org/>), but please note that for Healthy Families America, enrollment may occur up to the age of twenty-four (24) months at time of intake as long as there is documentation to show the referral was made by DCFS, which is an exception for this population and not reflected on the website listed above. In addition, if a home visiting program is not available to the youth and her child, the Triple P Program offered through MidSOUTH will accept referrals for mothers in foster care and their infants and toddlers.

It is important to ensure that the youth is as prepared as possible for the arrival of her infant. In addition to providing the education resources listed above, the Division will also ensure the following items are purchased generally between twenty-four (24)-thirty-two (32) weeks of pregnancy and are provided to the youth (if they are not already available in the youth's current placement). The Division recognizes that the specific needs may vary. The prices attached to individual items below are meant to serve as guidelines. As such, the amounts of the individual items purchased may be above or below the guidelines listed below as long as the overall amount spent for the preparation of the infant does not exceed \$750 (to include taxes).

Car seat	\$150.00
Pack n Play or Crib* (to include sheets)	\$300.00
Large supply of diapers and wipes	\$100.00
Set of bottles	\$35.00
Infant clothes (to include pajamas, onesies, no scratch mittens, hat, and socks)	\$75.00
Infant towels and wash cloths	\$25.00
Infant bathtub	\$25.00
Burp cloths	\$15.00
Outlet covers and cabinet locks	\$15.00
Pacifiers	\$10.00
Total Not to Exceed	\$750.00

*Consider current placement of mother and impending future plans. If the mother in foster care is placed with her infant in a resource home, the resource home should already be equipped with a crib and that crib shall have current certification of compliance with Consumer Product Safety Guidelines. However, if the resource home has not previously had infants or other young children placed in the home but is willing to accept the young mother and her baby to keep them placed together, a crib may still be purchased (and shall meet Consumer Product Safety Guidelines) with the understanding that the crib will follow the mother/baby, if a placement change occurs. If it is likely a mother and her child may change placements frequently, a pack n' play may allow for that mobility while still ensuring a safe sleep environment.

All of these items may be requested on the same requisition form and will be coded to Chafee.

The youth's FSW or TYS Coordinator will assist her in working with her local Women, Infants, and Children (WIC) office to provide access to a free breast pump and/or formula, as applicable, once her infant arrives.

Once the infant arrives, if the mother and baby are placed together in a resource home, the teen mother's board rate may be increased by an additional \$451 to provide additional financial support to help meet the infant's ongoing needs. The special board justification reason of "minor parent" will be selected when increasing the board amount for this reason (if for whatever reason the infant comes into the custody of the Department, then at that point the infant would receive his/her own

board payment). If the mother resides in her own apartment or home, her board rate may also be increased by up to an additional \$451 (special board rate justification: minor parent), but if she has other income from a job, her additional income may also be taken into consideration when determining the special minor parent board rate and revising her TYS budget.

After the arrival of the infant, if the mother and infant are placed together, the FSW will check to make sure the infant's sleeping environment meets all safe sleep requirements at each visit to the youth in her placement. The FSW will also review safe sleep protocols with the young mother at each visit for at least the first six (6) months after the infant's birth.

If the youth has opted to breastfeed, the FSW and/or TYS Coordinator will ensure the mother has been provided with the Arkansas WIC Breastfeeding Helpline at 1-800-445-6175 and Baptist Health Breastfeeding Warm Line at (501) 202-7378 both of which answer calls from across the state 24/7 (the youth may need to leave a voice mail, but calls are generally returned within one hour). The FSW and/or TYS Coordinator will also help the youth research information about local breastfeeding supports such as Breastfeeding Peer Counselors through the local WIC Program or La Leche League if the youth is interested. DCFS will assist with transportation as available and appropriate.

After the arrival of the baby, the FSW and/or TYS Coordinator will determine if there are parenting classes and/or home visiting programs available that are geared toward the care of infants and toddlers and strengthening parent/child bond and enroll the youth and her baby as appropriate. See references above to the Arkansas Home Visiting Network and Triple P referrals for mothers in foster care and their children.

Finally, the Division will also help the mother access daycare vouchers as appropriate for her infant or other young children. Daycare vouchers may be keyed for the infant or young child of a mother in foster care by unselecting the "participating as child" button on the mother's Client Information Screen in the Division's information management system, keying the daycare vouchers for her child, and then re-selecting the "participating as child" button on the mother's Client Information Screen in the Division's information management system immediately after the daycare vouchers have been keyed.

Internal Procedure 360: Quality Assurance Coordinator for Missing Children

06/2023

The Division of Children and Family Services (DCFS) Quality Assurance (QA) Coordinator for Missing Youth plays an integral role in locating children missing from foster care by supporting the youth's caseworker in these efforts. The missing child's assigned caseworker is required to:

- A. Report within two (2) hours of the child going missing the information on the missing or abducted child to the law enforcement authorities for entry into the National Crime Information Center (NCIC) database of the Federal Bureau of Investigation, and to the National Center for Missing and Exploited Children (NCMEC; see DCFS Policy VII-N: Child Missing from an Out of Home Placement for more details):
 - 1) A photo of the missing or abducted child or youth
 - 2) A description of the child's or youth's physical features, such as height, weight, sex, ethnicity, race, hair color, and eye color
 - 3) Endangerment information, such as the child's or youth's pregnancy status, disabilities, prescription medications, suicidal tendencies, substance use disorders, vulnerability to being sex trafficked, and other health or risk factors
 - 4) Whether child indicated a destination
 - 5) If the individual was traveling by car, the make and model number, license plate number, as well as registration (if possible)
 - 6) Name of the individual who last saw the missing person
- B. Obtains a report number and the contact information for the officer assigned to the case and documents the report number in the Division's information management system.
- C. Contact the local Office of Chief Counsel (OCC) attorney within twenty-four (24) hours of receiving notice for the missing child and request that the Office of Chief Counsel (OCC) attorney file a motion/order to notify the court that the child is missing.
- D. Secure the personal belongings of the missing person until the police provide further direction.
 - 1) Items may include:
 - a) Hairbrush, toothbrush, etc. in the event that investigators may need to undertake DNA analysis
 - b) Electronic equipment such as a cell phone or computer that law enforcement may need to locate the child
 - c) Any written material such as a journal/ notes/ diary.
- E. Notify local law enforcement and NCMEC immediately if there is any suspicion that the youth is involved in human trafficking.
- F. Document suspected human sex trafficking in the Division's information management system.

- G. Maintain regular communication with law enforcement agencies (e.g., local law enforcement, FBI, U.S. Marshals, as applicable) and NCMEC in efforts to provide a safe recovery of a missing or abducted child or youth, including by sharing information pertaining to the child's or youth's recovery and circumstances related to the recovery.
- H. Respond to law enforcement as needed who contact DCFS to provide an assessment when they locate and transport missing children to determine if it is appropriate to release the child to a specific person.
- I. If the assigned missing detective determines the child needs to be entered into NAMUS, provide the items for DNA and or medical / dental records as requested.

In most cases, DCFS staff will engage with the local assigned law enforcement officer/assigned detective first. However, in more severe cases (e.g., missing human trafficking victims), DCFS will keep in contact with the assigned Federal Bureau of Investigations agent or the Department of Justice /United States Marshals agent. DCFS works directly with the US Marshals office and communicates with them daily to locate children missing from foster care. DCFS also gives updates to the assigned VICE agent and CACD investigator when there are sex crime allegations.

Depending on the severity of the matter (e.g., ongoing matters in criminal court) determines the amount of ongoing communication needed with law enforcement. The follow-up contact is circumstantial based on the need for follow up communication.

In addition, the QA Coordinator for Missing Children helps support local DCFS staff in locating missing children by:

- A. Monitoring Missing Children Report generated by the Division's information management system and researching efforts put forth to date regarding locating the youth to include electronic case record review to ensure required notifications to local law enforcement and NCMEC have been made.
- B. Communicating with or ensuring the assigned caseworker communicates with local law enforcement and NCMEC to approve the photo provided and determine if it shall be released via the media.
 - 1) DCFS communicates with both agencies that the child shall not be identified as a child in foster care to the public.
- C. Running the missing child's photo in investigative software (e.g., Spotlight) to assist law enforcement agents with any social media posts uploaded of the child through facial recognition software.
- D. Coaching local staff regarding due diligence efforts to locate missing youth and collaborating with local staff, local law enforcement, and other stakeholders to help locate missing youth from Central Office through use of social media platforms and other online tools (e.g., CLEAR and Spotlight) and documenting efforts in the Division's information management system, as applicable
- E. Providing training and other information regarding missing youth and human trafficking to staff, youth, and stakeholders upon request to increase awareness of the vulnerability of youth in foster care to trafficking
- F. Monitoring No Photo in report in the Division's information management system and working with local staff to have current pictures uploaded (and sent to NCMEC, when

applicable) while providing coaching in regard to importance of maintaining up-to-date photos in the Division's information management system

- G. Assisting with maintaining regular communication with or ensuring assigned caseworker's communication with law enforcement agencies (e.g., local law enforcement, FBI, U.S. Marshals, as applicable) and NCMEC in efforts to provide a safe recovery of a missing or abducted child or youth, including by sharing information pertaining to the child's or youth's recovery and circumstances related to the recovery.

Internal Procedure 375: Facilitated Discharge Planning

10/2021

The Division of Children and Family Services (DCFS) strives to prevent crisis placements regarding treatment and to ensure a seamless transition process for children discharging from acute, sub-acute, or QRTP settings. To that end, DCFS Clinical Facilitators will facilitate discharge planning meetings with the assigned Family Service Worker (FSW) (county of origin FSW and resident county FSW, as applicable), FSW Supervisor(s), and any other members of the local DCFS team as needed, and to assess if appropriate for the child's parents to be present, if parental rights are still in place, attorney ad litem, the PASSE, and the current facility from whom the child is receiving services.

During discharge planning meetings, the Clinical Facilitator will pose questions regarding the mental health treatment of the child, the responsibilities of all parties involved, information about their medications, if applicable, and level of care recommendation. Please follow the procedures listed below for each respective placement type.

375.1: Entry to and Discharge from Acute Placements

10/2021

The Family Service Worker (FSW) will:

- A. When a child is going to be admitted to an acute placement, send an email to the DCFS Clinical Facilitator box at DCFS_clinicalfacilitator@dhs.arkansas.gov to provide notification of the placement. The email will need to include the following information in the following format:
 - o Name:
 - o DOB:
 - o Where is the child be admitted into?
 - o What PASSE is the child in?
 - o Who is the care coordinator and contact information?
- B. Key the placement change within two (2) business days.
- C. Continue to check in with child's hospital team (nurse, social worker, or therapist)
- D. Invite parent or guardian if rights are in place and it is assessed as appropriate

The Clinical Facilitator will:

- A. Call or email within one (1) business day to set up a discharge planning meeting.
- B. Ensure daily calls occur until the child's discharge plan is made and confirmed.

375.2 Subacute

10/2021

The Family Service Worker will:

- A. Email DCFS_clinicalfacilitator@dhs.arkansas.gov within three (3) business days of a child going into a sub-acute/residential placement. The email will need to include the following information in the following format:

- Name:
 - DOB:
 - Where is the child be admitted into?
 - What PASSE is the child in?
 - Who is the care coordinator and contact information?
- B. Initiate emergency calls if the child goes acute while in a subacute setting per Internal Procedure 375.1: Entry to and Discharge from Acute Placements.
 - C. A FSW or FSW Supervisor will ensure that visits or phone calls happen with children in sub-acute at least once every two weeks.

The Clinical Facilitator will:

- A. Call and/or send an email within three (3) business days of receiving the notification email to set up a discharge planning meeting that will occur during the first week of the child's stay.
- B. Set up and facilitate weekly calls until the provider reports that child is stable at the facility.
- C. Resume facilitation of weekly calls when the thirty (30)-day discharge notice is given by the provider.
- D. Emergency calls will take place if the child is admitted into an acute placement while in a subacute setting immediately as per Internal Procedure 375.1: Entry to and Discharge from Acute Placements.

375.3: Discharge Planning from Qualified Residential Treatment Program

10/2021

The Clinical Facilitator will:

- A. Upon receipt of invitation from EQ Health, participate in the EQ Health assessment to discuss discharge planning, barriers, and timelines.
- B. Ensure the team receives a thirty (30)-day notice prior to discharge as written per the Qualified Residential Treatment Program (QRTP) contracts.
- C. Ensure the team has the discharge summary within then (10) days of discharge.
- D. At the six (6)-month placement mark at the QRTP facility, increase the number of meetings and/or calls to develop an appropriate discharge plan.

The Family Service Worker will:

- A. Make contact every other week with child placed in the QRTP.
- B. Continue to keep the 367 updated based on the last ninety (90) days of behaviors happening at the QRTP so that when discharge meetings start, the 367 is prepared to send out for referrals.
- C. If a child is admitted into an acute placement while in QRTP, follow Internal Procedure 375.1: Entry to and Discharge from Acute Placements and facilitate a call with the QRTP facility to confirm child's acceptance back into program.

375.4: Discharge from Therapeutic Foster Care Placement

10/2021

The Clinical Facilitator will:

- A. Arrange and facilitate progress meeting at six-month therapeutic foster care (TFC) home placement mark to address what services are being utilized, the progress of the child, what level the child is currently maintaining, and the permanency plan.
- B. Assist in coordinating meetings to include TFC provider, adoptive parents, and the PASSE when the pre-adoptive home is located and selected to ensure smooth discharge process.

The Family Service Worker will:

- A. If child in TFC is admitted to an acute placement, follow Internal Procedure 375.1: Entry to and Discharge from Acute Placements, which will also include the TFC provider.

Internal Procedure 380: Youth in Extended Foster Care as His or Her Own Monthly Board Payee

08/2024

For the majority of the youth in Extended Foster Care, the preference is for a Transitional Youth Services (TYS) Sponsor to be identified for the youth. Per DCFS Policy VIII-B, the role of the sponsor is to provide support and guidance to the youth as they transition to adulthood, as well as receive the board payment on the youth's behalf. The sponsor is then intended to assist the youth in managing the board payment according to their established budget developed by the youth and their Transitional Team.

However, there may be occasional situations in which a youth in Extended Foster Care may be made his or her own payee for the monthly board payment. The following elements will be assessed by the youth's Transitional Team to determine if the youth may be made his or her own payee:

- A. Efforts made to locate an appropriate sponsor for the youth and reasons for which an appropriate sponsor could not be identified for the youth.
- B. Maturity level of the youth, particularly as it relates to youth's history of managing money responsibly.
- C. Youth's history of consistent communication with Division staff.

- D. Whether the youth is currently in compliance with the Extended Foster Care requirements or has a viable plan to come into compliance with said requirements (see Policy VIII-B: Extended Foster Care for more information).

If based on the assessment above, the youth's Transitional Team determines the youth should be his or her own payee:

- A. The youth's origin county FSW will submit the request via email to his or her Area Director with his or her supervise carbon copied.
- B. If the Area Director approves, he or she will forward the request to the Assistant Director of Field Operations or designee.
- C. If the Assistant Director of Field Operations or designee approves, he or she will forward the request to the DCFS Director or designee.
- D. If the DCFS Director or designee approves, the approval notification will be communicated back to the origin county FSW.
- E. The FSW will request the youth to complete a W-9 form in order to set the youth up as a vendor.
- F. The FSW will submit to his or her Financial Coordinator the completed W-9 along with the approval from the DCFS Director or designee to make the youth his or her own payee.
- G. The Financial Coordinator will submit the request and associated documentation referenced above to his or her Budget Specialist in Central Office to establish the youth as vendor in AASIS.
- H. Once a vendor number has been established for the youth, the Budget Specialist will notify the local Financial Coordinator and origin county FSW.
- I. The origin county FSW will request the local Resource Supervisor to open the youth as a provider in the Division's information management system.
- J. The Resource Supervisor will open the youth as a provider and also make the youth "unavailable" as a placement option in the Division's information management system.
- K. The origin county FSW or his or her supervisor will key the youth into the placement and enter the board amount, as established by the youth's budget developed by the youth and his or her Transitional Team.
- L. The youth's Transitional Team will monitor how the youth manages his or her monthly board payments by periodically requesting expense payment verification.
- M. Finally, the youth's Transitional Team will also ensure the youth understands that, in the event he or she expends his or her board payment before paying all monthly expenses, the Division is not responsible for providing additional funding to the youth prior to the next board payment, unless the youth qualifies for any of the financial supports outlined on the TYS Support Table for youth in Extended Foster Care. The origin county FSW will document this conversation in the Division's information management system.

Internal Procedure 382: Youth in Extended Foster Care Residing Out of State

08/2024

The Division of Children and Family Services (DCFS) recognizes that youth in Extended Foster Care may want to pursue opportunities outside the State of Arkansas. While the Division wishes to reasonably support youth in such endeavors and allow them to remain connected to DCFS staff in Arkansas, there are also challenges to providing a sufficient level of supervision and care to youth residing out of state. In addition, in some instances youth may qualify for more benefits in their current state of residence if they are not participating in the Arkansas Extended Foster Care Program.

As such, a youth living outside of Arkansas is only eligible to participate in the Arkansas Extended Foster Care Program if at least one of the following requirements is met:

- A. The youth has moved to another state to reside with family and is still enrolled in high school.
 - 1) The youth may continue to participate in the Extended Foster Care Program until he or she earns a high school diploma or GED.
- B. The youth has been placed by DCFS with an out-of-state placement provider.
- C. The youth is attending college or another accredited post-secondary education or training program in another state supported by an Arkansas Education and Training Voucher (ETV).
- D. The youth is serving in any branch of the military and attending basic training out of state or otherwise meeting service requirements out of state.
- E. The youth does not meet any of the requirements above, but the youth's current state of residence agrees to provide supervision through a non-minor dependent (NMD) Interstate Compact for the Placement of Children (ICPC) request.

Beyond these basic eligibility requirements, the youth must also agree to:

- A. Participate in monthly virtual visits with the assigned origin county Family Service Worker (FSW) in Arkansas.
 - 1) When keying the virtual visits, select the Face to Face (Other) as the "Type/Location" for the contact.
- B. Provide documentation to his or her origin county FSW that verifies he or she is in compliance with the Arkansas Extended Foster Care Program requirements (see Policy VIII-B: Extended Foster Care for more information).
 - 1) For youth who move to another state under a non-minor dependent ICPC supervision agreement, this documentation must be provided by no later than sixty (60) days from the youth's arrival in the other state and may also be obtained by the assigned caseworker in the other state.
- C. Identify an eligible Transitional Youth Services (TYS) Sponsor who has the ability to electronically transfer the board payment funds to the youth.
 - 1) This sponsor requirement is waived if the youth has been approved to serve as his or her own payee for monthly board payments (see DCFS Internal Procedure 380: Youth in Extended Foster Care Serving as His or Her Own Monthly Board Payee for more information).

Prior to agreeing to allow the youth to reside outside of Arkansas while participating in the Arkansas Extended Foster Care Program, the origin county FSW will contact the DCFS Eligibility Unit to determine the appropriate steps regarding the youth's Medicaid coverage.

When developing a budget for a youth who is eligible to participate in the Arkansas Extended Foster Care while residing in another state, the youth's specific circumstances will be considered. For example, for a youth serving in the military, the majority of his or her room and board needs will already be met through his or her respective branch of the military. However, a small budget provided by DCFS may still be reasonable to cover any expenses not covered by the military such as a cell phone bill.

Internal Procedure 390: Hotel Stays for Youth in Extended Foster Care

01/2024

Placing a youth who is participating in the Extended Foster Care Program in a hotel is a last resort. However, due to a variety of factors, the Division of Children and Family Services (DCFS) must occasionally utilize this option to ensure a youth's safety. Hotel stays are intended to be short-term options until a better long-term housing option can be secured for the youth.

Prior to making a hotel reservation for a youth, the youth must agree to abide by the following:

- A. Contact the hotel if there is a delay in checking in as some hotels cancel reservations if the youth has not checked in by a specific time (for some hotels this is as early as 6:00 p.m.).
- B. Only youth for whom the reservation is made can be in the room -- no other guests.
- C. No smoking, drinking alcohol, or using any illegal substances or mis-using over-the-counter medications in the room.
- D. Be mindful of noise levels (e.g., keep the TV volume down, do not play music loudly).
- E. Do not damage the room and keep the hotel reasonably clean (e.g., take trash out, do not leave food sitting outside the fridge, keep laundry in one place, etc.).
- F. Allow hotel staff to clean the room once or twice weekly.
- G. Do not make phone calls from the phone in the hotel room or charge anything else to the room. Fees may apply to movies and other extras.

If any of these agreements are violated and/or DCFS receives complaints from the hotel about the youth's behavior or condition of the room, the Division may cancel the reservation. Further, if the hotel asks the youth to leave, DCFS cannot guarantee that another room in a different hotel will be provided.

When a youth is placed in a hotel, the primary Family Service Worker (FSW) will key the youth into an extraordinary circumstance placement in the Division's information management system.

To ensure that the hotel stay is a short tenure, the origin county Family Service Worker (FSW) for the youth staying in the hotel will set and facilitate weekly Transitional Team Meetings to discuss with the youth and his or her Transitional Team (to include the TYS Program Manager or TYS Specialist):

- A. Any safety issues or other concerns the youth may have encountered while at the hotel and, if there have been any incidents or concerns, how to address those
- B. Any needs the youth may have (e.g., food, medication, clothing, etc.) and how to meet those needs
- C. Other housing options and the steps that need to take place -- by the youth and Transitional Team members -- to secure a long-term housing option
- D. The youth's progress in meeting the Extended Foster Care Program participation requirements (see Policy VIII-B: Extended Foster Care for more information)
- E. Any lifelong connections the youth may have who could be possible supports.

In addition, the assigned county of origin FSW is required to conduct a face-to-face visit with the youth in the hotel room at least weekly. If the county of origin FSW is located in a different county

than the hotel in which the youth is staying, the origin county FSW is only required to make his or her monthly, face-to-face visit to the youth at the hotel. However, the assigned resident county FSW or TYS Coordinator for the youth is required to visit the youth face-to-face in the hotel room at least once a week during the weeks in which the origin county FSW is not making his or her monthly visit. The goal of these visits is to keep in frequent contact with the youth to ensure their safety and well-being, provide any case or service updates, and make sure the hotel room is reasonably clean. If the youth needs assistance in maintaining the cleanliness or orderliness of the room, the staff member will provide guidance or direct assistance, as appropriate for each individual youth and situation, in putting the room in order.

If a youth is in a hotel for four (4) consecutive weeks, the origin county FSW will submit a complex briefing to the DCFS Placement Team in Central Office. This will allow the DCSF Placement Team to meet on the case and determine if other options are available. However, there is nothing preventing the county of origin FSW from submitting a complex briefing to the DCFS Placement Team prior to four (4) weeks of a hotel stay if circumstances warrant the briefing.

If alternate housing options are secured for the youth (e.g., Supervised Independent Living Programs, resource home, Transitional Youth Sponsor home, Foster Youth to Independence housing voucher, etc.), but the youth refuses the alternate housing option, DCFS maintains the right to suspend the hotel reservation for the youth. However, in order to give the youth adequate time to prepare to make his or her own arrangements, the Division will provide the youth with thirty (30) days' notice (i.e., the Division will continue paying for the hotel for up to an additional thirty (30) days assuming all hotel agreements listed above are followed and there have been no complaints by the hotel regarding the youth). Staff, in coordination with the youth's PASSE Care Coordinator, are also expected to assist the youth in securing placement in a homeless shelter if, at the end of the thirty (30) days, the youth has not made other arrangements and continues to refuse the alternate housing options the Division may have previously arranged.

If alternate housing options cannot be located by the Division and there are not extenuating circumstances that prevent the youth from obtaining employment and saving enough money to secure his or her own housing -- with support of the monthly board payment -- staff will work closely with the youth to develop a plan for the youth to move out of the hotel or otherwise cease paying for the hotel stay.

Section 400 – RESOURCE

Internal Procedure 400: Resource Home Inquiries and Initial Screening

08/2024

See DCFS Policy VII-B: Resource Home Recruitment and Retention regarding overarching directives related to this topic. Specific operational procedures for staff related to recruitment and retention of resource homes follow below.

The general recruitment and promotion of the need for resource homes is shared by all DCFS staff. However, once traditional resource parent applicants submit a formal inquiry via www.fosterarkansas.org, the DCFS Centralized Inquiry Unit then takes responsibility for initial response to those inquiries, screening, and background check processing. Initial screening and background check processing for provisional relative or fictive kin resource parents are handled at the local county level.

400.1 General Recruitment of Traditional Resource Applicants

08/2024

When asked about how to apply to serve as a resource parent staff, all DCFS staff will:

- A. Refer anyone inquiring about becoming a resource parent to www.fosterarkansas.org.
- B. Provide a brief overview of the inquiry process to prospective resource parents.
 - 1) PUB-17: Road to Fostering can assist in providing talking points for this overview.

400.2 Centralized Inquiry Unit Response to Traditional Resource Applicant Inquiries

08/2024

The designated Centralized Inquiry Unit staff will:

- A. Enter information documenting all activities with the family beginning with applicant status (inquiry) to the approval process in the Division information system. This includes all appropriate Provider Screens – General Information Tabs, Household Members/Requirements Tabs, Contacts Screen, Preferences Tab, and Services Details Screen.
 - 1) Respond to all phone and internet inquiries within three (3) business days of receiving the assignment from the inquiry site. Give a brief explanation of the county foster care needs and explain the resource parent assessment process.
- B. If moving forward with the process, provide the family with Resource Packet 1 within one (1) business day after initial contact is made. Resource Packet 1 will consist of:
 - 1) A letter that:
 - a) Thanks the family for their interest
 - b) Identifies a contact person
 - c) Indicates the date, time, and location of the next information meeting in their county or, if applicable, a neighboring county that is hosting prospective resource parents from surrounding counties

- 2) CFS-316: Request for Child Maltreatment Central Registry Check Instructions (form electronically generated per the Central Registry Request instructions):
 - 3) CFS-341: Certification of Absence of Criminal Record
 - 4) CFS-342: State Police Criminal Record Check or instructions for electronically generating the CFS-342
 - 5) CFS-419: Resource Family Support System Information
 - 6) CFS-593: Arkansas State Vehicle Safety Program Additional Requirements for DCFS Drivers
 - 7) VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business
 - 8) VSP-2: Authorization to Obtain Traffic Violation Record
 - 9) Arkansas State Vehicle Safety Program Manual
 - 10) CFS-401: Current Household Information Sheet
 - 11) CFS-405: Worksheet for Social Security Benefits
 - 12) CFS-406: Family Financial Worksheet
 - 13) CFS-407: Employment Information Sheet
 - 14) CFS-415: Reference for Resource Family
 - 15) CFS-419: Resource Family Support System Information
 - 16) CFS-455: Request/Consent for Department of Health Services
 - 17) Road to Fostering Infographic
 - 18) Inquiry to Adoption Flowchart.
- C. Upon receipt of completed forms, route all background check forms to applicable units.
- 1) See DCFS Internal Procedure 400.3: Background Check Processing for Traditional Resource Applicants for specific instructions.
 - 2) If all checks clear, provide Resource Packet 2 to the family. Resource Packet 2 will include:
 - a) Cover letter
 - b) CFS-363: Resource Parent Applicant Smoking Certification
 - c) CFS-484: Landlord Notification of Potential Tenant Foster Care Services
 - d) CFS-404: General Medical Report
 - e) PUB-30: Resource Parent Handbook
 - f) Instructions for Online Pre-Service Training
 - g) PUB-23: Foster Care Court Process Infographic
 - h) PUB-24: Resource Home Visit Guide Infographic
 - 3) If all checks are not clear, consult with Centralized Inquiry Unit Manager regarding next steps in terms of whether:
 - a) Inquiry must be deleted, and provider number closed due to specific background check result information; or,
 - b) If Centralized Unit Inquiry staff may gather additional information from the family to determine, in consultation with the applicable Resource Worker and Resource Worker Supervisor, if the family is interested in and eligible to pursue an alternative compliance or policy waiver request, as applicable. See Appendix 8: Alternative Compliance and Policy Waiver Protocol.
- D. Attempt to contact the family to follow-up if the completed forms have not been received within ten (10) calendar days of sending them to the family.
- E. If the Centralized Inquiry Unit Worker is unable to contact the family after three (3) attempts (combination of phone and email):
- 1) Send an email to the family informing them that the Centralized Inquiry Unit Worker has attempted to contact them and will not be contacting them further, but also

welcoming the family to contact the Centralized Inquiry Unit if they are still interested in becoming a resource home

- 2) Delete the inquiry in the Division's information system and close the provider number (Centralized Inquiry Staff may reopen the provider number if the family decides to resume the application process in the future)

400.3 Background Check Processing for Traditional Resource Applicants

08/2024

The Centralized Inquiry Unit will:

- A. Submit the signed CFS-593: DCFS Arkansas State Vehicle Safety Program, VSP-1: Authorization to Operate State Vehicles and Private Vehicles on State Business, and VSP-2: Authorization to Obtain Traffic Violation Record to the Vehicle Safety Program Coordinator along with a clear copy of the driver's license for each prospective resource parent and any applicable teenage drivers to the appropriate person in the DCFS Background Check Unit for processing.
 - 1) Ensure copy of the driver's license includes front and back of license.
 - 2) Document on the Provider Household Member Required Checks Information Screen.
 - 3) See DCFS Internal Procedure 401: Assessment of Driving Record for more detailed information.
 - 4) The county office must receive the results of the Traffic Violations Record check before the family can be approved for training.
- B. Assist with the completion, as needed, of the CFS-316: Request for Child Maltreatment Central Registry Check for each household member age fourteen (14) years and older, excluding children in foster care to the Central Registry Unit. The CFS-316: Request for Child Maltreatment Central Registry Check must be notarized.
 - 1) If applicable, a Child Maltreatment Central Registry Check should also be conducted on each household member aged fourteen (14) years or older, in any state of residence in which they have lived for the past five (5) years, and in their state of employment, if different, for reports of child maltreatment.
 - 2) Document on the Provider Household Member Required Checks Information Screen.
 - 3) Provide a copy of the results to the county office for filing in the resource home record. The county office must receive the results of the Arkansas Child Maltreatment Central Registry Check before the family can be approved for training. Training waivers may be approved if child maltreatment check results from other states are still pending.
- C. Use CFS-341: Certification of Absence of Criminal Record to obtain written certification from the resource parents that any household member ages ten (10) through seventeen (17) does not have a criminal record. Provide a copy of results to the county office for filing in the resource home record.
- D. Submit the completed CFS-342: State Police Criminal Record Check for each household member, excluding children in foster care to the DCFS Criminal Background Check Unit or assist the applicant with submission of the State Police Criminal Record Check via the online Information Network of Arkansas (INA) process, as applicable. The CFS-342: State Police Criminal Record Check must be notarized. The State Police Criminal Record Check must be completed prior to requesting the FBI Criminal Background Check.
 - 1) Document on the Provider Household Member Required Checks Information Screen.

- 2) Provide a copy of the results to the county office for filing in the resource home record. The county office must receive the results of the State Police Criminal Record Check before the family can be approved for training.
- E. Facilitate the initial steps of the FBI fingerprint-based Criminal Background Check for all resource parent applicants and all members of the prospective resource home who are eighteen and a half (18.5) years of age and older, excluding children in foster care. The fingerprint-based FBI Criminal Background Check must be submitted prior to the family attending training; however, the results are not required before the family can attend training.
 - 1) Forward the completed CFS-342: State Police Criminal Record Check to the Criminal Background Check Unit or ensure completion of the State Police Criminal Record Check via the online process, as applicable.
 - 2) Upon receipt of the transaction number from the Criminal Background Check Unit, forward the transaction number to the applicant's resource worker who will ensure the applicant goes to an approved electronic harvester to have fingerprints scanned.
 - a) In the event of an applicant's fingerprints being rejected, the Criminal Background Check Unit will receive the rejection letter from the Arkansas State Police.
 - b) The Criminal Background Check Unit will send the rejection letter to the Resource Worker or other requestor to provide to the applicant.
 - c) The applicant must schedule a new fingerprint appointment using the online scheduling tool and take the rejection letter with them to the new appointment.
 - d) The applicant's fingerprints will be run again using the initial transaction number.
 - i. If there are two fingerprint rejections using the same transaction number both times, the Arkansas State Police may then run a name search. This can only be done when there have been two rejections on the same transaction ID per federal requirements.
- F. Document the results in the Division information management system.
 - 1) FBI results will be uploaded directly into the Division's designated system. The assigned Resource Worker or designee will receive an email from the Criminal Background Check Unit notifying the assigned Resource Worker or designee that the FBI result is available to be viewed.
 - 2) Only those who have CJIS Clearance and have an absolute need to view FBI results will be given access to view background checks in the Division's designated system.

If there are any offenses listed on an applicant's criminal background check results, the Resource Worker will:

- A. Send a CFS-508-A to the applicant via certified, restricted mail and document the letter in Provider Contact Information Screen in the Division information management system.
 - 1) If the applicant chooses to challenge the accuracy and completeness of his or her criminal history record or obtain missing disposition information and contacts the assigned Resource Worker within thirty (30) days of receipt of the CFS-508-A to inform the Resource Worker that the family will challenge the results, keep the resource parent application and associated provider number open in the Division

information system until the requested corrections are either approved or denied at which point further action will be taken, as appropriate.

- a) If there are changes or updates to an applicant's criminal history record and the decision is made to move forward with a request for an alternative compliance request from the Child Welfare Agency Review Board, see Appendix 8: Alternative Compliance and Policy Waiver Protocol.
- 2) If the Resource Worker does not receive notification that the family has elected to challenge the results of their criminal history report, then remove the Resource Parent application from the system and close the associated provider number.
 - a) If the family chooses to review and request corrections to their state or FBI criminal history reports in the future, they may reapply to become a resource parent at any point once corrections are made. Resubmission of a Resource Parent application does not guarantee approval as a Resource parent.
- 3) For information regarding denial of an applicant based on background checks, please see DCFS Policy VII-D: Denial of a Resource Home Applicant and related procedures.

Internal Procedure 401: Assessment of Driving Records for Resource Parents

08/2020

When assessing a current or potential resource parent's ability to provide placement for a child in foster care, the applicant is required to submit an authorization for the Division of Children and Family Services (DCFS) to obtain his or her Traffic Violations Record from the Office of Driver Services as permitted by A.C.A. § 27-50-908. This record returns the number of traffic offenses and other violations incurred by the resource applicant, to include the number of points assessed by the Office of Driver Services for convictions of moving traffic violations as per the Arkansas State Vehicle Safety Program (ASVSP). DCFS repeats Traffic Violations Record checks every two (2) years for active resource parents.

To ensure child safety DCFS will carefully assess what, if any, safety concerns exist for any applicant or current resource parent accumulating ten (10) or more points on their Traffic Violations Record.

Upon receipt of a Traffic Violations Record containing ten (10) or more points, staff will:

- A. Ensure the applicant or current resource parent has a valid driver's license issued by the State of Arkansas.
- B. Assess for safety issues.
- C. Ensure the applicant or current resource parent participates in a defensive driving course.
- D. Ensure applicants are not denied on the sole fact that they have ten (10) or more points on their driving records, but rather that his or her driving record and any related information is assessed for safety issues.
- E. Complete the safety assessment portion of the In-Home Consultation while considering the driving record results as part of that safety assessment.
- F. Ensure that applicants having between ten and seventeen (10-17) points on their driving record successfully complete a defensive driving course, which can be completed on-line prior to becoming an approved resource home.
- G. Ensure applicants with eighteen (18) or more points on their driving record successfully complete an in-person defensive driving course prior to becoming an approved resource home.

Internal Procedure 402: In-Home Consultation Visit

08/2024

See DCFS Policy VII-C: Resource Home Assessment Process regarding overarching directives related to the in-home consultation (IHC) visit for resource home applicants. Specific operational procedures for staff conducting IHCs follow below.

The In-Home Consultation Visit is generally the local Resource Worker's first opportunity to meet the resource applicants. This visit helps the Resource Worker begin to assess the family's functioning and capacity to meet the need of the children in foster care, to include verifying if the home meets Minimum Licensing Standards and DCFS Policy requirements. The visit will also be used to continue to explain the approval process to the applicants and answer any questions they may have. Other visits to the home may be required prior to the final walk-through and orientation to ensure the home comes into full compliance with all Minimum Licensing Standards and DCFS policy requirements and to offer continued support to the applicants through the process.

402.1 Assignment of In-Home Consultation Visit for Traditional Resource Applicants

08/2024

The Centralized Inquiry Unit Worker will:

- A. Provide the background check results electronic file and other documentation to the Resource Supervisor for traditional resource applicants.
- B. Assign the traditional applicant family to the Resource Supervisor's inbox.

The Resource Supervisor will:

- A. Conduct a thorough history check in the Division information management system.
- B. Assign the family to a Resource Worker within one business day upon receipt.

402.2 Resource Worker In-Home Consultation Visit Responsibilities

08/2024

The Resource Worker will:

- A. Within five (5) business days after being assigned the resource home, contact the prospective resource family to schedule an in-home consultation (IHC) visit and FBI fingerprinting. The in-home consultation visit for traditional resource applicants will take place within two (2) weeks of the scheduling call.
 - 1) However, IHC visit for prospective provisional relative or fictive kin resource families will be conducted as soon as possible as needed for a particular case.
- B. During the in-home consultation visit:
 - 1) Review and complete the resource staff portion of the CFS-450: Prospective Provisional Resource Parent Information and Questionnaire for provisional applicants and send to the applicable MidSOUTH Training Academy by the next business day via REDcap.
 - a) The CFS-446: In-Home Consultation Visit Report for provisional applicants must be completed and submitted to MidSOUTH via REDcap within two (2) weeks of the initial In-Home Consultation Visit taking place.
 - 2) Review and complete the CFS-446: In-Home Consultation Visit Report for traditional applicants.

- a) Provide a copy of the pp. 6-7 of the CFS-446 to the applicants.
- 3) Discuss Minimum Licensing Standards and other DCFS policy requirements related to resource homes as outlined in PUB-30: Resource Parent Handbook and answer any questions the family may have.
- 4) Review and complete CFS-480: Alternate Compliance of Water Supply Agreement for Resource Homes, if applicable.
 - a) Provide a copy of CFS-480: Alternate Compliance of Water Supply Agreement for Resource Homes to the resource applicants, if applicable.
- 5) Inform the prospective resource family that they will not be approved until they meet Minimum Licensing Standards, DCFS policy requirements, and any other qualifications deemed appropriate (except for certain non-safety standards that may be waived for relative and fictive kin providers).
- 6) Discuss training required prior to approval, including completion of CPR and Standard First Aid training and certification (for specific CPR and First Aid requirements, see PUB-30: Resource Parent Handbook).
- 7) Provide CFS-409: Resource Family Preference Checklist to traditional resource applicants only and ask them to complete and return the document to the Resource Worker.
 - a) Enter prospective resource family preferences (based on their selections on CFS-409) in the Preferences Tab in the Provider Services/Admission Criteria Button.
- 8) Provide SAFE Questionnaire I to traditional resource applicants only.
- 9) Inform the family that three (3) positive confidential references are required, including at least one (1) from a relative and one (1) from a non-relative (family's selected references should already be provided from Centralized Inquiry Unit via CFS-415).
- 10) Ensure that the reference letter templates (SAFE Reference Letters for traditional applicants and CFS-458: Kinship Reference Letter for Provisionals) are delivered to the identified references with instructions:
 - a) For returning the completed references; and
 - b) That they are not to share the completed reference letter with the prospective resource family.
- 11) Ensure the prospective resource family members understand that they will not view the reference letters.
- 12) Begin completing CFS-475-A: Initial Checklist for Resource Home Assessment and determining what non-safety alternative compliances or policy waivers may be required for kinship homes.
- 13) Determine whether traditional applicants would be willing to serve as an informal respite home in addition to a regular resource home (see Policy VII-G: Alternate Care).
- 14) If the family is being opened as a provisional resource home, also:
 - a) Complete the CFS-452: Provisional Resource Home Verification with the family.
 - i. Provide a copy of the CFS-452: Provisional Resource Home Verification to the family and file the original in the resource home record.
 - b) Show the provisional applicants how to access PUB-30: Resource Parent Handbook [online](#).
 - c) Review and provide the following to the provisional applicants and ask them to complete, as applicable:

- i. CFS-363: Resource Parent or Applicant Smoking Certification
 - ii. CFS-404: General Medical Report
 - iii. CFS-419: Resource Family Support System Information
 - iv. CFS-455: Request and Consent for Department of Health Services, if applicable
 - v. CFS-484: Landlord Notification of Potential Tenant Foster Care Services, if applicable
 - vi. PUB-15: A Relative's Guide to the Arkansas Child Welfare System
 - vii. PUB-23: Foster Care Court Process Infographic
 - viii. PUB-26: Roadmap to Kinship Resource Home
- 15) File all completed forms, including those received from the Centralized Inquiry Unit, in the resource home record.

Internal Procedure 403: Assessment of Prescribed and Over-the-Counter Substances

08/2024

When assessing a potential resource placement for a child in foster care, the applicant is required to disclose any medications or other substances currently prescribed or otherwise consumed as well as the conditions those medications or other substances are designed to treat. Open resource providers must also disclose any medications or other substances consumed and the conditions for which they are designed to treat if obtained after initial approval.

Knowledge that an individual is prescribed certain medications or other substances is, by itself, insufficient to impact an individual's ability to be a resource placement. However, prescriptions and other substances taken by a resource applicant or open provider are a legitimate and necessary area of inquiry. An open conversation about the use of alcohol will also be held with resource applicants and open providers (e.g., frequency, volume, past or current struggles with alcohol consumption, etc.).

Upon receipt of this information, staff will carefully assess:

- 1) If the conditions for which the applicant is being treated would in any way limit the person's ability to adequately supervise and otherwise appropriately care for children placed in their home whether physically, behaviorally, or emotionally with or without the use of the medication or other substance. The age and any special needs of children being considered for placement in the home will be taken into account during this assessment.
- 2) Whether the prescribed medication or other substance has a mind- or mood-altering effect when ingested and how that effect would then impact the person's ability to adequately supervise and appropriately care for children placed in their home whether physically, behaviorally, or emotionally. Questions to explore during this assessment may include:
 - a) Why were the children removed? Was the removal at all tied to use of similar medications or other substances and the impact those had on caretaker's ability to parent?
 - b) How often does the applicant use the prescribed medication or other substance? For example, only before bedtime? Only while school-age children are at school? Only when another caregiver is present, etc.?
 - c) Are there other caregivers in the home? If so, do any of those other caregivers use the same or similar mind- or mood-altering prescriptions or other substances?

As per Child Welfare Agency Review Board Minimum Licensing Standard 200 and 314, all over-the-counter medications shall be stored in an area not readily accessible to children, and all prescription medications, excluding Epi-pens, inhalers, and Glucagon kits, shall be locked.

In addition, if possible, resource parents will not ingest medications or other prescribed substances in the presence of children in foster care.

Internal Procedure 404: Initiation of Pre-Service Training for Resource Homes

08/2024

See DCFS Policy VII-C: Resource Home Assessment Process regarding overarching directives related to the referral of resource applicants to pre-service training. Specific operational procedures for staff referring resource parent applicants to pre-service training follow below.

To approve applicants for pre-service training, within one (1) business day of successfully completing the In-Home Consultation Visit for relative and fictive kin applicants and five (5) business days of successfully completing the In-Home Consultation Visit for traditional applicants, the Resource Worker will:

- A. Submit the signed and completed CFS-450: Prospective Provisional Resource Parent Information and Questionnaire or CFS-446: In Home Consultation Visit Report, as applicable, to the Resource Supervisor or designee with one (1) of the following recommendations:
 - 1) Invite the applicant to attend pre-service training, OR
 - 2) Do not invite the applicant to pre-service training and provide an explanation.
- B. If the Resource Supervisor or designee approves the recommendation to send the applicant to pre-service training:
 - 1) Complete the contact purpose of “In-Home Consultation/Approval for Training” in the Provider Contact Information Screen.
 - 2) Log receipt of the CFS-450 or CFS-446, as applicable, on the DCFS Resource/Adopt Home in the Division information system.
 - 3) Submit a copy of the CFS-450 or CFS-446, as applicable, to MidSOUTH via REDcap (unless one-on-one pre-service training has been arranged or the applicant is attending training through The CALL, Foster Love, or another community partner) approving the family to attend pre-service training:
 - 4) Inform the prospective resource parents that the MidSOUTH trainer will contact them to schedule pre-service training.
- C. When an applicant is NOT approved:
 - 1) Send letter to applicants who were not approved to attend pre-service training.
 - 2) Forward a copy of the letter to the Resource Supervisor.
 - 3) Log notice of non-selection on the Provider Household Member Required Checks Information Screen.
 - 4) Select “IHC/Not Approved for Training” and document why the family was not approved.
- D. Arrange or provide one-on-one pre-service training to the family if group training sessions are unavailable locally.

The Resource Supervisor or designee will:

- A. Either approve or disapprove as appropriate the recommendation of the CFS-450 or CFS-446, as applicable, from the Resource Worker.
- B. Return the signed CFS-446 to the Resource Worker.

Internal Procedure 405: Resource Home Pre-Service Training

03/2024

See DCFS Policy VII-C: Resource Home Assessment Process regarding overarching directives related to pre-service training for resource homes. Specific operational procedures for staff supporting resource applicants through the training process follow below.

The prospective resource family will:

- A. Complete a minimum of fourteen (14) hours of pre-service classroom training for traditional applicants or twelve (12) hours of pre-service classroom training for relative and fictive kin applicants. One (1) hour of a panel of DCFS staff, current or former resource parents, and/or youth in foster care (may be pre-recorded and shown via DVD or streaming) is also required for both traditional as well as relative and fictive kin applicants (must occur prior to a child being placed with traditional resource parents). All make-up sessions will also be completed for a family to fully complete pre-service training.
- B. Complete CPR and Standard First Aid Training and receive certification for infant, child, and adult training in both areas, as applicable.
- C. Submit the completed SAFE Questionnaire I for traditional applicants to their pre-service trainer on the first day of training, as applicable.
- D. Ensure that the individuals providing references have delivered their letters to the agency responsible for the home study before completing pre-service training.

The Resource Worker will:

- A. Document the CPR Training and First Aid Training Effective and Expiration Dates, in the Provider Household Members/Requirements Tab in the Division information system.
- B. File all completed forms in the resource family record (CFS-404; CFS-455, and CFS-484, if applicable).
- C. Enter prospective resource family preferences (based on their selections on CFS-409) in the Preferences Tab in the Provider Services/Admission Criteria Button.
- D. Attend the last training module and as many other training modules as possible.
- E. Hold the Area or County Orientation Session using the CFS-465: Resource Parent Orientation Checklist to guide the orientation session.

DCFS Internal Procedure 406: Home Study Assessment

08/2024

See DCFS Policy VII-C: Resource Home Assessment Process regarding overarching directives related to home studies for resource homes. Specific operational procedures for staff and contractors involved with home studies follow below.

The individual conducting the home study will:

- A. Conduct an initial face-to-face interview with the prospective resource parent(s) in the applicant home.
- B. Evaluate the first interview and note responses that will require further clarification or development.
- C. Conduct a second face-to-face interview with the applicant(s) to include pursuing clarification or other follow-up items from the first interview.
 - 1) It is permissible for one of the two interviews to be conducted over a virtual conference platform (e.g., Zoom, Facetime) with the approval of the applicable DCFS Program Manager or designee who oversees the home study provider contracts.
- D. Evaluate the second interview and note responses that will require further clarification or development.
- E. Conduct additional face-to-face interviews with the prospective resource parent(s) or other household members to further explore topics noted during the evaluation process.
- F. Interview each household member separately who is ten (10) years of age or older. Observe younger children and interview if appropriate.
- G. Review the three (3) reference letters and ensure that all three (3) letters are positive references.
- H. Using information collected during the interviews, complete the Division-approved template and any other associated tools.
- I. Complete and submit the final home study report to the Resource Worker for review and assessment within:
 - 1) Thirty (30) days of completing Session 1 of AR Kinship Connect for provisional resource applicants; and,
 - 2) Forty-five (45) days of completing Session 4 of PRIDE for traditional resource applicants.

The Resource Worker will:

- A. Review the final home study report and other assessment documents.
- B. Based on the review, submit the recommendation to approve or deny the home to the Resource Supervisor or designee within five (5) business days of receiving the final home study report.
- C. Document the Initial Home Study Completed Date on the Provider Service Details Screen in the Division information system.
- D. Notify the applicant in writing if a determination to approve or deny the home based on the final home study report and other assessment documents cannot be completed within sixty (60) business days of the family completing pre-service training and explain the reason.
- E. Provide a copy of the final home study report, stamped with "DCFS use only" and "Not for private use" to the family regardless of approval or denial.
- F. Maintain all components of the Division-approved home study (e.g., report template, reference letters, questionnaires) per the Division record retention schedule.

The Resource Supervisor or designee will:

- A. Review and assess the completed final home study report and other assessment documents as well as the Resource Worker's recommendation to approve or deny.
- B. Approve or deny the home within five (5) business days of receipt of all final documents from the Resource Worker.

Internal Procedure 407: Resource Home Orientation

08/2024

See DCFS Policy VII-C: Resource Home Assessment Process regarding overarching directives related to the final walk-through and orientation of resource homes. Specific operational procedures for staff conducting resource home orientations follow below.

For provisional resource parents, the orientation will take place within fourteen (14) business days of placement of the child(ren). The review of this information is also encouraged when provisional status is removed, and the home is ready to be opened as a fully approved kinship resource home, as appropriate.

For traditional applicants, the orientation will take place during the final walk-through of the home which will occur within two (2) weeks of final home study approval by the Resource Supervisor.

The orientation constitutes three (3) hours of the pre-service training requirements.

The Resource Worker will:

- A. For traditional resource applicants, conduct a final walk-through of the home.
- B. Review and complete the CFS-465: Resource Parent Orientation Checklist with the applicants to include reviewing and discussing all forms and publications listed on that checklist. Use PUB-30: Resource Parent Handbook to expand on bullet points from the checklist where noted.
- C. Invite any questions from the resource parents.
- D. Provide a copy of all forms referenced above to the resource parents and maintain the originals in the resource home record.

Internal Procedure 408: Resource Home Monitoring and Reevaluation

08/2024

See DCFS Policy VII-E: Resource Home Monitoring and Reevaluation regarding overarching directives related to this topic. Specific operational procedures for staff monitoring and reevaluating resource homes follow below.

408.1: Quarterly Visits

08/2024

The Resource Worker will:

- A. Monitor approved resource homes through quarterly visits to ensure compliance with Minimum Licensing and Division standards.
- B. Complete 475-B: Quarterly Monitoring Checklist for Resource Home to document completion of each quarterly monitoring visit.
- C. File each completed 475-B in the resource home record and document in the Division information system.

408.2: Annual Reevaluation

08/2024

The Resource Worker will:

- A. Conduct a reevaluation of the resource home annually and in the case of any major life change.
- B. Complete Division-approved update/reevaluation tools, CFS-451: Resource Parent Reevaluation and CFS-475-C: Reevaluation Checklist for Resource Home.
- C. Document completion and approval of all resource home reevaluations in the Division information system.
- D. Document in the resource home record that the resource parent(s) have maintained current certification in both CPR and Standard First Aid and document in the Provider Household Members/Requirement Tab in the Division information system.
- E. Update any expired State Police Criminal Record Checks and Central Registry Checks for each member of the household or members of the RFSS and document in the Provider Household Members/Requirement Tab.
- F. Enter the resource parents' hours of in-service training in the Training Screen in the Division information system.
- G. Request an exception for any resource parent whose annual in-service training hours are sixty (60) calendar days overdue, if applicable.
- H. Submit documentation with recommendation to approve or disapprove the home to the Resource Supervisor or designee.
- I. Complete the Provider Reevaluation Screen and Request Approval for Resource Supervisor's review and approval.

The Resource Supervisor will:

- A. Review the Division-approved update/reevaluation tools, CFS-451: Resource Parent Reevaluation and CFS-475-C: Reevaluation Checklist for Resource Home and Resource Worker recommendation to approve or deny the home.
- B. Approve the Resource Worker's Request for Approval on the Provider Reevaluation Screen in the Division information system.

When an exception to the in-service training requirements is requested, the Area Director will:

- A. Receive the request for extension to in-service training requirements.
- B. Review the quality of care provided by the resource family and the reasons for overdue training.
- C. Determine whether to grant an exception to the in-service training requirement for up to sixty (60) calendar days.

Internal Procedure 409: Resource Family Support System (RFSS) Approval Process

10/2022

The Resource Family Support System (RFSS) may be comprised of up to three other households identified by the resource family. RFSS members may provide care for children when the resource parent is unable to do so for up to 72 hours on the occasion of anticipated or unanticipated events. The RFSS is designed to help ensure a certain sense of normalcy for children and youth if and when the resource parents cannot care for the children for short periods of time. RFSS members should be people such as the resource parents' relatives, friends, neighbors, etc. who are regularly in contact with the resource family and the children placed in their home.

Resource parents can locate who their approved RFSS are in the Foster and Adopt Provider Portal under the "My Home" tab.

- A. Resource Home is open and approved.
- B. Resource Worker collects RFSS information this would be; State Police Criminal background checks, Central Registry checks, DMV, out of state central registry checks (if the family has lived outside of Arkansas within the last five years).
- C. Resource Worker will submit background checks within seven (7) business days of receipt of the background checks.
 - 1) RFSS who have true child maltreatment and appear on the Central Registry will not be approved as RFSS.
 - 2) RFSS who have a criminal background check will only be approved in the process if it's a criminal offense that can be waived by the Area Director. The prospective RFSS will be required to provide information about the criminal offense.
- D. Resource Worker will receive the results typically in 2-3 weeks. Resource Worker will document the background checks in the Division's information management system upon receipt. Please note: out-of-state central registry checks can take 90 or more days.
- E. Resource Worker will contact RFSS to schedule a walk through the of the RFSS home. The walk through will be scheduled within 72 hours.
- F. Resource Worker will conduct the final walk through and document this information in the Division information management system in the appropriate locations.
- G. Resource Worker will notify the Resource family upon approval of the RFSS.

Internal Procedure 410: Kinship Resource Family Transitioning to Traditional Resource Family Home

07/2022

The Division of Children and Family Services (DCFS) Policy VII-A: Resource Home Definitions and Roles states that when a provisional kinship resource home is opened as a fully approved kinship resource home, the resource parents may then request to care for children in foster care who are not related to or are not fictive kin of the kinship resource parent. However, DCFS Policy VII-A requires additional evaluation of the home to ensure that it would be an appropriate placement for children who are not kin to the resource parent, to include additional training. This internal procedure sets forth assessment criteria and specific training requirements.

The Resource Worker will:

- A. Assess the level of positive collaboration the kinship resource provider has had with the Division to determine if the provider a candidate for becoming a traditional resource home.
- B. If the outcome of the assessment is that the kinship home is a candidate for a traditional resource home based on prior positive collaboration with the Division, review any alternative compliance(s) or policy waiver(s) the family may have had approved in order to open their kinship home and, in consultation with his or her supervisor, determine:
 - 1) Which ACs or policy waivers will have to be rescinded and which applicable standard or policy requirement with which the family must now come into compliance before becoming a traditional resource home; and,
 - 2) Which ACs or policy waivers the Division wishes to keep in place.
 - a) If it is determined that an AC or policy waiver will be kept in place, a re-approval of that AC or policy waiver must be requested and considered for the home as a traditional resource home rather than a kinship home.
- C. Once any AC or policy waiver decisions and related actions have been completed, determine the proper training curriculum:
 - 1) Families that have had a DCFS placement and positive collaboration for at least six (6) months are eligible to complete *Bridging the Gap* Training in lieu of the Division's current traditional resource parent training.
 - 2) Families that wish to open as a traditional resource family home while continuing to serve as a kinship resource home (dual placement types) must have at least twelve (12) months of placement and collaboration with the Division and are then eligible to complete *Bridging the Gap* Training in lieu of the Division's current traditional resource parent training.
 - 3) Families that had a kinship placement for less than six (6) months are required to attend traditional PRIDE training
- D. After a determination has been made, notify the family of approval/denial
 - 1) If denial, reason for denial shall be provided
 - 2) If approved, refer the family for necessary training
- E. Encumber a SAFE Update for the family.

The Resource Worker Supervisor will:

- A. Review the recommendation by the Resource Worker.
- B. Recommend approval/denial of the family and training courses needed to the Area Director or designee.

The Area Director or Designee will:

- A. Approve/Deny the request.
- B. Notify the Foster Care Manager and Kinship Connect Manager of the request and determination outcome.

Internal Procedure 411: Traditional DCFS Resource Home to Private Agency Foster Home 12/2023

If a current DCFS resource home wishes to become a Private Licensed Placement Agency (PLPA) resource home, the DCFS resource worker will:

- A. Discuss this request with the resource family to ensure their wishes are to convert from DCFS Resource Home to PLPA Resource Home.
- B. Request the family sign the DHS-4000 (Authorization for Release of Information) allowing for the provider's resource file to be shared with the PLPA.
 - 1) Note: This excludes background checks
- C. Complete the DCFS to PLPA Resource Home Memo that provides the DCFS recommendation regarding the resource home to become a PLPA resource home.
- D. Provide the DCFS to PLPA Resource Home Memo and allowable documents to the PLPA Specialist in the Central Office Specialized Services Unit.
 - 1) Allowable documents include, but may not be limited to
 - a) CFS-475-A: Initial Approval Checklist
 - b) CFS-446: In-Home Consultation
 - c) CFS-475-C: Reevaluation Checklist, as applicable
 - d) CFS-363: Resource Applicant Smoking Certification
 - e) CFS-404: General Medical Report
 - f) Current Immunizations for all children in the home
 - g) Current rabies vaccinations for all household pets
 - h) CFS-448: Privacy and Use of Surveillance in Resource Homes
 - i) CFS-455: Request/Consent for Health Department Services, as applicable
 - j) CFS-480: Alternate Compliance of Water Supply Agreement, as applicable
 - k) CFS-484: Tenant Notification to Landlord Regarding Potential Tenant Foster Care Services, as applicable
 - l) Current floor plan
 - m) Proof of Homeowner/Rental Insurance and General Liability Insurance
 - n) SAFE Home Study, SAFE Home Study Updates, SAFE Questionnaires, and other SAFE related documents, as applicable
 - o) CPR/First Aid Certification
 - p) CFS-445: Agency Approved Tornado Plan
 - q) PRIDE Training Certificate
 - r) Continuing Education Hours Certificates, as applicable
 - s) Other records as deemed appropriate

The PLPA Specialist in the Central Office Specialized Services Unit will:

- A. Review the DCFS to PLPA Resource Home Memo to determine the recommendation from the DCFS resource team.
- B. If the recommendation is in favor of the family converting to a PLPA resource home:
 - 1) Review all shared documents to ensure that shared documents are permissible under the release of information agreement signed by the resource provider.
 - 2) Provide the recommendation memo and all approved shared documents to the PLPA.
 - 3) Notify the DCFS resource worker that the information has been provided to the PLPA and the DCFS provider services may be closed and/or reassigned for adoption subsidy purposes only.

- C. If the recommendation is not in favor of the family converting to a PLPA resource home:
 - 1) Discuss with the DCFS resource worker and supervisor regarding the unfavorable recommendation to determine necessary action steps related to the home remaining a DCFS resource home.
 - 2) Notify the PLPA of the Division's recommendation.
 - a) Note: DCFS cannot share specific information regarding the resource home's status (e.g., whether the home is involved in a child maltreatment investigation, whether the home is currently on unavailable status, whether the home is under corrective action, etc.).

Internal Procedure 412: House Parent Family that Wishes to Become a DCFS Adoptive Family 07/2022

The prospective family will:

- A. Provide a letter of intent to become a DCFS resource family home.
- B. Provide a letter from their respective organization detailing that they are currently in good standing along with the organization's support for the family to open for adoptive placement.
 - 1) This will include detailed information ensuring the family is not in violation of any agency policies by becoming adoptive parents.

The Resource Worker will:

- A. Assess the family's length of time partnering with the agency and the collaborative relationship between both parties.
- B. If the family meets eligibility for opening as an adoptive home, recommend to the Resource Supervisor whether they should continue the process to open as an adoptive home for DCFS.
- C. After the determination has been made, notify the family of approval/denial.
 - 1) If denied, reason for denial must be provided to the family.
 - 2) If approved by the Area Director, refer the family for PRIDE training and continue with outlined steps for opening a resource home as in DCFS VII-C: Resource Home Assessment Process.

The Resource Supervisor will:

- A. Review the recommendation letters from the Resource Worker, family, and agency.
- B. Recommend approval/denial of the family opening as a DCFS resource home to the Area Director.

The Area Director or Designee will:

- A. Approve/Deny the request and provide notice to the Resource Supervisor.
- B. Notify the Foster Care Manager of the request and determination of the outcome.

Internal Procedure 413: Therapeutic Foster Homes that Plan to Adopt

07/2023

When a therapeutic foster care (TFC) home is selected to adopt a child that is already placed in their home, the following steps are to occur:

- A. The TFC agency will provide a referral to the DCFS Adoption Supervisor over the referenced child's case indicating that the home is appropriate to be an adoptive home and wishes to adopt the child placed in the home.
- B. The DCFS Resource Worker, assigned based on the family's residence, will:
 - 1) Complete all necessary background checks, including Child Maltreatment Central Registry, State Police Criminal Record Check, FBI fingerprint based Criminal Background Check, and Department of Motor Vehicle (DMV) Traffic Violations check.
 - a) NOTE: DCFS cannot request/accept previous background checks from the TFC provider or agency.
 - 2) Request a copy of the training certification for Pressley Ridge.
 - 3) Request the SAFE Home Study and any SAFE Home Study Updates completed by the TFC agency.
 - a) If the SAFE Home Study is provided, the Resource Worker shall ensure the SAFE Home Study is current based on the provider's re-evaluation status.
 - b) If the home study provided is not a SAFE Home Study, the Resource Worker shall complete a referral to their local contract provider for a SAFE Home Study.
 - 4) Open the provider for adopt only services in the Division's information management system.
 - a) This will be a different provider identification number than the TFC home.
 - i. Do NOT close the TFC provider services in the Division's information management system. If a change/closure is needed related to the TFC home, notify the Specialized Services Unit Manager.
 - ii. The TFC agency will continue to ensure that the provider is completing requirements per minimum licensing standards for re-evaluations (SAFE Home Study updates, First Aid, CPR, CEUs, and background checks).
- C. The DCFS Adoption Specialist will:
 - 1) Confirm that the TFC provider has been opened for adopt only services in the Division's information management system.
 - 2) Continue to leave the child keyed into the TFC resource home until one (1) calendar day prior to the adoption.
 - 3) On the calendar day (or next business day) prior to the adoption hearing, key the child into the pre-adoptive placement.
 - 4) After the finalization of the adoption, key the child into the adoptive placement.

Internal Procedure 414: Private Licensed Placement Agency Resource Homes that Plan to Adopt

07/2023

This procedure includes private licensed placement agency (PLPA) and specialized private licensed placement agency (SPLPA) resource homes that wish to adopt. This includes resource homes opened through the following Agencies:

- Sparrow's Promise (formerly Searcy Children's Home)
- Children's Homes Inc. (formerly Paragould Children's Home)
- Southern Christian Children's Home
- Free Will Baptist Ministries
- Arkansas Baptist Children's Home (Connected)
- COMPACT
- Second Chance Youth Ranch

When a PLPA/SPLPA resource home is interested in adopting a child placed in their home, the following steps are to occur:

- A. The PLPA/SPLPA resource home or agency will request a Consideration to Adopt Staffing by notifying the child's Family Service Worker and/or Adoption Specialist that the home is interested in adoption and deemed appropriate to be an adoptive home by the PLPA/SPLPA Agency.
- B. The Family Service Worker assigned to the child(ren)'s case shall:
 - 1) Schedule and conduct the consideration to adopt staffing within ten (10) working days from the request to include:
 - a) Adoption Specialist;
 - b) Age-appropriate child;
 - c) Provisional or relative/fictive kin resource parent, as applicable;
 - d) Resource parent (to include private licensed placement agency (PLPA) parents, as applicable)
 - e) PLPA staff, as applicable;
 - f) Resource parent's assigned resource worker, as applicable;
 - g) FSW Supervisor;
 - h) Other county staff;
 - i) Attorney ad litem;
 - j) Office of Chief Counsel (OCC) Attorney;
 - k) CASA; and,
 - l) Other professionals, if applicable
 - 2) Utilize CFS-489: Resource Parent Consideration to Adopt to record the desire of the resource parents; and
 - 3) Enter a contact in the Division's information management system detailing the outcome of the consideration to adopt staffing.
 - 4) If the result of the consideration to adopt staffing is that the PLPA/SPLPA resource home is not selected to move forward in the adoption process, there are no additional steps related to this procedure.

- 5) If the result of the consideration to adopt staffing is that the PLPA/SPLPA resource home is selected to move forward with the adoption process, proceed to the following steps.
- C. The DCFS Resource Worker, assigned based on the family's residence, shall initiate immediately:
- 1) Complete all necessary background checks, including Child Maltreatment Central Registry, State Police Criminal Record Check, FBI fingerprint based Criminal Background Check, and Department of Motor Vehicle (DMV).
 - a) NOTE: DCFS cannot request/accept previous background checks from the PLPA/SPLPA provider or Agency.
 - 2) Request a copy of the training certificate for PRIDE or NTDC pre-service training.
 - 3) Request the SAFE Home Study and any SAFE Home Study Updates completed by the PLPA/SPLPA Agency
 - a) If the SAFE Home Study is provided, the Resource Worker shall ensure the SAFE Home Study is current based on the provider's re-evaluation status.
 - b) If the home study provided is not a SAFE Home Study, the Resource Worker shall complete a referral to their local contract provider for a SAFE Home Study.
 - 4) Open the provider for adopt only services in the Department's Case Management System
 - a) This will be a different provider identification number than the PLPA/SPLPA Home
 - i. Do NOT close the PLPA/SPLPA Provider services in the Division's information management system. If a change/closure is needed related to the PLPA/SPLPA Home, notify the Specialized Services Unit Manager.
 - ii. The PLPA/SPLPA Agency will continue to ensure that the provider is completing requirements per minimum licensing standards for re-evaluations (SAFE Home Study updates, First Aid, CPR, CEUs, and background checks).
- D. The DCFS Adoption Specialist will:
- 1) Confirm that the PLPA/SPLPA Provider has been opened for adopt only services in the Division's information management system.
 - 2) Continue to leave the child keyed into the PLPA/SPLPA resource home until one (1) calendar day prior to the adoption.
 - 3) On the calendar day (or next business day) prior to the adoption hearing, key the child into the pre-adoptive placement.
 - 4) After the finalization of the adoption, key the child into the adoptive placement.

Internal Procedure 415: Opening Kinship Homes

08/2024

The Division of Children and Family Services (DCFS or Division) in accordance with Executive Order EO 23-18 must establish a streamlined process to open and license a kinship home within a 45-day deadline. The goal is to ensure the safety and well-being of the child while minimizing delays in placement, as mandated by the executive order, to expedite the approval of kinship homes.

In these situations, the Family Service Worker will:

- A. Upon removal of the child from their home, identify and assess potential relatives or fictive kin caregivers as per DCFS Policy VI-B2: Provisional Home Placement for Children in Foster Care.
- B. Assist with completion of the CFS:450: Prospective Provisional Resource Parent Information and Questionnaire as appropriate to the specific case and/or local county procedures.
- C. Keep the Resource Worker informed of any changes to the child's need for a provisional placement and any other relevant information.
- D. Collaborate with the Resource Worker to evaluate the prospective provisional home.

The Resource Worker will:

- A. Prior to placement of the child:
 - 1) Process all necessary background checks by (see Procedure VII-CI: Background Check Processing for more information):
 - a) Conduct an expedited Child Maltreatment Central Registry Check (via CFS-316: Request for Arkansas Child Maltreatment Central Registry Check)
 - b) Conduct an expedited State Police Criminal Record Check (via CFS-342: State Police Criminal Record Check)
 - c) Conduct a Vehicle Safety Program (DMV) Check (see Procedure VII-C1 for forms to be completed)
 - d) Submit the FBI Criminal Record Check (FBI results do not have to be received to open the provisional home, but results must be received and clear to approve as a regular DCFS Resource Home)
- B. Within the first forty-eight (48) hours of placement:
 - 1) Conduct an Initial Home Consultation:
 - a) Complete a visual inspection of the home (via CFS-446: In Home Consultation Visit Report)

- b) Follow up on any compliance issues identified during the night of placement if completed by On-Call staff
 - 2) Based on the results of the background checks listed above and the visual inspection of the home, begin the process for requesting any necessary Alternative Compliances or DCFS Policy Waivers, if applicable.
 - 3) Determine if the caregiver can complete the required training through group sessions with MidSOUTH or if they would benefit from personalized 1:1 training:
 - a) If the caregiver is deemed suitable for group training with MidSOUTH, send the CFS-450 or CFS-466 to Redcap to initiate the training process
 - b) If the caregiver is not a candidate for completing training with MidSOUTH, schedule 1:1 training to be completed within fourteen (14) days
 - 4) Provide family with the Kinship Support Resource Guide:
 - a) Explain to the relative/fictive kin process related to being opened as a fully approved DCFS Resource Home
 - b) Clearly communicate that all documents must be submitted within fourteen (14) days of receipt of the checklist to allow time for processing and meeting the forty-five (45)-day deadline
 - 5) Enter relative/fictive kin into the Division information management system as a provider (refer to Policy VII: Development of Resource Homes).
- C. Within first ten (10) days of placement:
 - 1) If any documents have not been received, contact the caregiver to remind them of the missing items. Offer assistance in gathering or completing the documents if any challenges are identified.
 - 2) Determine if the caregiver has started required training:
 - a) If the family was referred to MidSOUTH for training and has not yet begun, pivot to scheduling 1:1 training within next fourteen (14) days:
 - i. Document the reasons for the change in training format and ensure the caregivers are informed of the new schedule
 - 3) Verify the status of the home study:
 - a) If 1:1 training is required, assess whether the home study should be completed by a contract provider or by resource staff
 - 4) Conference with supervisor about status of opening home.
- D. Within first thirty (30) days of placement:
 - 1) If documents remain outstanding, conduct a follow up emphasizing the approaching deadline and the potential impact of the placement process if documents are not received.

- 2) Provide additional support or resources as needed, such as transportation assistance or referral to community services.
 - 3) If a home is not on track to open within the forty-five (45)-day deadline, a staffing with the Area Director should be scheduled at this time to assess the situation:
 - a) Set action steps for remaining tasks and document in the Division information management system
- E. Within first forty-five (45) days of placement, the Resource Worker will:
- 1) Complete final walkthrough of home:
 - a) Provide any necessary support to family and explain next steps
 - 2) Complete necessary steps in the Division information management system to open home as an approved Relative or Fictive Resource Home.

The Resource Supervisor will:

- A. Upon receipt of a notification email from a worker who has removed children and identified a prospective provisional placement (see Procedure VI-B1: Provisional Resource Home Placement for Children in Foster Care for more information), be responsible for ensuring completion or opening home within first forty-five (45) days of placement.
- B. Conference with and support the resource worker as necessary regarding opening the provisional home.
- C. Review and approve the home study.

Internal Procedure 425: Alternate Compliance and Policy Waiver Protocol

2/2025

The approval of resource homes and relative and fictive kin placements is a critical process within DCFS, aimed at ensuring safety, stability, and well-being of children in care. This procedure is necessary to provide a clear, standardized framework for preparing and submitting Policy Waiver and Alternative Compliance packets to the Placement and Residential Licensing Unit (PRLU) for review and approval.

By streamlining this process, DCFS will:

- Reduce delays in placement decisions
- Ensure compliance with legal and procedural requirements
- Enhance communication and collaboration among staff, families, and the licensing board
- Promote consistency and accountability in the submission of complete and accurate documentation.

“Policy Waiver” is defined as a request to deviate from the Division of Children and Family Services (DCFS) policy and procedures. The Division of Children and Family Services Director, or designee, approves all policy waiver requests. The following require a policy waiver:


- A. Any misdemeanor convictions, except for minor traffic violations
- B. Driving Under the Influence or Driving While Intoxicated
- C. Any issues that are not in compliance with DCFS Policy
- D. Record of maltreatment:
 - 1) However, any person found to have record of child maltreatment will not only be reviewed by the DCFS Director or designee, but the DCFS Director or designee will also notify and consult with the Child Welfare Agency Review Board, via the Residential Licensing Unit Manager as its designee, regarding the policy waiver and any corrective action associated with the policy waiver.

The following misdemeanors and policy standards may be granted policy waivers at the local level by the Area Director:

Relatives/Fictive Kin (Kin)

Regardless of when the offense (if applicable) took place provided there have been no other offenses since the date of the incident:

- 3 children under the age of 6

- 
- 10 points on driving record provided there is a documented plan in place outlining who/how child would be transported
 - Exemptions for immunizations approved by the Health Dept.
 - Insufficient income/government assistance
 - Non-payment of fine
 - Possession of alcohol in a dry county
 - Walk-through room (child sleeps in room where others walk through to get to another room in house)

IF they occurred **more than five (5) years ago** and provided there have been no other offenses since the date of the incident:

- Criminal mischief
- DUI/DWI
- Failure to appear for traffic violations
- Forgery
- Hot checks
- Public Intoxication
- Shoplifting
- Suspended driver's license
- Theft by receiving

IF they occurred **more than ten (10) years ago** and provided there have been no other offenses since the date of the incident:

- Animal cruelty
- Any drug charges IF applicant also has a clean drug screen at the time of application
- Bribing public official
- Destruction of property
- Furnishing alcohol to a minor
- Harassment
- Leaving scene of an accident
- Obstruction/attempt to destroy evidence
- Possession of controlled substance with or without intent to deliver IF applicant also has a clean drug screen at the time of application
- Terroristic threatening
- Theft of property

Traditional Resource Applicants (non-relatives/non-fictive kin)

Regardless of when the offense, if applicable, took place provided there have been no other offenses since the date of the incident:


- Three (3) children under the age of six (6)
- Exemptions for immunizations approved by the Health Dept.
- Non-payment of fines
- Possession of alcohol in a dry county

IF they occurred **more than ten (10) years ago** and provided there have been no other offenses since the date of the incident:

- Any drug charges IF applicant also has a clean drug screen at the time of application
- Bribing a public official
- Criminal mischief
- Destruction of property
- DUI/DWI
- Failure to appear for traffic violations
- Forgery
- Hot checks
- Leaving scene of an accident
- Obstruction/attempt to destroy evidence
- Possession of controlled substance with or without intent to deliver IF applicant also has a clean drug screen at the time of application
- Public Intoxication
- Shoplifting
- Suspended driver's license
- Theft of property
- Theft by receiving

“Alternative Compliance” is defined as a request for approval from the Child Welfare Agency Review Board to allow a licensee to deviate from the letter of a regulation. The licensee must demonstrate substantial compliance with the intent of the regulation. This includes, but is not limited to, regulations governing criminal background checks and convictions for prohibited offenses.

To expedite the placement of a child with a safe and appropriate relative or fictive kin and reduce the amount of trauma a child experiences when entering foster care, a temporary Alternative Compliance may be granted when attempting to place a child with a relative or fictive kin on a provisional basis. A temporary Alternative Compliance may be initiated by the Family Service Worker via phone or email but must go through the chain of command, receiving approval from



the Family Service Worker Supervisor or designee, the Area Director or designee, and the DCFS Director or designee (refer to the Central Office Approvals document). If a temporary Alternative Compliance is approved by the Division of Children and Family Services Director or designee, the DCFS Director or designee will then notify the Placement and Residential Licensing Unit Manager or designee of the temporary Alternative Compliance approval.

Licensing Board


Licensing Board meetings are held on the 4th Wednesday of each month. In months where a Holiday interferes, changes to this schedule will be communicated in advance. All documentation in the standardized request packet will be completed prior to a family being scheduled for review. Family members and staff are not required to attend the meeting unless the Licensing Board notifies the FSW of their required presence. When attendance is necessary, attendance will be allowed via zoom.

The standard protocol for requesting a policy waiver or an Alternative Compliance is the same, up until the point when the request is given to the DCFS Director, or designee.

The protocol for standard policy waiver and Alternative Compliance requests are as follows:

The Family Service Worker will:

- A. Determine if a policy waiver or Alternative Compliance will be requested based on their professional judgment. Issues to take into consideration on criminal convictions and record of maltreatment include:
 - 1) The nature and severity of the crime or maltreatment
 - 2) Consequences of the crime or maltreatment
 - 3) Frequency and duration of the crime or maltreatment and when the maltreatment occurred
 - 4) Relationship between the crime or maltreatment and the health, safety and welfare of any individual
 - 5) For maltreatment offenses listed on the Child Maltreatment Central Registry, whether the offender is eligible to request removal from the Child Maltreatment Central Registry Review Team
- B. If approval is recommended by the Family Service Worker and Supervisor or designee, a request to the Area Director will be sent within Two (2) business days for a policy waiver or an Alternative Compliance using the CFS-509-B: Request for Alternative Compliance or policy waiver, and will attach all appropriate supporting documentation, as applicable:
 - 1) Detailed Staff Letter: The FSW must submit a detailed letter outlining the nature of the family's request, any concerns identified in the background checks, the circumstances surrounding the concerns, and the FSWs assessment of the family's explanation and mitigating factors. The letter must also confirm that the FSW has



reviewed the background checks and verified that the information provided by the family aligns with the background check findings.

- 2) Detailed Family Letter: The family must provide a detailed letter addressing the nature of the request, any incidents noted on background checks, the circumstances surrounding those incidents any corrective actions or other factors.
- 3) CFS-446: In-Home Consultation Visit Report
- 4) The police report and any other reports or court orders regarding any criminal charges or convictions.
- 5) When request is due to central registry hits, also include:
 - a) Three (3) personal character references
- 6) When request is due to a required space waiver, also include:
 - a) A drawing of the floorplan of the home
- 7) When request is due to a swimming pool, also include:
 - a) Photographs of the pool and fencing
- 8) When request is for sleeping arrangements, also include:
 - a) Photographs of the sleeping space

The Family Service Worker Supervisor or designee will:

- A. Determine if the requested policy waiver or Alternative Compliance is appropriate for approval.
- B. If approved, the Family Service Worker Supervisor or designee will send it to the Area Director or designee.
- C. If denied, the Family Service Worker Supervisor or designee will notify the Family Service Worker and the family.

The Area Director or designee will:

- A. Within five (5) business days of receipt of the request for traditional applicants or two (2) business days for relatives and fictive kin, determine if the requested policy waiver or Alternative Compliance is appropriate for approval based on the considerations previously outlined in this protocol:
 - 1) If approved, the Area Director or designee will forward the request to the DCFS Director or designee (refer to the Central Office Approvals document).
 - 2) If denied, the Area Director will return the request to the Family Service Worker Supervisor or designee:
 - a) The Family Service Worker Supervisor will notify the Family Service Worker and the family

At this point, the procedures for requesting a policy waiver differ from the procedures for requesting an Alternative Compliance.



Policy Waivers

When a policy waiver has been requested, the DCFS Director or designee will, within three (3) business days of receipt of the request:

- A. Deny any inappropriate request for a policy waiver and return it to the Area Director or designee; or
- B. Approve an appropriate request for a policy waiver.

The DCFS Director's or designee's final decision will be conveyed to the Area Director or designee for appropriate action.

Alternative Compliance

When an Alternative Compliance has been requested, the DCFS Director or designee will:

- A. Deny any inappropriate request for an Alternative Compliance and return it to the Area Director or designee within three (3) business days; or
- B. Approve an appropriate request for an Alternative Compliance and notify the Area Director or designee and send it to the Placement and Residential Licensing Unit Manager or designee, all within in three (3) business days.

The Placement and Residential Licensing Unit Manager will:

- A. Review the Alternative Compliance request to ensure the correct regulation has been requested and all required documents are in the packet.
- B. Request any missing documentation be submitted.
- C. Respond via email within three (3) business days, verifying that the request will be placed on the board agenda (indicating for which month).

The Placement and Residential Licensing Unit Assistant will:

- A. Place the Alternative Compliance request on the agenda of the next scheduled meeting of the Child Welfare Agency Review Board.
- B. Gather packets received to be delivered to the Board Members three (3) weeks prior to the scheduled board meeting.
- C. Send packets to the Board Members for review at the 3-week mark requesting their response, questions, and request for appearance by the 1-week mark.
- D. Notify staff if their presence, or the presence of the family, is required via Zoom for the meeting by the 1-week mark or as soon as possible following a response from the Board Members.

The Family Service Worker will:

- A. Notify the resource parent applicant or resource parent of the Child Welfare Agency Review Board meeting via telephone and CFS-510 sent by certified, restricted mail.
- B. Prepare the resource parent applicant or resource parent for what to expect at the Child



Welfare Agency Review Board meeting.

- C. Appear with the resource parent at the Child Welfare Agency Review Board meeting to answer questions, if applicable.

The Child Welfare Agency Review Board will give final approval or denial of the request for the Alternative Compliance.

Section 500 – ADOPTION AND GUARDIANSHIP

Internal Procedure 500: Placing Children on and Removing Children from the Heart Gallery

07/2023

WHICH CHILDREN SHOULD BE PLACED ON HEART GALLERY?

In general, only children who truly have a need for an adoptive placement will be placed on the Heart Gallery.

Eligibility criteria:

- A. Must be thirty (30) days or more past parents' Termination of Parental Rights (TPR)
- B. All appeals of termination must be exhausted

Children who should not be referred to the Heart Gallery include those who are:

- A. Placed in pre-adoptive placements
- B. Placed with foster parents who likely will adopt or with relatives who likely will assume custody or adopt
- C. Other situations where adoptive placement is imminent or very likely (will require one-on-one conversations with Adoption staff)

HOW DO CHILDREN GET ONTO THE HEART GALLERY?

Within ten (10) business days of the child/case becoming eligible (see eligibility criteria above), the Adoption Specialist or Adoption Supervisor will send a referral email to Project Zero Logistics Coordinator (Anna Dietrich, anna@theprojectzero.org), the DCFS Public Information Specialist (Keith Metz: keith.metz@dhs.arkansas.gov), and the Adoption Manager (Shanesha Arbor: Shanesha.arbor@dhs.arkansas.gov).

The referral should include the following information:

- Child's full name
- Child's gender
- Case number
- Client ID
- Date of birth
- Area
- County

- Member of sibling group
- Being adopted together or separately

WHAT IS NEEDED FROM THE ADOPTION SPECIALIST AFTER THE DECISION IS MADE TO PLACE THE CHILD ON THE HEART GALLERY?

- A. A completed Bio Request Form on the child or sibling group.
- B. The Bio Request Form can be requested from DCFS Public Information Specialist or downloaded at
<http://dhsshare.arkansas.gov/DCFS/Shared%20Documents/Forms/AllItems.aspx>
- C. A current Project Zero photograph of the child.
 1. The photo will be taken by Project Zero, but the Adoption Specialist or Adoption Supervisor should coordinate with the Project Zero Logistics Coordinator re: location, transportation, etc.

WHAT HAPPENS WHEN AN INQUIRY IS MADE ON A CHILD FROM THE HEART GALLERY?

Project Zero staff will respond via email within three (3) business days of the inquiry, copying the Adoption Specialist, Adoption Supervisor, and Adoption Manager.

The Adoption Specialist should respond to the inquiring party within three (3) business days of notification of the inquiry.

If the inquiring party is a match and placement is made, the Adoption Specialist should notify the Project Zero Logistics Coordinator within five (5) business days to request that a “Family Found” banner be added to the child’s/children’s entry on the Heart Gallery.

WHEN SHOULD CHILDREN BE REMOVED FROM THE HEART GALLERY?

- A. After their adoptions are finalized.
- B. At another change in permanency status:
 - Child ages out
 - Child changes permanency goal
 - Child enters extended foster care
 - Child placed with relatives/family

The Adoption Specialist should notify the Project Zero Logistics Coordinator within five (5) business days of any of these changes to remove the child’s information from the Heart Gallery.

Internal Procedure 510: Traditional Resource Parents Considered for Subsidized Guardianship

08/2024


The Division of Children and Family Services (DCFS or Division) believes in achieving permanency for children and youth who must enter foster care swiftly and safely. Guardianship is one permanency option to consider for youth who cannot be placed with a fit parent or returned to the guardian or custodian from whom he or she removed. A guardianship may be supported by a subsidy if all subsidized guardianship requirements are met, which include that reunification and adoption have been ruled out and that the guardian is a relative or fictive kin to the child (see DCFS Policy VIII-L: Subsidized Guardianship for a complete list of all subsidized guardianship requirements).

Fictive kin means a person selected by the Division who:

- A. Is not related to a child by blood, marriage, or adoption; and
- B. Has a strong, positive, and emotional tie or role in the:
 - 1) Child's life; or
 - 2) Child's parent's life if the child is an infant.
 - a) The DCFS Director or designee must approve a fictive kin for an infant.

Under this definition, traditional resource parents do not meet the definition of fictive kin as there will not already be a strong, positive, and emotional tie or in the child's life at the time the child enters foster care. However, there are two exceptions to this rule that may result in a traditional resource home being considered fictive kin:

- A. A traditional resource parent who fostered a child who then returned home, but the child later re-enters foster care and is placed with the same traditional resource parent with whom they resided during the previous foster care episode may be defined as fictive kin.
 - 1) In these situations:
 - a) A provisional fictive kin service may be opened at the time of child's subsequent entry into foster care if the traditional resource parents have closed their foster family home service during the time the child was not in foster care and all provisional resource home requirements are met; or,
 - b) A fictive kin foster family service may be at the time of the child's subsequent entry into foster care if the traditional resource parents have a current open and available foster family home service.
- B. A traditional resource parent who has fostered a child who is now sixteen (16) years of age or older for at least one (1) consecutive year may also be defined as fictive kin when:

- 
- 1) Reunification and adoption have been ruled out and the reasons for which reunification and adoption have been ruled out are clearly documented in the child's case plan;
 - 2) The youth considers the traditional resource parents as having a strong, positive, and emotional tie or role in his or her life;
 - 3) Efforts to identify relatives and fictive kin for the child have been clearly documented throughout the life of a case (e.g., via CFS-305: Relative and Fictive Kin Efforts Log) and those efforts have not been successful in identifying safe and appropriate relatives or fictive kin who are willing to take placement of the child.

Traditional resource parents who may be defined as fictive kin under the exceptions above may also be considered as the potential guardians for the child or youth when guardianship is determined to be in the best interest of the child or youth. Further, these traditional resource parents who subsequently qualify as fictive kin may also be eligible for a guardianship subsidy if all other subsidized guardianship requirements outlined in DCFS Policy VIII-L are met. However, the DCFS Director or designee must approve these subsidized guardianship requests prior to the subsidized guardianship agreement being signed. The DCFS Director or designee must approve the request for a traditional resource parent to be considered a fictive kin resource parent for the purposes of subsidized guardianship prior to the discussion occurring with the court team. The routing of these initial requests for approval will be as follows:

- A. The child's origin county Family Service Worker (FSW) will send the request prior to preparing the full subsidized guardianship packet) through his or her chain of command.
- B. The applicable Area Director will review the request within three (3) business days and, if he or she approves, forward it to the DCFS Assistant Director of Placement Supports and Community Outreach or designee.
- C. The DCFS Assistant Director of Placement Supports and Community Outreach or designee will review the request within three (3) business days and, if he or she approves, forward it to the DCFS Director or designee.
- D. The DCFS Director or designee will review the request within five (5) business days and relay his or her decision to the team involved.

If the DCFS Director approves the request and the home does not already have an open fictive kin foster family home service, the origin county FSW will collaborate with the local Resource Supervisor to open a fictive kin foster family home service for the home previously classified as a foster family home in the Division's information management system. All other steps to finalize the subsidized guardianship will then be followed as outlined in DCFS Policy VIII-L: Subsidized Guardianship.

Internal Procedure 515: Permanent Separation of Siblings for Adoption

02/2025

DCFS prioritizes keeping siblings together which is paramount in adoptive considerations to maintain familial bonds. However, in cases where separation is determined to be in the best interest of one or more siblings, a structured decision-making and approval process must be followed to ensure transparency, through assessment, and compliance with best practice and policy. Sibling relationships should be considered in each placement decision, along with the child or youth's needs. Simply because siblings were separated once in foster care, they do not have to remain separated throughout foster care or into adoption.

Some viable reasons siblings may not be placed together include:

- Safety Concerns
 - A sibling poses a risk of harm to another sibling due to severe behavioral issues, including aggression, abuse, or violence.
 - There is documented evidence of one sibling victimizing another.
- Specialized Needs
 - A sibling has complex medical, emotional, or psychological needs that require individualized care, making joint placement impractical.
- Conflictual Relationships
 - Evidence from therapists or other professionals indicated that separation would benefit the children's development or healing.
- Age and Developmental Differences
 - Significant age differences between siblings may create challenges in identifying a family capable of addressing their diverse needs.

Each of these reasons must be thoroughly documented and supported by evidence, such as:

- Evaluations from therapists, counselors, or psychologists
- Input from resource parents, teachers, and other professionals
- Efforts made to locate and secure a family capable of adopting all siblings together


Maintaining sibling groups will be paramount in adoption considerations. Siblings will be placed together in the same pre-adoptive home unless:

- A current mental health professional for one of the siblings provides written documentation that adoptive placement as a sibling group is not in the best interest of one or more of the siblings, and
- The DCFS Adoption Manager has executed a CFS-412: Request and Waiver for Permanent Separation of Siblings, and

- There is a current judicial ruling (court order) that adoptive placement of the siblings together would be detrimental to their best interests or is otherwise not possible at the time of placement due to treatment needs of one or more of the siblings (one of the children is currently in a residential treatment facility and will need to be placed with the siblings in the adoptive home upon completion of treatment).

Prior to placement of any sibling into a pre-adoptive home, the Adoption Specialist will:

- A. Request from the primary FSW and review provided documentation of reasonable efforts to maintain a sibling bond for all siblings placed in separate resource homes.
- B. Review the CFS-305: Relative and Fictive Kin Efforts Log as well as all documentation of reasonable efforts to locate relatives and fictive kin, ensuring that all individuals who should have been considered have been properly considered as permanency options for the sibling group:
 - 1) Do not move forward with discussions of pre-adoptive placement until all individuals have been properly evaluated as placement options:
 - a) Document all evaluations in the Division information management system
- C. Request and review documentation that the siblings have been consulted regarding potential permanent separation from their siblings for purposes of adoption. Verify that:
 - 1) Each sibling has been advised that they have a right to placement with their siblings, so long as the placement is not detrimental to the safety of any sibling
 - 2) Each sibling has been consulted and advised that separation of siblings for the purpose of adoption means they will no longer be guaranteed, and in some cases allowed, to have contact with their siblings
 - 3) The response and desires of each sibling
- D. Consider the validity of reasons for recommendation for permanent separation of siblings with the understanding that the following must be considered as part of a best interest decision:
 - 1) Routine sibling contact is mandated by law and siblings must have a minimum of bi-weekly contact while in out-of-home placement
 - 2) The relationship between a resource parent and a child is not a factor in the consideration of the separation of siblings for adoption
 - 3) Arkansas is not an open adoption state, and statements of intent to continue sibling contact after adoption should not be taken at value
 - 4) Siblings are likely to be the longest standing life connection for one another and to sever the sibling bond is a loss
 - 5) Relative and fictive kin options are preferred in permanency, to include in adoption, because they allow a child to hold a connection to their origin story, family genetic history, and community which results in better outcomes for the child

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- E. If, after review of documentation and consideration of best interests, permanent separation of siblings is necessary to ensure the safety of one or more of the siblings:
- 1) Schedule and conduct a Separation of Siblings Family Team Meeting (FTM).
Invite:
 - a) Primary FSW
 - b) FSW Supervisor
 - c) Adoption Supervisor
 - d) Area Director
 - e) Adoption Manager
 - f) Program Administrator for Foster Care and Adoption
 - g) Assistant Director of Placement Supports and Community Outreach
 - 2) If the FTM results in agreement for permanent separation of siblings:
 - a) Complete CFS-412: Request and Waiver for Permanent Separation of Siblings
 - b) Obtain signatures from all required attendees on CFS-412
 - c) Provide any additional information as requested by the Adoption Manager
 - 3) Complete an adoption court report recommending permanent separation of the siblings for purposes of adoption
 - 4) Attend the court hearing and follow subsequent recommendations of the court regarding pre-adoptive placement of the siblings

Internal Procedure 520: Adult Adoption from Extended Foster Care

11/2024

The Division of Children and Family Services (DCFS or Division) strives to achieve permanency for youth in foster care prior to the age of eighteen (18), but recognizes this goal is not always met. However, in the event a young adult participating in the Extended Foster Care Program finds a forever family, DCFS will facilitate an adult adoption prior to the young person turning twenty-one (21) years of age. An adult adoption subsidy is available for youth aged eighteen (18) to twenty-one (21) for the purpose of meeting the needs of the youth. In addition, payments for one-time expenses, known as a non-recurring adoption subsidy, may be obtained to reimburse the family for out-of-pocket pre-adoptive or finalization expenditures.

In these situations, the Adoption Specialist will:

- A. Organize and facilitate a Family Team Meeting with the young adult and potential adoptive parent to ensure mutual understanding regarding the goal of the adult adoption, Medicaid coverage, any other benefits that would be impacted by the adoption, and the adoption subsidy.
 - 1) Typically, the subsidy amount will be the same as the current board payment.
 - 2) Regarding Medicaid coverage:
 - a) If the youth is IV-E eligible, then IV-E Medicaid will attach to the adoption subsidy.
 - b) If the youth is not IV-E eligible, the subsidy will be state funded, and, therefore, Medicaid will not attach to the adoption subsidy. However, the young adult will qualify for Former Foster Care Medicaid once the adult adoption is finalized. The young adult must apply for Former Foster Care Medicaid at the local Department of Human Services (DHS) county office once the adoption is finalized.
 - 3) Once the adoption is finalized, a young adult is no longer eligible for all Transitional Youth Service Supports as set out in the Transitional Youth Services (TYS) Services Table. The young adult will continue to qualify for the services listed under the General Transitional Youth Services and After Care for Youth sections, being mindful of the eligibility criteria set forth for each Service/Support. The young adult will no longer qualify for the benefits laid out in the Extended Foster Care section.
- B. If the decision to move forward with the adult adoption is made, complete an adult adoption subsidy packet to submit to the Adoption Subsidy Coordinator in Central Office. This packet must include the CFS-453-H: Checklist for Initial Adult Adoption Subsidy Packet along with all applicable supporting documentation as listed on the checklist.



The Adoption Subsidy Coordinator will:

- A. Review the packet and complete the applicable adoption subsidy agreement form:
 - 1) CFS-428-D: Adoption Assistance Agreement for Adult Adoption (Federal)
 - 2) CFS-428-E: Adoption Assistance Agreement for Adult Adoption (State)
- B. Route completed agreement forms to the Adoption Manager for approval, then send to the DCFS Director or designee for signature.
- C. Send the signed CFS-428-D or CFS-428-E, as applicable, to the Adoption Specialist with written instructions.
- D. Notify the adoptive parent in writing if the application is denied and explain the reason, the internal review procedures, and the Administrative Fair Hearing procedures.
- E. Send a notification of denial to the Adoption Specialist
- F. Scan all subsidy packets into Edoctus.

The Adoption Specialist will:

- A. Forward the following to the Adoption Supervisor when submitting the recommendation to finalize the adoption:
 - 1) CFS-432: Checklist for Recommendation for Finalization of Adoption
 - 2) CFS-418: Adoption Summary of the child and all updates
 - 3) CFS-471: Signed Disclosure for Adoption
 - 4) VR-15 Report of Adoption
 - 5) Certified Birth Certificate of young adult
 - 6) FBI, state criminal record checks, and child maltreatment checks as applicable
 - 7) CFS-428-D or CFS-428-E: Adoption Assistance Agreement for Federal IV-E Funded Assistance for Adoption of Adult in Extended Foster Care or Adoption Assistance Agreement for State Funded Assistance for Adoption of Adult in Extended Foster Care as applicable
 - 8) Adoption Information Sheet
- B. Send the packet to the OCC attorney within five (5) business days following supervisory approval.
- C. Complete the steps to finalize the adoption as set out in Procedure VIII-9: Finalization of an Adoption; specifically, steps I through L.