

Impact Analysis

Subject: General Casework

Functional Area: Entering Data Required for AFCARS

Brief Description of Current Function/Process:

Adoption and Foster Care Analysis and Reporting System (AFCARS) consists of a number of data elements that states are required to report to the federal government on a semi annual basis. The federal government uses AFCARS information to: identify trends; plan for needed services; establish funding priorities; conduct research and evaluation; maintain/update regulations; and respond to the Congress and others for requests for data.

Caseworkers and other staff record AFCARS data in CONNECTIONS, CCRS and BICS. (See attached mapping document.) Within CONNECTIONS, AFCARS data elements are often shown with an asterisk (*) on the field label. OCFS originally planned to capture some additional AFCARS data elements with CONNECTIONS Build 19, however, with the delay in implementing that build it became necessary for OCFS to modify some existing CONNECTIONS windows and add one new window to capture a complete set of data elements. The Health module, introduced with Build 18.9, enables the capture of five data elements related to child health. With Build 18.9.6, OCFS will be able to capture data pertaining to: conditions associated with the child's removal; foster home composition; and a child's adoption.

What Remains the Same?

LDSS and voluntary agency caseworkers and other staff will continue to enter data into WMS/BICS, CCRS and CONNECTIONS in accordance with OCFS requirements and local procedures. Specific arrangements between LDSS and Voluntary Agencies in reference to data collection and documentation will continue to be governed by the contractual agreements between these organizations.

What is New or Changes?

- **Clinical Appointment tab** – with the issuance of the 08-OCFS-ADM-01: Changes Associated with CONNECTIONS Build 18.9 Health, Education and Permanency Hearing Report Modules, data entry on the Clinical Appointment tab is required for: all children in foster care and all children in OCFS custody placed in a Voluntary Agency. For each clinical appointment for a child in care over 30 days, staff will enter at least one AFCARS diagnosis, OR a well child, initial assessment, or reassessment appointment type in the physical/medical domain with a non-AFCARS diagnosis, blank diagnosis, or well child diagnosis.
- **Tracked Child Detail/Removal Information tab** - staff will check as many "Conditions Associated with Child's Removal" as apply to each discrete removal episode.

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- **Tracked Child Detail/Placement Information tab** – staff will enter AFCARS foster care information each time a child is placed or re-placed in a family foster care setting. This data includes foster family structure, whether the placed child was ever previously adopted and information about that adoption. A reminder to staff to complete/verify this information will appear on the Tracked Child Detail – Program Choice/PPG tab, and on FASP Appropriateness of Placement, Plan Amendments, and Finalize Adoption tabs whenever a Program Choice of “Placement” is selected.
- **AFCARS Adoption Information window** – At the time of adoption finalization staff will enter various pieces of information about the adoptive family, the birth parent(s) and the location of the adoption agency on a new AFCARS window that is accessed from the Finalize Adoption window (CCR/Stage Composition/Options).

Implications/Considerations:

System

- At least one AFCARS diagnosis (any applicable domain) **OR** a well child, initial assessment, or reassessment appointment type in the physical/medical domain with a non-AFCARS diagnosis, a blank diagnosis, or well child diagnosis must be entered.
- If a child has a chronic condition or existing diagnosis at the time of placement, an appointment type of “Diagnosis at Intake” should be utilized (e.g. asthma, autism).
- The new AFCARS button on the Finalize Adoption window is only enabled when all the fields in the Finalize Adoption window are filled and saved. The data entered on the Finalize Adoption window is modifiable as long as the stage remains open (though no additional PIDs are generated after the initial save).

Program

- LDSS internal procedures and agreements with voluntary agencies should clearly provide for the prompt designation of health responsibility and the timely recording of clinical appointments/diagnosed conditions, including “well child” if applicable.
- LDSS procedures should define responsibility for completing the Removal Information Tab for each removal episode as close to the removal as possible.
- LDSS internal procedures and agreements with voluntary agencies should clearly delineate responsibility for verifying/ entering AFCARS Foster Care Information as soon after each (re)placement as possible.
- LDSS internal procedures and agreements with voluntary agencies should clearly delineate responsibility for entering the new AFCARS Adoption information that is accessed from the Finalize Adoption window. It may be necessary to re-define responsibility for the completion of information on the Finalize Adoption window.

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- LDSS and voluntary agencies should plan for the entry of required health, removal, foster care placement, and adoption information for all children in care as of the implementation date for Build 18.9.6.
- **Staff need to enter** CCRS Movement Code – Child’s Placement Ended as soon after a child’s discharge from foster care as possible.

AFCARS Elements

Darker shaded elements are those that are not currently being provided but will be after Build 18.9.6. Lighter shaded elements are those that are currently being provided but will be enhanced by Build 18.9.6.

DE #	Description	Possible Values	Location
Foster Care Elements			
1	State	State	Derived
2	Report Ending Period Date	xx/xx/xxx	Derived
3	Local Agency (FIPS Code)	County or equivalent unit	CCRS district of case manager
4	Record Number	number	CCRS sequential number state assigned to the child
5	DT of Most recent periodic review	xx/xx/xxx	CONX Service Plan Review
6	Child's Date of Birth	xx/xx/xxx	CONX Person Demographics
7	Sex	Male/Female/blank	CONX Person Demographics
8a	Child Race: American Indian or Alaska Native	Applies/Does Not apply	CONX Person Demographics
8b	Asian	Applies/Does Not apply	CONX Person Demographics
8c	Black or African American	Applies/Does Not apply	CONX Person Demographics
8d	Native American or Other Pacific Islander	Applies/Does Not apply	CONX Person Demographics
8e	White	Applies/Does Not apply	CONX Person Demographics
8f	Unable to Determine	Applies/Does Not apply	CONX Person Demographics
9	Hispanic Origin	Yes/No/Unable to determine	CONX Person Demographics
10	Child's Disability - Has the child been clinically diagnosed with disability	Yes/No/Not yet determined	CONX Health- Clinical Appointment tab, Diagnosis field; OR well child, initial or reassessment appointment type (physical/medical domain) without a diagnosis
11	Mental Retardation	Applies/Does Not apply	CONX Health- Clinical Appointment tab, Diagnosis field
12	Visual or Hearing Impaired	Applies/Does Not apply	CONX Health- Clinical Appointment tab, Diagnosis field
13	Physically Disabled	Applies/Does Not apply	CONX Health- Clinical Appointment tab, Diagnosis field
14	Emotionally Disturbed	Applies/Does Not apply	CONX Health- Clinical Appointment tab, Diagnosis field

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15	Other Medically Diagnosed Condition requiring special care	Applies/Does Not apply	CONX Health- Clinical Appointment tab, Diagnosis field
16	Child Ever Adopted	Yes/No/Unable to Determine	CONX Tracked Child – Placement Information tab
17	Age (Of child when previous adoption was recognized)	Not Applicable/less than 2/2-5/6-12/13 or older/Unable to determine	CONX Tracked Child – Placement Information tab
18	Date of First Removal from Home	xx/xx/xxxx	CCRS Movement Codes – oldest Child’s Placement begins date
19	Total Number of Removal from Home to Date	Number	CCRS Movement Codes – based upon cumulative of child’s placements ending and beginning
20	Date Child Was Discharged from last foster care episode	xx/xx/xxxx	CCRS Movement Codes – Child’s most recent Placement Ended date prior to current placement
21	Date of latest removal from Home	xx/xx/xxxx	CCRS Movement Codes – most recent Child’s Placement begins date
22	Removal Transaction Date	xx/xx/xxxx	CCRS Movement Codes – when Child’s Placement begins date was system entered
23	Date Of Placement in current foster care setting	xx/xx/xxxx	CCRS Movement Codes - most recent Transfer or Placement begins date
24	# of previous Placement settings during this removal episode	Number	CCRS Movement Codes – total of all Transfers
25	Removal from Home (Manner of Removal from Home for current removal episode)	Voluntary/Court Ordered/Not Yet Determined	CONX Derived from Tracked Child - Removal Information tab
26	Physical Abuse	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
27	Sexual Abuse	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
28	Neglect	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
29	Alcohol Abuse (Parent)	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
30	Drug Abuse (Parent)	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
31	Alcohol Abuse (Child)	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
32	Drug Abuse (Child)	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
33	Child's Disability	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
34	Child's Behavior problem	Applies/Does Not apply	CONX Tracked Child - Removal Information tab

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35	Death of Parent(s)	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
36	Incarceration of Parent(s)	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
37	Caretaker's inability to cope due to Illness or other reasons	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
38	Abandonment	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
39	Relinquishment	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
40	Inadequate Housing	Applies/Does Not apply	CONX Tracked Child - Removal Information tab
41	Current Placement setting	Pre-Adoptive Home/Foster Family Home-Relative/Foster Family Home-Non Relative/ Group Home/ Institution/ Supervised Independent Living/ Runaway/Trial Home Visit	CCRS facility type
42	Out of State Placement	Yes/No	CONX Caps Resource State of facility
43	Most recent case plan goal	Reunify with Parent(s) or Principal Caretaker(s)/ Live with Relative(s)/ Adoption/Long Term Foster Care/ Emancipation/ Guardianship/ Case Plan Goal Not Yet Established	CONX Tracked Child Detail
44	Care taker Family Structure	Married Couple/ Unmarried Couple/Single Female/Single Male/ Unable to Determine	CONX Derived from Caretaker Information, Family Relationship Matrix
45	Year of Birth (1st principal caretaker)	xxxx	CONX Derived from Caretaker Information, Family Relationship Matrix
46	Year of Birth (2nd principal caretaker)	xxxx	CONX Derived from Caretaker Information, Family Relationship Matrix

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47	Date of Mother's parental rights termination	xx/xx/xxxx	CCRS Adoption Codes – based upon method used to terminate rights
48	Date of legal or putative father' s parental rights termination	xx/xx/xxxx	CCRS Adoption Codes – based upon method used to terminate rights
49	Foster family structure	Not Applicable/ Married Couple/ Unmarried Couple/Single Female/Single Male	Tracked Child – Placement Information tab
50	Year of Birth (1st Foster Caretaker)	xxxx	CONX FAD Demographics
51	Year of Birth (2nd Foster Caretaker)	xxxx	CONX FAD Demographics
52a	Race of Caretaker #1: American Indian or Alaska Native	Applies/Does Not apply	CONX FAD Demographics
52b	Asian	Applies/Does Not apply	CONX FAD Demographics
52c	Black or African American	Applies/Does Not apply	CONX FAD Demographics
52d	Native American or Other Pacific Islander	Applies/Does Not apply	CONX FAD Demographics
52e	White	Applies/Does Not apply	CONX FAD Demographics
52f	Unable to Determine	Applies/Does Not apply	CONX FAD Demographics
53	Hispanic or Latino Ethnicity of 1st Foster caretaker	Yes/No/Unable to determine/ Not applicable	CONX FAD Demographics
54a	Race of Caretaker #2: American Indian or Alaska Native	Applies/Does Not apply	CONX FAD Demographics
54b	Asian	Applies/Does Not apply	CONX FAD Demographics
54c	Black or African American	Applies/Does Not apply	CONX FAD Demographics
54d	Native American or Other Pacific Islander	Applies/Does Not apply	CONX FAD Demographics
54e	White	Applies/Does Not apply	CONX FAD Demographics
54f	Unable to Determine	Applies/Does Not apply	CONX FAD Demographics
55	Hispanic or Latino Ethnicity of 2nd Foster caretaker	Yes/No/Unable to determine/ Not applicable	CONX FAD Demographics
56	Date of Discharge from Foster Care	xx/xx/xxxx	CCRS Movement Codes – Child's Placement Ended code for current care episode
57	Foster Care Discharge transaction date	xx/xx/xxxx	CCRS Movement Codes – transaction date of Child's Placement Ended code for current foster care episode

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58	Reason for Discharge	Reunification with Parent(s) or Primary Caretaker(s)/ Living with Other Relative(s)/ Adoption/ Emancipation/ Relative Guardianship/ Transfer to Another Agency/ Runaway/ Death of Child/ Not Applicable	CCRS Movement Codes based upon Reason codes for discharge/closing
59	Title IV-E (Foster Care)	Applies/Does Not apply	BICS
60	Title IV-E (Adoption Assistance)	Applies/Does Not apply	BICS
61	Title IV-A	Applies/Does Not apply	BICS
62	Title IV-D (Child Support)	Applies/Does Not apply	CSMS (Child Support Management System)
63	Title XIX (Medicaid)	Applies/Does Not apply	BICS
64	SSI or Other Social Security Benefits	Applies/Does Not apply	BICS
65	None of the Above	Applies/Does Not apply	BICS
66	Amount of monthly foster care payments	\$	BICS
Adoption Elements			
1	State FIPS Code	State	Derived
2	Report Period End Date	xx/xx/xxx	Derived
3	Record Number	Number	CCRS sequential number state assigned to the child
4	State Agency Involvement	Yes/No	Derived
5	Child Date of Birth	xx/xx/xxx	CONX Person Demographics
6	Child Sex	Male/Female/blank	CONX Person Demographics
7a	Child's Race: American Indian or Alaska Native	Applies/Does Not apply	CONX Person Demographics
7b	Asian	Applies/Does Not apply	CONX Person Demographics
7c	Black or African American	Applies/Does Not apply	CONX Person Demographics

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7d	Native American or Other Pacific Islander	Applies/Does Not apply	CONX Person Demographics
7e	White	Applies/Does Not apply	CONX Person Demographics
7f	Unable to Determine	Applies/Does Not apply	CONX Person Demographics
8	Child Hispanic Origin	Yes/No/Unable to determine	CONX Person Demographics
9	Has Agency Determined Special Needs?	Yes/No	CCRS Adoption Codes entered by NYSAS based upon subsidy approval
10	Primary Basis for Determining Special Needs	Race/Age/Sibling Group Placement/Medical Condition or Other Disability/Other/ Not Applicable	CCRS Adoption Codes entered by NYSAS based upon subsidy type
11	Mental Retardation	Applies/Does Not apply	Derived from Health Services
12	Visually/Hearing Impaired	Applies/Does Not apply	Derived from Health Services
13	Physically Disabled	Applies/Does Not apply	Derived from Health Services
14	Emotionally Disturbed	Applies/Does Not apply	Derived from Health Services
15	Other Diagnosed Condition	Applies/Does Not apply	Derived from Health Services
16	Biological Mother's Birth Year	xxxx	AFCARS Adoption Information window
17	Biological Father's Birth Year	xxxx	AFCARS Adoption Information window
18	Biological Mother Married at Time of Birth	Yes/No/Unable to Determine	AFCARS Adoption Information window
19	Date of Mother's TPR	xx/xx/xxxx	CCRS Adoption Codes – based upon method used to terminate rights
20	Date of Father's TPR	xx/xx/xxxx	CCRS Adoption Codes – based upon method used to terminate rights
21	Date Adoption Legalized	xx/xx/xxxx	CCRS Movement Codes – based upon Adoption as a Reason code for Child's Placement Ended
22	Adoptive Family Structure	Married Couple/ Unmarried Couple/Single Female/Single Male	AFCARS Adoption Information window
23	Adoptive Mother's Year of Birth	xxxx	AFCARS Adoption Information window
24	Adoptive Father's Year of Birth	xxxx	AFCARS Adoption Information window
25a	Race Adoptive Mother: American Indian or Alaska Native	Applies/Does Not apply	AFCARS Adoption Information window
25b	Race Adoptive Mother: Asian	Applies/Does Not apply	AFCARS Adoption Information window

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25c	Race Adoptive Mother: Black or African American	Applies/Does Not apply	AFCARS Adoption Information window
25d	Race Adoptive Mother: Native American or Other Pacific Islander	Applies/Does Not apply	AFCARS Adoption Information window
25e	Race Adoptive Mother: White	Applies/Does Not apply	AFCARS Adoption Information window
25f	Race Adoptive Mother: Unable to Determine	Applies/Does Not apply	AFCARS Adoption Information window
26	Adoptive Mother's Hispanic Origin	Yes/No/Unable to determine/ Not applicable	AFCARS Adoption Information window
27a	Race Adoptive Father: American Indian or Alaska Native	Applies/Does Not apply	AFCARS Adoption Information window
27b	Race Adoptive Father: Asian	Applies/Does Not apply	AFCARS Adoption Information window
27c	Race Adoptive Father: Black or African American	Applies/Does Not apply	AFCARS Adoption Information window
27d	Race Adoptive Father: Native American or Other Pacific Islander	Applies/Does Not apply	AFCARS Adoption Information window
27e	Race Adoptive Father: White	Applies/Does Not apply	AFCARS Adoption Information window
27f	Race Adoptive Father: Unable to Determine	Applies/Does Not apply	AFCARS Adoption Information window
28	Adoptive Father's Hispanic Origin	Yes/No/Unable to determine/ Not applicable	AFCARS Adoption Information window
29	Relationship of Adoptive Parent to Child-Stepparent	Applies/Does Not apply	AFCARS Adoption Information window
30	Relationship of Adoptive Parent to Child-Other Relative	Applies/Does Not apply	AFCARS Adoption Information window
31	Relationship of Adoptive Parent to Child-Foster Parent	Applies/Does Not apply	AFCARS Adoption Information window
32	Relationship of Adoptive Parent to Child-Other Non-Relative	Applies/Does Not apply	AFCARS Adoption Information window
33	Child Was Placed From	Within the state/ Another state/ Another country	AFCARS Adoption Information window
34	Child Was Placed By	Public Agency/ Private Agency/ Tribal Agency/ Independent Person/Birth Parent	Derived
35	Receiving Monthly Subsidy	Yes/No	CCRS discharge reason code
36	Monthly Amount	\$	CCRS to be entered by NYSAS
37	Adoption Assistance	Yes/No	CCRS Adoption Subsidy type