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**Administrative Directive**

<b>Transmittal:</b>	
<b>To:</b>	Commissioners of Social Services Executive Directors of Voluntary Authorized Agencies and Contract Preventive Agencies
<b>Issuing Division/Office:</b>	Strategic Planning and Policy Development
<b>Date:</b>	
<b>Subject:</b>	Case Management Changes Associated with CONNECTIONS Build 18 (February 2005)
<b>Suggested Distribution:</b>	Directors of Service Child Protective Services Supervisors Child Welfare Supervisors Legal Staff Staff Development Coordinators CONNECTIONS Implementation Coordinators
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<b>Attachments:</b>	<p>Attachment A: CONNECTIONS Build 18 Implementation Wave Schedule</p> <p>Attachment B: Social services legal citations related to requirements for maintaining records, sharing of information, confidentiality, privacy and re-disclosure of information</p> <p>Attachment C: CONNECTIONS Permanency Planning Goals (PPGs) Mapping Guide</p> <p>Attachment D: Model Contract for Purchase of Foster Care</p> <p>Attachment E: Advocates for Children Settlement Agreement (ADVPO) Templates</p> <p>Attachment F: CONNECTIONS Final Regulations</p> <p>Attachment G: Proposed Regulatory Amendments: Standards for Uniform Case Records and Family and Child Assessments and Service Plans (18 NYCRR Part 428, et.al.)</p>
<b>Attachment Available On – Line:</b>	YES

**Filing References**

<b>Previous ADMs/INFs</b>	<b>Releases Cancelled</b>	<b>Dept. Regs.</b>	<b>Soc. Serv. Law &amp; Other Legal Ref.</b>	<b>Manual Ref.</b>	<b>Misc. Ref.</b>
04 OCFS ADM-02 04 OCFS INF-10 04 OCFS INF-09 04 OCFS INF-07 04 OCFS INF-04 04 OCFS INF-01 03 OCFS ADM-01	95 ADM- 7 88 ADM-28	18 NYCRR, Parts 405, 428, and 466	SSL 446		

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- Attachment C: CONNECTIONS Permanency Planning Goals (PPGs) Mapping Guide
- Attachment D: Model Contract for Purchase of Foster Care
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**CONNECTIONS/Child Welfare Acronyms**

<b>ACS</b>	Administration for Children’s Services (NYC Daytime)
<b>ADVPO</b>	Advocates Preventive Only (B18) (stage)
<b>ADM</b>	Administrative Directive Memo
<b>AppReg</b>	Application Registration
<b>AFCARS</b>	Adoption & Foster Care Analysis & Reporting System
<b>ARI</b>	Administrative Review of Investigation (stage)
<b>ASFA</b>	Adoption and Safe Families Act
<b>BCFI</b>	Behavioral Concerns and Family Issues
<b>BICS</b>	Benefits Issuance and Control System (1986)
<b>BF</b>	Business Function
<b>BFP</b>	Business Function Profile
<b>CCF</b>	Congregate Care Facility
<b>CCR</b>	Child Case Record (B18)
<b>CCRS</b>	Child Care Review Service (1982)
<b>CD</b>	Community District (NYC)
<b>CID</b>	Case Initiation Date
<b>CIN</b>	Client Identification Number (in WMS system)
<b>COI</b>	Court Ordered Investigation (stage)
<b>CPRS</b>	Child Protective Record Summary
<b>COFCCA</b>	Council of Family and Child Caring Agencies
<b>COS</b>	Court Ordered Supervision
<b>CPM</b>	Child Protective Manager
<b>CPS</b>	Child Protective Services (Article 10)
<b>CPS Worker/Monitor</b>	Child Protective Services Worker/Monitor (Role in Family Services Stage)
<b>CSMS</b>	Child Support Management System
<b>CW</b>	Child Welfare
<b>CWS</b>	Child Welfare Services (stage)
<b>DRL</b>	Domestic Relations Law
<b>DRS</b>	Division of Rehabilitation Services (oversees youth in custody of OCFS)
<b>DUP</b>	Duplicate Report (CPS Intake)
<b>ECS</b>	Emergency Children’s Services (NYC b/w 4:30 p.m. - 8:30 a.m.)
<b>FAD</b>	Foster Adoptive Development (stage)
<b>FADRS</b>	FAD Record Summary
<b>FAR</b>	Finalized Adoption Record (B19) (stage)
<b>FASP</b>	Family Assessment and Service Plan (B18)
<b>FBH</b>	Foster Boarding Home
<b>FCI</b>	Foster Care Issues (B18)
<b>FPLS</b>	Federal Parent Locator Service
<b>FSI</b>	Family Services Intake (B18)
<b>FSNR</b>	Family Strengths, Needs and Risks (B18)
<b>FSS</b>	Family Services Stage (B18)
<b>HPF</b>	High Priority Factor (NYC)
<b>IAB</b>	Institutional Abuse (CPS)
<b>ICPC</b>	Interstate Compact for the Placement of Children

<b>ICWA</b>	Indian Child Welfare Act
<b>INF</b>	Informational Letter
<b>INI</b>	Initial Report (CPS)
<b>INT</b>	Intake (CPS) (stage)
<b>INV</b>	Investigation (CPS) (stage)
<b>IRI</b>	Individual Report Involvement (CPS)
<b>JD</b>	Juvenile Delinquent (Article 3)
<b>LDM</b>	Local Data Maintenance
<b>LDSS</b>	Local Department of Social Services
<b>LOD</b>	Level of Difficulty (Special/Exceptional rate)
<b>MA</b>	Medical Assistance/Medicaid
<b>MAPP</b>	Model Approach to Parenting Program (FAD)
<b>NCANDS</b>	National Child Abuse and Neglect Data System
<b>NYS</b>	New York State
<b>NYCRR</b>	New York Codes, Rules and Regulations
<b>O&amp;A Block</b>	Outcome and Activity Block in Service Plan
<b>OCFS</b>	Office of Children & Family Services
<b>OCI</b>	Open Caseload Inquiry (case management report in CONNECTIONS)
<b>OCI</b>	Office of Confidential Investigations in ACS (investigates NYC foster care & daycare reports)
<b>OMH</b>	Office of Mental Health
<b>OMRDD</b>	Office of Mental Retardation/Developmental Disabilities
<b>OTI</b>	Out of Town Inquiry (stage)
<b>PC</b>	Program Choice
<b>PFR</b>	Putative Father Registry
<b>PHL</b>	Public Health Law
<b>PID</b>	Person Identification Number (in CONX)
<b>PINS</b>	Person in Need of Supervision (Article 7)
<b>PPG</b>	Permanency Planning Goal
<b>RIST</b>	Regional Implementation Support Team
<b>RAP</b>	Risk Assessment Profile
<b>RID</b>	Resource Identification number
<b>SA</b>	Safety Assessment
<b>SACWIS</b>	Statewide Automated Child Welfare Information System (1993)
<b>SCR</b>	State Central Register (created 1982 - CONNECTIONS R2 1997)
<b>SPR</b>	Service Plan Review
<b>SSPS</b>	Statewide Services Payment System
<b>TCD</b>	Track Child Detail
<b>TPR</b>	Termination of Parental Rights
<b>UCR</b>	Uniform Case Record
<b>VA</b>	Voluntary Agency
<b>YASI</b>	Youth Assessment and Screening Instrument
<b>WMS</b>	Welfare Management System (1982)

## I. Purpose

The purpose of this release is to provide general information and guidance on specific New York State (NYS) Child Welfare practice changes, effective with the implementation of CONNECTIONS Build 18, scheduled to begin in February 2005. The phased implementation of Build 18 will be accomplished in “waves” over the period of one year. Each wave is comprised of one or more social services districts and, generally, those voluntary agencies whose administrative offices are located in those respective districts. The Build 18 implementation schedule, which is slightly revised from the schedule listed in the Informational Letter, 04 OCFS-10, Phased Implementation for the New Case Management System in CONNECTIONS Build 18, is included as Attachment A. This Administrative Directive (ADM) and the requirements set forth applies to all social services districts and voluntary agencies statewide (voluntary foster care agencies and contract preventive agencies, hereafter referred to as agencies), as they become fully implemented respective to the date of their wave implementation. An exception to that are changes to the CPS investigation conclusion closure reasons discussed in section III N of this release, which become effective statewide upon the implementation date of wave 1.

CONNECTIONS Build 18 provides for the creation of a single electronic case record and supports the collection and recording of child protective, preventive, foster care and adoption services information. The Case Management functionality in CONNECTIONS Build 18:

- defines security for the Case Management system;
- provides a statewide standardized Family Services Intake for families in need of services;
- provides for the creation of a Child Welfare Services case in CONNECTIONS, including all assessment and service planning activity, now referred to as the Family Assessment and Service Plan (FASP);
- provides for the recording of contacts and case Progress Notes;
- provides for the capturing of Service Plan Review information, for the entire period the Child Welfare case is open for services; and
- provides for the creation of a Child Case Record (CCR) for those children completely legally freed.

All of the above entail significant change to current case practice. This release addresses the practice implications of these changes and their effect on social services districts and agencies statewide. It clarifies policy requirements regarding the confidentiality and disclosure of case information while working within a shared case record.

This release also stipulates the necessity for dual entry of some data into CONNECTIONS and the Child Care Review Services (CCRS) during the interim period between CONNECTIONS Build 18 and Build 19. Finally, it introduces:

- a revised Model Contract for social service district purchase of foster care services;
- a new set of templates for documenting preventive-only cases covered by the court settlement in the Advocates for Children lawsuit, hereafter referred to as ADVPO;
- recently promulgated OCFS regulations, effective January 26, 2005, primarily regarding the implementation and administration of the CONNECTIONS system; and
- proposed OCFS regulatory amendments: Standards for Uniform Case Records and Family and Child Assessments and Service Plans (18 NYCRR Part 428, et.al.).

## II. Background

Child welfare practice in New York State performs a vital role in providing for the safety, permanency and well-being of New York's most vulnerable children and families. Child welfare caseworkers, supervisors, and managers work to achieve the following outcomes:

- children are safe;
- families are preserved;
- children are adopted when their birth family cannot be preserved;
- children leaving care at the age of majority can live independently;
- children and youth develop normally.

CONNECTIONS is designed to support child-centered and family-focused case practice and to guide and document worker efforts to achieve these outcomes for children and families.

CONNECTIONS was developed in response to the provision of federal financial incentives to develop a Statewide Automated Child Welfare Information System (SACWIS) to provide a more efficient and effective administration of child welfare programs and to meet the federal mandate for state collection of a set of foster care and adoption related data elements (the Adoption and Foster Care Analysis and Reporting System (AFCARS)). CONNECTIONS, in accordance with these mandates, is designed to create a single, statewide, integrated system for the collection and recording of child protective, preventive, foster care and adoption services information. When CONNECTIONS is fully implemented with the release of Build 19, it will replace the existing "legacy" systems (the Welfare Management System (WMS) for child welfare cases, CCRS and the Adoption Album) and will interface with the Benefits Issuance Control System (BICS), Child Support Management System (CSMS), and WMS Non-Services, including Medical Assistance (MA or Medicaid).

The CONNECTIONS system currently includes the following components:

- Child Protective Services Intake
- Child Protective Services Investigation
- Administrative Review of Investigations
- Foster Adoptive Home Development
- Resource Directory
- Security Structure

The addition of the Family Services Stage (FSS) in Build 18 implements case management functionality in CONNECTIONS and adds appropriate social services district and agency Foster Care, Preventive and Adoption staff as workers in the system. The design of case management functionality affords the opportunity to provide system support for important OCFS policy, program and practice initiatives. Throughout the design process, the project relied heavily on stakeholder and user participation. The Case Management Workgroup, comprised of representatives from a number of social services districts and agencies, devoted many days to defining requirements and reviewing multiple iterations of Build 18 design so that the system would address both local district and agency needs and SACWIS requirements. The CONNECTIONS Management/Steering Committee, comprised of local commissioners and agency

directors, debated major issues and decided critical questions such as the imposition of a requirement for individual assessment of all tracked children and other case members in order to effectively identify and address individual needs.

Build 18 was developed in conjunction with current practice research and reflects the principles and practices that are the foundation of our outcome-based training system. It supports the use of evidence-based best practices and structured decision making assessment tools, including an emphasis on family involvement in planning, the utilization of family strengths, and concurrent planning for children in foster care.

Build 18 specifically supports NYS OCFS Child Welfare practice improvement agenda, including those areas targeted for improvement in the 2003 Program Improvement Plan developed in response to the 2001 Federal Child and Family Services Review. Support for effective practice is reflected in the new standardized Family Services Intake and in the redesigned assessment and service plan. Build 18 also provides automated support to schedule and document Service Plan Reviews, provides for the development, review and monitoring of child visitation plans and results, and adds important components to the case record focusing on the permanency and well-being of adolescents in foster care.

Assessment and service plan revisions implement safety, permanency and well-being provisions of the federal Adoption and Safe Families Act (ASFA) and address Chafee Foster Care Independence Program requirements pertaining to adolescents in foster care. The Family Services Stage collects federally required AFCARS data. Build 18 collects and aggregates case information and provides reports to administrators and supervisors that will enhance their ability to make case practice, management and planning decisions based on real data.

The automation of case management concurrent with the above referenced changes calls for the re-engineering of many local social services district and agency work processes. Build 18 implementation will thus impact most district and agency child welfare staff.

### **III. Program Implications**

#### **A. Single Electronic Family Case Record**

##### ***1) Policy and Practice Implications***

Currently, each social services district and agency maintains its own separate child welfare case record for each family served. This practice will be replaced in CONNECTIONS with documentation of all ongoing child welfare services within a single electronic case record. This record is not the social services district's Case Manager's record, or the agency's foster care worker's record, but the family's record. Where multiple workers are assigned a role in the case, each will work within this single record. This is a major change to current practice and local policy. Workers will see the work, including progress notes, of all other assigned workers in the Family Services Stage. All stages (Intake, Investigation, Family Services, etc.) will be electronically linked to the Family Case, but on-line access to investigation stages will be limited to social services district workers. All workers with a role in the stage will be alerted whenever a new child protective services (CPS) report on the family comes in to the State Central Register (SCR) and, again when an investigation is determined. This enables assigned social services district child welfare workers to view the Investigation Stage or assigned child welfare agency staff can contact the CPS Worker to

discuss relevant safety issues and findings. This increased information sharing supports a family-centered practice with improved service coordination, timely informed decision-making, and coordinated services planning that address the family's most important needs and concerns. Each worker assigned to the Family Services Stage will contribute to the development of a single-family assessment and service plan that incorporates more comprehensive and cohesive assessment and planning for individual family members.

Although the content of the Uniform Case Record (UCR) remains largely the same, the form and manner of maintaining certain components will change. Until the implementation of Build 19 when CONNECTIONS becomes the system of record, the UCR for legal purposes will consist of the combined case management information maintained in CONNECTIONS, the WMS and CCRS systems, and all relevant external paper records; i.e. court orders, correspondence. Requirements for the local maintenance of all external documentation such as court orders, birth certificates, photographs, psychiatric reports, etc., will continue with the implementation of Build 18 and Build 19.

With the implementation of Build 18, a large portion of the information in the case record will be stored in an electronic format. Intake information, family assessments and service plans, plan amendments, and progress notes will be recorded in CONNECTIONS. The ability to print case record components (for example, investigation summaries, individual FASPs, or FASP components) will be available. Printing should be employed judiciously for specific purposes, not as maintenance of a second 'back-up' paper record. For example, copies of the FASP may be printed to share with the family or the court. Agency clinical treatment notes, daily logs, and written material created by service providers who act in roles other than Case Worker, CPS Worker/Monitor, Case Planner and Case Manager will still be recorded outside of CONNECTIONS.

## ***2) Access to the Case Record***

There are two basic types of access to the case record: 'Maintain' access, which allows a person to edit (i.e. add, modify, update, delete), and 'View' access, in which there is no ability to edit. Everyone who has a role in a stage will have 'Maintain' access to that stage as defined by his or her role in the stage. To create entries in a case (i.e. maintain), workers must access the stage through the *workload*. To simply 'View' information, the worker accesses the stage through *person or case search provided that the individual is given access via one of the methods given below*.

Persons without a role in the stage can be granted access rights in several different ways. These include:

- Unit Hierarchy
- Organizational Hierarchy
- Assigned Business Function
- Assigned Job Type
- Assigned Unit Specialization
- Agency Access Options Matrix

The Build 17 Job Aid and Security Step-by-Step Guide provides detailed information regarding each of these options.

It is important to note that anyone who has access to a worker's workload, for example, a Unit Approver *or above in the same unit as the worker*, will have 'Maintain' access to the stages of the worker's workload. Thus, *supervisors have the same maintain rights as their workers, including 'Maintain' access to the FASP, providing they go through the worker's workload.* Social services districts and agencies may optionally choose to provide additional access through the Agency Access window. Throughout this ADM, wherever access is discussed in relation to worker role and organization, it is to be understood that the same access applies to all persons who have access to that worker's workload.

**Required Action:** Single Electronic Family Case Record

Once CONNECTIONS is implemented by OCFS, social services districts and agencies may not use their own internal system in lieu of CONNECTIONS Build 18.

All social services districts must establish and maintain a single uniform case record for each family for whom a case record is required pursuant to 18 NYCRR 428.1. To be complete, a UCR must meet all requirements of 18 NYCRR 428.3.

The following must be documented and maintained in CONNECTIONS, Build 18:

- Family Services Intake Report
- Family Services Intake Face Sheet
- All Family Assessment and Service Plans and Plan Amendments
- All Service Plan Review Reports
- All Progress Notes

The following must continue to be documented and maintained in WMS and CCRS systems until Build 19 is implemented:

- Recording of eligibility for any funding source and entry of the Eligibility category in WMS;
- Direct and Purchase of Services Authorizations in WMS;
- Registration, child tracking, CID date and demographic information in CCRS;
- FASP information (Plan Type, Service Needs and Status, Program Choice, PPG, Worker Function, Case Status) in CCRS; and
- Placement/Movement, Level of Difficulty (LOD), Legal and Adoption Activities in CCRS.

The following must be maintained outside of CONNECTIONS:

- Application for Services (LDSS 2921):
- Family Album entries for children freed for adoption: and
- External Documentation List / Actual Documents, including but not limited to
  - Birth Certificates
  - Medical Information and Consents

- Record of school placement, education reports and evaluations
- Psychiatric/psychological reports
- Reports from other agencies
- Court Orders
- Correspondence

## **B. Confidentiality and Security**

### ***1) Access to Information***

Working within a single family case record raises questions regarding confidentiality, disclosure and privacy issues and requires heightened awareness and vigilance on the part of all staff that have access to case information. As noted above, specific access to information is prescribed by either the security access a person has, including all of the unique business functions (BF's) they may be assigned, and the role they, or someone under their supervision, have in a case. The assigned BF's together constitute a person's business function profile (BFP). Examples of special BF's supported in the case management system include "View Unfounded" and "View Sealed Adoption". Security administrators in social services districts and agencies must make specific decisions regarding who may have access to what records bases upon their role in providing services to a child or family member and their unique need to know the information maintained in different parts of the case record. OCFS has disseminated specific guidelines for each BF to aid in this decision making process. The system further prescribes that certain BF's may only be assigned based on the type of organization to which the user belongs. For example, "View Unfounded" and "View Reporter/Source" are only assignable to someone in a social services district who has responsibility related to child protective services; it is not available for assignment to any agency staff.

Existing statutes and regulations related to confidentiality and disclosure of information support sharing of information and access to essential information by service providers, agencies responsible for a child placed in their care and for persons who are responsible for direct service provision, development, implementation or coordination of service plans, and monitoring services to a family. Such statutes and regulations also clearly delineate the circumstances under which information may be shared and the responsibilities of those persons who may disclose and/or receive the information. These statutes and regulations have not been amended in order to support the access to information that staff will have within the electronic case management system in CONNECTIONS. However, the CONNECTIONS regulations (see Attachment F) further define the confidentiality and security requirements for the CONNECTIONS system.

The new case management system in CONNECTIONS will facilitate appropriate access to the information that was previously maintained in distinct paper records by individual social services districts and agencies. Development of the new case management system and provision of access to information within a social services district or agency is based upon the principle of persons who have a "need to know" specific information so they may fulfill their responsibilities and adequately provide services and plan for the health, safety, permanency, and well-being of the child(ren) and their family. Information maintained in the case management system in CONNECTIONS is confidential and may be disclosed only in a manner consistent with the applicable statutory and regulatory standards.

There are numerous sections of Social Services Law (SSL) and the New York Codes, Rules and Regulations (NYCRR) in addition to federal statutes and Public Health Laws (PHL) that address these issues. OCFS has carefully analyzed relevant requirements and incorporated safeguards into the development of the new case and financial management design in CONNECTIONS that will continue to support the confidentiality and privacy of the individual and family case record. It is still incumbent upon each staff person, as it is now, to comply with these requirements to protect and maintain the confidentiality of the families they serve. Each social services district and agency continues to be responsible for informing all staff, both employees and volunteers of their legal responsibilities regarding confidentiality, disclosure of information and privacy for the children and families they serve.

Attachment B provides a listing of some of the more common social services legal citations related to requirements for maintaining records, sharing of information, confidentiality, and re-disclosure of information.

**2) Reference Guide**

A quick reference guide to relevant confidentiality statutes and regulations by program areas is as follows:

- Foster Care - SSL 372, 373-a, 409-e, 409-f; 18 NYCRR 357.3, and 430.12,
- Preventive - SSL 409-e, 409-f, 18 NYCRR 423.7
- CPS - SSL 422(4), (5), (6), (7), 422-a, and 424(4), (5), 18 NYCRR 432.7
- Adoption - DRL 114; SSL 373-a, 18 NYCRR 357.3, 421.2 (d), 421.18 (m)
- HIV- Public Health Law Article 27-F; 18 NYCRR 421.2 (d), 431.7
- Domestic Violence - SSL 459-g, 18 NYCRR 452.10
- Retention, sealing and expungement of records - SSL 422(5), 422(6), 422(8), 18NYCRR 428.15 (a) (4) 432.9, 441.7, 466.5
- Confidentiality - 18 NYCRR 466.4
- Security - 18 NYCRR 466.6

**3) Retention, Sealing and Expungement of Information**

The chart below describes the standards in effect as of January 26, 2005 with regard to child welfare records retention, sealing and expungement. There is no change to the requirements with regard to child protective services records; the other program areas have changed. OCFS believes the adoption standards are already common practice in the field.

**RETENTION, SEALING AND EXPUNGEMENT OF CHILD WELFARE RECORDS**

PREVENTIVE SERVICES	applies solely to preventive services cases where there has been no foster care or protective services provided between case opening and case closing	EXPUNGE records of a child and family receiving preventive services must be expunged
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		six years after the 18 <sup>th</sup> birthday of the youngest child in the family
FOSTER CARE (non-adopted children)	applies to foster care cases and all other services provided in these cases between case opening and case closing	RETENTION MINIMUM records of a foster child must be retained for 30 years following the discharge of the child from foster care
ADOPTION	applies to the foster care and adoption records of children who have been adopted	SEAL retain records permanently
PROTECTIVE	applies to the child protective services intake and investigation and applies solely to protective services cases where there has been no foster care or preventive services provided between case opening and case closing	SEAL <i>unfounded</i> CPS reports and EXPUNGE 10 years from the date of the report to the SCR ----- EXPUNGE <i>indicated</i> CPS reports and protective service records 10 years after the 18 <sup>th</sup> birthday of the youngest child named in the report

The expungement of individual identifiable information from the CONNECTIONS system includes the elimination of electronic data and any information from the electronic system or the elimination of the electronic data required to access such information. There is no expungement requirement for foster care records. The retention, sealing and expungement of paper documents are the responsibilities of the social services district/agency.

**4) HIPAA Requirements and Health Information**

It is essential to understand that the Health Insurance Portability and Accountability Act (HIPAA) does not apply to everyone who receives or maintains protected health information (PHI). In fact, Congress only authorized the U.S. Department of Health and Human Services (DHHS) to promulgate regulations for three specific types of entities that transmit or maintain PHI, namely those health care providers who conduct certain financial and administrative transactions electronically (such as claims for payment), health plans, and health care clearinghouses. These entities governed by the HIPAA regulations are collectively referred to as "covered entities." Several years ago OCFS conducted an examination of its business practices and, finding that it did not meet the above definition, declared OCFS not to be a covered entity. Therefore, OCFS need not comply with the federal HIPAA regulations.

Under HIPAA, DHHS explicitly permits covered entities to disclose protected health information as may be required by law (see 45 CFR 164.512(a)). As New York State is required by applicable State (See Social Services Law §373-a) and federal statutes and regulations (45 CFR 1355,

Appendix D (AFCARS)) to collect and report certain information regarding foster care and adopted children, including Title XIX (Medicaid) assistance information, covered entities are permitted under HIPAA to make such disclosures to the State. Disclosure to the State as required by law does not jeopardize a covered entity's ability to comply with HIPAA. Information that is required and which may be disclosed includes, but is not limited to, those conditions which require special medical care, such as chronic illnesses. Included are children diagnosed as HIV positive or with AIDS. Additional conditions that must be reported are mental retardation, visually or hearing impaired, physically disabled, and emotionally disturbed.

Once this information is disclosed to the State, it is not subject to HIPAA. However, such information is confidential and protected by various federal and State laws, and as such, will be restricted in CONNECTIONS (in Build 19 Health Services component, security access is provided to only those with a legitimate need to know / role in the case).

In Build 18, the design of the progress notes assists staff to document and to locate medical information in the case record. There is a specific data field in the section on "purpose" that has a value of "medical". Workers should use the "medical" progress note to reference where existing medical records and information are located, identify appointments that are essential for the child, and summarize relevant information that affects the child or family's health, safety or well-being. *Workers must not disclose specific health information related to HIV, reproductive rights, or other confidential health information within the body of the progress note.* See Section IV: Preview of Build 19 Functionality for future system enhancements for confidential documentation of health information.

### ***5) Electronic Transfer of Case Specific Information***

Information recorded in the CONNECTIONS system is very sensitive. It is crucial that workers maintain the confidentiality of that information within the standards set forth in statute and regulation. All staff persons need to be aware of their responsibilities when using any electronic system to communicate critical case information that includes any individual client identification data.

The CONNECTIONS training materials (specifically, the Step-by-Step Guides) include an appendix containing Security Awareness Materials. These should be reviewed by all staff. OCFS continues to take particular care in developing the CONNECTIONS system security structure to support the preservation of confidential data (including the control of access through assigned roles, implied role, Business Functions, etc.). This structure also includes the use of Reminder To-Do's, which enable one CONNECTIONS user to transmit information to another CONNECTIONS user in a manner that retains better control over confidential case information than is possible with e-mail. For this reason, OCFS has emphasized the preference for using Reminder To-Do's, rather than e-mail, when confidential information needs to be sent from one worker to another. See Required Action section of Confidentiality for specific guidelines related to the use of electronic communication mediums when sharing case specific information.

## **6) Progress Notes**

Information maintained in Progress notes will be viewable by all persons with a role in the stage and case, persons within the unit or organizational hierarchy, persons with unique Business Functions that support cross-case viewing, and persons with an implied role in the case. Workers should use clear, descriptive information when completing a progress note. Impressions and opinions of the worker or statements made to the worker by others may be included, but should be clearly labeled as such. Relevant facts and information that support the worker's statements should be included, wherever possible. Workers should reference the CONNECTIONS Job Aid and Online Help for Progress notes or 18 NYCRR 428.5 to review the types of information that should be included in progress notes.

It may be difficult to distinguish the difference between a "clinical treatment" note and a progress note that should be recorded in the child welfare case record in CONNECTIONS. With the exception of any and all specific legal requirements for reporting that are placed upon any clinician (i.e. reporting of crimes or suspected abuse or neglect), inherent within the therapist – client relationship, there is an expectation of confidentiality and privacy for the client. With certain statutory exceptions, maintenance of this confidentiality is the ethical and legal responsibility of the clinician. Progress notes recorded by clinicians who are assigned a role of case planner/caseworker in CONNECTIONS, but who are also responsible for direct clinical treatment for the child or other family members in the case must include the types of information in the family's child welfare record identified in NYCRR 428.5. This includes specific information related to health, safety, risk, or well-being of the child(ren), progress made or barriers to achieving permanency outcomes and other information relevant to the reasons, issues or causes related to the request for services or basis for ongoing services, reason for placement of the child, and diligence of efforts towards permanency. Documentation should include references to other clinical treatment providers and a summary of the information provided to the case planner or caseworker that supports achievement of the goals, outcomes, tasks and activities that are identified in the service plan.

See Section D for further information regarding Progress Notes.

## **7) Child Protective Services Reporter/Source Information**

Identifying information related to reporter/source of a report of alleged child abuse or maltreatment to the State Central register, absent the written consent of the reporter/source, may not be shared with contract preventive or foster care voluntary agency staff. To safeguard this information, the following directives must be followed:

- All CPS staff are required to *enter any identifying information related to contacts with the reporter/source in Investigation Stage Progress Notes only, using the "Other Participant" data field with the value of "reporter/source."*
- Social services district staff must not include any identifying information regarding the reporter/source, including the institution, organization, etc. with which the person is affiliated, in any narrative field in Safety Assessments, the Risk Assessment Profile, Investigative Findings or Investigative Actions.
- No identifying information related to reporter/source of a child protective services report should be included in any progress note in the Family Services Stage, or any other narrative portion of the Family Services Intake or Family Services Stage.

This policy reinforces statutory limitations on the disclosure of the identity of the source of a report of suspected child abuse or maltreatment and the person who made such report, as set forth in section 422(4)(A) of the Social Services Law.

## **Required Action**

### ***1) Confidentiality***

Social services districts and agencies must create, review and revise as necessary, all current internal policies and procedures regarding maintaining case confidentiality, privacy, disclosure of information, security, and retention, sealing and expungement of information as required by statute and regulation. The policies should specifically address standards for the re-disclosure and printing of case and individual identifiable information and the standards for the retention, sealing and expungement of any paper documents that are the responsibilities of the social services district/agency.

Workers should use the “medical” progress note to record medical/ health-related information, but they must not disclose specific health information related to HIV, reproductive rights, or other confidential health information within the body of the progress note.

### **Guidelines for Using Electronic Communication for Sharing Case Specific Information:**

To maintain the confidentiality of case and individual client information that is being shared between and among districts and agencies, a staff person should use the following order of preference when sharing case specific data:

- **CONNECTIONS:** Use the CONNECTIONS electronic case record to allow access to the information through a “To-DO” or the assignment of a role; the CONNECTIONS system is the most secure method of sharing data and should be used whenever possible.
- **Office Telephone/ Surface Mail:** If CONNECTIONS cannot be utilized, the user must then consider if there is another secure method that can be used to share the information. Can it be mailed via a surface carrier, is it necessary to use certified mail, can the staff person be called on their office phone, or can the material be hand delivered?

If none of the above alternatives can be used to share the information due to system or time constraints, the following may be considered:

- **Faxing:** When faxing confidential or case specific information, always notify the person to whom the data is being sent before it is faxed, verify the fax number, and confirm that the information was received by that individual.
- **E-mail within the intranet:** If it is determined that there is no other alternative method of communicating the information, please note that the e-mail system within the intranet is secure, but there is still risk inherent in the use of e-mail and users must exercise caution. The biggest risk in using e-mail is user error, (for example, clicking on the wrong person in the address book and inadvertently sending the information to the wrong person.)
  - Limit the information in the e-mail to non-confidential information. For example, “Please be sure to read case notes on Case #123456 before the service plan review on 4/4/05.
  - Do not reference the individual’s use case names in the subject line of the e-mail message.

- Only use intranet e-mail: do not send case specific data over the internet.
- Before hitting the “Send” button, be certain that the name of the person chosen you have chosen from the directory is correct. There are many staff in the Global Address Book with the same or similar names. This heightens the risk of sending information to the wrong person. If you are not sure of the identity of the person in the Global Address Book, right click on the name and then on Properties for more identifying information. If you are still unsure, call the person first to verify their e-mail address.
- Caution the person(s) to whom the data is being sent that the data is not to be forwarded without consideration of all of the issues contained in these guidelines.

If case specific information must be sent, enter it into a WORD document or EXCEL spreadsheet and password protect it. To password protect a document:

1. Open the document
2. On the **File** menu, click **Save As**. It is good practice to always save it as a copy, so that if you forget the password, you still have access to the original
  - Please note that if you forget the password, you cannot open or gain access to the password-protected document
3. On the **Tools** menu in the **Save As** dialog box, click **General Options**
4. In the **Password to open** box, type a password, and then click **OK**
5. In the **Reenter password to open** box, type the password again, and then click **OK**.
6. Click **Save**.
7. Call the person to whom you are sending the document to notify them of the password.

In addition:

- **Printing:** When printing confidential information, for example FASPs or Progress Notes, be certain to send to the correct printer and retrieve the printed copy immediately.
- **Cell Phones:** Staff should remain vigilant about the use of cell phones in public places. Sensitive case specific information should not be discussed in public places that do not provide the ability for the worker to protect the individual identity of children and family members. Staff should also be sensitive to other electronic devices that may interfere with or intercept conversations of persons using cell phones.

## 2) *Security*

OCFS, local districts, and public or private agencies providing child welfare services that have access to the CONNECTIONS system must establish and maintain a CONNECTIONS security plan addressing the following areas:

- Physical security of CONNECTIONS resources;
- Equipment security to protect equipment from theft and unauthorized use;
- Software and data security;
- Telecommunications security;
- Personnel access control;
- Contingency plans for meeting critical processing needs in the event of short or long-term interruption of service;

- Emergency aid and/or disaster preparedness;
- Designation of a security manager for OCFS and a security coordinator for the local district or public or private agency; and
- A program for conducting periodic security reviews at least once every two years to evaluate physical and data security operating procedures and personnel practices and to determine whether appropriate, cost effective safeguards exist to comply with the above stated requirements.

Each social service district and agency must immediately report in writing to the State Information Technology staff person designated by OCFS of the loss or theft of any CONNECTIONS equipment or any event that may jeopardize the security of the CONNECTIONS system.

## C. Standardized Family Services Intake

### 1) *Policy and Practice Issues*

Currently, the Family Services Intake (FSI) process occurs entirely outside of CONNECTIONS. There is no standardized format for documenting an Intake; each social services district and agency follows its own procedures. Although the *criteria for opening* a case are unchanged and intakes can still be *initiated* by either a social services district or agency, the process is changed by Build 18. Build 18 introduces a standardized format for recording Intakes for services cases. Every request or intake for services will need to be first opened as a Family Services Intake Stage in CONNECTIONS, *including cases that were initiated from an SCR intake and investigation*. The FSI is the *single route to an ongoing services stage*.

While the FSI is the only pathway to open a case for services, there is no intent to prohibit foster care or preventive services agencies from documenting services provided to a child and family prior to the acceptance of the application for services and the opening of a services case. Any outreach activities provided prior to opening a case for services should be documented in the FSI. Agencies must temporarily document activities that occur in the period after an FSI is submitted to the social services district for acceptance, but before the FSS is opened, outside of CONNECTIONS. These interim activities must be subsequently documented in CONNECTIONS progress notes after opening of the FSS. Social services districts must expeditiously review, accept and reassign (or reject) the FSI to keep the interim period as brief as possible.

Workers will need the new security BF, "Create FSI," to record a non-CPS Intake. Only one individual will be able to work on an individual FSI at a time; however, workers have the ability to reassign the FSI to another worker as often as necessary.

### 2) *Stage Types*

There is a new concept of "Stage Type" within the Family Services Stage that drives the requirements for documentation within CONNECTIONS. All cases must be opened and maintained within CONNECTIONS but the extent of required documentation varies by stage type. There are five major stage types:

- CWS: Child Welfare Services (foster care, child protective, preventive, and adoption services. CWS includes a sub-type, the Child Case Record (see also section I)
- OTI: Out of Town Inquiry (see also section K)
- COI: Court Ordered Investigation (for non-CPS cases) (see also section K)
- ICPC: Interstate Compact for the Placement of Children
- ADVPO: Advocates Preventive-Only cases (NYC) (see also section L)

Stage type is selected as part of the FSI. Requirements for FSI documentation also vary by type and are enforced by the system. There are minimal requirements for OTI, COI, and ICPC Intakes; Intakes for CWS and ADVPO cases are more extensive. Intakes must *document basic information* concerning the source of the referral or request for services, individual identifying information and demographics, a brief description of the need for services, and the decision to open the case for services or close the Intake without opening a services case. The Application for Services (form LDSS- 2921), which may be signed by the client or by the caseworker on behalf of the client, will continue to be completed on a paper form. After demographic information is entered into CONNECTIONS, a face sheet can be printed and attached to the Application. It is not necessary to manually record this same information on Form 2921.

If the Intake is coming from a CPS investigation, much of the required demographic information will automatically be carried forward from the Investigation Stage to reduce duplicate entry. Workers have the ability add, update or remove people from the FSI. CPS Workers need to review the family composition that is carried forward from the Investigation Stage and delete persons as appropriate so that only the persons who will be receiving services will go forward into the Family Services Stage. Once a Family Services Stage is opened, persons can only be end-dated (i.e. discontinued from participation in the case) but not deleted. The CPS Worker will need to complete a brief narrative summary regarding the reasons for involvement with the family.

### **3) Behavioral Concerns and Family Issues**

A screening for behavioral concerns and family issues (BCFI) must be completed for all non-CPS cases. Caseworkers will use a two-tiered decision-making structure, modeled after the CPS Safety Assessment, to identify and document the presenting concerns and emergency needs, if applicable, that are the basis for the service request. They also must document any emergency services that are provided and determine initial programmatic eligibility if the intake is for preventive-only services. The BCFI is not required for an FSI originating from a CPS Investigation as Safety and Risk Assessments will be completed as part of the investigation Stage. Workers must also complete a checklist of “Requested Services” if the social services district has opted to require this. Intakes for Out of Town Inquiries, Court-Ordered Investigations, and ICPC cases are streamlined and do not require the BCFI or requested services checklist in CONNECTIONS. Completion of the Requested Services checklist in CONNECTIONS is required for Advocates Preventive Only (ADVPO) Intakes in NYC; however, completion of the BCFI is not required for ADVPO Intakes, but will be required on the new ADVPO templates.

### **4) Submission/Acceptance**

There is no required supervisory approval of Family Services Intakes, but Intakes may be “submitted for review” to a supervisor if desired. Social services districts and agencies should develop internal procedures if this is desired. Since only the social services district can open the case for ongoing services, Intakes recorded by an agency must be submitted to the social services district for acceptance and progression to the Family Services Stage. Intakes will be submitted for acceptance online through CONNECTIONS. The paper Application for Services must be forwarded separately. The social services district worker will record the date the signed application was received in the social services district. Agencies may close an Intake without social services district approval, unless the worker received an Application for Services signed by a parent/client. If a signed application was received, only the social services district can approve its closing. If the social services district denies the application, the social services district worker must send a Denial Letter. Denial Letters can be generated from CONNECTIONS.

### **5) Closing**

The system will automatically close Intakes if there has been no activity (i.e. the FSI has not been updated) for a period of 60 days (all days referenced in this ADM refer to calendar days) and the “Date LDSS Received Application Signed by Parent/Client” has not been recorded on the FSI decision window. The system will not automatically close the FSI if the worker has indicated that a signed application was received or if the FSI was created from within a CPS Investigation stage.

### **Required Action: Standardized Family Services Intake**

Effective with Build 18 implementation, all intakes for Family Services must be opened and documented in CONNECTIONS in compliance with system requirements for the type of services being requested. Intakes for opened Family Services Stages become part of the official case record.

All Family Services Intakes have the following requirements:

- In accordance with 18 NYCRR 428.3 (b)(1):
  - The Application for Services (LDSS-2921) must be completed and signed.
  - Demographic information must be entered into CONNECTIONS and retained as part of the case record.
- Workers must complete the BCFI screening and, if the FSI is for preventive-only services, determine initial programmatic eligibility.
- Intake Workers must complete a checklist of requested services if the social services district has chosen to require this option.
- Intake Workers are responsible for performing a person and case search to relate known persons and cases so that duplicate persons and cases will not be created.
- The social services district worker must either record “the date LDSS received the Application signed by a parent/client,” or record that the “Application was signed by the CPS Worker”.
- If rejecting a request for services where a signed application was received, the social services district worker must send a Denial Letter.

- Documentation of the FSI in CONNECTIONS must begin by the day the client verbally requests to apply for and receive services. An application (LDSS-2921) will then be offered by the district or agency. The offering of the application must be documented in the FSI.

Family Services Intakes that are initiated by an agency have additional requirements:

- The FSI must be submitted for acceptance to the social services district “FSI Acceptance” unit within 5 days of taking the Intake for placement in Foster Care (or on the day upon which a child entered the agency if this initiated the FSI).
- The paper Application for Services must be forwarded to the social services district immediately upon receipt by the client.
- The social services district worker must review the FSI, and accept or reject it in a timely manner (no more than 5 days from receipt) to allow the agency to continue to work on the case within CONNECTIONS.
- Agencies may close an Intake without social services district approval, unless the worker received an Application for Services signed by a parent/client. If a signed application was received, the FSI must be submitted to social services district for acceptance or rejection.

#### **D. Family Services Stage**

The Family Services Stage (FSS) provides the framework for documentation of a child welfare services case. There can be only one open FSS for a family per social services district. The FSS in CONNECTIONS consists of six sections represented as tabs in the electronic case file: Stage Composition, Family Assessment and Service Plan (detailed in Section F), Progress Notes (detailed in Section G), Service Plan Review (detailed in Section H), Key Dates, and Case Summary.

##### ***1) Stage Composition***

Person and demographic information from the FSI will automatically be brought forward into the Stage Composition tab. Workers will use the Family Relationship Matrix in Stage Composition to record the relationships between all people listed in the stage. Workers must also record the Primary Caretaker and, if applicable, the Secondary Caretaker, in the family. Family relationship and primary and secondary Parent/Caretaker information must be completed before beginning work on the Initial Assessment and Service Plan. Workers are responsible for maintaining updated person and family demographic information on this tab.

##### ***2) Placement/Key Dates***

The Placement/Key Dates tab displays critical foster care markers based on an interface with CCRS. This is a display-only window with information brought forward from CCRS for worker convenience; the information cannot be updated in CONNECTIONS; if it is incorrect, it should be updated in CCRS.

The following information is displayed:

- Children in placement
- ASFA Day 1\*

- Date Next Permanency Petition Filing Due
- Date Next Permanency Hearing Due
- Date TPR Decision Due

\*Note that since ASFA Day 1 is calculated from the activity date of the M910 (child enters care) recorded in CCRS, it does not reflect any prior detention period. Any such period will not be part of the calculation of 15 of the most recent 22 months in foster care. With the implementation of Build 19, detention periods, if entered in Legal Activities, will be part of the calculation.

### **3) Case Summary**

The Case Summary tab provides a list of the current and historical stages associated with the case and the workers associated with each stage. This listing is provided for easy viewing while working within the FSS. It does not navigate the worker to the other stages.

### **4) Opening a Family Services Stage**

Only the social services district can open an FSS. When the social services district Intake Worker records a decision to open the FSS or when they ‘accept’ an FSI from an agency, the social services district worker will stage progress the FSI to the FSS. The system automatically assigns the social services district worker as Case Manager. The Case Manager can then reassign the stage to another social services district worker. The Case Manager must then search CONNECTIONS and select the names and roles of any other workers (social services district or agency), assigned to the stage. These names and roles display in the FSS Case Summary tab of CONNECTIONS. The WMS Application Registration (App Reg) process must also be completed from Stage Composition to initiate a WMS case opening. Case Managers can also reassign the role of Case Manager to another worker in their district.

### **5) Worker Roles**

Working within a single shared case emphasizes the need for clarity of role definition and reinforces the OCFS case-planning model of practice. Each worker in the FSS must be assigned to one of four stage roles, described below, which shapes the role they play in the case, how they contribute to the assessment and service plan, and governs their ability to enter data in CONNECTIONS. If social services districts currently assign multiple Case Planners to a case, having a single Case Planner will require a change to how staff does their work.

- **Case Manager** - Every case opened for services ( i.e. a case with an open FSS) will have a single Case Manager, who must be a social services district worker. The Case Manager provides oversight of the case and must approve the Family Assessment and Service Plan (FASP). Outside of CONNECTIONS (until implementation of Build 19) the Case Manager is also responsible for approving funding eligibility determinations and service authorizations.
- **Case Planner** - There is a single Case Planner assigned per FSS. The Case Planner, who may be either social services district or agency staff, is the caseworker with the primary responsibility for providing, or coordinating and evaluating, the provision of services to the family. The Case

Planner delineates the roles of the various service providers and requires collaboration among all the Case Workers assigned to the FSS so that a single integrated family assessment and service plan is developed and implemented. The Case Planner makes, or arranges for, the required frequency of casework contacts, by specifying to each assigned Case Worker what his or her responsibility is towards meeting the minimum required casework contacts. The Case Planner is responsible for the entirety of the contents of the family assessment and service plan and its timely submission for approval. This means the Case Planner must coordinate the documentation of all work in the FASP, review all work, and either accept it as contributed by the worker(s) or revise it accordingly. The Case Planner sends the FASP to his or her supervisor (unit approver) and to the Case Manager for approval. The Case Manager may be assigned as the Case Planner and perform the dual roles of Case Manager and Case Planner, except for approval of the FASP which becomes the responsibility of the Case Manager's supervisor in this instance.

Where the FSS has come from an open child protective services investigation, it is strongly recommended that the social services district retain initial case planning responsibility and that the CPS Worker complete the Initial FASP before assigning an agency as designated Case Planner. The agency worker may be assigned the role of Case Worker in the interim. An agency should be assigned as Case Planner for the Initial FASP where there is an open investigation only if the social services district considers it in the best interest of the child(ren) for a specific case.

- **CPS Worker/Monitor** – The CPS Worker/Monitor is a social services district CPS staff who is monitoring services being provided by non-CPS staff to children and family named in an open indicated case of child abuse or maltreatment. The CPS Worker/Monitor may complete the Risk and Safety Assessments in the FASP, if so designated.
- **Case Worker** – All other workers in the FSS who assess, evaluate, make casework contacts, provide or arrange for services to any family member, will be assigned the role of Case Worker. Case Workers may be either social services district or agency workers. There may be multiple Case Workers assigned to an FSS. The Case Worker contributes to the development of the family assessment and service plan, as defined by role and directed by the Case Planner.

Case Workers may be associated with a specific child(ren) in the FSS. The association function restricts access to completion of child specific work within the FASP, such as the Child Scales and Foster Care Issue component, to only the associated worker or Case Planner. The Case Planner can associate any worker to a child(ren); Case Workers can also associate themselves. Association (and unassociation) is done on the Tracked Children Detail window. If there is no associated worker, the child specific work must be completed by the Case Planner.

Assigned roles are reinforced by system security; CONNECTIONS will not permit staff who are not assigned a specific role to perform certain functions. For example, the system won't let anyone but the person with the Case Manager role enter that a child is 'legally free for adoption.' Each worker's role is clearly specified and each person working with the family will know what they are expected to contribute to the assessment and the service plan. The single shared record, with clearly assigned roles and with Case Planner responsibility to coordinate, should result in clear integrated service planning with the family.

## **6) *CPS Monitoring***

NYCRR432.2(b)(5) - The purpose of monitoring is to ensure the continued safety of the child(ren) that risk reduction activities and services are being implemented in the established plan for services, and that the service plan is modified when progress has been insufficient.

A case cannot be closed to CPS (FSS must include a program choice of child protective) unless the following standards as prescribed in NYCRR432.2 (c) are met:

- All children in the household are assessed to be safe and that risk of future abuse or maltreatment has decreased sufficiently
- CPS has offered rehabilitative services to the children and family, the services have been rejected and it is not in the best interest of the child to initiate a Family Court petition
- CPS has sought a Family Court order, but the court has dismissed the petition
- For a child in foster care:
  - The child is freed for adoption
  - The child has a PPG of independent living with a permanency resource or adult residential care
  - It is documented in the record that the reason for the placement is not attributable to abuse or maltreatment (i.e. PINS or JD)

Programmatically, if the case manager or case planner is not a CPS worker, a local district must have a child protective services monitor assigned to a Family Services Stage within CONNECTIONS, unless the local district staff person assigned as the case manager, has OCFS approved child protective training, and sufficient experience and skills that supports their ability to fulfill the required CPS monitoring tasks and functions.

In CONNECTIONS, if the local social services district wishes to have the CPS monitor complete the risk or safety in a FASP, then a distinct person must be assigned the role of CPS monitor, separate from the case manager.

## **7) *Closing the Family Services Stage***

The social services district has sole responsibility for closing the FSS. Either the Case Planner or Case Manager may initiate stage closing. The social services district Case Manager, or the Case Manager's supervisor if the worker is functioning as both Case Planner and Case Manager, must approve the closing. Stage closing is initiated from the Case Summary tab.

### **Required Action: Family Services Stage**

A social services district worker must accept or reject a Family Services Intake from an agency worker within 5 days of submission of the FSI for acceptance. If he/she accepts a FSI, the worker must stage progress the accepted Intake to a Family Services Stage. The social services district worker must either

accept the role of Case Manager for the FSS or reassign it to another social services district worker. The Case Manager may either retain case planning responsibility or assign it to another worker (social services district or agency).

All social services district and agency Case Planners, Case Workers, and CPS Worker/Monitors, must enter and maintain required child welfare information in CONNECTIONS Build 18, including but not limited to, person and family demographic information, program choice and permanency planning goal, periodic FASPs, plan amendments, and progress notes. Workers must review all current information about their cases which has been recorded by other workers assigned to the FSS.

The Family Relationship Matrix in Stage Composition must be completed prior to the initiation of the FASP.

- 1) The social services district Case Manager, in accordance with 18 NYCRR 428.2(b) must:
  - authorize the provision of services
  - approve the client eligibility determinations according to 18 NYCRR 423.3(b), 430.9, 430.10, and 432.11
  - review and approve (or reject) family assessment and service plans in a timely manner (within 5 days of submission of the FASP for approval), unless also acting as Case Planner.
  - The Case Manager must initially assign other workers as appropriate. The system will record the names and roles of all workers assigned to the stage in the CONNECTIONS Case Summary tab.
- 2) The social services district or agency Case Planner in accordance with 18 NYCRR 428.2(c) must:
  - provide, coordinate and evaluate the provision of services to the family
  - refer the child and family to providers of services as needed
  - delineate the roles of the various service providers
  - require collaboration among all assigned Case Workers so that a single family assessment and service plan is developed
  - define individual worker responsibility and timeframes for the entry of FASP components
  - review all FASP components completed by other workers and edit/ revise as needed
  - submit the completed FASP to his or her supervisor before submission to the Case Manager
  - submit the FASP to the Case Manager according to stipulated timeframes
  - be responsible that client progress and adherence to the service plan is documented as required by 18 NYCRR 430.9 through 430.12 , and
  - make, or arrange for, casework contacts as required under 18 NYCRR 423.2 (b)(3), 423.4(c)(1)(ii)(d)(2), 432.2, and 441.21.
  - The Case Planner is responsible for the entirety of the contents of the FASP and its timely submission for approval.
- 3) The social services district CPS Worker/Monitor must:
  - complete the CPS Safety and Risk Assessments in the FASP if designated to do so by the social services district, and

- review the FASP as needed or assigned.
- 4) The social services district or agency Case Worker must:
- maintain casework contacts with the child, family, and foster care caretaker if applicable, in accordance with 18 NYCRR 430.12(c)(3) and 441.21, and.
  - complete FASP components related to all associated children and as directed by the Case Planner.
- 5) The Case Planner must associate a Case Worker to a particular child(ren), or the Case Worker must associate themselves, in order to enable Case Worker completion of FASP components regarding that child by the associated worker.

**E. Permanency Planning Goal and Program Choice / Tracked Children Detail**

**1) PPG Revisions**

Permanency Planning Goals (PPGs) are revised in CONNECTIONS Build 18 to goals enacted into Title IV-E by ASFA and thereafter into State law by Chapter 7 of the laws of 1999. Since workers will need to record PPGs in both CCRS and the CONNECTIONS case management system until the implementation of Build 19 when CONNECTIONS becomes the system of record, a mapping guide is provided in Attachment B to assist workers.

New CONNECTIONS Permanency Planning Goals
1 – Return to Parent a) Parent b) Non-Parent Caregiver
2 – Placement for Adoption a) Upon filing Petition to Terminate Parental Rights b) Upon Voluntary Surrender
3 – Referral for Legal Guardianship/Custody a) Relative b) Non-Relative
4 – Placement with a fit and willing Relative [Non-Guardianship/Non-Custodian]
5 – Place in another planned living arrangement a) Discharge to Independent Living b) Independent Living – Unaccompanied Refugee Only c) Discharge to Adult Residential Care  <i>Note: May use PPG #5 only if the social services district has documented a compelling reason why goals 1-4 would not be in the child's best interest.</i>

6 – Prevent Placement
7 – Prevent Return to Placement
8 – Protect Child

**2) Program Choices**

The existing Program Choices are unchanged but a new one has been added. The new Program Choice, “Non-LDSS Custody, Relative/Resource Placement” applies to children in the care of a relative or other resource person and who are not in the legal custody of the local Commissioner of Social Services. This Program Choice is an “add” that reflects the unique legal status and planning needs of this population. It is not meant to be a substitution for “Protective” or “Preventive Services” program choices, and must be used in conjunction with either or both program choices. Relevant questions in the FASP are customized for this population. Social services districts should review their caseloads to identify the cases that fit this status and make sure workers use the new Program Choice appropriately.

**3) Tracked Child Detail**

The PPG and Program Choice(s) are recorded (and can be modified or end-dated) on the Tracked Children Detail window in CONNECTIONS. The Tracked Children Detail window is accessible from the FASP tab but external to the FASP, to allow for worker access whenever necessary. Entry of both PPG and Program Choice are key to the customization of the FASP content upon its launch. Recorded PPG and Program Choice information displays on the FASP tab and is carried into the printed FASP report. A historical view of all PPGs and Program Choice(s) is available. Anyone with a role in the FSS can record PPG and Program Choice data.

Program Choice(s) is entered first and then the system presents corresponding PPG values for selection. A PPG and Program Choice must be established for each tracked child prior to beginning work on the Initial FASP. The recording of a PPG and Program Choice informs the system that a child is “tracked;” there is no specific tracking indicator, as there is in CCRS. The rules for tracking have not changed. Workers should verify that the PPG and Program Choice(s) are accurate before beginning work on any FASP. If a PPG or Program Choice is incorrect, the system might require completion of components that are not relevant or omit presenting sections essential to a complete assessment.

The Tracked Children Detail window includes the following placement information brought forward from CCRS and displayed in CONNECTIONS:

- Agency Name
- Placement Date
- Facility ID
- Facility Address
- Facility Type.

The placement information displayed on this window can be modified in CONNECTIONS by the Case Planner or associated Case Worker, *but this does not update the information in CCRS*. Workers must be sure to keep placement data consistent in both systems until implementation of Build 19. The name of

the discharge resource for a child who is in a Non-LDSS Custody setting (see also section F.6.) can also be recorded on the Tracked Children Detail window.

### **Required Action: Permanency Planning Goal and Program Choice / Tracked Children Detail**

Workers must record the child's PPG and Program Choice in both CCRS and the CONNECTIONS case management system until the implementation of Build 19. PPGs should be recorded in accordance with Attachment B: CONNECTIONS / Permanency Planning Goals (PPGs) Mapping Guide.

A PPG and Program Choice must be established and recorded in Tracked Children Detail for each tracked child prior to beginning work on the Initial FASP. The Case Planner is responsible for initially setting these.

All workers should verify that the PPG and Program Choice(s) are accurate before opening and beginning work on any future FASP. This is a prerequisite to system presentation of the correct FASP components.

Until implementation of Build 19, workers must be sure to keep placement data in Tracked Children Detail and CCRS consistent.

The new Program Choice, "Non-LDSS Custody, Relative/Resource Placement" should be used for children in the care of a relative or other resource person but not in the custody of the local Commissioner of Social Services. It should always be used in conjunction with a protective and/or preventive Program Choice.

## **F. Family Assessment and Service Plan**

The *Family Assessment and Service Plan (FASP)*, by its very name, signals the renewed emphasis on the family focus of the case management model. The FASP renames and replaces the existing templates for uniform case record assessment and service plans (Initial, Comprehensive, Reassessment and Plan Amendment). Workers will continue to assess and plan with families for children's safety, permanency, and well being, and to document the development, review and amendment of those assessments and plans on a prescribed timeline. The major components of the assessment and service plan (assessing safety and risk, updating case information, planning for permanency, the assessment analysis, and developing and evaluating service plans) remain. Nonetheless, the revised FASP introduces significant format, content, and process changes to the assessment and service plan. It provides structure and guidance regarding the focus of assessment and on-going work with children and families and reflects the model of practice that is the foundation of our training system. The content changes to the assessment and service plan are congruent with what research has shown is supportive of rapid achievement of family engagement, child safety, permanency and well-being.

### ***1) Required Individual Assessment of Tracked Children and Family Caretakers***

Currently, the assessment protocols in the UCR direct workers to record their assessment of the family as a unit, highlighting the most serious needs/problems of specific adult or child family members where relevant. The Family Assessment and Services Plan (FASP) supports a more thorough assessment of the strengths, needs and functioning of each family member, including

individual assessment of all tracked children (children with a Program Choice and PPG) and each primary and secondary parent/caretaker. The required assessment documentation includes the completion of individual child and caretaker scales and narrative questions and the assessment of the family as a whole through completion of family scales. The ability to assess non-tracked children, other caretakers, and more than one family household is available as an option. Currently, workers also respond to a number of narrative questions designed specifically to record information regarding children in foster care. The new FASP strengthens this component by providing a guide to permanency practice through guided narrative questions and other features. This component, Foster Care Issues, must now be completed individually for each child in foster care. CONNECTIONS provides for copying of entries to other children in the stage where appropriate to avoid redundant data entry.

## ***2) Inclusion of Structured Decision-Making Tools***

FASPs for protective cases will contain the same Safety Assessment and Risk Assessment Profile as used in the CPS Investigation. Both are essential components of the Structured Decision Making model, an evidence-based approach to support workers in making informed decisions at key points in the case. The ongoing use of the same safety and risk assessment tools will support a continuing focus on child safety and risk throughout service delivery, assist with decisions regarding the need for immediate safety interventions, encourage service provision geared to the reduction of risk, and help to measure progress and to inform the critical decision regarding when to terminate service provision. Both the Safety Assessment and Risk Assessment Profile are incorporated in the December, 2003 series of CPS UCR templates and will be familiar to workers who utilize them. They will be new to workers who currently use the older UCR templates. On-line “Help” will be available to assist workers with new concepts and definitions and their correct application.

## ***3) Safety Assessment***

The Safety Assessment identifies the factors that caseworkers must continually seek to identify and assess during every casework contact throughout the life of a case. The Safety Assessment also supports workers in making safety decisions and in choosing appropriate safety interventions. It uses a two-tiered decision making approach to the assessment of immediate danger to the child. While safety assessment is an on-going process, it must be documented as part of every FASP. The worker must first assess the presence of any safety factors and then determine if any of the identified safety factors pose an immediate danger of serious harm. Language revisions to the list of safety factors more accurately reflect relevant behaviors and/or circumstances that can affect child safety. Workers will continue to identify family strengths and/or family, neighborhood or community resources available to the family and to describe how they mitigate or address safety concerns. Since December, 2003, five (5) ~~new~~ safety decision choices replaced the former safety decision of “safe” vs. “unsafe,” in cases assessed by CPS staff or for those preventive or foster care cases with a program choice of “protective”. The new safety decision choices are more clearly defined. They support a more integrated and logical assessment of the multiple factors that contribute to the safety decision and the necessity of safety interventions. The list of safety interventions has been revised to more clearly reflect emergency services or interventions to control for the immediate health and safety of the child(ren) versus service(s) designed to reduce risk or be rehabilitative in nature. Explanatory comments are required for identified safety factors and interventions. If a Safety Assessment was completed and approved in the Investigation Stage within seven days of initiating the FASP, it will be brought forward into the FASP for review and modification as appropriate. If

there is no approved safety within seven days, the Safety Assessment in the FASP will be blank and must be completed anew. (Additional information about the Safety Assessment can be found in 03 OCFS ADM-01: Practice Changes Associated with CONNECTIONS Build 16.

The FASP Safety Assessment for non-CPS cases is unchanged. It will simply consist of a narrative section where staff can record any current safety issues and concerns, as well as any key protecting factors that support the present safety of the children.

#### **4) Risk Assessment Profile**

The Risk Assessment Profile (RAP) is a research-based assessment protocol to assist workers in making informed decisions regarding the level of risk of future abuse or maltreatment. Its use should result in more effectively targeting the provision of services to cases with high or very high risk. Studies have demonstrated that research-based assessment models are consistently more reliable and accurate in determining the likelihood of future child abuse and maltreatment, whether used by new or experienced workers, than models based upon a consensus of belief regarding risk factors. The RAP collects specific information about a limited set of criteria that have been shown to empirically impact the likelihood of future abuse and maltreatment. Responses to each discrete criteria are weighted based on a statistical analysis of their influence on the level of risk, and added together to derive an overall risk score. The overall score is then assigned a risk rating level (from low to very high) based upon NYS research findings. The presence of specifically designated risk elements, deemed by OCFS to indicate an elevated risk, automatically raises the final risk rating to very high. The elevated risk elements (for example, death of a child as a result of abuse/maltreatment by a caretaker) refer to events that are relatively rare, and thus do not affect the likelihood of future child abuse in the majority of cases. However, although they occur infrequently, the presence of any elevated risk element indicates a heightened risk of serious child abuse or maltreatment in the future. (Additional information about the RAP can be found in 03 OCFS ADM-01: Practice Changes Associated with CONNECTIONS Build 16.

The on-going assessment of risk is one of the primary responsibilities of child welfare staff. Therefore, the RAP is required in all FASPs for child protective cases. The RAP in the initial FASP looks and functions just like the RAP in the Investigation Stage. In Comprehensive and Reassessment FASPs, however, it looks quite different. The Case Planner evaluates many of the risk elements as part of a broader assessment of family strengths, needs and risks. These risk elements are embedded in the new Strengths, Needs and Risks (SNR) scales that are completed on a separate CONNECTIONS window. In addition to completing the scales, brief narratives may be recorded to further explain the scale selection. In order to avoid duplicate entry, worker responses to areas of caretaker or family functioning included in the SNR scales that correspond to the risk elements are automatically ‘mapped’ to the RAP. This means that the system links the scale response to the appropriate weight of the risk element as part of the calculation of the overall risk score. This necessitates worker completion of the Strengths, Needs and Risks scales before the RAP can be done. Workers must then complete additional risk assessment questions on the RAP window. This window includes the risk criteria that could not be embedded in the scales and several additional questions that evaluate factors such as progress in meeting service plan outcomes and whether there has been an indicated CPS report since the last FASP. Workers or supervisors who want to view all the identified risk elements can also view the responses to the embedded questions by clicking on the ‘Mapped Risk’ button on the RAP window.

Since the RAP is based upon research on child protective cases, its applicability to non-CPS cases is not established and it is not included in FASPs for non-CPS cases. A similar, but non-scored, risk assessment is employed, in the initial FASP only, for these cases.

### **5) *Broader Family Assessment of Strengths and Needs***

The FASP supports a fuller, more accurate assessment of family members through the analysis of multiple factors. In addition to the Safety Assessment and the Risk Assessment Profile, the assessment of family functioning is revised to assess a wider spectrum of functioning and to include individual and family strengths as well as needs and problematic behaviors. The Strengths, Needs and Risks scales replace the risk scales on the current UCR templates. The current risk scales primarily focus on helping workers to identify problems and the highest level of need within the family as a whole, rather than the areas of strengths or highest functioning for each individual child or caretaker and the family overall. The new FASP scales look at both individual and overall family functioning. They prompt workers to look at the whole family, to see the positive, and to identify important strengths, as well as needs, of the family unit as a whole and of individual children and parents or caretakers.

The scales are grouped into three areas: Family functioning, Parent/ Caretaker functioning and Child functioning. One of four ratings is selected for each scale; the ratings cover the wide range of functioning, from significant strength in a specific area, through adequate functioning, to areas of potential need or concern, and areas of serious concern and high risk or need. The scales provide workers with a guide to focus their interviews with the family and significant others in the family network so that significant areas of family strengths and needs can be identified. They can also be used as a tool to help the family assess themselves. Each tracked child and parent/caretaker must be assessed individually. The family/household of the primary caretaker must also be assessed. In addition, workers have the option of assessing other family members (for example, the siblings of a tracked PINS or JD) or the household of a secondary caretaker or grandparent (who might provide a future permanency resource). CONNECTIONS will display the name and age of all family members who were previously recorded in Stage Composition above the scales and indicate if they are a tracked child or a primary/secondary caretaker.

Revised Assessment Analysis questions help workers synthesize the wealth of information gathered via the Safety and Risk Assessments and the SNR scales. This component continues the emphasis on considering the family's perspective and building on identified strengths. Workers also identify the conditions and factors that underlie or contribute to the abuse or neglect or the presenting problem. Completion of the analysis questions forms the basis upon which the service plan is constructed. Workers need to specifically state what improvements/changes need to be made, instead of merely stating the "problem." This information is carried forward by the system to guide service planning and target changes to achieve the permanency planning goal and provide for child safety, permanency and well-being.

### **6) *Foster Care Issues***

A new component, Foster Care Issues (FCI), is required to be completed *individually* for each child in foster care. This incorporates and revises current UCR sections Appropriateness of Placement,

Permanency Planning, Concurrent Planning, and Visiting Plan and Review. The system will present the relevant (and required) questions based on Program Choice, PPG, and child age. The revised FCI questions provide guidance to foster care staff regarding the tasks and decisions that are fundamental to their role. They support the rapid achievement of permanency and reflect the standards of practice of the federal Child and Family Services Review.

Visiting Plans must be created for all children in placement. If it is unsafe or impossible for a child to visit, the reason for this must be recorded in lieu of a plan. Multiple visiting plans can be created for a child, including separate plans for individual parents if they visit separately, sibling visitation, or arrangements for visitation with a person outside of the immediate family. Visitation plans will be carried forward from an approved FASP to the next FASP. Plans detailing visitation between a child and a parent or identified discharge resource must be reviewed in the subsequent FASP and modified as necessary. A Family/Child Visiting Grid will be created by the system based upon Progress Note entries with a note type of family or sibling visitation or attempted visitation. CONNECTIONS provides for copying of appropriate FCI entries to other children in the stage to avoid redundant data entry.

FCI provides customized support for recording of discharge from foster care status changes if these need to be recorded within a periodic FASP. Multiple discharges of different types (discharge to home/relative/other caretaker, discharge to Independent Living, discharge to Adult Residential Care) can be recorded for different children. 'Discharge to Adoption' is only available within the Child Case Record. The discharge windows are the same windows as in Plan Amendments for discharges. The documentation requirements focus on issues related to child safety, permanency, and well-being after discharge. Discharge Protocols can be printed as a separate FASP component, as well as a part of the FCI or the complete FASP.

### ***7) Assessment of Life Skills for Adolescents***

A protocol to guide the assessment of a foster care youth's acquisition of essential life skills was made available in template form in December 2003 as part of Build 16. With Build 18, the Life Skills Assessment is required for youth in foster care, fourteen years of age or older, regardless of the youth's permanency goal. This supports a focus on outcomes essential to a successful transition to eventual self-sufficiency and responsible adulthood. Where a life skill is assessed as inadequate, workers should involve the youth in the development of a service plan to prepare the youth for employment and/or post secondary education, and other needed skills and abilities. The Life Skills Assessment may be added to the FASP as an option in preventive cases and may be completed for any child in the case, regardless of the age of the child.

### ***8) Non-LDSS Custody - Relative/Resource Placement***

A new component, Non-LDSS Custody - Relative/Resource Placement, is required to be completed for each child with this Program Choice. This component presents four abbreviated sections of FCI (Appropriateness of Alternative Placement, Relative/Resource Placement Functioning, Permanency Progress, and Record Return Home) tailored to the situation and needs of children in the care of a relative or other resource person, but not in the legal custody of the local Commissioner. The Life Skills Assessment and Visiting Plan from FCI can be added to the FASP and completed for these children as an option, if desired.

### **9) Outcome-oriented Service Plan based on Strengths**

The FASP Service Plan has an enhanced outcome and strengths based focus to support development of a service plan with the family. As part of the Assessment Analysis, workers specifically define the improvements and changes that family members need to make in order to meet the children's needs for safety, permanency and well-being. The list of changes should be used by the worker and the family as they develop the service plan. To aid the worker to structure and record the plan that they have developed with the family, the list is carried forward by the system to guide service planning. Workers develop service plan outcome and activity "blocks" (O/A block) targeted to needed change. Each O/A block will include a brief description of what needs to change and a description of the desired outcome and how the family and worker will know it has been achieved. It will also include identification of the specific individual or family strengths that will be used to achieve the specified outcome, and a description of family and worker activities.

All workers with a role in the FSS are able to create and modify service plan O/A blocks and will be able to view the O/A blocks created by other workers. This will foster coordinated service planning where there are multiple workers in the case.

Workers can create as many O/A blocks as necessary. The system will identify O/A blocks by the date created, outcome statement, and name of the last worker who modified the block. O/A blocks will be carried forward from one FASP to the next until the block is marked as complete or discontinued. Workers and families will evaluate the level of outcome achievement of each block that is carried forward and modify it as necessary. Workers must be careful to modify only the blocks they created, or are responsible for, as they document the evaluation of achievement and any modification to the service plan.

In addition, if the social services district has opted to require this, workers must document the specific services that are needed by the family and/or individual member(s) and the status of those services (provided direct, provided purchased, referred/waitlisted, planned, completed, discontinued, refused, or unavailable) as part of the Service Plan. This is done via a drop down list on the service plan window.

The most crucial piece of service planning, involvement of the family, remains unchanged. The above changes in content and format are guides to support service planning. They in no way replace essential caseworker skills and good supervision in the areas of engagement, assessment, communication, family-involved planning, and supporting change. Workers must continue to document the family's involvement in the development of the service plan within the FASP.

### **10) Programmatic Eligibility**

The requirement for documentation of the need for mandated preventive and foster care placement services as a part of each FASP is unchanged. Programmatic eligibility standards and criteria for mandated preventive and foster care placement services remain the same. The format for documentation, however, has been modified to more closely reflect eligibility requirements. The system will present only the eligibility standards that are valid for program choice and stage type. After the worker selects the standard that applies to the child or family, the corresponding eligibility criteria, and in some instances, sub-criteria, are presented for selection. Workers must also record a

brief narrative describing the relevant behaviors and/or circumstances related to the selected eligibility criteria. CONNECTIONS will not allow the worker to save changes unless the minimum eligibility criteria are met for the selected standard and comments have been entered. Programmatic eligibility for placement must be recorded for each individual child in foster care. Copy functionality exists that allows workers to copy the recorded Eligibility Standards and Criteria to other children in the FSS. Specific documentation of Eligibility for Placement Services is not required for a CCR stage type, as it qualifies by its very nature.

Any worker assigned to the FSS may access and record programmatic eligibility. The Case Planner is responsible for reviewing or completing the documentation. Programmatic eligibility is approved by the Case Manager as part of the FASP approval process.

### ***11) FASP Process Changes***

The process of completing the assessment and service plan will significantly change with the implementation of the online FASP. Workers currently use an electronic or paper UCR template which is approved according to the prescribed timeframes. The templates include all possible plan components. Workers select the appropriate risk or non-risk template for their case and work individually to complete those components that they determine are relevant. They can start work on the UCR at any time and complete components in any order. Where multiple workers are involved in a case, workers submit their template to the Case Planner, who compiles all contributions and then submits a paper or electronic copy to the Case Manager for approval. In some instances, this has taken the form of separate assessments and service plans simply bundled together.

#### **a. Shared Record**

In CONNECTIONS, all workers assigned to the FSS will document their work within a single, shared FASP. The online FASP brings system efficiencies to the process of completing a FASP, but more importantly, it reinforces and supports the Case Planner's function to coordinate case planning, and results in one collaborative integrated assessment and service plan for the family. The online FASP also necessitates system rules and changes to current practices.

#### **b. Responsibility for the FASP**

Responsibility for the FASP - The designated Case Planner, who may be either a social services district or agency worker, is always responsible to complete the FASP and submit it for approval according to section III. F. 9. f. below. Unless the Case Manager is also serving as the Case Planner, the Case Manager has no update rights to any portion of the FASP.

Where multiple workers are assigned to the FSS, responsibility for completion of selected FASP components is defined by the worker's assigned role. Case Workers who are associated to a specific child(ren) must complete FASP components related to the child, including case update, child strength, needs and risk scales and foster care issues for the associated child, assessment analysis, and service plan outcome and activity blocks. They must do so within the time period set by the Case Planner.

The Case Planner is ultimately responsible for all content in the FASP whether or not he/she originally authored them. He/she then must set sufficient time to review all FASP components, synthesize multiple entries as appropriate and submit the FASP for approval

within the specified timeframe. The Case Planner is responsible for completion of the Family and Parent/Caretaker scales, unless the circumstances of a particular case make it more appropriate for completion by another worker assigned to the FSS. If so, the Case Planner must specify who will complete the Family and Parent/Caretaker scales. Where there is a program choice of protective, the Case Planner is responsible for the completion of the safety and risk assessment components of the family assessment and service plan, unless the social services district has designated the CPS Worker/Monitor to do so. Social services districts must be clear in this designation. Completion of the safety and risk (initial FASP only) assessments in non-protective cases is always the responsibility of the Case Planner. Case Workers who are not associated to a specific child should complete components as relevant to their role in the case and as specified by the Case Planner.

### ***12) Access to FASP Components***

The system supports designated responsibilities for selected FASP components by restricting “maintain” access to workers with specified roles. “View” access is always available to anyone with a role in the stage. The Case Planner can always access all components and has the ability to modify all FASP entries. Only the Case Planner and the CPS Worker/Monitor can complete the CPS Risk and Safety Assessments. If a Case Worker is associated to a specific child, only that worker and the Case Planner can complete FCI questions or SNR scales for that child. This protects work from being accidentally modified by another worker. If no worker is ‘associated’, the Case Planner must complete the scales and FCI questions for a tracked child. Anyone with a role in the stage may complete the scales for an untracked child if no worker is ‘associated’. Access to Family and Parent/Caretaker scales is unrestricted to allow for their completion by someone other than the Case Planner if appropriate in a particular case. Access to O/A blocks in the Service Plan is also left open due to the potential need of transferred workers to pick up a block in progress. O/A blocks are identified by date created and name of the last person to modify them, so that workers can identify their own blocks and not overwrite another’s work. Other FASP components (Case Update, Assessment Analysis, Family Involvement) provide a dual level access through the Case Planner Summary functionality described below.

### ***13) Case Planner Summary Functionality***

All workers with a role in the FSS will have access to create draft entries in those FASP components with Case Planner Summary functionality. The Case Planner only has maintain access to ‘Case Planner Summary’ through which the Case Planner can compile the draft entries into a single summary narrative and modify it as appropriate. This ‘Case Planner Summary’, rather than the individual contributions of caseworkers contributing to the FASP, constitutes the official FASP document. This allows everyone connected with the case to provide his or her input towards a single final narrative. Workers can modify their drafts up until the time the Case Planner invokes summary functionality. Case Workers will not be able to make further entries after the Case Planner Summary has been launched although they may still view previous entries. A checkbox on the entry window will indicate if the Case Planner Summary has been launched. If workers have information that should be recorded in the FASP after the Case Planner Summary has been launched, they need to contact the Case Planner so it can be included.

Draft entries will be marked with the name of the worker who created them, but they are not saved after a FASP has been approved. Draft FASPs (not yet approved) can be printed by anyone with a role in the stage. The print will display all draft entries marked by worker name, as well as the Case Planner Summary. The approved FASP does not include draft entries. If the Case Planner is the only worker in the FSS, he/she should record entries directly on the Case Planner Summary window. This will eliminate the need to convert entry on the draft window to the final summary.

#### ***14) System Efficiencies***

Important efficiencies are provided by the system. The CONNECTIONS system will customize the FASP according to Program Choice, PPG, and age of tracked children. Once these are recorded in CONNECTIONS, the system will present only the relevant/required assessment and service plan components and subcomponents for completion. Workers may opt to complete additional non-required components by adding these to the FASP.

System customization of the FASP requires that workers be cognizant of the impact of recorded Program Choice upon the FASP. Workers should make sure the Program Choice and PPG are correct for all children in the FSS before launching a FASP so that the system will present the appropriate components. In certain instances, however, the *sequence* of adding or deleting a Program Choice and launching a FASP must be considered. Where a child's Program Choice has changed, the worker might need to add a particular component to the FASP for completion. For example, if the Program Choice of Placement for a child was end-dated before the launch of the FASP, a worker may need to manually add the Discharge Protocol to the FASP in order to complete required documentation of the required issues related to child safety, permanency, and well being after discharge. (If the worker delayed changing the child's Program Choice until after launching the FASP, the system would present the entire Foster Care Issues component for completion, including parts that might no longer be relevant.) If Protective Services are ending but the worker wishes to complete a final CPS Safety Assessment and RAP, these will not be available if the Protective Program Choice is end-dated prior to launch of the FASP. The worker may either delay changing the Protective Program Choice until after launch of the FASP, or may end-date the Protective Program Choice and manually add the RAP and CPS Safety Assessment.

Information from the last approved FASP will come forward and pre-fill selected FASP components as follows:

- The original needs/concerns that prompted opening of the services case will be documented in the Initial FASP and will automatically display in all subsequent FASPs for worker information.
- Family Background information is carried forward; the system allows for additions to this information in subsequent FASPs.
- In the Initial FASP, the CPS Safety Assessment will be pre-filled from the last approved Safety Assessment in the Investigation Stage, *provided that The Initial FASP was launched within seven days of the approved Safety Assessment.*
- RAP data in the Initial FASP pre-fills from the current approved RAP data from the Investigation Stage. The system requires the Case Planner to review the Safety and RAP pre-filled data, and accept it as currently accurate and ready for submission, or modify it as necessary. (Safety Assessment and RAP data from the Investigation Stage does not carry forward into Comprehensive and Reassessment FASPs, however, if there is an open FSS, and a

new CPS report is received, RAP data will pre-fill in the CPS investigation stage to allow the CPS worker to view the most recent RAP.)

- Active (not marked complete or discontinued) O/A blocks are also carried forward for review and modification.

The system provides aids within the FASP to support good case planning (for example, the “Needed Improvements” from the Assessment Analysis is displayed in the Service Plan tab). The usefulness of these aids is fundamentally related to the employment of sequential case planning (full assessment prior to assessment analysis prior to service planning) by workers. Sequential work is supported but not mandated by the system.

The Assessment Summary is a succinct, system-generated summary of the most significant factors, problems, and strengths that were identified in the assessment. These factors may reflect work completed and recorded by several individual workers. It summarizes the information recorded within separate FASP assessment components, including the Safety Assessment, Risk Assessment /Risk Assessment Profile, the Strengths, Needs, and Risks Scales (Family, Parent /Caretaker, and Child), and Life Skills Assessment. The Assessment Summary is not considered part of the FASP, but is an efficiency provided to workers to aid in developing the family’s service plan.

The Assessment Summary can be generated from within an in-process or pending FASP by any worker with a role in the stage if the required components of the FASP, from which it is derived, pass system edits for completeness. It can be accessed from within the Assessment Analysis (by choosing “Assessment Summary” from the Reports menu) and Service Plan and Outcome and Activity windows (via a pushbutton). The Assessment Summary is not available if the stage type is CCR.

The system provides for copying of appropriate entries to the records of other children in the stage to avoid redundant data entry.

A CONNECTIONS alert will cue all assigned workers when a FASP is coming due or overdue. The Family Services Open Caseload Inquiry Report (OCI) lists the number of FASPs on a worker’s caseload that are ‘Overdue’, ‘Due within seven days’, and ‘Due within fourteen days.’ The OCI also identifies the FASP type, status, due date, and number of days overdue if applicable, of each FASP for all open cases on the FSS workload. This report is available to workers on-line in real time.

## ***15) FASP Rules and Timeframes***

### **a. Due Dates**

The timeframes for approval of periodic assessment and service plans remain essentially the same, although it is slightly extended for the Initial FASP in indicated and opened CPS cases. Where the CID is the date of indication of a CPS report, the FASP is due (must be approved by the Case Manager, or by the Case Manager’s supervisor if the Case Manager is also serving as Case Planner) within seven days of the approval of the Investigation Conclusion. This change was instituted to allow time for supervisory review and approval of the Investigation Conclusion and the Initial FASP in a sequential manner within CONNECTIONS. All other timeframes for FASP approval are unchanged: the Initial is due

30 days after the CID, the Comprehensive is due 90 days after the CID, and Reassessment FASPs are due six months after the CID, and every six months thereafter. To allow time for review and approval, the Initial FASP must be submitted for approval no later than five working days prior to its due date, and Comprehensive and Reassessment FASPs must be submitted no later than ten working days prior to the due date. Plan Amendment timeframes are described in the section 10, Plan Amendments.

**b. Case Initiation Date**

Case Initiation Date (CID) standards are unchanged. The CID is the earliest of the following four dates: Social Services District Receipt of an Application for Services signed by a Parent/Client, CPS Indication, Placement in Foster Care, or Court Order. In CONNECTIONS, the system sets the CID upon a worker's recording of one or more of these dates. The system will automatically generate the CPS Indication date upon approval of a CPS indication within the Investigation Stage; workers do not record this date. As the CID trigger for the application for services is the date it was received by the social services district, a social services district worker must record this date. The CID remains modifiable until a FASP is approved. The system recalculates every time a trigger date is entered or modified and resets the CID if necessary. (The exception to this is that the trigger date for receipt of application cannot be modified if it was recorded during the FSI; if recorded in the FSS, it is modifiable until approval of a FASP). After approval of a FASP, the CID cannot be modified and the cycle of FASP due dates is set.

**c. Launching a FASP**

There are system rules governing who can start (launch) a new FASP, when they can do it, and preconditions that must be met before a FASP can be launched:

- Any worker with an assigned role in the Family Services Stage may launch (open and initiate work on) the FASP. This is essential to not barring workers from timely completion of FASP components.
- The system limits how far in advance of its due date a FASP may be launched. This supports documentation of current case status within the FASP. The Initial FASP may be started immediately upon opening of the Family Services Stage. However, the Comprehensive FASP may not be launched more than 30 days before its due date, and a Reassessment FASP may not be launched more than 60 days before its due date.
- The following preconditions, which are essential to system customization of the FASP, must be met before a FASP can be launched:
  - A FASP may not be launched until a Primary Caretaker has been identified.
  - The Family Relationship Matrix, which identifies the relationship of each family member to all other family members, must be completed. There must be at least one child in the FSS with a PPG and Program Choice.
  - Any person with a date of death (DOD) recorded in Stage Composition must be end-dated in the FSS.
  - There must be a CID with one exception. The Initial FASP for an FSS with a program choice of protective may be launched if there is an open Investigation Stage and an approved Safety Assessment. (In this instance, the system will allow the worker to begin

working in the FASP but will prevent submission of it for approval until one of the CID Trigger Dates is recorded, thus establishing a CID).

- Only one FASP (including a Plan Amendment) in the stage can be in the process of being developed and approved at a time. FASP processing has been designed to not allow overdue work to hold up coming due work. If an in-process FASP is overdue and the launch window for the next coming-due FASP is open, the coming due FASP may be launched.
- Launching the new FASP, however, will drop the uncompleted FASP into “template” format. Workers responsible for the overdue FASP will then have 60 days to complete work within the template format, at which point the template will be frozen (it is no longer modifiable). The template is similar to a word document; system efficiencies are not available and data from the template does not carry forward to the next FASP. The template must be approved off-line. If a FASP is pending approval and the launch window for the coming due FASP is open, the system will not allow the coming due FASP to be launched for 7 days. On the eighth day after submission of the FASP for approval, the coming due FASP may be launched, even if the pending one has not been approved, and the pending work will be dropped to template format. Attempting to launch a Plan Amendment will never drop a FASP to template format. The worker will receive a message to contact the Case Planner. Plan Amendment status change information can be incorporated directly into the FASP.
- If a previously due FASP was never launched, it will be marked as “Missed” upon the launch of a new FASP; it will not be able to be completed, even in template format.
- FASPs may be launched if the due date has passed and a subsequently due FASP has not been launched. Therefore, a Case Planner should launch and complete an overdue FASP before launching the coming due one. A late FASP may never be launched if it is more than 365 days overdue; it will be marked as “Missed” upon the launch of a new FASP.

All workers assigned to the FSS need to be conscious of the impact of their launch of a FASP. Not only will the overdue FASP be dropped into template format or be precluded from completion, but the information carried forward from the last approved FASP may be seriously outdated. The system will alert workers to the existence of an in-process or pending FASP and the impact of launching a new FASP. Workers should contact the Case Planner or Case Manager before launching a FASP if the action will drop an in-process one into template format. Case Managers and supervisors must also be conscious of the need for timely review of pending FASPs, particularly if it is within the launch window of the next FASP.

#### *d. Online Approval*

By regulation (18 NYCRR 428.3), the FASP must be approved by the Case Planner’s supervisor and by the Case Manager. If the Case Manager is also acting as Case Planner, the Case Manager’s supervisor must approve the FASP. The CPS Worker/Monitor, if there is one, must receive and review the FASP. (18 NYCRR 432.2(b)(5)(iii)(a))

The FASP will be submitted and approved online within the CONNECTIONS system. Only the Case Planner can initiate submission of the FASP for approval. When the Case Planner submits a FASP for approval, the system will send an approval To-Do to the Case Planner’s supervisor (unit approver) and to the Case Manager. If the Case Planner is also acting as Case Manager, the system will send the approval To-Do to the Case Manager’s supervisor. The Approval To-Do’s go to all

approvers at the same time but the system enforces the sequential order of approval. The order of approval is as follows: Case Planner's supervisor (unit approver), any additional approvers within the district or agency of the Case Planner, DRS approver if there is one (see section M), and then the Case Manager and any other approvers within the district as required by local policy.

If the worker who is assigned as the Case Planner is the unit approver for their own unit, CONNECTIONS will enable staff search and the Case Planner will be forced to choose someone else from their social services district or agency to submit to, prior to Case Manager approval. (An individual cannot submit work to himself or herself, nor can an individual add himself or herself as an approver.) The approval will not be considered complete until the Case Manager or their supervisor (if the Case Planner is also acting as Case Manager) approves the FASP.

The system accommodates changes and additions to the default approval process. Where there is a CPS Worker/Monitor, the Case Planner may add the CPS Worker/Monitor to the approver list or send an alert to review the FASP. If a higher-level review is desired, the Case Manager can add another approver to the process. If the Case Manager adds an approver(s), the FASP is not considered approved, until the additional approver(s) has approved it. All approvals must be completed by the FASP due date.

Online approval in CONNECTIONS is acceptable as the electronic equivalent of required signatures by the Case Planner, the Case Planner's Supervisor, and the Case Manager (and the CPS Worker/Monitor if sent to such person for approval). All FASPs, including Plan Amendments, also include a signature page. This should be printed and used for obtaining the signature of the family and third party reviewer, as appropriate.

The system will not allow submission of a FASP for approval unless all required components, as determined by Program Choice, PPG and age, are complete. The 'Check FASP Detail' button provides a system check of the FASP to determine if all of the required components have been completed. The system will advise workers what components still need to be completed. Although the system mandates entry in specified fields prior to submission for approval, the quality of that entry cannot be determined by the system. *Good supervision remains critical to support quality worker response.*

#### ***e. Plan Amendments***

Plan Amendments must be used to record status changes that occur between FASP cycles. The status changes *requiring* plan Amendments are unchanged with one exception; the requirement for a Plan Amendment for children "absent without consent" is no longer mandatory. (Tracking for children in or absent from placement settings will be supported in Build 19.) The timeline for required completion of Plan Amendments is slightly altered. The status change "Case Open or Closed for Protective Services" may be recorded for up to 7 days following that event (instead of on the date of opening or closing). Other specified status changes are to be recorded within 30 days of the status change, unless the status change is within the allowable launch period of the next regularly scheduled FASP. If the Comprehensive FASP is coming due within 30 days or the Reassessment FASP is coming due within 60 days, the status change(s) is to be documented within that FASP instead of on a separate Plan Amendment.

There is a new optional “Change to Visitation Plan” Plan Amendment to facilitate updating of the visiting plan. Please refer to 04 OCFS INF-10 regarding the need to have current visitation plans/information in the record. The Plan Amendment “Other Status Change” remains available for any other locally desired requirement or option, including updates to the service plan. Plan Amendments will be recorded and approved within CONNECTIONS. The system will present available status changes based upon the stage type (CWS or CCR) and the Program Choice(s) of the child(ren) in the FSS. Workers will select the status change(s) to be documented and the system will present the required components for the status change. Easy access to update the current Service Plan in conjunction with the status change will always be available regardless of stage type or Program Choice. As with the launch of a FASP, workers need to be cognizant of the impact of the sequence in which they add or delete a Program Choice and launch the Plan Amendment. If, for example, a worker needs to complete a Plan Amendment for “Preventive Services Started,” he or she should add Preventive as a Program Choice prior to launching the Plan Amendment. In contrast, if he or she wishes to complete a Plan Amendment for “Child Discharged to Home, Relative, Other,” he or she should delay ending the “Placement” Program Choice until after the Plan Amendment is launched, so that the discharge protocol (which is dependent upon a Placement Program Choice) will be available.

Any worker *with a role in the FSS* may initiate and complete a Plan Amendment but only one Plan Amendment can be in process at a time. Several workers may work within this Plan Amendment and multiple status changes may be included. When working within the same Plan Amendment, workers need to coordinate efforts before its submission for approval to be sure all work is completed.

CPS Workers will need to be assigned a role in the FSS if they are to complete the required “Case Open for Protective Services” Plan Amendment when the Program Choice ‘Protective’ is added to children already receiving non-CPS services. Upon indication of a CPS report that was received subsequent to the opening of a services case, the system will automatically add the Protective Program Choice to the FSS and provide an alert to all assigned workers in the FSS. The FSS Case Planner (or Case Manager if there is no other worker assigned as Case Planner) must then either complete the required Plan Amendment or assign a role in the stage to the CPS Worker so he/she can complete it.

As with other FASPs, the system allows any worker to launch and complete a Plan Amendment, but only the Case Planner can submit it for approval. Workers should contact the Case Planner by phone or send a To-Do so that the Case Planner is informed that the Plan Amendment is ready to submit for approval.

Plan Amendments can only be created if there is already an approved FASP (except in Child Case Records where a Plan Amendment will be the first FASP completed for a child freed for adoption). Plan Amendments may not be launched if a FASP is in process or is pending approval. If a FASP is pending approval, workers need to contact the Case Planner to determine the most appropriate action. This might be pulling the FASP from submission for approval and recording the status change within the FASP. With one exception, Plan Amendments may not be launched if a periodic FASP is available to be launched (time is within the FASP launch window). As previously noted, the status change should be documented within the FASP. The one exception to this launch prohibition is when the worker is closing the FSS. The worker is not required to complete the FASP in this instance. *The system will allow a Plan Amendment to be launched, even if a Comprehensive*

*or Reassessment FASP is available to be launched, providing the worker confirms he or she is closing the FSS. The system will ask, and the worker must confirm, that he or she is closing the FSS.*

Plan Amendments are electronically attached to the FASP they are updating and are displayed on the FASP tree. Therefore, the most current service plan will always be available on the system and can be easily generated and given to the family.

### **Required Action: Family Assessment and Service Plan**

Case Planners must complete and submit FASPs to the Case Manager in time for approval by the FASP due date. To allow time for review and approval, the FASP must be submitted for approval to the Case Manager no later than ten days prior to its due date.\*

*\*Please note: This ADM establishes a minimum standard. Social services districts may establish guidelines that exceed the minimum standard in order to support their own unique approval process.*

The Case Manager must review and either approve or reject the FASP no later than 5 days after its submission. If rejected, the FASP must be modified and resubmitted for approval within five days of the rejection.

The following status changes must be documented in a Plan Amendment within CONNECTIONS if they occur between FASP cycles:

- Preventive Services Started
- Preventive Services Ended
- Case Open to CPS
- Case Closed to CPS
- Child Entering/Reentering Foster Care
- Child Moved from One Foster Care Setting to Another
- Child Discharged to Home, Relative, Other Caretaker
- Adolescent Discharged to Independent Living
- Child Discharged to Adult Residential Care
- Child Reunited Home From Non-LDSS Placement
- Child Legally Freed (available in CCR only)

Documentation of the following status changes is optional:

- Change to Visitation Plan
- Update Service Plan
- Other Status Change

All FASPs, including Plan Amendments, must include the signature(s) or electronic equivalent(s) of the Case Planner, the Case Planner's supervisor and the Case Manager, and where required pursuant to 18 NYCRR Part 428, the signature of the CPS Worker/Monitor.

Workers must make sure that the Program Choice and PPG are recorded and correct for all tracked children before launching a FASP.

Workers must make sure that the Primary and Secondary Parent/Caretakers are correctly identified before working on FASP components. Changing them after a FASP is in process requires the re-completion of certain components.

Workers must complete an individual assessment of all tracked children and each primary and secondary parent/caretaker.

Workers must complete a Visiting Plan for all children in foster care placement (or document the reason why it is unsafe or impossible for the child to visit).

All Discharges (to Home, Relative, Other Caretaker, to Independent Living, to Adult Residential Care, and to Adoption) must be recorded within the FASP or a Plan Amendment by the Case Planner or associated Case Worker.

Workers must complete a life skills assessment for all children in foster care 14 years of age and older.

The Case Planner is responsible for completion of the Family and Parent/Caretaker scales, unless he/she specifies another Case Worker to complete these. Where there is a program choice of protective, the Case Planner is responsible for the completion of the safety and risk assessment components of the family assessment and service plan, unless the social services district has designated the CPS Worker/Monitor to do so. The Case Planner is always responsible for completion of the safety and risk (in the initial FASP only) assessments in non-protective cases.

The social services district CPS Worker/Monitor must complete the CPS Safety and Risk Assessments in the FASP if designated to do so by the Case Manager.

Case Workers who are associated to a specific child(ren) must complete FASP components related to the child, including: case update; child strengths, needs and risk scales; foster care issues for the associated child, and for children 14 years of age or older, a life skills assessment; assessment analysis; and service plan O/A blocks, within the time period set by the Case Planner.

Case Workers who are not associated to a specific child should complete components as relevant to their role in the case and as directed by the Case Planner.

For the most part, there is no system-prescribed order for completion of FASP components. However, the Strengths, Needs, and Risk scales must be completed prior to the Risk Assessment Profile in Comprehensive and Reassessment FASPs. The assessment should be completed prior to the service plan.

Documentation of needed services / service status by individual must be completed as part of the Service Plan, if the social services district has opted to require this.

Workers must document the family's involvement in the development of the service plan within the FASP.

The Case Planner or the associated Case Worker must record programmatic eligibility for placement and mandated preventive services within each FASP.

Workers must complete overdue FASPs that are dropped into template format.

The Case Planner should review, and modify if necessary, all worker entries to the FASP.

Although online approval in CONNECTIONS is acceptable as the electronic equivalent of required signatures, districts may still want to use the printed output page, especially at Service Plan Review meetings and as a working contract with the family. It is strongly recommended that the signatures of parent(s) and child(ren) over the age of ten, and that of the Third Party Reviewer for foster care cases, are obtained.

## **G. Progress Notes**

Social services district and agency child welfare staff currently document progress notes on either the 2000 or 2003 Progress Notes Template, or in some instances, on paper. With the implementation of CONNECTIONS Build 18, child welfare staff will document all progress notes in CONNECTIONS (with the exception of advocate preventive-only cases). The nature and purpose of progress notes will not change. Workers will continue to document all contacts and casework activities. Progress notes must be recorded in a timely manner to support accurate, contemporaneous entry of all casework activities. The requirements for timely recording are unchanged. The existing requirements will be reinforced by the system, which will automatically freeze progress notes (i.e. the note becomes non-modifiable) 15 calendar days after the note is first saved in draft.

Workers assigned to the FSS will have view access to all progress notes entered by any worker assigned to the stage. This will keep workers up-to-date on case events and activities. Required data fields will add greater accuracy and specificity to the contents of a progress note. Progress note functionality will allow workers to search, sort, and filter progress notes by multiple criteria (e.g. date, type, purpose, participant). This will assist staff in preparing reports and help supervisors fulfill monitoring responsibilities. Up to 200 progress notes at a time can be sorted and printed in chronological order. Progress notes with a 'Type' of Family/Primary Resource Visitation, Sibling Visitation, Other Visitation, Attempted Family/Primary Discharge Resource Visitation, and Attempted Sibling Visitation pre-fill a Family/Child Visiting Grid within the Foster Care Issues component of the FASP. On-line Help will be available to guide progress note entry and improve workers' documentation of case contacts and activities.

Any worker that has access to Progress Notes will have the ability to print a Progress Notes Data Report for any period which they specify. The report consists of the data that was entered into progress notes when the notes were recorded; it does not contain the narrative of the notes. The Data Report thus constitutes a contact grid which supervisors and workers can use to ascertain the frequency of contact and whether minimum contact requirements have been met. The Progress Notes Data Report includes event date, note status (draft or final), type(s) of contact, method of contact, location of contact, name of participant(s), name of other participant(s), name of author (person who made the contact), district/agency (of person who entered the note), focus of contact, purpose of contact, and indication if contact was unannounced. The Report can be printed from the Progress Notes Detail window.

The system does not require supervisory approval of progress notes. Internal procedures need to be developed where this is desired. Where supervisory review is desired prior to the note being final (and consequently, non-modifiable), workers will have to be instructed to save their progress notes in 'draft' form. As progress notes freeze 15 calendar days after being saved in draft, supervisors need to review

them within this time period so workers can make any requested corrections. Supervisors might want to instruct workers to send an Alert to them when notes are ready for review within this 15 day period. A supervisor cannot edit a worker's notes; they must direct the worker to make any needed changes. Supervisors can also create a progress note or add an addendum to an existing note. These would be marked with the supervisor ID.

The "Enter Progress Note" Business Function gives social services districts and agencies the ability to have on-call and clerical or support staff enter progress notes on a case in which they do not have a role. Workers given this business function will have the ability to enter a progress note in any open stage in that district or agency.

Enhanced progress note functionality mandates change in how progress notes will be recorded.

- Progress notes will be entered individually for each casework event.
- Each progress note will have data fields (type, method of contact, family participant/focus, location of contact, other participant, and purpose) with drop down boxes. Specific fields are required depending upon the type and method of contact. The progress note cannot be saved until a value for all required fields is selected. A checkbox is available to indicate an unannounced visit.
- There are two levels of system edits for required data fields. Social services districts may opt for either the standard or higher level edits. The edit matrix and data values of the Case Manager's social services district will be employed for everyone assigned to the stage, including agency workers.
- The progress notes narrative field has a text tool control, which provides workers with Microsoft Word-like functionality, such as spell check, bolding, bulleting, etc.
- Progress notes may be 'saved as draft' for up to 15 calendar days from the first time the note is saved; this allows them to be modified by the worker who entered them. If the note is later modified and saved again, the 15 day period does not restart. When complete, they should be 'saved as final'. Any notes remaining in draft will automatically be 'saved as final' by the system on the 15<sup>th</sup> day from the date it was first saved as draft. Notes 'saved as final' (whether by the worker or by the system) will be frozen and no longer modifiable.
- Workers and/or supervisors may write an "addendum" for comments or corrections after a note has been frozen.
- Progress notes instructions, customized by a social services district by type of note (as distinct from Online HELP), will be available to guide worker entry *in districts that have selected this option*. Workers may choose to view or hide these instructions on the progress note entry window.

See Section B: Confidentiality for additional information and direction concerning documentation of contacts and activities in progress notes.

### **Required Action: Progress Notes**

Progress notes are required as part of the case record for all open child protective and child welfare services cases.

Progress notes must begin on the case initiation date as defined in 18 NYCRR 428.2(a) and must continue until the case is closed to all services. Investigation progress notes must be maintained

separately for each Investigation Stage.

Progress notes must include the documentation required by 18 NYCRR 428.5(c). They must be made as contemporaneously as possible with the occurrence of the event or the receipt of the information that is to be recorded.

Progress notes must be entered in CONNECTIONS Family Services Stages effective with Build 18 implementation, with the exception of ADVPO cases (see section III M, Documentation of ADVPO Cases).

Each progress note entry must include the date of the event and the name of the author. The system will record the date of the entry and name of the person who recorded the entry.

Progress notes in a Family Service Stage must not include any identifying information related to the reporter/source of a child protective services report.

Progress notes need not include clinical notes, daily logs or other written material created by service providers who act in roles other than Case Worker, CPS Worker/Monitor, Case Planner and Case Manager.

Progress notes for ADVPO cases must be recorded on the 2003 Progress Notes Template and kept in the paper file.

## **H. Service Plan Review**

There are strong correlations between the timely achievement of permanency and timely re-assessment and re-development of the service plan, particularly with the involvement of an independent third party reviewer. Service Plan Review (SPR) conferences are required for all foster care cases, and are strongly recommended but not mandatory for non-placement cases. These requirements are unchanged. Build 18 provides support for these critical conferences. Additional information regarding Service Plan Reviews can be found in 04 OCFS-INF-9.

Currently, scheduling of the SPR conference is done offline and the conference is documented in a progress note. The date and attendees of the SPR Conference is recorded within the current Plan Development section of the UCR Assessment and Service Plan (Comprehensive and Reassessment only). In Build 18, SPR conferences may be scheduled, and must be documented, in CONNECTIONS. This will be done on the SPR tab apart from the FASP. Because the SPR tab is located outside of the FASP, it may be accessed whenever needed. Clerical workers may be given security access to schedule conferences and record SPR information. Scheduling functionality is available as a system efficiency. Its utilization is optional. Workers will be able to record scheduling details in CONNECTIONS and then generate system alerts to assigned workers and notification letters to family members and other invitees not in CONNECTIONS. The system will retain meeting and participant information for efficiency in scheduling future SPR conferences. When recorded in CONNECTIONS, the scheduled date of the next SPR meeting will be displayed on the associated FASP and on the SPR window.

SPR conferences must be documented on the SPR tab in CONNECTIONS. The conference date, list of attendees, and reason why a required invitee did not attend, must be recorded. These will carry forward into the appropriate FASP, providing that this information has been recorded in CONNECTIONS prior

to the submission of that FASP for approval. Narrative comments regarding the meeting summary, the family's input, involvement and view, and third party reviewer conclusions and recommendations are also to be recorded. This information is not brought forward into the FASP. If the third party reviewer is on CONNECTIONS, he or she will be able to record his or her comments directly. If the third party reviewer is not on the system, his or her comments must be entered into the system by clerical staff or by a worker with a role in the stage. The Case Planner is responsible for documentation but any worker with a role in the stage, or with the 'Access SPR' security Business Function, can do so. Entries in the third party reviewer window will be marked with the date, time, and worker name/ID of the individual who made the entry and will freeze on 'save.' Meeting summary, and the family's input, involvement and view will not freeze on save. If multiple workers are recording narrative comments, conflicting viewpoints might be documented. Even though this information is not brought forward into the FASP, it is essential that the Case Planner and other caseworkers with a role in the case review the data in this tab as a matter of practice.

### **Required Action: Service Plan Review**

SPR conferences must be conducted for all children placed in foster care in accordance with the requirements of 18 NYCRR 430.12 (c)(2).

SPR conferences must be documented on the SPR tab in CONNECTIONS. This is the responsibility of the Case Planner. Documentation must include the SPR conference date, list of invitees, attendees, reason why a required invitee did not attend, and narrative comments regarding the meeting summary, the family's input, involvement and view, and third party reviewer conclusions and recommendations.

In instances where more than one service plan review conference per planning period is appropriate and is approved by the social services district, the convener of the additional SPR is responsible for documentation.

### **I. Child Case Record**

Generally, social services districts create a separate case in WMS and CCRS when a child has been completely legally freed for adoption. Some districts wait until the adoption is finalized and then create a separate WMS record solely to pay an adoption subsidy.

In CONNECTIONS, all children who have been freed for adoption (regardless of whether they have a goal of adoption or are currently placed in an adoptive setting) will have a separate, single-person, system-generated case. The system will *automatically create* a separate Child Case Record (CCR) when the Case Manager records (clicks checkbox) that a child is "completely freed for adoption" (the rights of all parents have been terminated through either a termination of parental rights procedure, voluntary surrender, death, or any combination thereof) on the Tracked Children Detail window. Only the Case Manager can initiate a CCR and the checkbox is not visible to other workers in the FSS. The freed for adoption box cannot be checked if there is a FASP in pending approval status. The pending FASP should be approved prior to creating the CCR.

The CCR is a one-person case in the name of the child. New WMS and CONNECTIONS case numbers are created and, although a CCRS case must be manually opened, using the "Y" indicator allows reopening the child's track using the original CID. The freed child is end dated in the family case record and selected demographic data for the child is automatically copied into the CCR. The CID (case

initiation date) for the new case record remains the same as it was in the family record. The child's CIN and PID do not change until adoption finalization.

FASPs are started anew in the CCR, with a Plan Amendment (child freed for adoption) being the first FASP in the CCR. The FASP cycle is based on the CID of the FSS/CWS from which the CCR was created. Only the Reassessment FASP and Plan Amendments are available. The CCR assessment and service plan is called the Child Assessment and Service Plan (CASP) and required documentation is customized to the situation and specific needs of a freed child. Progress notes are also newly started in the CCR. The worker(s) assigned to the CCR will have access back to the FSS from which the child has been end-dated. The six basic tabs available in the FSS/CWS are all available in the CCR. The workers who are assigned roles in the CCR case have an "implied role" in the FSS/CWS stage that the freed child was end dated in. This means that workers in the CCR have view access into the FSS/CWS the child was known in. The workers in the FSS/CWS stage, however, do **not** have an implied role in the CCR.

Once the adoption has been finalized, workers need the Business Function "Access Sealed Adoption" to view information in the CCR. Assignment of this Business Function should be strictly limited to maintain confidentiality of the child record. The record is only to be accessed for appropriate reasons, for example, a court order requiring the unsealing of the adoption record.

#### **Required Action: Child Case Record**

A CCR must be opened in CONNECTIONS before a new WMS and CCRS case can be established. Until Build 19, the Case Manager must record that the child is 'completely freed for adoption' in order to create the CCR. When recording a child as 'completely freed for adoption' in CONNECTIONS, social services districts should verify that they have recorded the CCRS Adoption Activity of A 499 in CCRS.

A Plan Amendment is to be completed within 30 days of creation of the CCR.

Workers may need to record a new visitation plan for the child within the CCR CASP, if appropriate.

#### **J. CCRS and WMS Documentation**

Until the implementation of Build 19, when CONNECTIONS becomes the system of record, workers still need to register the case, assigning tracking indicators to children, and entering the CID; record the assessment and service plan (Plan Type, Service Needs and Status, Program Choice, PPG, Worker Function, Case Status); and record placement (movement), legal, adoption activities and Level of Difficulty (LOD) in CCRS. Workers will continue to receive CCRS reports listing "coming due" and "overdue" assessments and service plans. Attachment B provides a mapping guide to assist workers with correlating CCRS PPGs with the revised CONNECTIONS PPGs.

#### **Required Action: CCRS and WMS Documentation**

Until implementation of CONNECTIONS Build 19, WMS and CCRS remain the systems of record.

The following must be recorded in WMS until Build 19 implementation:

- Funding eligibility by category for any funding source for which the child or family may be eligible
- Direct and Purchase of Services Authorization.

The following must be documented in CCRS until Build 19 implementation:

- CCRS registration, CID and tracking indicators
- FASP information (Plan Type, Service Needs and Status, Program Choice, PPG, Worker Function, Case Status)
- Placement/Movement, Legal, Adoption Activities and Level of Difficulty (LOD).

#### **K. Non-Child Welfare Stage Types**

Social services districts currently provide a variety of ongoing services for which the establishment and maintenance of a Uniform Case Record and completion of assessment and service plans is *not required*. These include: Court-Ordered Investigations (COI) that are not reported to the SCR, Interstate Compact on the Placement of Children (ICPC) for incoming children (children being placed into New York State from another state), and Out of Town Inquiries (OTI). Currently, there is no standard method and vehicle for documenting these cases. Each social services district maintains its own records, which often consists of a combination of paper and electronic copy. With the implementation of Build 18, however, these cases will be documented in the system.

OTI, COI, and ICPC type stages will employ selected functions of the CONNECTIONS system: Stage Composition, Progress Notes, and Case Summary. The other FSS tabs are disabled.

Stage type is selected as part of Family Services Intake. Once an FSS is opened, a Case Manager can change the stage type to CWS if necessary without having to open a new Family Services Intake. This is done from the Case Summary tab. A CWS type cannot be changed to a non-CWS type. (In this instance, the CWS would need to be closed; and a new FSI opened.)

#### **Required Action: Non-Child Welfare Stage Types**

Workers must open OTI, COI, and incoming ICPC public placement cases in CONNECTIONS. A streamlined Family Services Intake will need to be completed in CONNECTIONS before the FSS can be opened. Workers must maintain Stage Composition and case summary information in CONNECTIONS and document case activities in Progress Notes. These stage types do not require the opening of a WMS case in conjunction with the opening of an FSS.

Please note: Outgoing ICPC cases (New York State children being placed in another state) are treated the same as other Child Welfare Service cases. A Family Service Stage with a type of CWS must be opened for these children and FASPs are required.

Until Build 19, there will be no system support for any Model of Practice-Preventive cases. All child welfare cases are stage type "CWS" in the CONNECTIONS system. If OCFS has granted a district a waiver for an alternative best practice model of assessment and services planning, the district may continue to use this approved model instead of completion of the FASP in CONNECTIONS and will not

be out of compliance with regulations related to UCR requirements. However, please note that a FASP will be generated and coming due and overdue reports will be generated for these CWS stages. Data elements within the FASP are only retrievable for data aggregation and management reports if data is entered into the individual data fields.

**L. Documentation of ADVPO Cases / ADVPO Templates (for NYC only)**

***1. Practice and Policy Implications***

Preventive services cases in New York City subject to the Advocates for Children settlement agreement will continue to be documented in accordance with terms and conditions of that agreement, unless and until the settlement agreement is amended or revoked. Preventive agencies that contract with the Administration for Children’s Services (ACS) and which serve preventive services only clients will continue to use paper or electronic templates for these cases. ADVPO may not be used for any case when there is a concurrent program choice of CPS, Foster Care or Adoption for any child in the family. The prescribed timelines remain unchanged.

The FSS for cases covered by the Advocate settlement agreement employs selected functions from the CONNECTIONS system and is limited to the following CONNECTIONS tabs: Stage Composition, Progress Notes (available, but not required), and Case Summary. The remaining Build 18 tabs, Family Assessment and Service Plan, Service Plan Review, and Key Dates, will not be accessible to cases covered by the Advocate settlement agreement.

***2. ADVPO Templates***

A new set of templates, that mirror the information collected in CONNECTIONS, replaces the current templates. These must be used by preventive services agencies for documentation of Family Services Intake, FASPs, Progress Notes, and SPR conferences, if held. Templates for Life Skills Assessment and Non-LDSS Custody – Relative/Resource Placement are available for use as required by ACS policy and procedures. ACS and/or OCFS staff will continue to review ADVPO case records on-site for monitoring and/or audit purposes as authorized by the settlement agreement.

ADVPO cases will also be documented partly within the CONNECTIONS Case Management system. Demographic data will be entered into CONNECTIONS.

A listing of the ADVPO Templates available is attached to this ADM as Attachment E.

**Required Action: Documentation of ADVPO Cases**

Preventive services agencies will continue to document and transmit case record information in a manner consistent with the Advocates for Children settlement agreement. Information that is currently entered into CCRS must continue to be entered into that system and comparable information must likewise be entered into CONNECTIONS.

The following rules/actions will apply related to completion of information in CONNECTIONS for a new request for services as an ADVPO case and when there is a new CPS report received:

**At first request for preventive services only by a family:**

- ADVPO case is created in the CONNECTIONS system via the initiation and submittal for acceptance of an FSI. All required FSI fields must be complete, including Intake Source, person demographics, requested services, and intake decision information.
- The CONNECTIONS Intake for ADVPO cases does not require completion of Behavioral Concerns and Family Issues (BCFI) or Programmatic Eligibility within the system. The BCFI and programmatic eligibility will be recorded on the ADVPO template and retained by the Agency.
- Workers must record the Intake narrative and Programmatic Eligibility, and complete the BCFI screening on the Family Service Intake template.
- ADVPO agency worker must submit the FSI to ACS immediately upon receipt of a signed application.
- ACS/OCACM case manager is assigned, documentation at the time of the receipt of the signed application establishes the CID date.
- ACS assigns case planning to the ADVPO agency.
- Existing ADVPO case in CONNECTIONS will be on the workload of the contract Preventive agency worker as case planner and the ACS/OCACM case manager.
- ADVPO completes all documentation, progress notes and Family Assessment and Service Plans in templates.
- The Agency worker must keep all person information updated in CONNECTIONS.
- ADVPO cases require the opening of a WMS and CCRS case in conjunction with the opening of an FSS.
- SPR Conferences are recommended but not required. If held, SPRs must be documented on the SPR template.

**When a CPS report is made after the initiation of the ADVPO family services stage (FSS) is established:**

- ADVPO Preventive agency worker will receive an “alert” in CONNECTIONS that there is a new CPS intake on individual(s) in their FSS stage.
- At the time of the CPS intake, either the SCR will relate or ACS/DCP will merge the new case number associated with the CPS intake to the existing ADVPO case number, enabling ACS/DCP to view the ADVPO FSS in CONNECTIONS.
- ADVPO agency will not be able to view the CPS intake or investigation stage.
- ADVPO agency staff may request and DCP shall provide information relevant to the report and investigation, including the safety status of the child. Information related to the identification of the reporter/source must not be disclosed by ACS to the Contract Preventive or Foster Care Agencies, absent the written consent of the reporter/source.

**During the investigation period when the FSS remains an ADVPO:**

- Within the ADVPO FSS type, ADVPO agency worker will begin to enter progress notes into the FSS stage in CONNECTIONS at the time the alert for the new CPS report is received (per settlement agreement, ADVPO needs to transmit information to ACS/DCP from the time of the initiation of a CPS investigation.)

- ADVPO agency will forward a paper copy of Family Assessment and Services Plan (FASP) to ACS/DCP during the time of the investigation if FASP is due prior to the investigation conclusion.

**When the CPS report is unfounded:**

- If the family wishes to continue to receive services and the ADVPO agency continues to provide services to the family, progress notes entry into CONNECTIONS ends, the ADVPO worker uses progress notes templates for documentation and continues to complete the FASP in template format.
- ADVPO worker may wish to print the progress notes maintained in CONNECTIONS to support a comprehensive paper record if the report is unfounded.

**Prior to the determination of the CPS report investigation when DCP places a child, initiates court activity, or receives a court order for services:**

- DCP worker modifies the FSS from ADVPO to CWS in CONNECTIONS during the investigation stage.
- The ADVPO agency will begin to complete all work in CONNECTIONS, including progress notes and all required components, including the FASP.

**When the CPS report is subsequently unfounded and a CWS stage was created during the investigation stage:**

- If the family wishes to continue to receive services, the CWS FSS must be closed, the existing WMS case must be closed and a new FSI must be created.
- The previous WMS registration number must be used for the newly created FSI/FSS associated to the new ADVPO FSS. (At the time of the person search required in the Family Services Intake, the CONNECTIONS system will indicate that these persons are already known from a previous case. Worker should relate new FSI to this case number.)
- ADVPO agency worker should document in the progress notes in CONNECTIONS that this is an "administrative closure", services continue to be provided as a new ADVPO FSS with no lapse in service.

**When the CPS Report is indicated and open for services with program choice of CPS at the time of the investigation conclusion:**

- DCP will modify the stage type from ADVPO to CWS.
- The ADVPO agency will then complete all work in CONNECTIONS, including progress notes and all required components, including the FASP.

Workers will need to use a Plan Amendment template to record a status change, even after a stage type change to CWS, *if the system will not allow a FASP or Plan Amendment to be launched*. [This will only happen in a period prior to the launch window of the next Reassessment FASP. Status changes should be recorded in the next FASP wherever possible and in a Plan Amendment if outside of the FASP launch window. However, there are six months between due dates of Reassessment FASPs and since

the Reassessment FASP can only be launched 60 days or less prior to its due date, it is possible that the FASP might not be able to be launched.

CONNECTIONS requires that there be an approved FASP in the system before a Plan Amendment can be launched, but when a stage type of ADVPO is changed to CWS, there will be no approved FASP *in the system*. In this circumstance only, the status change will need to be recorded on a Plan Amendment template even though the case is no longer ADVPO. Since a Comprehensive FASP can be launched 30 days prior to its due date and the Initial FASP can be launched at any time, status changes in this period can be recorded in CONNECTIONS.

## **M. Youth in OCFS Custody**

### ***1) Policy and Practice Implications***

Historically, social services districts have had responsibility for authorizing or determining financial, eligibility and WMS/CCRS system requirements for youth in the custody of OCFS. With the implementation of Build 18, agencies will initiate and submit FSIs to social services districts for these cases. Social services districts will support stage progression to the FSS and assignment of a “case planner” role to the agency that submitted the FSI, and assignment of a “caseworker” role in CONNECTIONS for cases involving a youth in OCFS custody youth placed in a voluntary agency. This practice will become effective for each social services district as they are implemented respective to its wave of implementation (see 04-OCFS-INF-10). These types of cases are often referred to as “replacement cases” as the court awards custody to the Commissioner of OCFS, but at the court hearing, a determination is made that the youth, at this time, may be best served at a voluntary foster care agency. Please note that the cases of OCFS custody youth placed in a voluntary agency that have been opened in WMS will convert to a CONNECTIONS FSS workload on the date Build 18 is implemented in the social services district.

The same responsibilities will also be assumed by agencies and social services districts when a youth who has been in OCFS custody is prepared to “step-down” from an OCFS facility. These are youth who remain in the custody of the OCFS Commissioner, but have demonstrated that they are no longer in need of the more secure, structured or restrictive program within an OCFS facility, but reintegration into the community may be best served through a transitional placement at a voluntary agency.

“Case Manager” is a role uniquely assigned to social services district staff only, and at this time may not be assigned to an OCFS staff person within the CONNECTIONS system. Social services district staff will assume the CONNECTIONS role of “Case Manager” for these cases since the social services district “Case Manager” is the sole entity provided with the ability to “approve” a FASP. In order to support appropriate case planning and case processing in the system, “approvals” are required steps. If the social services district has no legal responsibility or functional case involvement as pertains to the OCFS custody youth, then the approval of the FASP by the social services district “Case Manager” should be regarded as “ministerial” or an action taken to facilitate the completion of the FASP approval process only, allow for necessary tracking, and in the future support eligibility, legal activity, payment and essential data gathering.

This “approval” by the social services district case manager does not imply an agreement with the FASP or oversight of the work completed by the agency on behalf of this youth. It is the responsibility of the OCFS Division of Rehabilitative Services (DRS) programmatic or functional

case manager, assigned a role of a “caseworker” in the FSS stage in CONNECTIONS who is responsible for oversight of the services provided by the agency to the youth in OCFS custody and the progress towards achievement of the permanency plan.

Providing support for all youth in the custody of OCFS placed in voluntary agencies will allow social services district staff to view essential information and progress the youth and family have made towards achievement of the youth’s permanency plan. This will allow for LDSS to more effectively coordinate with OCFS staff to plan for and support the successful reintegration of the youth to his home and community.

## **2) *Joint Custody or Shared Cases***

Responsibilities for overall case management are different if the social services district maintains joint custody of the OCFS custody youth and/or if social services district has concurrent CPS, Preventive Services or Foster Care case involvement with other family members. The social services district, in consultation with the assigned OCFS/DRS worker, will be responsible for making the designation of the role of “Case Planner” which may or may not be the voluntary agency where the OCFS custody youth is placed. The social services district Case Manager will approve each FASP for the OCFS custody youth and the other family members in the case as a single integrated assessment and service plan. Approval of the FASP by the case manager will occur in the appropriate sequential order after the OCFS/DRS worker has approved the FASP. In these cases the following rules/actions will occur:

- OCFS retains legal custody and programmatic case management responsibility, including approval of the assessment and service plan for youth in OCFS custody placed in voluntary agencies;
- the social services district is responsible for the case management of the family case;
- the voluntary agency will continue to provide direct care and services to the youth and family that support the appropriate permanency goal, as well as perform the Case Planner or Associated Caseworker role which includes documentation of the assessment and service plan;
- OCFS is responsible for maintaining continuous legal authority for the custody and placement of the youth, including the filing of timely petitions for the extension of placements and permanency hearings, and for monitoring that court orders contain “best interests” and “reasonable efforts” language;
- the social services district is responsible for all legal and court activities related to the respective child welfare case, including, but not limited to, permanency hearings or Article 10 proceedings related to the family case;
- the legal and procedural methods that govern how youth in OCFS custody are placed into, transferred between, and discharged from voluntary agencies remains the same;
- OCFS will continue to submit an application for Title IV-E, MA and TANF-EAF determinations to the fiscally responsible social services district as well as the Common Application form, Verification of Assistance form, Household Economic Profile, court orders and WMS screen prints. Note: if OCFS is unable to obtain the detention remand order from the appropriate OCFS liaison, and it is known that the youth was in detention prior to placement with OCFS, then the social services district must request a copy of such detention remand order from the Family Court or detention facility;
- the social services district having fiscal responsibility will continue to determine funding eligibility, pay the voluntary agencies and claim reimbursement for the appropriate federal and

state shares of the total cost of care based on the applicable funding streams and notify OCFS of the eligibility determination and provide the CIN that has been assigned for each youth if it was not previously known;

- the social services district will continue to open and authorize services in WMS and, until the implementation of Build 19, make legal, movement and LOD entries into CCRS. The social services district will continue to ignore CCRS Plan cues; and
- until Build 19, the social services district will continue to notify OCFS within 60 days when Title IV-E and/or MA re-determinations are due. OCFS will submit needed re-determination documents to the social services district every 6 months (This will become every 12 months upon final promulgation of the proposed regulations – see Attachment G.)

### **Required Action – Youth in OCFS Custody**

To enable the opening of a Family Services Stage (FSS), it will be necessary for the VA to complete the Family Services Intake (FSI). The FSI will be submitted for acceptance by the voluntary agency to the fiscally responsible social services district. The social services district will stage-progress the FSI to the FSS. The social services district will initiate the WMS Application Registration process from the FSS Stage Composition window in the same manner as for youth placed in the social services district commissioner’s custody.

The social services district Case Manager will assign the “Case Planner” role to the voluntary agency in which the OCFS custody youth is placed and the “Case Worker” role to OCFS/DRS staff. Note: OCFS/DRS staff will retain programmatic/functional case management. If there is joint custody of the youth by the social services district and OCFS, or the social services district has Preventive Services or Foster Care involvement with the OCFS custody youth’s family, the Case Planner role may be assigned to either a social services district worker or to a worker in another a voluntary agency as the social services district, in consultation with the OCFS/DRS worker, determines appropriate. The social services district will assign the OCFS/DRS worker the Case Worker role.

Services planning for OCFS custody youth placed in voluntary agencies will be documented in CONNECTIONS. Voluntary agencies will complete the FASP instead of the UCR templates and will record progress notes in CONNECTIONS. When the Case Planner submits a FASP for approval, the Approval To Do will be simultaneously sent to the Case Planner’s Supervisor, the assigned OCFS/DRS worker and the Case Manager at the social services district. The system will enforce that the approvals occur in the order of Case Planner’s Supervisor, OCFS/DRS worker and Case Manager. Voluntary agency staff will schedule and document Service Plan Reviews through CONNECTIONS (see Impact Analysis – Service Plan Reviews).

1. Each social services district should consider designating a specific person within its CONNECTIONS Intake unit to receive FSIs for OCFS custody youth placed in voluntary agencies that are submitted for acceptance in order to expedite timely opening of the FSS and WMS case. This name should be shared with appropriate agency and OCFS staff.
2. Voluntary agencies should document on the FASP narrative who the OCFS contact person is for this child and if different, which OCFS staff person should be assigned the role of “Case Worker” for this case.
3. The social services district should consider whom it wishes to be assigned the role of Case Manager in the CONNECTIONS case. 04-OCFS-ADM-02 recommends that WMS case

management be assigned to the social services district staff acting as the liaison to OCFS for eligibility purposes. This person would need to be trained in CONNECTIONS Build 18.

4. The social services district should maintain a current list of the specific OCFS/DRS staff person(s) who will be assigned the role of “Case Worker” for its respective social services district.
5. Where the social services district maintains custody of the OCFS youth placed in a voluntary agency and/or maintains a Preventive Services or Foster Care case involvement with the OCFS custody youth’s family, the social services district and OCFS/DRS staffs assigned to the case should jointly determine which entity (social services district or voluntary agency) is assigned “Case Planner.”

**N. Changes to Investigation Conclusion Closure Reasons**

With the implementation of Build 18, Closure Reasons on the Investigation Conclusion window will be revised to more accurately reflect the outcome of the Investigation Stage. As seen in the attached chart, there is not always a direct match between the old and new reasons, but the revised reasons are easy to understand and will simplify the selection of the appropriate closure reason. Closure reasons continue to be linked to the determination of the investigation. Both Unfounded and Indicated Closure Reasons have been revised; the reasons for not opening a case for services are clarified. The “open for services” reasons are streamlined. There is only one open reason for unfounded determinations (Case open – Services) and only two for indicated determinations (Case open – CPS required, Case open – CPS not required). If there are ongoing child welfare issues requiring the continued assessment of safety and risk with a child protective focus, the worker must select ‘Case open – CPS required’. If there are no identified safety or high-risk issues at the time of determination, the worker may select ‘Case open – CPS not required’. If a worker is unsure of the correct closure reason to choose, he or she should consult the worker’s supervisor to discuss the safety and risk issues in the case.

<b>Pre-Build 18 Closure Reason</b>	<b>Build 18 Closure Reason</b>
<b>Unfounded</b>	<b>E. Unfounded</b>
<b>Determinations</b>	<b>Determinations</b>
Close - No credible evidence	Closed - No services required OR Closed- Refused services OR Closed- Unable to contact/moved out of jurisdiction
Close - Unable to contact	Closed – Unable to contact/moved out of jurisdiction
Open – Court ordered services	Case open - Services
Open - Court ordered supervision	
Open – Voluntary services	
Open – Voluntary placement	
Open – Court ordered placement	
<b>Indicated</b>	<b>Indicated</b>
<b>Determinations</b>	<b>Determinations</b>
Close – Refuse service/unable to take legal action	Closed – Services refused/unable to take or continue legal action

Close – No services required	Closed – No services required
Close – Lost Contact	Closed – Unable to contact/moved out of jurisdiction
Close – Only child died	Closed – No surviving children
Open – Court ordered services	Case open – CPS required OR Case open – CPS not required
Open - Court ordered supervision	
Open – Voluntary services	
Open – Voluntary placement	
Open – Court ordered placement	

Selection of any ‘Case open’ reason will create an FSI and pre-fill demographic data. Selection of ‘Case open – CPS required’ in an indicated investigation will automatically generate the Program Choice of Protective for all children in the open FSS (provided that they are not a “tracked child” in another case). The programmatic function of CPS Worker/Monitor must be fulfilled when there is a Program Choice of Protective and services are being provided by someone other than a CPS worker. Please refer to Section D.5 – CPS Monitoring of this ADM.

Unlike the rest of Build 18 implementation that occurs in waves, the *Closure Reasons in Investigation Conclusion will change for all districts as soon as the first district is implemented.* All CPS workers will select from the new Build 18 Closure Reasons upon implementation of wave 1. However, selection of ‘Case open’ will system generate a *Family Services Intake only in districts that are implemented.* Primary workers in an *implemented* social services district who are concluding an investigation will see the message “This is a build 18 implemented Investigation Conclusion” at the top of the Investigation Conclusion window. (This message is a tool to aid staff at the help desk distinguish between implemented and non-implemented districts; it will no longer display after all districts have been implemented).

- During the wave 1 implementation period, there are instances, connected with saved or pending investigations, where a CPS worker might have to select a new Closure Reason from the revised Build 18 list. This affects all workers, regardless of whether Build 18 has been implemented in their social services district. If an Investigation was Pending Approval before the date of wave 1 Build 18 implementation, the Investigation Conclusion window will contain the pre-build 18 Closure Reasons. If the pending Investigation is then rejected, when the Investigation Conclusion window is opened, the selected pre-build 18 Closure Reason will be displayed *but will be red to indicate an error condition.* The worker must then click on the Closure Reason field and select a Build 18 Closure Reason from the revised list in the drop-down box.
- If an Investigation was Pending Approval before the date of Build 18 implementation and the Pending Approval status was invalidated by a worker opening the Investigation Conclusion window in Modify mode, the worker needs to select a Build 18 Closure Reason from the revised list in the drop-down box.
- Pending Investigations with a pre-build 18 Closure Reason can be approved. If a pending Investigation Conclusion with a pre-build 18 Closure Reason is approved in an implemented district, the pre-build 18 Closure Reason will be used to create an FSI Stage. Since there is no pre-build 18 closure reason equivalent to ‘Case Open - CPS Required,’ the protective program choice will not be system-added to the FSS for these children. Workers will need to add the protective program choice if appropriate.

- If an Investigation Conclusion has a pre-build 18 Closure Reason saved *but not submitted for approval* before Build 18 implementation, then upon wave 1 implementation, the selected Closure Reason will be displayed in red and a Build 18 Closure Reason must be selected before it can be submitted for approval.

### **Required Action: Changes to Investigation Conclusion Closure Reasons**

All CPS workers statewide must use the revised Closure Reasons in Investigation Conclusion upon wave 1 Build 18 implementation.

CPS workers must select the ‘Case open – CPS required’ Closure Reason if there are ongoing child welfare issues requiring the continued assessment of safety and risk.

After Build 18 implementation of wave 1, CPS workers must select a Build 18 Closure Reason if a pending investigation with a pre-build 18 reason is rejected, or if a pre-build 18 Closure Reason was saved *but not submitted for approval* before wave 1 implementation.

If a pending Investigation Conclusion with a pre-build 18 Closure Reason is approved, workers must add the program choice ‘protective’ to the FSS, as the system will not automatically do so.

The programmatic function and responsibilities of CPS Worker/Monitor must be fulfilled when there is a Program Choice of Protective and services are being provided by someone other than a CPS worker.

### **O. CONNECTIONS Final Regulations**

Recently promulgated OCFS regulations, effective January 26, 2005, regarding the implementation and administration of the CONNECTIONS system impose requirements upon social services districts, voluntary authorized agencies and other private agencies that provide child welfare services in a new 18 NYCRR Part 466 as follows:

- require mandatory use of the CONNECTIONS system upon issuance of this Administrative Directive (ADM) and the OCFS implementation schedule; the Build 18 application is mandatory as each social services district and agency is implemented according to the schedule (see Attachment A);
- set forth prescribed confidentiality requirements and reinforces existing requirements for access to and disclosure of confidential information;
- require social services districts and agencies with access to CONNECTIONS to develop and implement policies and practices to maintain confidentiality of individual identifying information contained in the CONNECTIONS system, including taking disciplinary action against any employee who fails to comply with the confidentiality standards referenced in these regulations;
- set forth retention sealing and expungement requirements and amend other sections of OCFS regulations with regard to retention, sealing and expungement of records (see section III. B.);
- establish the requirements for security planning including: equipment and other physical resources, software and data security, telecommunications, personnel access, contingency planning regarding service interruption, emergency or disaster preparedness, security management and coordination, and security reviews; and
- establish loss and theft reporting procedures.

These regulations became effective January 26, 2005. A copy is attached to this ADM as Attachment F.

**P. Proposed regulatory Amendments: Standards for Uniform Case Records (18 NYCRR Part 428, et.al)**

OCFS has drafted proposed regulations that substantially amend standards for Uniform Case Records (18 NYCRR Part 428) to reflect the practice improvements supported by the CONNECTIONS system in Build 18. OCFS has already promulgated several sets of regulations aimed at implementing the safety, permanency and well-being provisions of ASFA and corresponding State law. The amended Standards for Uniform Case Records continue this effort, and utilize the discretion that ASFA affords states to promote better child welfare practices directed toward child safety and expediting permanency outcomes. The amendments were crafted after much consultation with child welfare providers during ASFA implementation and again during CONNECTIONS design. The proposed regulations stream-line case recording so that only key components are specified. Under this approach, the CONNECTIONS system demonstrates the decisions and documentation requirements, rather than the regulations detailing each decision and documentation requirement. Reference to the "form and manner" provided by the CONNECTIONS system is used in the proposed regulations, as that system will continue to guide workers through decision-making and documentation requirements.

The proposed regulatory changes include: requiring a new safety assessment at key points in the casework process and a new research based risk assessment, additional questions pertaining to children in foster care designed to expedite an alternative permanent discharge outcome if a child cannot return to his or her family of origin, and questions posed to facilitate the documentation that a petition to file for termination has been filed for a child in care for 15 of the most recent 22 months, or, alternatively, that the petition should not be filed because of an ASFA authorized exception.

The proposed regulations are designed to focus assessments to enable clear decision-making about services that will allow a child to remain safely at home, return home sooner and avoid replacement in foster care after discharge. Furthermore, once a child is placed in foster care, the proposed regulations are designed to focus on providing a permanent placement for each child.

Finally, a process for access to both medical and non-medical foster care information for non-adopted, former foster children is proposed in these regulations for this same purpose.

A copy of these regulations is attached to the ADM as Attachment G. The regulations have been approved for filing for public comment. They will appear in the State Register on March 2, 2005.

**Q. Model Contract for Purchase of Foster Care Services**

A revised model contract for social services district purchase of foster care will become effective upon implementation of CONNECTIONS Build 18 in the social services district. The revised model contract reflects the changes in business practice and procedures required by CONNECTIONS Build 18 implementation. It provides a uniform statewide standard to support compliance with State and federal regulatory requirements, including the requirements of the recently promulgated CONNECTIONS regulations, the proposed regulatory amendments for uniform case records and family assessment and

service plans, and the new Chafee requirements for Independent Living. In addition, the revised model contract provides the basis for social services districts to claim State and federal financial participation in their foster care programs. The model contract will be revised again with the implementation of CONNECTIONS Build 19. This revised model purchase of foster care services contract replaces the model issued by 88 ADM-28 and the amendment issued as 95 ADM-7.

Schedule A of the Agreement for Purchase of Foster Care includes a narrative of agency and program services and identifies the maintenance, medical, and education reimbursement rates that will be paid under the contract. Schedule B of the Agreement contains a listing of requirements that must be accomplished and identifies if the social services district (referred to as the Department) or the agency with case planning responsibility or the agency of the associated Case Worker is responsible for these. A copy of the revised Model Contract for Purchase of Foster Care is attached to this directive as Attachment C.

### **Required Action: Model Contract for Purchase of Foster Care Services**

Social services districts must modify their foster care services and maintenance agreements to follow the revised model contract format.

- The revised model contract must be in use by the first day of Build 18 implementation in the social services district and employed thereafter until further notice. However, those districts that have contracts currently in effect that extend beyond the date of Build 18 implementation may continue to use those agreements in effect until the agency is fully implemented. Those districts that have contracts currently in effect that will expire before the date of Build 18 implementation may extend the current contract until the implementation date.
- The duration of the agreement must not exceed twelve (12) months.
- The model contract is to be used for all foster care services that are purchased.
- Schedule A, Program Narrative and Reimbursement Rates, must be completed by the Agency and approved by the Social Services District.
- Schedule B, the Options chart, must be completed by the Social Services District to identify the responsible party for each of the listed requirements.

#### **IV. Systems Implications – Build 19 Functionality**

CONNECTIONS Build 18 implements fundamental family services case management functionality: Family Services Intake, Family Services Stage, Family Services Stage Composition, Family Assessment and Service Plans, Progress Notes, Service Plan Review, Key Dates, and Case Summary. It sets the foundation for Build 19.

Build 19 will expand this case management functionality and provide financial management support for FSS. Build 19 financial management automates payments and funding eligibility determinations and will establish a finalized adoption record (FAR) for the purpose of automating subsidy payment and documenting post adoption services.

In Build 19 there will be a separate health services component for documenting essential health information and a health narrative tab. Enhanced security around health information will include a unique BF that provides specific access. It must be assigned to staff who do not have a role in the case

(such as nurses or health care coordinators in voluntary agencies) in order for them to view or maintain a child's health information. Otherwise, only the caseworker associated to the child, the case planner, the case manager and their respective supervisors may view health information. In order to enhance confidentiality of health information, there will be no access permitted through implied role in a case and no access across agencies that share a case, as is generally permitted for non-health related information. Specific confidentiality statements will also be included on each page of health information data when it is printed out and warnings regarding confidentiality of the information will be provided when entering the health module and its various tabs.

In addition, Build 19 will implement the following CONNECTIONS functionality:

#### Case Management

- **Placement**, including referral, search, activities, and removal.
- **Interstate Compact for Placement of Children (ICPC)**, incorporates ICPC tracking into CONNECTIONS which allows for centralized processing and recording of ICPC activities. Build 19 will support outgoing ICPC requests, the production of 100A and 100B forms, and the collection of medical and financial (including Title IV-E) information.
- **Adoption**, including photolisting, adoption subsidy, and adoption milestones.
  - Enhanced secure access when necessary to closed CCRs *across districts and agencies* through a new BF, "Access Adoption/Sibling Links." OCFS will control social services district and agency assignment of this BF in order to protect the confidentiality of sealed adoption records.
- **Health Services**, recording of essential health information for all children in foster care, clinical appointments, early intervention services for children under the age of four, family member health information, HIV Risk Assessment information, and special security, as described above, to provide for the confidentiality for health related information.
- **Education**, recording of educational information for all children in foster care, school district, history, and individual education plans (IEP).
- **Legal Activities**, are associated by track for each child. Tracks are recorded to document activities associated with Article 10 (Abuse/Neglect), Article 7 (PINS), Article 3 (JD), and voluntary placements. Petitions and hearings are documented by date and outcome/disposition. Termination of Parental Rights and surrenders are recorded, as is the status of legally free for adoption. The Funding Eligibility module will use certain legal activities for the purpose of Title IV-E determinations.
- **External Documentation**, support for tracking case documentation that is maintained outside of CONNECTIONS, for example: birth certificates, medical reports and court orders.
- The system will accommodate use of an alternative OCFS approved assessment and service plan (**Model of Practice Purchase Preventive – MOPPP**), completed outside of CONNECTIONS in lieu of the FASP, for preventive services purchased from a public agency or for a private voluntary agency that uses an alternative evidence-based model of practice. This will be permitted only by waiver and must be approved by OCFS.

#### Financial Management

- **Service Authorization**, supports request, approval, and payment for goods and services to clients in an FSS

- **Funding Eligibility**, provides funding eligibility determinations for the following areas: Title IV-E foster care, Title XX under 200% of Poverty, Emergency Assistance for Families (EAF), Title IV-E Adoption Assistance and State Adoption Subsidy, Medical Assistance for foster and adopted children. It includes Automated Budget Eligibility Logic (ABEL) to allow review of AFDC based on July 16, 1996 standards and automates the application of income rules based on the relationship matrix. It will support and provide cues consistent with the proposed State regulatory change of the period for re-determining Title IV-E foster care from every six months to every 12 months, conforming to the federal time limit.
- **Interfaces** – WMS Services and Non-Services (upstate and NYC); Medical Assistance (Title XIX Medicaid); Benefits Issuance and Control System (BICS); Title IV-D Child Support Enforcement (CSMS), including Putative Father Registry (PFR) and Federal Parent Locator Service (FPLS); Welfare Reporting and Tracking System (WRTS), and to the Data Warehouse.

#### Conversion

Data conversion for each social services district will be part of the phased rollout of Build 19. Services data maintained in Upstate WMS (service authorizations, adoption subsidy, placements, eligibility), CCRS (legal, movement and adoption activities, and LOD information), and BICS (adoption subsidy level of difficulty) will be converted into open Family Services Stages or Finalized Adoption Record (FAR) stages.

#### V. Training and Support

A comprehensive package of training, reference materials, and on-site technical assistance is available to support implementation of CONNECTIONS Build 18. As previously mentioned, Build 18 will be implemented using a phased approach over the course of one year to allow for increased levels of training and on-site technical support for workers.

Prior to Build 18 implementation, OCFS regional forums were conducted for social services district and agency staff on Build 18 new functionality and related practice changes. Regional Office Field Staff have been working closely with districts and agencies over the past year to provide technical assistance and assist with preparation for implementation.

Training for Build 18 will be provided in a series of instructor led and computer lab courses that includes a minimum of 2 days of Case Management Policy/Practice Training for all Child Protective and Child Welfare staff, 1½ days of CONNECTIONS System Training for Child Protective staff and 2½ days of CONNECTIONS System Training for Child Welfare staff. This training is essential for all caseworker and supervisory staff prior to implementation. In addition to the program and application courses that apply to all users, there are specialized courses for workers with specific needs, such as new users of CONNECTIONS, supervisors and resource workers.

Pre-registration is required for all courses. Social services districts and agencies are encouraged to use the online STARS system for their registration needs. Questions concerning the first course in the series, *CONNECTIONS Build 18: Case Management Model Training*, should be directed to Marje Sciolino at the Center for the Development of Human Services (716-876-7600). To register for this course, agencies should complete all information on the registration form provided with their training announcement. Copies of the form may be obtained by contacting Marje Sciolino. Fax completed registration forms to the CDHS Registration Fax Line (716-796-2202) or call the main number (716-

876-7600) and ask for Registration Services. For questions or assistance regarding all other courses in the series, please contact the SUNY Training Strategies Group by calling toll-free at 1-877-451-4835 and ask for a CONNECTIONS representative.

Along with the instructor led training, OCFS is also providing a comprehensive, Step by Step Guide to all of the Build 18 case management functionality, a shorter, Quick Start Guide, and detailed, online help available from within the CONNECTIONS application, and the CONNECTIONS ‘Introduction to Child Welfare Case Management Practice’ CBT. This CBT is designed for child welfare users who are new to the CONNECTIONS system and need to learn CONNECTIONS basic functionality as part of their new worker orientation. The content focuses on orienting staff to basic CONNECTIONS concepts and familiarizing them with Toolbar functionality, Assigned Workload, Task List, and the basics of Search. To obtain a copy of this CBT, please contact the SUNY Training Strategies Group by calling toll-free at 1-877-451-4835. Release notes will be distributed via e-mail, providing a more technical overview of the elements in Build 18.

Prior to each wave implementation, a Preview of Build 18 will be available for social services district and agency use to help workers gain familiarity with the system.

***Please note: The Build 18 Preview will allow printing of a completed and approved FASP. The printed copy may be retained in the case record in lieu of completion of the appropriate UCR template.***

On-Site Implementation Support will also be available. The on-site support staff, comprised primarily of Contractor Implementation Specialists, will assist users who, after completing CONNECTIONS lab-based training, require additional “hands-on” assistance to navigate through the system and complete required tasks. Implementation support staff will assist users in the following ways:

- Working side-by-side with newly trained district/agency workers and assisting them in working competently within the system;
- Identifying and troubleshooting technical and program problems/issues and escalating them for resolution if they cannot be resolved on-site; and
- Interpreting instructional materials and job aids to assist users in comprehending and competently completing CONNECTIONS tasks.

OCFS has developed a series of Case Management Impact Analysis documents that will help districts and agencies prepare for the changes contained in CONNECTIONS Build 18. These Impact Analysis documents, which are organized around work processes impacted by the new design, have been distributed to Directors of Services and CONNECTIONS Implementation Coordinators and are posted on the CONNECTIONS website.

Additional aids are available through the CONNECTIONS website including:

- CONNECTIONS Build 18 Job Aids;
- Overview of CONNECTIONS Build 18 Case Management
- CONNECTIONS Build 18 Self Assessment
- CONNECTIONS Guide for Business Process Review and Analysis in Preparation for Build 18 Case Management
- CONNECTIONS Build 18 Resource Guide for Managers

- CONNECTIONS Case Management Issue Briefs.

## **VI. Effective Date**

Information contained in this release becomes effective upon the date of implementation of CONNECTIONS Build 18 in the social services district and voluntary foster care or contract preventive agency according to the schedule in Attachment A or upon a revised schedule if issued by OCFS. The changes to CPS investigation conclusion closure reasons, discussed in section III O of this release, become effective statewide upon the implementation date of wave 1.

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### **Issued By:**

Name: Nancy W. Martinez

Title: Director

Division/Office: Strategic Planning and Policy Development

# Draft 2/14/05

## Attachment A: CONNECTIONS Build 18 Implementation Wave Schedule

Wave / Day 1	District	Program / Agency Name	Code
<b>Field Test</b>	Oswego	Catholic Charities of Syracuse/Oswego	C02
12/13/04		Liberty Resources	IMK
		Oswego County Opportunities Inc	C25
<b>1 and 2</b>			
2/28/05	Oswego	Catholic Charities of Syracuse/Oswego	C02
		Liberty Resources	IMK
		Oswego Opportunities, Inc	C25
3/21/05	Cayuga	Berkshire Farm	P33
	Cortland	George Junior Republic, Inc	W15
	Onondaga	Tompkins County YAP	SF4
	Tompkins	Catholic Charities of Syracuse/Cortland	C21
		Cayuga Home For Children	W03
		Toomey Residential & Comm Svcs	C06
		Elmcrest Children's Center	C08
		Arise Child & Family Svcs	C15
		Salvation Army Syracuse	C17
		Cayuga Counseling Services	W02
		Partnership for Results	
		Youth Advocacy Program	
<b>3</b>	Chemung	Catholic Charities Broome County	C01
4/11/05	Steuben	Children's Home Wyoming Conf	C14
	Broome	YAP of Broome County	SF4
	Chenango	Catholic Charities Southern Tier	I84
	Madison	Glove House, Inc	W05
	Tioga	Catholic Charities Chenango	C18
	Schuyler	KidsPeace of NY	W47
	Seneca	Kinship Family & Youth Services	W11
	Yates	New Life Homes/Snell Farms	W18
	Livingston	Family Service Society	S22
	Ontario		
<b>4</b>	Monroe	Strong Memorial Hospital	S01
4/11/05	Wayne	Lifetime Assistance Inc	IT2
		Family Service of Rochester	S08
		Monroe County Office of Probation	SD8
		Rochester Society for the Prevention of Cruelty to Children	SD9
		Mt. Hope Family Center	SG6
		Catholic Family Center	W01
		Crestwood Children's Center	W04
		Hillside Children's Center	W09
		St Joseph's Villa Of Rochester	W14
		Ibero-American Action League	W32
		Urban League Of Rochester	W33

<b>5</b>	Erie	Charlee Catt Community Action	T34
4/25/05		Gustavus Adolphus	T11
		Buffalo Urban League	Q90
		Community Services for Dev Disabled	SF8
		Transitional Services Inc	IIA
		Baker Victory	T01
		Catholic Charities Buffalo	T03
		Child & Family Services Erie	T07
		Gateway/Longview, Inc.	T10
		Hopevale, Inc	T12
		Hispanic United of Buffalo	SJ1
		Compass House	T23
		Native American Community Services	T24
		St Augustine's Center, Inc	T25
		Kids Peace Nat Ctrs Kids Crisis	T27
		YWCA of Western NY	D10
		Joan A. Male	SG1
		Child and Adolescent Treatment Services	SG3
		Salvation Army of Buffalo	SG1
<b>6 (West)</b>	Allegany	New Directions	T20
4/25/05	Cattaraugus	Community Mission, Inc	T41
	Chautauqua	Family and Children Services of Niagara	IPR
	Genesee	Cattaraugus Community Action	T34
	Niagara		
	Orleans		
	Wyoming		
<b>6 (East)</b>	Herkimer	Upstate Home For Children	905
5/16/05	Jefferson	New York School For Blind	IND
	Lewis	Children's Home Jefferson County	C07
	Oneida	Mountain Lake Children's Residence	M48
	St. Lawrence	Neighborhood Center	SF1
	Clinton	Saint Francis Academy	M03
	Essex	Victim Assistance Center of Watertown	SJ4
	Franklin	House of Good Shepherd	C12
	Hamilton	Kids Oneida	SJ2
	Montgomery	YAP of Jefferson County	SF4
	Otsego	YAP of St. Lawrence County	SF4
	St Regis		
	Herkimer		
<b>7</b>	Albany	Hispanic Outreach Services	SD5
5/16/05	Fulton	Parsons Child & Family Center	M04
	Rensselaer	La Salle School, Inc	M16
	Saratoga	St Anne Institute	M20
	Schenectady	St Catherine's Ctr Children	M21
	Warren	St Colman's Home	M22
	Washington	Equinox, Inc	M27
		Community Maternity Services	M28
		Center For Family & Youth	M46
		Trinity Institute	S78
		Rehab Support Svs - Compeer for Kids	
		Vanderheyden Hall	M24
		Transitional Svs Kaydeross	C45
		Charlton School	M11

		Catholic Fam & Comm Svs Saratoga	M33
		Schenectady Comm Action Pgm	M31
		Northeast Parent and Child Soc	M40
		Carver Foster Care Prevention	SD4
		Child Program and Family Resource Center	SD3
<b>8</b>	Columbia	Columbia Greene MH Association	
6/6/05	Delaware	Anderson School	901
	Greene	Children's Home Poughkeepsie	F02
	Schoharie	Dutchess County Community Action	
	Dutchess	Astor Home For Children	N14
	Orange	Occupations/Family Counseling, Inc.	
	Putnam	McQuade Children's Services	F03
	Rockland	Summit Children's Residential Ctr.	R13
	Sullivan	Family Of Woodstock	C11
	Ulster	Children's Home Of Kingston	F01
		Mental Health Assn/Ulster	IJC
		St John Bosco	IVA
		St Cabrini Home, Inc	N13
<b>9</b>	Westchester	Broadhurst-Center Corporation	I45
6/6/05		Four Winds Katonah	II5
		Family Service Of Westchester	R01
		Julia Dyckman Andrus Memorial	R14
		Yonkers Residential Center	R21
		The Lexington Center for Recovery	
		Urban League	SA7
<b>10</b>	Nassau	Nassau County Probation	D37
7/18/05	Suffolk	Regina Maternity Services Corp	R12
		Family & Children's Association	R15
		Leadership Training Institute	R22
		Nassau Coalition on Child Abuse and Neglect	SG7
		Maryhaven School	904
		Hope For Youth, Inc	R06
		Timothy Hill Children's Ranch	R24
		Lake Grove School	R30
		LI Adolescent & Family Services	R36
		Madonna Heights Svcs/mer St Ch	U10
		Awixa Home Inc	U70
		Downey Side, Inc.	U59
<b>11</b>	ACS	Manhattan Office of Field Services	072
8/8/05		Manhattan Family Preservation Program	072
		Office of Confidential Investigation	072
		ACM CES/Intake/MILS/Transfer	ACM
		DCCS Intake/MILS/Transfer	DCCS
		OCACM CES/Intake/MILS/Transfer	OCM
		Management Information Systems	MIS
		Voluntary Agencies IT	VA
		New Alternatives for Children, Inc.	700
		St. Vincent's Services	B04
		St. Christopher-Otilie	B06
		Jewish Child Care Association	J10
		Jewish Board of Family and Children Services	J70
		Cardinal McCloskey	N01

		New York Foundling Hospital / St. Agatha	N03
		St. Dominic's Home	N05
		Catholic Guardian Society - NY	N07
		St. Cabrini	N13
		Astor Home	N14
		Good Shepherd Services	N40
		St. Christopher Inc.	P11
		Children's Village	P12
		Inwood House, New York City	P23
		Ohel Children's Home and Family Services Inc.	U11
12	ACS	Heart Share Human Services of New York	B05
9/26/05		Mercy First (formerly Angel Guardian/St. Mary's)	B07
		St. John's Residence for Boys	B09
		Boys Harbor, Inc	I43
		East Harlem Council for Community Improvement	IQQ
		Catholic Home Bureau	N04
		Pius XII School	N06
		Forestdale, Inc.	P01
		Brooklyn Bureau of Community Service	P02
		Graham-Windham Services to Families and Children	P04
		Society For Seaman's Services	P14
		Edwin Gould Services for Children	P15
		Lakeside Family and Children Services	P16
		Salvation Army Social Services for Children	P18
		Episcopal Social Services	P27
		Builders for the Family and Youth of the Diocese of Brooklyn	S09
		Day Care Council of New York, Inc.	S27
		Family Consultation Service Diocese of Long Island	S33
		Hellenic American Neighborhood Action Committee In	S42
		Lower East Side Family Union	S45
		New York Urban League	S51
		Protestant Board of Guardians Youth Guardian Service	S54
		Puerto Rican Family Institute	S57
		Harlem Children's Zone, Inc. (formerly Rheedlen Foundation)	S60
		Steinway Child and Family Services, Inc.	S63
		Staten Island Mental Health Society	S66
		Highbridge Community Life Center	S70
		Bronx Lebanon Hospital Center	S72
		Little Sisters of the Assumption Family Health Service	S74
		Dominican Sisters Family Life Program	S80
		Kingsbridge Heights Community Center	S81
		SCAN New York	S82
		Partnership with Children (formerlyThe Big Sisters Inc.)	S84
		Child Development Support Corporation	S85
		Community Counseling & Mediation	S86
		Chinese-American Planning Council	S88
		Women's Prison Assoc. & Home Inc.	S91
		St. Lukes-Roosevelt Hospital - First Step Program	S94
		Visiting Nurse Services, Harlem Hospital	S95
		Brooklyn Community Counseling and Mediation	S96
		Queens Child Guidance Center	S97
		Southern Queens Park Association	S98
		Fordham-Tremont Community Mental Health Center	S99

		Neighborhood Youth & Family Services	SA1
		Family Support Systems Unlimited, Inc.	SA4
		Alianza Dominicana, Inc.	SB3
		Northside Center for Child Development Inc.	SB5
		Flatbush Haitian Center, Inc.	SB6
		United Activities Unlimited, Inc.	SC5
		Sesame Flyers (formerly New Perspective Carnarsie)	SC6
		Cypress Hills Local Development Corp.	SC7
		Church Avenue Merchant's Block Association	SC8
		Chinatown YMCA Family Support Program	SC9
		Citizens Advice Bureau	S11
		Big Brothers & Sisters of New York City	S12
		Pathways for Youth, Inc	S13
		New World Communities	S14
		North Manhattan Perinatal Partnership	S15
		Arab-American Family Support Center	S16
		New York City Mission Society	S17
		Dominican Women's Development Center	S18
		The Center for Children and Families Inc. / Safe Space	U12
		Brooklyn SPCC	U13
		Green Chimney's	U15
		Martin DePorres Group Homes	U17
		Coalition for Hispanic Family Services	U30
		Concord Family Services/Senior Citizen Housing Development Fund	U31
		Association to Benefit Children/Variety House	U61
<b>13</b>	ACS	Brooklyn Division of Child Protection / FPP	071
10/24/05		Queens Division of Child Protection / FPP	073
		Little Flower Children's Services	B08
		Lincoln Hall	N11
		Rosalie Hall	N23
		Sheltering Arms Children's Services	P03
		Abbott House	P10
		Leake and Watts	P13
		Lutheran Social Services of Metropolitan New York Inc.	P31
		Community Mediation Services, Inc.	S96
		The Valley Inc.	SC1
		Children's Aid Society	U02
		Harlem-Dowling Westside Center for Children and Family Services	U14
		Miracle Makers	U53
<b>14</b>	ACS	Bronx Division of Child Protection / FPP	070
11/21/05		Staten Island Division of Child Protection / FPP	074
		Pre-Placement	072
		Bronx Direct Foster Care Services	800
		Brooklyn Direct Foster Care Services	801
		Queens Direct Foster Care Services	802
		Direct Care Adoption	850
		Direct Congregate Care Services-Bronx	811
		Direct Congregate Care Services-Queens/Manhattan	812
		Direct Congregate Care Services-Brooklyn	813
		Direct Congregate Care Services-Crossroads	814
		Direct Congregate Care Services-Ashford Brooklyn	815
		Direct Congregate Care Services-Transitional Centers	816

		Agency Program Assistance	APA
		Accountability Review Panel (ARP)	DLS
		Parent Recruitment Evaluation and Permanency	PREP
		Office of Management Research and Evaluation	OMR
		Office of Quality Improvement	QI
		Third Party Review	TPR

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### Attachment B: Social services legal citations related to requirements for maintaining records, sharing of information, confidentiality, privacy and re-disclosure of information

- SSL 372. (Records and Reports) relates to children in foster care and adoption:
  - SSL 372.3 requires that records maintained by the OCFS, social services district or agency, regarding foster children are confidential.
  - SSL 372.4 (a) provides that no person shall divulge the information thus obtained without authorization so to do by OCFS or by an order of the Family Court, Court of Claims or Superior Court.
  - SSL 372.8 states that where a child is to be placed with or discharged to a relative or other person legally responsible such relative or person shall be provided with such information by an authorized agency as is provided to foster parents.
- SSL 373-a refers to medical histories and provides that the medical histories of a child legally freed for adoption or of a child in foster care and of his or her birth parents, shall to the extent available,
  - be provided by an authorized agency to such child's prospective adoptive parent or foster parent and upon request to the adoptive parent or foster parent when such child has been placed in foster care or adopted.
  - be provided by an authorized agency to such child when discharged to his or her own care and upon request to any adopted former foster child.
  - include all available information setting forth conditions or diseases believed to be hereditary, any drugs or medication taken during pregnancy by the child's natural mother and any other information, including any psychological information in the case of a child, which may be a factor influencing the child's present or future health.
- SSL 409-e refers to the family service plan required for all children who are identified as being considered for placement in foster care (preventive cases), and each child placed in foster care.
  - SSL 409-e.4 provides that relevant portions of the plan shall be given to the child's parent or guardian, counsel for such parent or guardian, and the child's law guardian within ten days of preparation of the plan
- SSL 409-f refers to uniform case recording and requires that the social services district shall establish and maintain a uniform case record consisting of the assessment, the family service plan, descriptions of care and such other records as OCFS may by regulation require to adequately review case management by the districts.
- SSL 422.4(A) refers to reports made to the SCR for abuse and maltreatment, that these reports remain confidential, and to whom information may be made available and under specified circumstances.
  - SSL 422.4 (A) (c) provides that information may be shared with a duly authorized agency having the responsibility for the care of a child who is reported to the SCR
  - SSL 422.4 (A) (i) provides that information may be shared with a provider agency or a licensing agency as defined in SSL 424-a
  - SSL 422.4(A) (o) provides that information may be shared with a provider or coordinator of services to which a child protective service or social services district has referred a child or a child's family or to whom the child or the child's family have referred themselves at the request of the children protective services or social services district

- when their records, reports, or other information are necessary to enable the provider or coordinator to establish and implement a plan of service for the child or the child's family, or
- to monitor the provision and coordination of services and the circumstances of the child and the child's family, or to directly provide services. Persons or agencies given access to information may exchange such information in order to facilitate the provision or coordination of services to the child or the child's family.
- SSL 422.4(A) provides that information related to the identification of the name or identifying information related to the source or reporter of a report of child abuse or maltreatment may not be released or disclosed to the parties noted above in SSL422.4(A)(o) without the written consent of the reporter or source of the report. However, such persons may give and receive information in order to facilitate an investigation.
- SSL 422-a refers to circumstances and conditions when disclosure of CPS information may occur.
  - SSL 422-a.4 provides that disclosure of information may not include any identifying information relevant to the reporter or source of a child protective report, absent the written consent of the reporter/source
- SSL 422.12 provides that any person who willfully permits and any person who encourages the release of any data and information contained in the SCR to persons or agencies not permitted by this title shall be guilty of a class A misdemeanor.
- 18 NYCRR 357.3 (b) establishes the standards for disclosure of medical information.
  - 18 NYCRR 357.5 addresses procedures for safeguarding information maintained by OCFS, local social services districts and other agencies.
- 18 NYCRR 428 establishes standards for all uniform case records and child service plans
  - NYCRR 428.15 establishes general social services district requirements
    - 18 NYCRR 428.15 (a) addresses records and reports
    - 18 NYCRR 428.15 (b) addresses purchase of service agreements
- 18 NYCRR Part 466 applies to the implementation and administration of the CONNECTIONS system
  - NYCRR 466.4, 5 and 6 specifically addresses confidentiality, sealing and expungement of records and security

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### Attachment C: CONNECTIONS / Permanency Planning Goals (PPGs) Mapping Guide

Permanency Planning Goals (PPGs) will be changed in CONNECTIONS to conform to AFCARS goals. Since workers will need to record PPGs in both CCRS and the CONNECTIONS case management system until the implementation of Build 19, this mapping guide is provided to assist workers.

Current CCRS PPG	New CONNECTIONS PPG
01 Discharge to Parents	1a – Return to Parent [Parent]
	1b – Return to Parent [Non-Parent Caregiver]
04 Discharge to Adoption	2a – Placement for Adoption [Upon filing Petition to Terminate Parental Rights]
	2b – Placement for Adoption [Upon Voluntary Surrender]
02 Discharge to Primary Resource Person	3a – Referral for Legal Guardianship/Custody [Relative]
	3b – Referral for Legal Guardianship/Custody [Non-Relative]
12 Discharge to Relative	4 – Placement with a fit and willing Relative [Non-Guardianship/Non-Custodian]
03 Discharge to Independent Living	5a – Place in another planned living arrangement [Discharge to Independent Living] <i>Note: May use only if the social services district has documented a compelling reason why goals 1-4 would not be in the child's best interest.</i>
10 Independent Living Unaccompanied Refugee Only	5b – Place in another planned living arrangement [Independent Living – Unaccompanied Refugee Only] <i>Note: May use only if the social services district has documented a compelling reason why goals 1-4 would not be in the child's best interest.</i>
05 Discharge to Adult Residential Care	5c – Place in another planned living arrangement [Discharge to Adult Residential Care] <i>Note: May use only if the social services district has documented a compelling reason why goals 1-4 would not be in the child's best interest.</i>
06 Prevent Placement	6 – Prevent Placement
07 Prevent Return to Placement	7 – Prevent Return to Placement
11 Protect Child	8 – Protect Child

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### Attachment D: Model Contract for Purchase of Foster Care

#### AGREEMENT FOR PURCHASE OF FOSTER CARE FOR CHILDREN

This AGREEMENT made this \_\_\_ day of \_\_\_\_\_, 20 \_\_\_,  
by and between the County of \_\_\_\_\_ through the \_\_\_\_\_ County Department of Social  
Services, hereinafter called the Department, located at \_\_\_\_\_, \_\_\_\_\_, New York  
\_\_\_\_, and \_\_\_\_\_

\_\_\_\_\_ hereinafter the Agency, located at \_\_\_\_\_ a foster care  
agency otherwise authorized by the New York State Office of Children and Family Services to provide  
foster care services.

WHEREAS, the Commissioner of Social Services of the County of \_\_\_\_\_, hereinafter  
Commissioner, is charged with the responsibility for the administration of all child welfare services in  
the County of \_\_\_\_\_ pursuant to Section 395 et seq. of Social Services Law; and

WHEREAS, the Agency, under the terms of its corporate authority has the power to provide the  
services required to be performed pursuant to this Agreement, and

WHEREAS, the Department believes that the amount of funds to be paid to the Agency is  
reasonable and necessary to provide quality services;

NOW THEREFORE, in consideration of the mutual promises herein contained the Department  
and the Agency mutually agree as follows:

#### SECTION I- DEFINITIONS

Whenever the following terms are used in this Agreement and schedules attached hereto, they have the  
following meaning unless otherwise clearly noted:

1. **ADULT PERMANENCY RESOURCE** means a caring committed adult who has been  
determined by the Department to be an appropriate and acceptable resource for a child and is  
committed to providing emotional support, advice and guidance to the child and to assisting the  
child as the child makes the transition from foster care to responsible adulthood.
2. **AGENCY BOARDING HOME**, as defined in 18 NYCRR 441.2(i) and as described in 18  
NYCRR Part 447, means a family-type home for the care and maintenance of not more than six  
(6) children operated by an authorized agency, in quarters or premises owned, leased or  
otherwise under the control of such agency, except that such a home may provide care for more  
than six (6) brothers and sisters of the same family.

3. **AGENCY WITH DESIGNATED CASE PLANNING RESPONSIBILITY** is the social services district or voluntary authorized agency of the assigned Case Planner.
4. **ASSIGNED ROLE** means the role in the family services stage designated for each case worker in the stage. The assigned role determines worker responsibilities and contract obligations of the worker's Department or Agency. Assigned roles are always initially designated by the Department and include: case manager, case planner, case worker, and child protective services monitor. After a role is assigned to an Agency worker, it may be reassigned to another worker within that Agency.
5. **ASSOCIATED CASE WORKER** is a case worker, other than the case planner for the family, who is responsible for assessment, service provision, and planning for one or more specific child(ren) in the family who are placed in the worker's Agency.
6. **AUTHORIZED AGENCY**, as defined in section 371(10)(a) and (b) of the Social Services Law, includes either a social services district, an Indian tribe that has entered into an agreement with the New York State Office of Children and Family Services to provide foster care, or a corporation organized under the laws of New York State and approved by the New York State Office of Children and Family Services.
7. **CASE INITIATION DATE (CID)** means the earliest of:
  - a. the initial date of application for foster care services, mandated or nonmandated preventive services for children;
  - b. the date that a report to the Statewide Central Register of Child Abuse and Maltreatment is determined to be indicated;
  - c. the date of placement in foster care of a child; or
  - d. the date of a court-ordered preventive services or commitment of care, custody and/or guardianship of a child to a social services district commissioner for placement with an authorized agency or foster parent.
8. **CASE MANAGEMENT** means those activities referenced in 18 NYCRR 428.2(b) related to overseeing all aspects of a case, including but not limited to: the making of timely and accurate eligibility determinations and service authorizations; following procedural safeguards regarding protection of the rights of the parents and child; providing care, maintenance and services appropriate to the child's needs; accepting voluntary placement agreements under appropriate circumstances; timely initiating all appropriate judicial proceedings; approving each family assessment and service plan; and timely and accurate entry of all data required to be entered in the Welfare Management System (WMS), the Child Care Review Service (CCRS), CONNECTIONS and any other Statewide automated child welfare information system designed by the New York State Office of Children and Family Services. Case management is always the responsibility of the Department.

9. **CASE MANAGER** is an employee of the Department with responsibility to authorize the provisions of services, to approve client eligibility determinations according to 18 NYCRR 423.3(b), 430.9, 430.10 and 432.2; and to approve in writing or by electronic equivalent the family assessments and service plans, as defined in 18 NYCRR Part 428. The case manager is responsible for role assignment in the family services stage.
10. **CASE PLANNING** means those activities referenced in 18 NYCRR 428.2(c) necessary for provision, arrangement, coordination and evaluation of the services specified in the child and family's service plan. In addition, case planning includes referring the child and his or her family to providers of services as needed, and delineating the roles of the various service providers. Case planning responsibility also includes documenting client progress and adherence to the service plan by recording in the Uniform Case Record that such services are provided, as required by 18 NYCRR Part 428 and 18 NYCRR 430.9 through 430.12, and making casework contacts or arranging for casework contacts as required under 18 NYCRR 423.2(b)(3), 423.4(c)(1)(ii)(d)(2), 432.2 and 441.21.
11. **CASE PLANNER** is the caseworker with the primary responsibility for providing, or coordinating and evaluating, the provision of services to the family. The case planner delineates the roles of the various service providers and requires collaboration among all the case workers assigned to the family services stage so that a single family assessment and service plan is developed. The case planner is responsible for the family assessment and service plan and its submission to the case manager for approval. There is a single case planner, who may be an employee either of the Department or the Agency, assigned per family services stage. The case manager may be assigned as the case planner and perform the dual roles of case manager and case planner, except for approval of the family assessment and service plan which becomes the responsibility of the case manager's supervisor in this instance.
12. **CASE WORKER** is any additional Department or Agency staff directly involved in a child welfare case who provides services to any family member, or assesses, evaluates, makes casework contacts, and/or arranges or coordinates one or more aspects of service delivery. The case worker contributes to the development of the family assessment and service plan as directed by the case planner. There may be multiple case workers assigned to a family services stage.
13. **CHILD PROTECTIVE SERVICES MONITOR** is an employee of the Department's child protective service who is monitoring services being provided by someone other than a child protective service employee to the children and family named in an indicated report of child abuse or maltreatment.
14. **DEEMED TO HAVE A GOAL OF INDEPENDENT LIVING** is any child sixteen (16) years of age or older who has resided in foster care for at least twelve (12) months within the past thirty-six (36) months and who has a goal of discharge to parents or relatives or adoption. The category "deemed to have a goal of independent living" requires the same services as if the child has a goal of independent living.

15. **DISCHARGE SERVICES** means supervision services and may include the provision of, referral to, or coordination with other appropriate services, when the child has been returned to the home of his or her parents, other relatives, primary resource person or to independent living as described in 18 NYCRR 430.12.
16. **FAMILY ASSESSMENT AND SERVICE PLAN** means the assessment and analysis of the family members' strengths, needs and problems; and the plan for services, as required by 18 NYCRR Part 428.
17. **FAMILY SERVICES INTAKE** means the CONNECTIONS stage for documentation of family information and events prompting the opening of a family services stage. A family services intake must be completed before a family services stage can be opened.
18. **FAMILY SERVICES STAGE** means the CONNECTIONS stage for documentation of cases open for child welfare services. There can be only one (1) open family services stage for a family per social services district. The family services stage is linked to a family case that is comprised of all past and current stages for the family.
19. **FUNDING ELIGIBILITY** means the initial determination of a family's eligibility for foster care services and required periodic re-determinations consistent with provisions of federal and State statutes and regulations, including but not limited to Title IV-E of the Social Security Act.
20. **FOSTER CARE OF CHILDREN** means all activities and functions provided relative to the care of a child away from his or her home twenty-four (24) hours per day in a foster family free home or a duly certified or approved foster family boarding home, or a duly licensed or certified group home, agency boarding home, child care institution, health care facility or any combination thereof.
21. **FOSTER CHILD** means a child who meets the criteria of 18 NYCRR 441.2(a).
22. **FOSTER FAMILY BOARDING HOME**, as defined in 18 NYCRR Part 443, means a residence owned, leased, or otherwise under the control of a single person or family who has been certified or approved by an authorized agency or by the New York State Department of Mental Hygiene or the New York State Office of Children and Family Services to care for children, and such person or family receives payment from the Agency for the care of such children.
23. **FOSTER PARENT** means a person, other than the child's parent, stepparent, or legal guardian, but including a relative within the third degree to the child's parent or step-parent, who is certified or approved to board children who are in the care, custody or guardianship of an authorized agency or the New York State Office of Children and Family Services, and who are placed for temporary or long term care.

24. **GROUP HOME**, as defined in 18 NYCRR 441.2(h) and as described in 18 NYCRR Part 448, means a family-type home for the care and maintenance of not less than seven (7), nor more than twelve (12) children who are at least five (5) years of age, operated by an authorized agency, in quarters or premises owned, leased or otherwise under the control of such agency, except that the minimum age limitation is not applicable to siblings placed in the same facility nor to children whose mother is placed in the same facility.
25. **INSTITUTION**, as defined in 18 NYCRR 441.2(f) and as addressed in 18 NYCRR Part 442, means any facility operated by an authorized agency for the care and maintenance of thirteen (13) or more children.
26. **LIFE SKILLS SERVICES** means services designated to assist foster care children and former foster children to prepare for employment and post secondary education, and to make the transition to responsible adulthood. Life skills services include, but are not limited to, structured programs of vocational training, life skills instruction, post discharge services and supervision until twenty-one (21) years of age.
27. **PUBLIC CHARGE** means a child whose income and resources, including available parental support, are insufficient to meet the total cost of foster care, including the cost of clothing and providing for the child's special needs.
28. **REFERRAL** means a request made by the Department that the Agency provide a service for a public charge.
29. **PRIMARY RESOURCE PERSON** means any individual related or unrelated to a child who is determined by the Department and the Agency to be an actual or potential source of support, care or assistance for the child.
30. **SERVICE PLAN REVIEW** means a case conference, including at least the case planner and a third party reviewer, and the parent(s), child, foster parents, and other participants to review and develop a service plan for the case in accordance with 18 NYCRR 428.9 and 430.12(c)(2). A service plan review conference is required in order to complete the comprehensive assessment and service plan and each and family reassessment and service plan when a child is in foster care.
31. **SUPERVISION SERVICES** means referral to or coordination with other appropriate available services for a child, until the child becomes twenty-one (21) years of age, when the child has been discharged to independent living (with adult permanency resources) as described in 18 NYCRR 430.12.
32. **THIRD PARTY REVIEWER** means an administrator or other person not responsible for the

case management or delivery of services to a case. The third party reviewer is a required participant in service plan reviews.

33. UNIFORM CASE RECORD means all documentation, both electronic and external, as required by 18 NYCRR Parts 428.3 and 466.

## **SECTION II - TERM OF AGREEMENT AND RENEWAL**

1. The term of this Agreement is from \_\_\_\_\_ through \_\_\_\_\_ (maximum of twelve (12) months) and may be renewed in writing from year to year thereafter, subject to annual negotiations.
2. The parties hereto are under no obligation to renew this Agreement or to purchase or provide any care after the expiration of the term set forth herein or any renewal thereof, except as herein provided. Either party should give notice in writing of its intention not to renew the Agreement at least six (6) months prior to the expiration of this Agreement.
3. If negotiations for a new agreement have not been completed upon expiration of this Agreement or subsequent renewal, the parties must enter into a written interim continuation agreement covering the period until negotiations are completed and a new Agreement is executed.

## **SECTION III - SCOPE OF SERVICES**

1. It is mutually agreed between the Department and the Agency that the Agency will provide foster care services and provide or obtain appropriate medical services in accordance with the standards prescribed by the New York State Office of Children and Family Services and as prescribed by federal and New York State laws and regulations, including, but not limited to Article 6 of the Social Services Law; 18 NYCRR Parts 427, 428, 430, 431 and 441-451; and Schedule A, which is attached hereto and incorporated herein.
2. The Agency warrants that it and its staff have all the necessary licenses, approvals and certifications currently required by the laws of any applicable municipality or local, state or federal government. The Agency further agrees to keep such required licenses, approvals and certificates in full force and effect during the term of this Agreement, or any extension thereof, and to secure any new licenses, approvals or certificates within the required time frames.
3. The Department is responsible for the determination of eligibility of children for foster care through all applicable funding streams pursuant to the regulations, policies and procedures of the New York State Office of Children and Family Services and applicable federal requirements. The Department is also responsible for the determination of eligibility of foster children for Medical Assistance, and for children freed for adoption, eligibility for federal adoption assistance

or State adoption subsidy in accordance with 18 NYCRR 421.24

4. The Agency agrees to provide foster care for children in accordance with the Program Narrative and rates of payment appended to this Agreement as Schedule A. These rates are to be negotiated in accordance with the regulations of the New York State Office of Children and Family Services.
5. The Agency and the Department must cooperate in collecting and entering data into the child welfare information systems (WMS, CCRS and/or CONNECTIONS) and any other statewide automated child welfare information system designated by the New York State Office of Children and Family Services in the form and manner required by the New York State Office of Children and Family Services. The Agency will provide such information to said data system as is required by the Department. The Agency, at the option of the Department, agrees to record information in WMS and CCRS, as required, until CONNECTIONS is implemented by the Department.
6. When CONNECTIONS is implemented in the district, as determined by the New York State Office of Children and Family Services, CONNECTIONS will be the system of record and the Agency must enter and maintain required child welfare information, including but not limited to, person and family information, periodic family assessment and service plans, plan amendments, progress notes, placement, legal, adoption, health and education related activities and events in CONNECTIONS. The Agency must review all current information about its cases that is recorded by other workers in the family services stage.

Once CONNECTIONS is implemented in the district, the Agency may not use its own internal system in lieu of CONNECTIONS. The Agency agrees to comply with applicable statutory and regulatory standards for recording child welfare information including, but not limited to, 18 NYCRR Parts 428 and 466.

7. The Agency must keep all CONNECTIONS equipment secure from theft or unauthorized use.
8. The Agency will not discriminate against employees, applicants for employment, or applicants for or recipients of services because of race, creed, color, national origin, gender, age, disability, marital status or sexual orientation.
9. The Department and Agency agree to provide the following in relation to each child covered by this Agreement. Department options are identified in Schedule B, which is attached hereto and incorporated into this Agreement.

**A. STANDARDS RELATED TO PLACEMENT**

1. Intake for Family Services

The Department, or the Agency at the option of the Department, will complete the family services intake, including but not limited to:

- completion of the Application for Services (DSS-2921)
- entry of demographic information into CONNECTIONS to create the Uniform Case Record Face Sheet
- completion of all required CONNECTIONS Intake components
- performance of a person and case search to relate known persons and cases, unless the Department specifically retains this responsibility.

In the event the Agency completes the family services intake, it must submit it to the Department for acceptance within X (but no more than five (5)) days of taking the intake or the day upon which the child entered the Agency whichever is earlier.

In the event that a child in the custody of the Department is placed by the court directly into the care of the Agency, or in the event a child in OCFS custody is placed directly into the care of the Agency, the Agency must complete the family services intake as described above and submit it to the Department for acceptance within X (but no more than five (5)) days of the day upon which the child entered that agency.

2. Opening of a Family Services Stage and Designation of Case Planner

Only the Department can open a family services stage. When the Department completes or accepts a family services intake, the Department will stage progress the family services intake to a family services stage and assign a worker role to the Agency that identifies Agency responsibilities in the family services stage.

The Department will open the family services stage and assign an Agency worker as either case planner for the family or case worker for the child at the time of the child's admission to the Agency or within X (but no more than five (5)) days of submission of the family services intake.

The Department will enter in CONNECTIONS the names and roles of any other case workers and service providers assigned to the case.

3. Case Initiation Date (Day 1)

CONNECTIONS will calculate the Case Initiation Date (CID), in accordance with 18 NYCRR Part 428. The CID will be designated and displayed in CONNECTIONS as soon as a child protective services report is indicated, or upon worker entry of the date of application for services, date of placement, or date of court-ordered services. The system will use the earliest of

these dates as the CID.

4. Designation of Program Choice and Permanency Planning Goal

The Agency with designated case planning responsibility must initially set child program choice (s) and permanency planning goal. The Agency with designated case planning and the Agency of the associated case worker must review and update program choice and permanency planning goal in CONNECTIONS, as appropriate, prior to opening each family assessment and service plan. The case planner, or the associated case worker at the direction of the case planner, must record programmatic eligibility for placement and preventive services within each family assessment and service plan.

The Department will remain responsible for reviewing the child's permanency planning goal throughout the foster care episode and will make a determination as to whether the permanency plan goal for each child is appropriate and that the Agency has considered all appropriate options for discharge, including:

- a. return to parent or guardian;
- b. adoption;
- c. legal guardianship or legal custody;
- d. placement with a fit and willing relative; or;
- e. placement in another planned living arrangement, including but not limited to:
  - independent living; or
  - adult residential care,if there is a compelling reason for determining that it is not in the best interests of the child to have discharge options a-d.

The Department will notify the Agency with designated case planning responsibility if the Department requires a change to the permanency planning goal or if the permanency goal is modified by the court.

5. Initial Family Assessment & Service Plan

The Agency with designated case planning responsibility must complete the initial family assessment and service plan and submit it to the case manager for approval no later than ten (10) days prior to the due date of the initial family assessment and service plan. The assessment and service plan must be approved by the case planner's supervisor prior to its submission to the case

manager.

The Agency of the associated case worker must complete initial family assessment and service plan components including case update, child strength, needs and risk scales, foster care issues, assessment analysis, and service plan outcome and activity blocks for the associated child, within the time period directed by the case planner.

Where there is a program choice of (child) protective, the case planner is responsible for the completion of the safety and risk assessment components of the family assessment and service plan, unless the child protective services worker/monitor is so designated by the Department. Completion of the safety and risk assessments is the responsibility of the case planner in non-protective cases.

If the Department places the child with the Agency within fifteen (15) days of the due date, or after the due date, of the initial family assessment and service plan, the Department will retain the role of case planner and such designated worker will complete the initial family assessment and service plan and submit it to the case manager for approval before assigning the Agency as designated case planner. A worker designated by the Agency will be assigned the role of case worker in the interim. Where the Department case manager is also serving as case planner, the family assessment and service plan must be submitted to the case manager's supervisor for approval.

6. Comprehensive Family Assessment & Service Plan and Subsequent Reassessment Family Assessment & Service Plans

The Agency with designated case planning responsibility must complete the Ninety (90)-Day comprehensive family assessment and service plan and each six (6)-month subsequent family assessment and service for the case as long as the Agency is the designated case planner and the child remains in the care of that Agency, unless the child entered the care of the Agency within thirty (30) days of the date the comprehensive or reassessment family assessment and service plan is due.

If the child was previously in the care of another Agency that had case planning responsibilities, and entered the care of the Agency within thirty (30) days prior to the date the family assessment and service plan is due, the Agency with previously designated case planning responsibility must complete the family assessment and service plan for that period and reassignment of the case planner role will be delayed until after its approval. If the child was not previously in care but entered the care of the Agency within thirty (30) days of the date the family assessment and service plan is due, the Department will complete the family assessment and service plan for that period and delay reassigning the case planner role until after its approval.

The Agency with designated case planning responsibility must complete the appropriate family assessment and service plan and submit it to the case manager for approval no later than ten (10) days prior to the date it is due as specified in 18 NYCRR Part 428. The assessment and service

plan must be approved by the case planner's supervisor prior to its submission to the case manager.

The Agency of the associated case worker must complete family assessment and service plan components including case update, child strength, needs and risk scales, foster care issues, assessment analysis, and service plan outcome and activity blocks for the associated child, within the time period directed by the case planner.

Where there is a program choice of (child) protective, the case planner is responsible for the completion of the safety and risk assessment components of the family assessment and service plan, unless the child protective services worker/monitor is so designated by the Department. Completion of the safety assessment is the responsibility of the case planner in non-protective cases.

The Department case manager will review and either approve or reject the family assessment and service plan no later than five (5) days following the submission of any family assessment and service plan.

If, after reviewing any family assessment and service plan, the Department disagrees with the assessment or the plan of services, the Department will contact the Agency with case planning responsibility within five (5) days of submission of the family assessment and service plan to discuss the area(s) of disagreement and necessary revisions. The modified family assessment and service plan, containing the revisions as agreed to by both parties, must be resubmitted by the Agency with case planning responsibility to the case manager for approval within five (5) days of the rejection of the family assessment and service plan. The assessment and service plan must be approved by the case planner's supervisor prior to its submission to the case manager.

7. Plan Amendment/Status Changes

If one of the following changes in program status occurs after completion of the initial, comprehensive or reassessment family assessment and service plan, and before the subsequent family assessment and service plan can be opened on the system, a plan amendment must be completed and submitted to the case manager for approval as required by 18 NYCRR Part 428:

- A. Preventive Services are started for a child;
- B. Preventive Services are ended for a child;
- C. Case Open to CPS
- D. Case Closed to CPS
- E. Child Entering/Reentering Foster Care

- F. A child is moved from one foster care setting to another;
- G. A child becomes legally freed for adoption;
- H. A child is discharged (trial or final) from foster care, including finalization of adoption.
- I. At the Department's option, the Agency must complete a plan amendment for a change to the visiting plan for a child, or for any other status change the Department so delegates.

The Agency with designated case planning responsibility or the Agency of the associated case worker of the relevant child must complete the plan amendment as appropriate. The Agency with designated case planning responsibility must submit the plan amendment. The plan amendment must be approved by the case planner's supervisor prior to its submission to the case manager.

The Agency with designated case planning responsibility or the Agency associated to a specific child(ren) must document any status change that occurs within thirty (30) days prior to the due date of the comprehensive family assessment and service plan or within sixty (60) days prior to the due date of the next reassessment family assessment and service plan, as part of that next assessment and service plan.

Documentation of status changes, whether on the plan amendment or within the family assessment and service plan, must include all information regarding the status change required by OCFS and, where appropriate, include an update of the service plan for the family.

#### 8. Progress Notes

The Agency must maintain progress notes as required by 18 NYCRR 428.5. Progress notes must be recorded in CONNECTIONS. The Agency must also review all current information about their cases that is recorded by other workers in the family services stage.

#### 9. Maintenance of Current Information

The Agency is responsible for keeping demographic and tracked child detail information regarding the child and his/her family updated in CONNECTIONS. This includes designation of primary and secondary caretakers, maintenance of the family relationship matrix, and recording of child program choice(s) and permanency planning goal.

#### 10. CONNECTIONS/UCR

Once CONNECTIONS is implemented by the Department as determined by the New York State

Office of Children and Family Services, the family assessment and service plan, plan amendments, and progress notes must be recorded, submitted, approved, and maintained through CONNECTIONS.

11. Provision of Client Services

When any approved family assessment and service plan identifies needed services which the Agency does not provide, the Department, upon confirmation of the need for services, will directly provide or arrange for provision of those services to the clients.

12. Legal Activities

a) 358-a Petitions

If the child enters foster care pursuant to a voluntary placement executed pursuant to section 384-a of the Social Services Law or a surrender executed pursuant to section 384 of the Social Services Law, the Department is responsible for the filing of the 358-a petition for court approval of the voluntary agreement or surrender within the time frames specified in section 358-a of the Social Services Law.

b) Section 1055 Orders

If the Family Court issues an order pursuant to section 1055 of the Family Court Act requiring diligent efforts or an order to initiate a proceeding to legally free a child for adoption, the Department will notify the Agency in writing or electronically of the order and send a copy of the order to the Agency. Once the Agency is notified of the court order, it is the Agency's responsibility to comply with the court order through working with the child and the family in regard to the exercise of diligent efforts. Department notification to the Agency will take place within ten (10) days of the Department's receipt of the order. It is the responsibility of the Department, or the Agency at the option of the Department, to follow through on the necessary legal aspects of legally freeing a child for adoption.

c) Permanency Hearings

Permanency hearings must be held in accordance with the standards set forth in the Social Services Law and the Family Court Act. The initial permanency hearing must be held no later than within twelve (12) months of the date the child entered foster care or at an earlier date as required by State law or by the court. For the purposes of this Agreement, a child is considered to have entered foster care the earlier of the date of the fact finding of abuse or neglect or the date that is sixty (60) days after the day the child was removed from his or her home. Subsequent permanency hearings must be held every twelve (12) months from the

preceding permanency hearing or at an earlier date as required by State law or by the court. Unless otherwise specified, the Department will file the petition for a permanency hearing.

With the exception of permanency hearings held in accordance with section 1055-a of the Family Court Act, the Department, or the Agency at the option of the Department, must file permanency petitions at least sixty (60) days before the hearing is to be held. Petitions for permanency hearings held in accordance with section 1055-a of the Family Court Act must be filed within the timeframes set forth in that statute. The Agency agrees to provide the designated Department case manager with all requested documents determined by the Department as necessary to support a petition for a permanency hearing. The Agency must provide the Department with such documentation in support of the (permanency hearing/extension) petition at least thirty (30) days prior to the date the Department must file the petition.

d) 1055-a Orders

The Department or Agency in receipt of a disposition issued pursuant to section 1055-a of the Family Court Act must notify the other of such disposition. Such notice must be provided within ten (10) days of the receipt of the court's disposition or no later than five (5) days prior to any necessary action, whichever is earlier. The Agency must comply with the dispositional decisions, unless such decisions involve an order to finalize an adoption proceeding, in which case compliance is the responsibility of the Department.

e) Other Court Orders

The Department or Agency in receipt of any dispositional order of the court must notify the other of such disposition within ten (10) days of the receipt of the court's disposition, or no later than five (5) days prior to any necessary action, whichever is earlier. The Department will determine whether the Department or the Agency is responsible for carrying out orders of the court and so notify the Agency. The agency must comply with any such orders so designated as their responsibility.

f) Agency Cooperation

The Agency agrees to provide appropriate staff as requested by the Department to testify in court in support of permanency goals or petitions for the extension of, or challenges to placement or in any other court proceedings where the testimony of staff of the Agency is deemed necessary by the Department. The Agency agrees to provide appropriate staff as requested by the Department to testify in court in support of a determination that reasonable efforts were made to finalize the foster child's permanency plan or to enable the foster child to return home safely.

g) Recording of Legal Activities

The Department, or the Agency at the option of the Department, must enter information regarding all filed legal petitions, court hearings and their resulting orders into CCRS until the implementation of CONNECTIONS Build 19. Once CONNECTIONS legal functionality is implemented by the Department, legal petitions, hearings and orders must be recorded in CONNECTIONS.

13. Registration and Photo Listing

The Agency must register and/or photo list with the New York State Adoption Service any child in its care who is freed for adoption after the child enters the care of that Agency consistent with the standards and within the time frames specified by law and regulation including 18 NYCRR Part 420. If the Agency requires information from the Department for such registration and/or photo listing, it must notify the Department in writing of the information required. At the time the appropriate forms are sent to the New York State Adoption Service, copies of the forms must also be sent to the Department.

The Department, or the Agency at the option of the Department, must enter information regarding adoption activities into CCRS until the implementation of CONNECTIONS Build 19. Once CONNECTIONS adoption functionality is implemented by the Department, registration and photo listing must be recorded, maintained, submitted and approved through CONNECTIONS.

**B. STANDARDS RELATING TO NECESSITY AND APPROPRIATENESS OF PLACEMENT**

1. Necessary Activities Prior to Placement

If a child at risk of placement is unknown to the Department or is a sibling of another child who is currently in the care of the Agency, the Agency must notify the Department of an impending foster care placement within five (5) days of the identification of the child as being at risk of care so the Department can authorize the preventive services to be provided by the Agency and/or direct the Agency to locate alternative living arrangements for the child, as appropriate.

If authorized by the Department, the Agency must offer preventive services to the child and the child's family prior to the child's foster care placement and attempt to locate safe alternative living arrangements, pursuant to 18 NYCRR Section 430.10.

2. Necessity and Appropriateness of Placement

The Department will require that the Agency with designated case planning responsibility, or the Agency of the associated case worker, document sufficient assessment information as required by 18 NYCRR 430.10 and 430.11 in the family assessment and service plan to justify the placement of the child into foster care and to justify the placement of a child into a specific type or level of placement. If the placement does not meet the standards set out in 18 NYCRR 430.11 for that specific type/level of care, the Department will so notify the Agency and request modified and updated assessment information.

3. Continued Necessity and Appropriateness of Placement

The Department will require that the decision to continue a child in a foster care setting and the decision to transfer a child to a specific type/level of placement are made pursuant to 18 NYCRR 430.10 and 430.11.

The Agency with designated case planning responsibility, or the Agency of the associated case worker, must document sufficient assessment information as required by 18 NYCRR 430.10 and 430.11 in the family assessment and service plan to warrant the continued placement of the child in foster care. If applicable, such documentation must justify the placement of the child in a more restrictive level of care than where the child was previously placed, and/or document compliance with the continuity of environment standards set forth in 18 NYCRR Section 430.11 if a change in placement has occurred since the prior family assessment and service plan review.

The Agency also must provide, or arrange for, services that attempt to alleviate the circumstances or needs of the child or the child's family that may be causing the child's placement.

**C. DILIGENCE OF EFFORT**

1. Consistency

The Agency with designated case planning responsibility and the Agency of the associated case worker must verify and document that the service goals and tasks included in the family assessment and service plan for the child and/or family are related to the specific needs exhibited by the child and/or family which contributed to the child's eventual placement in care. The Agency must complete the family assessment and service plan for the child and/or family with supporting, relevant documentation.

## 2. Service Plan Review

The Agency with designated case planning responsibility, or another specified agency at the option of the Department, must convene and hold the review panel for each service plan review in compliance with 18 NYCRR 430.12(c)(2) no earlier than the first day of the month preceding the month in which the family assessment and service plan is to be approved. The case planner or other convener is responsible for notifying the Department at least two (2) weeks prior to the scheduled review date and for inviting the case manager, and child protective services monitor if applicable, to attend the service plan review.

The Agency with designated case planning responsibility, or the Department at its option, is responsible for locating an independent third party reviewer to attend and participate at the service plan review. The Agency with designated case planning responsibility is responsible for inviting other case workers and service providers to the service plan review and obtaining their input into the service plan.

The Agency with designated case planning responsibility must make efforts to involve all required participants in the development and review of the service plan and at the case service plan review conference in compliance with 18 NYCRR 430.12(c)(2)(i)(a).

The Agency with designated case planning responsibility is responsible for inviting each participant in writing, or by electronic notice if the invitee has access to CONNECTIONS, at least two (2) weeks prior to the service plan review. The Agency must hold service plan reviews by the family assessment and services plan submission date in all cases.

In accordance with 18 NYCRR 430.12 (c)(2)(i), when possible, the Agency with designated case planning responsibility representative must, no later than thirty (30) days after the date of the service plan review, make face-to-face contact with the invited participants who were unable to attend the service plan review. At the face-to-face contact, the Agency must provide the participants with the information required by 18 NYCRR 430.12 (c)(2)(i).

If the face-to-face contact is not possible, the Agency must send the invited participants a letter informing them that the service plan review was held and that a copy of the service plan and all other information required by 18 NYCRR 430.1(c)(2)(i) will be made available to them upon request, provided, however, a copy of the service plan must be given to the child's parent(s).

The Agency must document in CONNECTIONS that each of the above requirements has been met.

## 3. Casework Contacts

The Agency with designated case planning responsibility and the Agency of the associated case worker must maintain casework contacts with the child and the child's current foster care caretaker (or provider) once the child enters the Agency's care. Casework contacts must be provided in accordance with 18 NYCRR 430.12(c)(3) and 441.21.

The Department has the option, on a case-by-case basis, to continue to provide case planning services and make casework contacts with the family. If the Department chooses to exercise this option, it will notify the Agency at the time the case is referred to the Agency and the Agency will be assigned the role of case worker.

4. Visitation

The Agency with designated case planning responsibility and the Agency of the associated case worker will be responsible for facilitating visitation between the child and the child's parent and/or sibling(s), as required by 18 NYCRR 430.12(d)(1) and 431.10(e).

The Department has the option on a case-by-case basis to continue to provide services to the parents, siblings or relatives and to maintain the responsibility for facilitating the parent-child visitation. If the Department chooses to exercise these options, the Department will so notify the Agency no later than ten (10) days after the child's admission to the Agency.

5. Time in Foster Care

If the child has a permanency planning goal of return to parents or relatives, the Department is responsible for reviewing the child's key dates in CONNECTIONS to determine and to take required actions under federal and New York State statute and regulation, including but not limited to, those requirements relating to permanency planning and/or the filing of a petition to terminate parental rights, as set forth in section 384-b(3)(l) of the Social Services Law and 18 NYCRR 430.12(e) and 431.9.

The Department will notify the Agency to review the case to determine if preventive services could aid in the discharge of the child, and to make a recommendation to the Department. If preventive services are authorized by the Department and cannot be provided by the Agency, the Department will notify the Agency regarding which specific agency is to provide such services.

6. Unplanned Termination

Termination of Placement - The Agency must give the Department a minimum of a fifteen (15) days prior written notice of its intention to request the removal of a child in the Agency's care. Should termination of placement be necessary for any reason for a child specifically placed with

the Agency by court order, the Department will seek termination or modification of the placement order in the appropriate Family Court.

At the point that the Agency can no longer provide for a child at the appropriate type and level of placement needed by the child within its own facilities, the Agency must notify the Department. The Department will thereafter conduct a diligent search of all the potential placement resources appropriate for the child within New York State, refer the child to any appropriate identified resource, and provide updates to the Agency. At the point the search has been exhausted, a conference will be held by the Department case manager with the Agency. Following such conference, a notice of termination of placement with the Agency may be given by the Agency to the Department pursuant to the agreements reached at the conference.

#### **D. DISCHARGE TO ADOPTION**

##### **1. Placement in Adoptive Home**

If the child has a permanency planning goal of discharge to adoption, the Agency, at the option of the Department, will locate an appropriate adoptive home for the child and place the child in such home with the knowledge and consent of the Department within the time frames set forth in 18 NYCRR 430.12(e). The Agency must not delay or deny placement of a child freed for adoption with otherwise suitable approved adoptive parents on the basis that the approved adoptive parents reside in a state or county different from that of the authorized agency with custody and guardianship of the child. The Agency agrees to comply with the standards forth in the Howard M. Metzenbaum Multiethnic Placement Act of 1994 (P.L. 103-382), as amended by the Small Business Job Protection Act of 1996 (P.L. 104-188) relating to the placement of children in foster care and adoption.

##### **2. Finalization of Adoption**

a) If the permanency plan for the child is adoption or placement in a permanent home other than that of the child's parent and the Agency is an approved adoption agency, the Agency must document in progress notes and in the family assessment and service plan, the steps taken to find an adoptive family or other permanent living arrangement for the child; to place the child directly or through another authorized agency with an adoptive family, a fit and willing relative, a legal guardian/legal custodian, or in another planned permanent living arrangement; and to finalize the adoption or legal guardianship/legal custody. At a minimum, such documentation must include child specific recruitment efforts such as the use of state, regional, and national adoption exchanges including electronic exchange systems. Such documentation must reflect reasonable efforts to place the child in a timely manner and to finalize the placement of the child.

b) If an Agency is not an approved adoption agency, and the Department will conduct the adoption home study for the Agency foster parent. The Agency must make every effort to provide the Department with all documents necessary for approval of the foster home as an adoptive home, including, but not limited to recent medical records, criminal history record summaries, State Central Register data base checks, home study documentation, child social summary, and agency caseworker recommendations.

c) The Agency must provide information regarding the adoption subsidy and non-recurring adoption expenses programs to foster parent(s) and prospective adoptive parent(s) upon request and at the time a proceeding to free the child for adoption has been commenced or a child is identified to prospective adoptive parent(s), in accordance with 18 NYCRR 421.24 (b). At the time of an adoptive placement, the Agency must provide an adoption subsidy and non-recurring adoption expenses agreement to any person(s) who desire to apply for an adoption subsidy and must send the completed subsidy and non-recurring adoptions expenses agreement and all relevant agency documentation to the Department for final approval within fifteen (15) days of receipt of the completed subsidy agreement. The Department, if authorized, will approve or reject the adoption subsidy and non-recurring adoption expenses agreement within thirty (30) days of its submission, or if the Department is not authorized, will send it to NYSAS for final approval.

d) The Agency, or the Department at its option, must enter information regarding all adoption activities into CCRS until the implementation of CONNECTIONS Build 19. Once CONNECTIONS adoption functionality is implemented by the Department, adoption activities must be recorded, submitted and approved in CONNECTIONS.

#### **E. DISCHARGE TO ANOTHER PLANNED LIVING ARRANGEMENT/ INDEPENDENT LIVING**

##### **1. Setting of Goal**

The goal of ‘Place in another planned living arrangement: discharge to independent living’ may be set in accordance with the requirements of 18 NYCRR 430.12(f)(1).

##### **2. Preparation for Discharge**

The Agency is responsible for assessing the life skills of all foster children fourteen (14) years and older at least every six (6) months and documenting within the family assessment and service plan, the child’s progress toward attaining each life skill outcome.

The Department, or the Agency at the option of the Department, must provide, or arrange for the provision of, life skills services to all foster children fourteen (14) years of age and older, regardless of the child’s permanency planning goal.

The Department, or the Agency at the option of the Department, must require that foster children

fourteen (14) years of age and older participate directly in designing their own program activities to prepare them for independent living and that the child accept personal responsibility for satisfying their part of the program.

The Agency must document the type of service and/or instruction provided, and the provider of the service/instruction in the case record, consistent with 18 NYCRR Parts 428 and 430.

The Department, or the Agency if authorized by the Department, must issue monthly stipend payments to each foster child sixteen (16) years of age or older with a permanency planning goal of Independent Living or deemed to have a goal of Independent Living and who is actively participating in life skills services according to his/her service plan in conformance with 18 NYCRR 430.12(f)(2)(i)(b). The Department will provide or arrange for the provision of a monthly stipend payment to each eligible child.

The Department, or the Agency at the option of the Department, must identify any persons, services and agencies which will help the child maintain and support himself / herself in the community, and must assist the child to establish contact with such agencies, service providers and persons and prepare the child to use such community resources.

The Department, or the Agency at the option of the Department, must provide for regular and continuous exploration and development of permanency alternatives for all foster children over fourteen (14) years of age, including foster children over fourteen (14) who have previously refused adoption. The Department, or the Agency at the option of the Department, must document the specific efforts to identify and nurture a permanent family connection or other adult permanency resource for the child.

The Department, or the Agency at the option of the Department, is responsible for providing a written notice of discharge to the child at least ninety (90) days prior to the child's discharge in accordance with 18 NYCRR 430.12 (f).

At the time of the Ninety (90) Day Notice, the Department must address the following issues related to the child's safety, permanency, and well-being upon discharge:

- appropriate housing that is expected to be available for at least 12 months from the date of discharge is secured;
- the child has a sufficient source of income;
- medical coverage is available to the child upon discharge for preventive health care and identified physical, mental, dental health and prescription needs;
- medical assistance coverage for the child will continue uninterrupted until a final determination that the child is ineligible has been made, with notice to the child of the final determination and of the right to a fair hearing to contest the determination;
- arrangements have been made for the child to receive essential documents such as

birth certificate, social security card, medical records, and education records at the time of discharge;

- an adult permanency resource is available or is being sought to provide emotional support/advice/guidance upon the child's discharge;
- any safety concerns related to the child's discharge from foster care are being addressed;
- arrangements have been made with service providers for services that the child will need upon discharge; and
- the child has been advised of the services that will be available to him/her upon discharge from foster care until he/she attains the age of twenty-one (21).

The information regarding these issues must be updated at the time of trial discharge, and again, at final discharge. The Agency is responsible for documenting the above information in a plan amendment or family assessment and service plan.

### 3. Trial Discharge

The Agency must provide trial discharge/aftercare services, as required in 18 NYCRR 430.12(f)(4)(i)(a), including casework contacts, to every child discharged to independent living and every child deemed to have been discharged to independent living for at least six (6) months after discharge. The child will remain in the custody of the Department during the entire period of trial discharge. Trial discharge may continue at the discretion of the Department up to the age of twenty-one (21) if the reassessment and service plan review indicates either the need for continued custody or a likelihood that the child may need to return to foster care. Face-to-face contacts during the trial discharge period must occur at the same frequency as required prior to the child being placed on a trial discharge status.

In the event the child becomes homeless during the period of trial discharge, the Department will assist the child to obtain safe and stable housing. Such housing must reasonably be expected to remain available to the child for at least the first twelve (12) months after the date of discharge. If appropriate housing is not available within thirty (30) days of the date the child becomes homeless, the Department may place the child in a suitable foster family boarding home, agency boarding home, group home or institution. These provisions regarding trial discharge do not apply where a court order terminates the Department's custody of the child or where the child reaches the age of twenty-one (21).

### 4. Post-Discharge

The Department, or Agency at the option of the Department, must provide supervision until the child reaches twenty-one (21) years of age after the Department's custody has been terminated where the child has been discharged to independent living, deemed to have a goal of independent living, or had remained in foster care until the age of 18 or older. During the period of

supervision, the Department will be responsible for providing or arranging for financial, housing, counseling, employment, education, medical and other appropriate supports and services as needed, and follow-up efforts. At the time custody of the child is terminated, the Department will advise the child in writing about how to obtain assistance, if needed, upon his or her discharge from foster care.

**F. DISCHARGE TO ADULT RESIDENTIAL CARE**

The goal of discharge to adult residential care may be set in accordance with the requirements of 18 NYCRR 430.10(c)(5) and 430.12 (g)(1)(i). The Department will review the decision to set that permanency goal in order to determine if there is compliance with the above regulatory standards.

The Agency must document compliance with the standards for setting the permanency goal. The Agency must plan for the discharge of the child as required in 18 NYCRR 430.12(g)(2) and, as applicable, 18 NYCRR 441.14 concerning additional requirements applicable to handicapped children in foster care who attain the age of 18.

**G. PREVENTIVE SERVICES**

The Department will make the initial decision to authorize mandated preventive services, as well as the decision to reauthorize the case as a mandated preventive services case, in compliance with the client programmatic eligibility standards presented in 18 NYCRR Section 430.9.

The Agency with designated case planning responsibility or the Agency of the associated case worker must document initial and continuing client programmatic eligibility for mandated preventive services within each family assessment and service plan. The Department will review programmatic eligibility documentation in CONNECTIONS.

For those cases involving more than one service provider, the Department, through its case management responsibility, will assign a specific party as the case planner and the remaining providers as case workers.

**H. THE AGENCY AGREES TO PROVIDE THE FOLLOWING IN RELATION TO EACH CHILD COVERED BY THIS AGREEMENT:**

1. Care of the child in compliance with 18 NYCRR Parts 441 – 451, as applicable.

2. Intake

Utilizing the referral summary information provided by the Department, the Agency must determine whether the services it provides are appropriate to meet the needs of the child being referred. The Agency has X days (but no more than thirty (30) days) from the initial referral of the child to make this determination and notify the Department.

3. Clothing

Upon placement, clothing needs of a child must be inventoried by the Agency. Any clothing needs identified must be purchased by the Agency. The Department will authorize allowances to buy necessary clothing and special allowances to buy additional clothing consistent with 18 NYCRR 427.16. The Agency must furnish all replacement clothing as needed during the child's placement and consistent with 18 NYCRR 427.16(a)(4). The Agency must furnish at the time of discharge a basic season-appropriate outfit. Upon discharge, the child is to take with him or her all of his or her possessions and clothing.

4. Medical Services

The Agency is responsible for providing or obtaining necessary and appropriate medical services for any foster child in its care.

The Agency must transmit to the Department documentation necessary to determine eligibility for Medical Assistance. The Agency must record required information in CONNECTIONS upon Build 19 implementation. Responsibility for eligibility determinations for Medical Assistance remains with the Department.

The Agency agrees to comply with the requirements set forth in 18 NYCRR 357.3(b) relating to the dissemination of the comprehensive health history of a foster child. The Agency must provide the comprehensive health history to the Department and/or appropriate authorized agency within seven (7) days of the request. The Agency must record required health and medical information in CONNECTIONS upon Build 19 implementation.

5. Notification of Death, Injury or Illness

The Agency must immediately notify the Department whenever a child in its care has died or has suffered an injury, accident or illness which requires emergency medical treatment at a hospital on either an inpatient or outpatient basis. The Agency must also comply with the reporting requirements set forth in 18 NYCRR 441.7(c) in regard to the New York State Office of Children and Family Services and the death or injury of foster children in its care.

The Agency, in accordance with 18NYCRR 441.22(p), must notify the New York State Office of

Children and Family Services and the local health department if a foster child is discovered to have an elevated blood lead level. The Agency must also provide such notice to the Department.

6. Confidential HIV - Related Information

The Department and the Agency agree to comply with the requirements of 18 NYCRR 431.7(a) to formulate and implement a written management plan to protect health history information related to an individual who has been diagnosed as having Acquired Immune Deficiency Syndrome (AIDS) or a Human Immunodeficiency Virus (HIV)-related illness or a HIV infection or laboratory tests performed on an individual for HIV-related illness.

The Agency agrees to require that staff, to whom confidential HIV-related information is disclosed as a necessity for providing services and in accordance with 18 NYCRR 431.7 and section 2782 of the Public Health Law, are fully informed of the penalties and fines for redisclosure in violation of New York State law and regulation.

The Agency and the Department will require that any disclosure of confidential HIV-related information must be accompanied by a written statement which includes the following or substantially similar language:

“This information has been disclosed to you from confidential records which are protected by State law. State law prohibits you from making any further disclosure of this information without the specific written consent of the person to whom it pertains, or as otherwise permitted by law. Any unauthorized further disclosure in violation of State law may result in a fine or jail sentence or both. A general authorization for the release of medical or other information is not sufficient authorization for further disclosure.”

7. Absent Without Consent

The Agency must notify the Department as immediately as practical, but in no circumstance later than twenty-four (24) hours after the absence, when a child is absent without consent and must follow the requirements as set forth in 18 NYCRR 431.8.

8. Education Program

The Department will not reimburse the Agency for any educational costs for a child placed in a group home, agency boarding home, or foster boarding home. These children must be enrolled in the public school educational program, unless another educational option is detailed in the child’s family assessment and service plan. The Agency must record required education information in CONNECTIONS upon Build 19 implementation.

9. Summer Education Program

The Department will not reimburse the Agency for summer school tuition costs unless the Agency receives the Department's prior authorization for such costs and the need for the summer program is detailed in the child's family assessment and service plan.

10. Education Tuition Reimbursement

Children placed in child care institutions must be educated in the least restrictive educational program, based on an evaluative process defined by the rules and regulations of the New York State Education Department, and tuition reimbursement for such a child will be at the rate calculated or approved for reimbursement by the New York State Education Department pursuant to Article 81 or other applicable statutes of Education Law governing tuition reimbursement for such children.

11. Removals

Removals from a foster family boarding home will be made in accordance with the requirements of section 400 of the Social Services Law and 18 NYCRR 443.5. The Agency must provide the required written notice to the foster parent(s).

12. Child Abuse and Maltreatment

The Agency agrees to comply with the provisions governing the reporting of suspected cases of child abuse or maltreatment as set forth in sections 413-416 and 418 of the Social Services Law and the requirements for State Central Register data base checks as set forth in section 424-a of the Social Services Law;

13. Certification and Approval of Foster and Adoptive Parents

The Agency agrees to comply with all certification and approval requirements for foster parents set forth in 18 NYCRR Part 443 and all approval requirements for adoptive parents set forth in 18 NYCRR Part 421. This includes, but is not limited to criminal history record reviews, State Central Register data base checks, and required medical exams for foster/adoptive parents and their family members. The Agency agrees that children will not be placed in any foster or adoptive home unless applicable requirements for certification, or approval, including emergency approval or certification, have been met.

14. Travel Expenses

If a transportation expense for home visits is not included in the board rate, the Department will authorize transportation in accordance with the visitation plan component of the child's family assessment and service plan.

If a transportation expense for home visits is included in the board rate, the Agency is responsible for transportation expenses if the destination is within fifty (50) miles of the facility. If the destination is more than fifty (50) miles from the facility, the Department is responsible for transportation costs, including the first fifty (50) miles.

#### **I. CLOSING A FAMILY SERVICES STAGE**

The Department has sole responsibility for closing the family services stage.

### **SECTION IV – FAIR HEARINGS**

Pursuant to 18 NYCRR 358, the Department will notify eligible applicants for, or recipients of, services of their right to a fair hearing to appeal the denial, reduction or termination of a service, or the failure of the Department to act upon an application within the appropriate time frames. The Department also will inform applicants for or recipients of preventive or adoption services how to make and submit a fair hearing request. The Department will provide the Agency with copies of the fair hearing decision it receives from the State of New York. The Agency, upon the request of the Department, must participate in fair hearings and any appeals thereof as witnesses when necessary for a determination of the issues.

### **SECTION V – REIMBURSEMENT**

The Agency agrees that payment by the Department is contingent upon the Agency submitting an appropriate claim form, which has been approved by the Department, to the person designated by the Department certifying the satisfactory completion of the Agency's performance and setting forth the payment to be made.

The Department agrees to pay to the Agency, on a monthly basis, within thirty (30) days of receipt of a billing statement, an amount equal to the applicable per diem rate(s) set forth in Schedule A, multiplied by each day of care actually provided by the Agency for each public charge placed with it, in accordance with this Agreement; provided, however, payment is not to be made for a child when the child is absent from the Agency for reasons other than those set forth in 18 NYCRR 628.3 and as defined by the New York State Office of Children and Family Services in the Standards of Payment Manual, Chapter 10, Section F. Payment will not be made to the Agency for the day the child is discharged from foster care.

A per diem dollar amount for each of the program types such as foster boarding home, agency boarding home, group home and institution must be specified in Schedule A which is attached hereto and which is incorporated with this Agreement. When the negotiated per diem rate exceeds the State established Maximum State Aid Rate (hereinafter MSAR), the MSAR will be used for purposes of State and federal reimbursement.

The medical per diem rate(s) established by the State constitutes the reimbursement available for health expenses of a child, subject to some specified exceptions. The medical per diem rate(s) must be set forth in Schedule A.

The applicable tuition rate for the appropriate educational services for children placed in child care institutions will be at the rate calculated or approved for reimbursement by the New York State Education Department pursuant to Article 81 or other applicable statutes of Education Law governing tuition reimbursement for such children.

The anticipated total cost of the Agreement is an estimate and serves as the limit of obligation under this Agreement. Should it appear that the anticipated total cost may be exceeded, an amendment to the Agreement must be executed. The anticipated total cost serves only as an upper limit and in no way obligates the Department to purchase child foster care services, maintenance, medical and education costs up to this amount. The anticipated total cost can be based upon experience during the past Agreement year modified by the anticipated experience during the new Agreement period. This amount includes the estimated cost of maintenance, social services, medical and education costs to the Department.

The total cost of this Agreement may not exceed \$\_\_\_\_\_.

## **SECTION VI – GENERAL RESPONSIBILITIES FOR PARTIES**

The Agency has the responsibility in accordance with this Agreement and with applicable New York State Office of Children and Family Services' regulations for the day-to-day provision of foster care services for each child placed with the Agency. It is recognized by the parties hereto, however, that ultimate responsibility for the welfare of each child rests with the Department.

The Agency must maintain sufficient staff, facilities and equipment, in full compliance with all applicable regulations of the New York State Office of Children and Family Services in order to provide the services set forth in Schedule A of this Agreement.

The Agency agrees to provide the services described in Schedule A of this Agreement at the principal location of \_\_\_\_\_ and agrees to provide the Department with written notification of the location(s) of any additional support services that are provided outside of the aforementioned address(s) in conjunction with the applicable child service plan.

The Department agrees to notify the Agency of the identity of the person(s) assigned case management

responsibility for each child receiving foster care services from the Agency.

The Department agrees to notify the Agency of the identity of the person(s) assigned as the child protective services monitor for the child protective services recipients receiving foster care services from the Agency.

The Department will determine, during the initial client eligibility process, the availability of any third party insurance resources upon placement of the child into foster care. Such process must be conducted pursuant to the Child Welfare Eligibility Manual issued by the New York State Office of Children and Family Services. When such resources are determined to be available, the Department agrees to properly code each case and provide the Agency with as much information as is available.

The Department each month will provide the Agency with a roster of the children in the Department's custody placed with the Agency. This roster will also provide information on third party health insurance through the placement of a code in the column named "Other Insurance." The Agency must pursue all third party health insurance available to children in its care. If the Agency contracts with a health care provider, it must require that the provider makes diligent efforts to determine if the foster children have third party coverage, and must attempt to utilize such coverage when applicable.

## **SECTION VII - BOOKS, RECORDS AND REPORTS**

All case specific information contained in the Agency's files must be held confidential by the Department and the Agency pursuant to the applicable provisions of the State law and any regulations promulgated thereunder, including, but not limited to, sections 372 and 422 of the Social Services Law, section 2782 of the Public Health Law, and 18 NYCRR Parts 357, 423, 428, 431 and 466, as well as all applicable federal laws and regulations, including but not limited to, the Civil Rights Act of 1964. Such information must not be disclosed except as authorized by law.

The records of individual recipients of services maintained by the Agency must be made available to the Department and New York State Office of Children and Family Services upon request, in a form, the manner and time as required by the Department or the New York State Office of Children and Family Services.

The Department or the Agency may release foster care information to a person, agency, or organization for purposes of a bona fide research project. Identifying information may not be made available unless it is absolutely essential to the research purpose and prior written approval is issued by the New York State Office of Children and Family Services. Anyone given access to such information may not redisclose such information except as otherwise permitted by law.

The Agency agrees to maintain financial books, records, and necessary supporting documents as required by the New York State Office of Children and Family Services. The Agency must use accounting procedures and practices that sufficiently and properly reflect all direct and indirect costs of the services provided under this Agreement. The Agency agrees to collect statistical data of a fiscal

nature on a regular basis and to make fiscal and statistical reports at the times prescribed by and on forms supplied by the New York State Office of Children and Family Services.

Such financial and statistical records are subject to inspection, review, excerpts, transcription or audit by authorized county, State and/or federal personnel.

The Agency and its subcontractor(s) agree to retain all books, records and other documents relevant to this Agreement for six (6) years after the Agency receives final payment for the services to which they relate, during which time authorized county, State and/or federal auditors will be provided with full access to and the right to examine the same. In addition, the Agency and its subcontractor(s), must make available, upon written request, this Agreement, and books, documents, papers and records of the Agency or subcontractor(s) that are necessary to certify the nature and extent of such costs involved, to the Secretary of the United States Department of Health and Human Services, or upon request, to the New York State Office of the State Comptroller, New York Attorney General's Office, or any of their duly authorized representatives.

## **SECTION VIII - ACCOUNTABILITY**

The Department will establish methods to evaluate the provision of foster care services by the Agency pursuant to this Agreement. All provisions of this Section are to be interpreted consistent with New York State law and applicable regulations. In implementing the foregoing, the Agency recognizes that the Commissioner of the Department, pursuant to statute, has ultimate responsibility for the protection and preservation of the welfare of all children within his or her jurisdiction and thus has the duty, ongoing throughout the term of this Agreement, to monitor the Agency with regard to the foster care services provided to the children referred hereunder.

The Agency agrees that program and/or facility review pertaining to the delivery of foster care services under this Agreement may be conducted at any reasonable time by qualified personnel from those local, State and federal agencies with the required legal powers and statutory authority to conduct such activities. Such reviews may include, but not be limited to, meetings with recipients of services, review of the uniform case record including, but not limited to, all information in the CONNECTIONS case records, review of service policy and procedural issues, review of staffing and job descriptions, and meetings with staff directly or indirectly involved in the provision of foster care services.

The Department will conduct a client review with the Agency at least twice a year to discuss the Agency's services purchased by the Department. This review will include, but not be limited to, such items as frequency of contact and planning with the family and significant others of foster children, scope of service plans and of achieving the goals stated therein, compliance with the State and federal laws, and the extent to which special mental health, remedial, tutorial and vocational services were provided after the Agency and the Department determined these services were necessary. These semi-annual client reviews will include determination of the Agency's compliance with this Agreement.

If the Agency violates this Agreement, the Department may, after due written notice, take such actions or invoke such sanctions under this Agreement and any applicable regulations issued by the New York State Office of Children and Family Services, as it deems necessary.

The Agency must not make any subcontract for the performance of this Agreement without the prior written approval of the Department. The assignment of this Agreement, in whole or in part, or of any money due or to become due under this Agreement is void without the prior written approval of the Department. All authorized subcontractors are subject to federal and State requirements governing purchase of services contracts including, but not limited to, 18 NYCRR Part 405. The Agency is responsible for the performance of all subcontractor(s).

The Agency covenants and agrees that neither it nor any of its directors, officers, members, or employees has any interest, nor will they acquire any interest, directly or indirectly, which would substantially or adversely conflict in any manner or degree with the Agency's performance of this Agreement. The names and addresses of the members of the Board of Directors of the Agency is to be annexed to this Agreement.

#### **SECTION IX – COMPLIANCE WITH LAW**

The Agency represents and agrees to comply with all applicable federal laws, including, but not limited to, the requirements of the Civil Rights Act of 1964 as amended, the Age Discrimination Employment Act of 1967 as amended, the Federal Rehabilitation Act of 1973 as amended, the Howard M. Metzenbaum Multiethnic Placement Act of 1994 (P.L. 103-382) as amended by the Small Business Job Protection Act of 1996 (P.L. 104-188), the Indian Child Welfare Act of 1978 (P.L. 95-608) and Executive Order No. 11246 entitled "Equal Employment Opportunity" as amended by Executive Order No. 11375 and as supplemented in Department of Labor Relations, 41 CFR Part 60. The Agency also agrees to observe all applicable federal regulations contained in 28 CFR Part 41; 45 CFR Parts 74, 84, 93; 1355 and 1356.

The Agency, its subcontractors, and the Department agree to execute and comply with Attachment \_\_\_\_, Certification Regarding Debarment, Suspension, Ineligibility and Voluntary Exclusion; and Attachment \_\_\_\_, Certification Regarding Limitation on Use of Appropriated Funds to Influence Certain Federal Contracting and Financial Transactions, from the Code of Federal Regulations.

In addition, if the total cost of this agreement is in excess of \$100,000, the Agency must comply with all applicable standards, orders, or regulations issued pursuant to the Clean Air Act of 1970 (42 U.S.C. 7401 et seq.) and the Federal Water Pollution Control Act (33 U.S.C. 1251 et seq.) as amended.

If the Agency expends \$500,000 or more in a year in federal funds from all sources, audits will be conducted as required by OMB Circular A-133.

#### **SECTION X – TERMINATION OF AGREEMENT**

The Agreement may be terminated by the mutual written agreement of the contracting parties.

The Agreement may be terminated by the Department, for cause, upon the failure to the Agency to comply with the terms and conditions of this Agreement, including the attachments hereto. The Department will give the Agency written notice specifying the Agency's failure.

In addition to the termination provisions set forth above, the Department has the right to terminate this Agreement, in whole or in part, if the Agency has failed, at any time, to comply with any applicable federal, State or local health, safety or fire code regulations; or in the event that any license, approval or certification of the Agency, required by federal, state or local government is revoked, not renewed, or otherwise not in full force or effect, or in the event that the Agency fails to secure a new such license, approval or certification during the term of this Agreement, if required.

Notice of termination will be given in writing specifying the reasons for termination and the effective date of termination. Such written notice will be delivered via registered or certified mail with return receipt requested or will be delivered by hand with receipt provided by the Agency. The Agency agrees not to incur any new obligations or to claim any expenses incurred after the effective date of the termination. The effective date of termination is not be less than thirty (30) days from the date of notice, unless substantial breach of contract is involved, in which case the effective date of termination may be immediate effective on delivery of the termination notice. In any event, the effective date of termination will not be later than the Agreement expiration date.

Upon termination or upon expiration of the term of this Agreement, the Department will arrange for the transfer to another Agency of all children covered by this Agreement then serviced by the Agency.

The Agency must comply with all Department close-out procedures, including but not limited to: accounting for and refunding to the Department within (6) months any overpayments which have been paid to the Agency pursuant to this Agreement; not incurring or paying any further obligation under this Agreement beyond the termination date; transmitting to the Department or its designee, on written request, copies of all books, records, papers, documents and materials pertaining to the financial details of any services provided under the terms of this Agreement: and transmitting to the Department or its designee, on written request, copies of all case-specific information and documentation concerning children in the care of the Agency.

## **SECTION XI – INDEMNIFICATION AND INSURANCE**

The Department and the Agency agree that the Agency is an independent contractor and is not an employee of the Department or the State of New York. The Agency agrees to indemnify the Department and the State of New York for any loss the Department, or the State of New York may suffer if such losses result from the claims of any person or organization (excepting only the Department) injured by the negligent acts or omissions of the Agency, its officers and/or it's employees or subcontractor(s). Furthermore, the Agency agrees to indemnify, defend, and save harmless the State of New York, the Department, and their officers, agents, and employees from any and all claims and

losses accruing or resulting to any and all contractors, subcontractors, and any other persons, firm, or corporations furnishing or supplying work, services, materials or supplies in connection with the performance of this Agreement, and from all claims and losses accruing or resulting to any person, firm, or corporation who may be injured or damaged by the Agency in the performance of this Agreement, and against any liability, including costs and expenses, for violation of proprietary rights, copyrights, or rights of privacy, arising out of the publication, translation, reproduction, delivery, performance, or use or disposition of any data furnished under this Agreement, or based on any libelous or other unlawful matter contained in such data or written materials in any form produced pursuant to this Agreement.

The Agency further agrees to procure and maintain in force, for the duration of this Agreement, insurance in types and in the amounts as determined by the Department. Such coverage must be identified and entered upon a Standard Insurance Certificate or its acceptable substitute and be signed by the Agency's insurance company, agent or broker.

The completed and signed Insurance Certificate is subject to approval by the \_\_\_\_\_ County Department of Law and upon approval will be attached to this Agreement and become a part hereof.

The Agency further agrees that the Department has the right to take whatever action it deems appropriate, including, but not limited to, the removal of the Agency from the rotation list, the removal of clients, the cessation of client referrals, and termination of this Agreement, if the Agency fails to submit a completed and signed Standard Insurance Certificate or its acceptable substitute, which is subsequently approved by the \_\_\_\_\_ County Department of Law, prior to the expiration of its insurance coverage.

IN WITNESS HEREOF:

The parties hereto have executed this agreement as of the day and year first above written.

\_\_\_\_\_ County Department of Social Services

by: \_\_\_\_\_  
Commissioner

\_\_\_\_\_  
Date

By: \_\_\_\_\_  
County Executive

\_\_\_\_\_  
Date

Approved as to Form:

\_\_\_\_\_  
County Attorney

\_\_\_\_\_  
Date

\_\_\_\_\_  
(Name of Agency)

by: \_\_\_\_\_  
Executive Director

\_\_\_\_\_  
Date

STATE OF NEW YORK)  
COUNTY OF \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_,

personally came \_\_\_\_\_ before me, to be known, who being duly sworn, did depose and say that (s)he resides in \_\_\_\_\_; that (s); he is an (the) \_\_\_\_\_ of the corporation described herein and which executed the foregoing instrument; that (s)he knew the seal of said corporation; that the seal affixed to said instrument was such corporate seal; that it was affixed by order of the Board of Directors of said corporation; and that (s)he signed (her/his name thereto by like order.

My Commission expires

## **Draft 2/14/05**

### **Schedule A**

*(Instructions to Agency) The following narrative should be completed by the Agency, in order to present an accurate description of the agency's programs. This narrative will be used to substantiate claims for federal reimbursement.*

#### **A. Program Narrative**

1. Agency's Name and Address
2. Foster Care Programs Provided by Agency  
(Institution, group residence, group homes, agency boarding homes, foster family boarding homes, educational services, etc. Include details on all programs, including goals and objectives.)
3. List of locations of all agency facilities to be used in providing services.
4. Persons served (ages, sex, geographic limitation, if any; number to be served by program, etc.).
5. Services of agency programs: include description of all those services which are provided, including those defined in the CSP, as well as any other services, such as day services, educational services, medical care and adoption services. Indicate types and numbers of staff providing services.
6. Self-evaluation procedures – description of agency procedures for evaluating program effectiveness.
7. Admission Policies and Procedures – description of referral process, agency requirements for reports, pre-placement visits, etc.



**Schedule B: DEPARTMENT OPTIONS**

*[The Department is to indicate which entity will be responsible for each task]*

<b>Contract Task / Responsibility</b>	<b>Department</b>	<b>Agency with Case Planning Responsibility</b>	<b>Agency of Associated Case Worker</b>
Family Services Intake			
<ul style="list-style-type: none"> <li>• Completion of family services intake (FSI)</li> </ul>			
<ul style="list-style-type: none"> <li>• # of days for Agency submission of FSI: (insert #)</li> </ul>			
<ul style="list-style-type: none"> <li>• # of days for Dept. acceptance of FSI: (insert #)</li> </ul>			
Completion of CPS safety and risk assessment – Initial FASP			
Completion of CPS safety and risk assessment - Comprehensive/Reassessment FASPs			
Required completion of plan amendment for a change to visiting plan (Department option)			
Convene and hold service plan review conference			
Identification of third party reviewer for SPR			
Number of days for Agency to accept/reject initial referral of child: (insert #)			
Foster Care Activities			
<ul style="list-style-type: none"> <li>• Continuing exploration and development of permanency alternatives for child over 14</li> </ul>			
<ul style="list-style-type: none"> <li>• Arrangement for/provision of life skill services for child over 14</li> </ul>			
<ul style="list-style-type: none"> <li>• Require child participation in design of activities to prepare for independent living.</li> </ul>			
<ul style="list-style-type: none"> <li>• Issue monthly stipend payments to child, 16 years or older, with PPG of discharge to independent living</li> </ul>			
<ul style="list-style-type: none"> <li>• Assistance to establish contact with service providers and community resources</li> </ul>			
<ul style="list-style-type: none"> <li>• Provision of written 90 day notice of discharge</li> </ul>			
<ul style="list-style-type: none"> <li>• Post discharge supervision</li> </ul>			
Legal Activities			
<ul style="list-style-type: none"> <li>• File petition for permanency hearing</li> </ul>			
<ul style="list-style-type: none"> <li>• 1055 Orders: Follow through on the necessary legal aspects of legally freeing a child for adoption.</li> </ul>			
Adoption Activities			
<ul style="list-style-type: none"> <li>• Identification of appropriate adoptive home</li> </ul>			
Recording of information (FASP, and movement, legal, adoption activities) in CCRS until implementation of CONNECTIONS Build 19			

## **Draft 2/14/05**

### **Attachment E: Advocates for Children Settlement Agreement (ADVPO) Templates**

- Family Services Intake
- Progress Notes
- FASP – Initial
- FASP – Comprehensive/Reassessment
- FASP Plan Amendment – Closed Preventive
- FASP Plan Amendment – Open to CPS
- FASP Plan Amendment – Closed to CPS
- FASP Plan Amendment – Enter Foster Care
- FASP Plan Amendment – Move Foster Care Setting
- FASP Plan Amendment – Change Visitation
- FASP Plan Amendment – Discharge to Home, Relative, Other
- FASP Plan Amendment – Discharge to Independent Living
- FASP Plan Amendment - Return Home from Non-LDSS Placement
- FASP Plan Amendment – Update Service Plan
- FASP Plan Amendment – Other Status Change
- Service Plan Review Conference Summary
- Non-LDSS Custody Relative/Resource Placement
- Life Skills Assessment

## Draft 2/14/05

### Attachment F: CONNECTIONS Final Regulations

Paragraph (4) of subdivision (a) of section 428.15 is repealed and a new paragraph (4) is added to read as follows:

(4) Such records, whether maintained by a social services district or provider agency must be retained in accordance with the following standards:

(i) records of a foster child must be retained for 30 years following the discharge of the child from foster care;

(ii) records of a child and family receiving preventive services must be retained for six years after the 18<sup>th</sup> birthday of the youngest child in the family. The provisions of this subparagraph apply where the sole service provided is preventive services. Where preventive services is provided in conjunction with or in addition to foster care, adoption or child protective services, the applicable standards for record retention in relation to foster care, adoption or child protective services as set forth in this section apply;

(iii) records of a child and family receiving child protective services must be maintained in accordance with the standards set forth in sections 422(5) and 422(8) of the Social Services Law and section 432.9(f) of this Title; and

(iv) records of an adopted child must be permanently retained.

Paragraph (1) of subdivision (a) of section 441.7 is amended to read as follows:

(a) All authorized agencies shall:

(1) maintain current case records for each child in its care, in accordance with the requirements of section 372 of the Social Services Law, which records [shall] must be conveniently indexed and retained [until such child becomes 21 years of age] in accordance with the requirements set forth in paragraph (4) of subdivision (a) of section 428.15 of this Title; such [record shall] records must also include the intake study; [,] the plan of service; [,] plan for discharge and aftercare, where

applicable; [,] the care and services provided, including social, psychiatric and psychological services, social history of the child and [his] the child's family; [,] certification of birth; [,] medical and surgical consent from parent or guardian; [,] record of school placement; [,] reports from other agencies; [,] all pertinent correspondence; [,] and periodic progress reports which [shall] must consist of social information, psychological or psychiatric reports, if applicable, medical and dental reports, reports from staff, and after care reports. The requirements of this paragraph [shall] must not be construed to require agencies to maintain duplicate records for those maintained by them pursuant to Parts [Part] 428 and / or 466 of this Subchapter.

A new Part 466 is added to read as follows:

PART 466

Implementation and Administration of the CONNECTIONS System

Section 466.1 Scope

466.2 Definitions

466.3 Mandatory Use

466.4 Confidentiality

466.5 Sealing and Expungement of Information

466.6 Security

Section 466.1 Scope.

The provisions of this Part apply to the implementation and administration of the CONNECTIONS system. This Part establishes standards for the internal and external recording of information in the CONNECTIONS system, the protection of confidential individual identifiable information, the sealing and expungement of information and the security of the system.

Section 466.2 Definitions.

For the purposes of this Part the following definitions apply:

(a) The CONNECTIONS system means the statewide automated child welfare information system implemented and administered by OCFS pursuant to section 446 of the Social Services Law.

The CONNECTIONS system contains, but is not limited to, those data elements required by applicable State and federal statutes and regulations, relating to the provision of child welfare services including foster care, adoption assistance, adoption services, preventive services, child protective services, and other family preservation and family support services.

(b) OCFS means the New York State Office of Children and Family Services, successor agency to the Department of Social Services and the Division for Youth, pursuant to chapter 436 of the Laws of 1997.

(c) A public or private agency means an authorized agency, as defined in paragraphs (a) or (b) of subdivision 10 of section 371 of the Social Services Law; a not-for-profit corporation, as defined in paragraph 5 of subdivision (a) of section 102 of the Not-for-Profit Corporation Law; or a public agency that receives prior approval from OCFS to provide foster care and/or child welfare services.

Section 466.3. Mandatory Use.

Upon issuance of an administrative directive by OCFS indicating that information regarding a child welfare service or services must be entered into the CONNECTIONS system, each social services district or public or private agency providing such service that has access to the CONNECTIONS system must use the CONNECTIONS system for recording the information in the form and manner prescribed by OCFS to satisfy the data requirements for the particular service. Any such administrative directive may require use of the CONNECTIONS system for all or part of the services or information to be documented, and may apply initially to a limited number of social services districts and/or public and private agencies.

Section 466.4 Confidentiality.

(a) Individual identifiable information contained in the CONNECTIONS system is confidential and may be disclosed only in a manner consistent with applicable statutory and regulatory standards.

(1) Individual identifiable information regarding children in foster care and their families is confidential and access to such information is allowable only pursuant to the standards set forth in sections 372, 373-a, 409-e and 409-f of the Social Services Law and applicable OCFS regulations including sections 357.3 and 430.12 of this Title. .

(2) Individual identifiable information regarding children and families receiving preventive services is confidential and access to such information is allowable only pursuant to the standards set forth in sections 409-e and 409-f of the Social Services Law and applicable OCFS regulations including section 423.7 of this Title. .

(3) Individual identifiable information regarding adoption assistance and adoption services is confidential and access to such information is allowable only pursuant to the standards set forth in section 114 of the Domestic Relations Law, sections 373-a and 409-f of the Social Services Law and applicable OCFS regulations including section 357.3 of this Title. .

(4) Individual identifiable information regarding child protective services is confidential and access to such information is allowable only pursuant to the standards set forth in sections 422(4), 422(5), 422(6), 422(7), 422-a, 424(4) and 424(5) of the Social Services Law and applicable OCFS regulations including section 432.7 of this Title. .

(5) In addition to the standards set forth in paragraphs (1) – (4) of this subdivision, information contained in the CONNECTIONS system is subject to all other applicable federal and State confidentiality standards, including but not limited to, those set forth in Article 27-F of the Public Health Law regarding confidential HIV-related information and section 459-g of the Social Services Law regarding the street address of residential programs for victims of domestic violence. .

(b) Consistent with applicable statute and regulation, an employee of OCFS, a social services district or a public or private agency providing child welfare services may have access to client identifiable information contained in the CONNECTIONS system only when access to such information is necessary for the employee to perform his or her specific job responsibilities.

(c) Each social services district and each public or private agency providing child welfare services that has access to the CONNECTIONS system must develop and implement policies and practices to maintain the confidentiality of individual identifiable information contained in the CONNECTIONS system consistent with applicable statutes and regulations including the taking of disciplinary action against any employee who fails to comply with the confidentiality standards set forth in this Part.

Section 466.5 Sealing and Expungement of Information

(a) All individual identifiable information regarding a child and/or family receiving preventive services that are not provided in conjunction with or in addition to child protective, foster care or adoption services must be expunged from the CONNECTIONS system six years after the 18<sup>th</sup> birthday of the youngest child in the family.

(b) All individual identifiable information regarding a child and/or family receiving child protective services is subject to the sealing and expungement standards set forth in sections 422(5), 422(6) and 422(8) of the Social Services Law and section 432.9 of this Title.

(c) The expungement of individual identifiable information from the CONNECTIONS system includes the elimination of the electronic data and information from the electronic system or the elimination of the electronic data required to access such information.

Section 466.6 Security.

(a) OCFS, local social service districts, and public or private agencies providing child welfare services that have access to the CONNECTIONS system must establish and maintain a CONNECTIONS security plan addressing the following areas:

1. Physical security of CONNECTIONS resources;
2. Equipment security to protect equipment from theft and unauthorized use;
3. Software and data security;
4. Telecommunications security;
5. Personnel Access Control;
6. Contingency plans for meeting critical processing needs in the event of short or long-term interruption of services;
7. Emergency and/or disaster preparedness;
8. Designation of a security manager for OCFS and a security coordinator for the local district or public or private agency; and
9. A program for conducting periodic security reviews at least once every two years to evaluate physical and data security operating procedures and personnel practices and to determine whether appropriate, cost effective safeguards exist to comply with the areas set forth in this subdivision. A report of each security review and all relevant supporting documentation must be maintained and made available to OCFS upon request.

(b) Each social service district and each public or private agency providing child welfare services that has access to the CONNECTIONS system must immediately report in writing to the State Information Technology staff person designated by OCFS the loss or theft of any CONNECTIONS equipment and any event that may jeopardize the security of the CONNECTIONS system.

## **Draft 2/14/05**

### **Attachment G: Proposed Regulatory Amendments: Standards for Uniform Case Records and Child and Family Assessments and Service Plans (18NYCRR Part 428, et.al.)**

Clause (b) of subparagraph (ii) of paragraph (2) of subdivision (d) of section 404.1 is amended to read as follows:

(b) every [six] 12 months for a child or minor in receipt of foster care maintenance payments;

PART 428  
STANDARDS FOR UNIFORM CASE RECORDS  
AND FAMILY AND CHILD ASSESSMENTS AND SERVICE PLANS

Sec.

428.1 General statement

428.2 Definitions

428.3 Uniform case record requirements

428.4 Face sheet

428.5 Progress notes (record of service provision)

428.6 [Initial assessment] Family assessments and service [plan] plans (content)

428.7 [Comprehensive assessment and service plan

428.8 Reassessment and service plan review

428.9 Service plan review for foster care cases

428.10] Plan [amendment] amendments (status changes)

428.8 Access to foster care records by a former foster child

[428.11 Initial risk assessment and service plan

428.12 Comprehensive risk assessment and service plan

428.13 Risk assessment and service plan review

428.14 Plan amendment risk assessment protocol]

428.9 Service plan review for foster care cases

[428.15] 428.10 General social services district requirements

Section 428.1 is amended to read as follows:

§ 428.1 General statement.

(a) Local social services districts [shall] must provide[, for all children in their custody placed in foster care or considered for such placement, and all those children who are in receipt of mandated and nonmandated preventive services (as defined in section 409-a of the Social Services Law), or legally freed for adoption or those who are named in an indicated report of child abuse or maltreatment (as defined under section 432.1 of this Title),] a thorough family assessment and an account of all family and children's services delivered to [such] children and their families through case records maintained in the form and manner and at such times as required by [the department] OCFS [in this Part] for the following:

(1) all children placed in local social services district custody, or considered for such placement;

(2) all children in receipt of mandated and nonmandated preventive services (as defined in section 409-a of the Social Services Law);

(3) all children legally freed for adoption; and

(4) all children named in an indicated report of child abuse or maltreatment (as defined under section 432.1 of this Title).

(b) Such records [shall] must:

- [(a)] (1) contain information that is relevant, useful, factual and objective;
- [(b)] (2) contribute to the district's understanding of a child's or family's [major problems] need for involvement with the child welfare system;
- [(c)] (3) contain [an early assessment] family assessments, including safety assessments, [an evaluation] evaluations of risk of future abuse and maltreatment in [open indicated] child protective cases, and assessments of the problems, strengths and needs of the child and the family receiving or applying for family and children's services, to [assure] promote valid decision making and planning and to [assure that] support major decisions affecting the safety, permanency and well-being of children [will be supported] by [a] careful, comprehensive and timely reviews and evaluations of all relevant material;
- [(d)] (4) contain [the] service goals or desired outcomes for each child and/or parent who receives one or more direct family and children's services from the district, or for whom the district purchases such services; and, for each child in foster care, the child's permanency planning goal; and
- [(e)] (5) [reflect] demonstrate district compliance with [the department's] OCFS's standards for family and children's services.

Subdivisions (b) and (c) of section 428.2 are amended to read as follows:

- (b) *Case manager* is defined for the purpose of this Part as the employee of the social services district with responsibility to authorize the provision of services[,]; to approve the client eligibility determination according to sections 423.3(b), 430.9, 430.10, and 432.1(o) of this Title[,]; and to approve [in writing] by signature or electronic equivalent, the family assessments and service plans as defined in this Part. [In cases where more than one caseworker is acting as case planner for family members, the case manager for the case must ensure collaboration among all the case planners in order to develop a single family assessment and service plan, or, if appropriate, a risk assessment and service plan, and the case manager must delineate the roles of the various service providers.]
- (c) The *case planner* is the caseworker with the primary responsibility for providing or [for ,] coordinating and evaluating the provision of services to the family as defined in subdivision [(g)] (e) of this section. Case planning includes referring the child and his or her family to providers of services as needed, and delineating the roles of the various service providers. The case planner also must require collaboration among all the case workers assigned to the case so that a single family assessment and service plan is developed. Case planning responsibility also includes documenting client progress and adherence to the service plan by recording in the uniform case record that such services are provided, as required by this Part and sections 430.9 through 430.12 of this Title, [that such services are provided], and making casework contacts or arranging for casework contacts as required under sections 423.2(b)(3), 423.4(c)(1)(ii)(d)(2), 432.2 and 441.21 of this Title.

Subdivisions (d) through (j) of section 428.2 are amended and new subdivisions (k) and (l) are added to read as follows:

- (d) The *child protective services monitor* is the employee of the child protective service who is monitoring services being provided by someone other than [the] a child protective service employee to the children and family named in an indicated case of child abuse or maltreatment [which is open in the State central register].
- (e) *Family*[. For], for the purpose of this Part, [family] means:
- (1) the child who is at risk of or in foster care, or named in an indicated child protective services report, his or her parents, [or] legal guardians, or other caretakers and his or her siblings;
  - (2) a woman who is pregnant as specified in sections 430.9(c)(6) and 430.10(c)(6) of this Title;
  - (3) a minor parent/child unit as defined in section 426.2 of this Title; or
  - (4) a child who does not live with his or her parents and needs services to prevent return to foster care, [or] a foster child whose parent(s)' rights have been terminated or whose parent(s) have surrendered the child for adoption, [or] a child who needs services and whose parents or legal guardians are unavailable [and needs services], or a child who is an unaccompanied refugee minor with or without his or her parents or legal guardian [who is an unaccompanied refugee].
- (f) *Family and children's services* [shall mean] mean the assistance, care and services provided to a child and his or her family in accordance with the service plans developed and maintained [in accordance with] as required by this Part. Such assistance and/or services [shall include] include, but are not limited to those services set forth in section 429.4(a) of this Title.
- (g) *Program choice(s)* for the purposes of this Part are defined as:
- (1) Preventive (nonmandated). Services designed to prevent possible future [placements] placement in foster care or services which may enable a child to return home sooner than anticipated when the following conditions exist: (i) preventive services are needed by this child/family and would be beneficial in preventing possible future [placements] placement in foster care; or (ii) the child is currently in placement, the child and/or family is in need of additional supportive services which are not eligible as mandated preventive services, and the provision of these services may enable the child to be returned home sooner than anticipated.
  - (2) Preventive (mandated). Services designed to avert imminent foster care placement or re-placement, or to enable a child to return home earlier than anticipated, or to facilitate a timely discharge when the following conditions exist:
    - (i) the child is at serious risk of foster care placement or re-placement, or the court has ordered preventive services and these services are necessary to keep this child at home with his or her family; or
    - (ii) the child is presently in foster care placement but is expected to be discharged within six

months, the services to be provided are directly related to one or more of the reasons the child is currently in foster care and the provision of these services will enable the child to return to his or her parents sooner than would otherwise be possible.

- (3) Placement. A child is currently in foster care placement or in need of out-of-home placement, or a child is currently in foster care placement [or] and has been legally freed for adoption.
- (4) Protective. A child is named in an open indicated child protective services case.
- (5) Non-LDSS Custody - Relative / Resource Placement. A child is placed in the home of a relative or non-related resource person with or without a court order and the local social services district is providing supervision and/or services to enable the child to return home or to enable the child to remain safely with the relative or resource person. The local social services district does not have custody of the placed child.
- (h) *Risk assessment* is a process of information gathering and analysis that examines the inter-relatedness of risk [influences and individual] elements affecting family functioning and documents them [on the appropriate uniform case record forms] in the form, manner and time prescribed by OCFS.
- (i) *Safety assessment* is a process of information gathering and analysis of selected safety factors and circumstances that [may] suggest there is an immediate threat to a child which, if not controlled or alleviated, will be likely to cause serious harm to the child and documents them in the form, manner and time prescribed by OCFS.
- (j) *Controlling interventions* are activities or arrangements which protect a child from unsafe situations, behaviors or conditions which are associated with immediate danger of serious harm, and without which the unsafe situations, behaviors or conditions would still be present or would in all likelihood immediately return.
- (k) Community optional preventive services are programs designed to serve families, children or youth where the children or youth are not at serious risk of foster care, but may be at general risk of future foster care by virtue of one or more identified characteristics of a population.
- (l) For the purposes of this Part, OCFS refers to the New York State Office of Children and Family Services

§ 428.3 is amended to read as follows:

428.3 Uniform case record requirements.

- (a) All social services districts must establish and maintain a single uniform case record for each family for whom a case record is required pursuant to section 428.1 of this Part.
- (b) (1) Each uniform case record must include, but need not be limited to the following [forms]

items [as prescribed by the department] in the form and manner prescribed by OCFS:

- (i) [WMS] a common application form;
- (ii) [initial assessment] family assessments and service plans at regularly scheduled intervals in accordance with subdivision (f) of this section [plan, or initial risk assessment and service plan];
- (iii) comprehensive assessment and service plan, or comprehensive risk assessment and service plan;
- (iv) reassessment and service plan review, or risk reassessment and service plan review;]
- [(v)] (iii) plan amendments [amendment], as required by section 428.7 [428.10 of this Part, or plan amendment risk assessment protocol, as required by section 428.14] of this Part completed for each status change; and
- [(vi)] (iv) all forms for the child care review service pursuant to section 406.4 and 465.1 of this Title, for as long as that system remains the official system of record of OCFS.

[(3)] (v) Each uniform case record must also include the following additional information and/or documents:

- [(i)] (a) face sheet;
- [(ii)] (b) progress notes in [a format specified] the form and manner prescribed by [the department] OCFS;
- [(iii)] (c) all official documents and records of any judicial or administrative proceedings relating to the district's contact with a child and/or a family, including but not limited to records of petitions, court orders, probation reports, voluntary instruments or agreements, fair hearings, administrative reviews, and the results of any examinations or evaluations ordered by a court;
- [(iv)] (d) all correspondence between the family, [and] the district and/or purchase of service agencies[.];
- [(v)] (e) information received from private or public purchase of service agencies [providers of specialized rehabilitative services, supportive services and probation services, as defined in section 423.2 (f), (g) and (h) of this Title], concerning casework contacts with a child and/or his or her family receiving family and children services[.] ; and
- (f) all documentation relating to the establishment of categorical eligibility for any funding source for which the child or family may be eligible.

- [(4)] (2) For foster care placement cases, additional information and documents must also include:
- (i) data and official documents relating to the identification and/or history of a child and/or his/her family, including but not limited to certified copies of birth certificates, documentation of religion, documentation of immigration status, and any consent forms and/or religious preference forms signed by the parent or guardian [record of financial status, including any documentation of financial eligibility];
  - (ii) all reports of medical or clinical examinations or consultations, including medical examinations and laboratory tests, psychiatric or psychological examinations or consultations (either court-ordered or voluntary), dental examinations[, plus]; and medical consent forms signed by the [parents] parent or guardian, by the commissioner of the social services district, or by the child if the child has capacity to consent, as applicable, regarding medical treatment for any child in foster care placement, including documentation that the child [in foster care] has been assessed for risk factors related to HIV infection in accordance with section 441.22(b) of this Title, and, if one or more risk factors have been identified, a description of the procedures that were followed to arrange for appropriate HIV-related testing including obtaining the necessary written informed consent for such testing; [and]
  - (iii) educational and/or vocational training reports or evaluations indicating the educational goals and needs of each foster child, including school reports and Committee on the Special Education evaluations and/or recommendations; and [.]
  - (iv) if the child has been placed in foster care outside of the state, a report prepared every 12 months by a caseworker either of the authorized agency with case management and/or case planning responsibility for the child or by the state in which the placement home or facility is located, documenting the caseworker's visit(s) with the child at his or her placement home or facility within the 12 month period.
- (c) A single family assessment and service plan [or risk assessment and service plan] must be completed [on one form,] as specified in sections 428.6[, and 428.7, 428.8, 428.11, 428.12 or 428.13] of this Part, for all family members at the intervals described in subdivision (f) of this section. The assessment and service plan must include a description of the collaborative efforts of the case planner and all case workers assigned to the case.
- (d) Each [initial] family assessment and service plan, [each comprehensive service plan and each service plan review] must document the involvement of the parent(s) or guardian and, where appropriate, child(ren) 10 years or older, including children in foster care and their siblings, in the development of the plan, or must document efforts to involve them in the development of the plan. Such efforts must include, but are not limited to:

- (1) [requesting parents] encouraging parent(s) or guardian and the children to participate in the development and review of the plan, and attempting to obtain the [parent's signature] parent(s)' or guardian's signatures documenting their review of the plan; and
  - (2) where the parent(s) or guardian and/or children are not able to participate in the development of the plan and arrangements cannot be made to allow participation, conveying the contents of the service plan and any recommendations to them, and attempting to obtain the [parent's signature] parent(s)' or guardian's signatures documenting their review of the plan.
- (e) For foster care cases, the service plan review requirements of section 428.9 of this Part [will] also apply.
- (f) [Document] Case process flow.
- (1) Social services districts must initiate a uniform case record for a family on the case initiation date as defined in section 428.2 (a) of this Part.
  - (2) On the case initiation date, the following must be completed and become part of the uniform case record:
    - (i) [WMS] a common application form; and
    - (ii) face sheet or equivalent in accordance with section 428.4 of this Part.
  - (3) Documentation of casework activity and contacts [on] in progress notes must [be commenced] begin on the case initiation date[.For] or, for cases where a report has been [made to] accepted by the [State] Statewide central register, casework activity must be recorded [on the] in progress notes from the date of receipt of the report of suspected abuse or maltreatment.
  - (4) Except for open indicated child abuse and maltreatment cases, [the] an initial family assessment and service plan must be completed by the social services district or by a provider agency providing services pursuant to a purchase of service agreement, and must be approved by the case manager within 30 days from the case initiation date. For open indicated child abuse and maltreatment cases, [the] an initial [risk] family assessment and service plan must be completed by the social services district or the provider agency providing services pursuant to a purchase of service agreement, and approved by the case manager [on] within seven days of the date that a report to the [State] Statewide central register is determined to be indicated.
  - (5) [The] A comprehensive family assessment and service plan [or the comprehensive risk assessment and service plan] must be completed by the social services district or by a provider agency providing services pursuant to a purchase of service agreement and must be approved by the case manager within 90 days from the case initiation date.
  - (6) All subsequent family reassessment and service plan reviews [or risk reassessment and

service plan reviews] must be completed by the social services district or by the provider agency providing services pursuant to a purchase of service agreement, and must be approved by the case manager six months from the case initiation date and every six months thereafter.

- (7) A plan amendment must be completed by the social services district or by the provider agency providing services pursuant to a purchase of service agreement, and must be approved by the case manager for the case, in accordance with the requirements of section [428.10] 428.7 of this Part, whenever a significant change occurs in the status of the case. [A plan amendment risk assessment protocol must be completed in accordance with the requirements of section 428.14 of this Part whenever a child protective report is indicated, the family does not already have an open case within the State central register, and one or more family members are in receipt of foster care and/or preventive services.]
- (g) Each initial family assessment, comprehensive family assessment and family reassessment developed in accordance with this Part must contain, as applicable: a written consideration of whether it is safe for the child to remain in his or her home; or whether it is safe for the child to remain in his or her current foster care placement, and whether it is safe to discharge the child from foster care.
- (h) The name or other information identifying the reporter and/or the source of a report of suspected child abuse or maltreatment, as well as the agency, institution, organization, and/or program with which such person(s) is associated must only be recorded or documented in progress notes and such documentation must be recorded in the manner specified by OCFS.

Section 428.4 is amended to read as follows:

§ 428.4 Face sheet.

- (a) Each uniform case record established under this Part [shall] must contain a face sheet or equivalent. [There are no mandated State forms developed for the face sheet.] Each local district and agency [shall] must utilize a form or on-line equivalent that will best meet local purposes.
- (b) The face sheet [shall] must be prepared at the time of application for services and [shall be located at the beginning of the record] be available for easy reference. The information on the face sheet [shall] must be amended as necessary and contain the most current information available.
- (c) The content for the face sheet [shall] must include, but need not be limited to:
  - (1) the names of parent(s), including any absent parent as that term is defined in subdivision (a) of section 347.2 of this Title, if known, and their addresses and telephone numbers;
  - (2) the name, sex, date of birth and marital status of each family member and their relationships with each other; and
  - (3) information which would be needed in case of an emergency, such as the name, address

and telephone number of a specified person to be contacted other than a family member in the same household[; and

- (4) information on other agencies, districts or community programs that are presently serving members of this family].
- (d) The [WMS] common application form may be used as a face sheet [if such form meets the district's needs]. Any supplemental information may be attached to the [WMS] common application form.

Subdivision (a) and (b) of section 428.5 is amended to read as follows:

§ 428.5 Progress notes (record of service provision).

- (a) Progress notes [are] must begin [begun] on the case initiation date as defined in section 428.2(a) of this Part or upon receipt of a report of suspected abuse or maltreatment for child protective service cases, and [are] must [continued] continue until the case is closed to all services. Progress notes must be made as contemporaneously as possible with the occurrence of the event or the [receiving] receipt of the information which is to be recorded.
- (b) Each progress note entry [shall] must include the date of the entry, the date of the event, and the name or initials of the author and person making the entry.

Subdivision (c) of section 428.5 is repealed and a new subdivision (c) and (d) is added to read as follows:

- (c) Progress notes must include, but are not limited to:
  - (1) descriptions of contacts with children and parent(s) receiving services, including missed or cancelled appointments, and the reasons therefor;
  - (2) actions taken in the investigation of a reported case of child abuse or maltreatment, including emergency and/or controlling interventions taken, and descriptions of collateral contacts and other activities relating to the collecting of information needed to formulate an assessment, and/or assist with making a determination regarding the report of abuse or maltreatment; provided, however, the name or other information identifying the reporter and/or the source of a report of suspected child abuse or maltreatment, as well as the agency, institution, organization, and/or program with which such person (s) is associated, must be recorded in the manner specified by OCFS;
  - (3) efforts made to engage the family members in the development of the service plan, their level or degree of participation in the process and the family and children's reactions to services;
  - (4) referrals and communications with other service providers involved in the case, and information received from specialized rehabilitative and supportive service providers

- concerning casework contact activities with a child and/or family receiving preventive and/or protective services;
- (5) referrals and communications with the local probation department regarding a child in the case;
  - (6) descriptions of contacts with educational/vocational personnel on behalf of a child;
  - (7) court hearings or other legal activities;
  - (8) significant events such as births, marriages, and divorces; and
  - (9) documentation of caseworker / supervisor conferences, including a description of the nature of the discussions and any required follow-up activities.
  - (10) For children in foster care or an alternative placement setting, progress notes must also include:
    - (i) casework contacts with child's parent(s), guardian, and/or relatives, the child and the child's day-to-day caretaker(s) including casework contacts required in accordance with section 441.21 of this Title;
    - (ii) descriptions of activities related to medical and dental examinations required on a regularly scheduled basis, including the initial medical examination, and any significant results, diagnosis, referrals and prescribed medications arising from such medical and dental examinations in accordance with section 441.22 of this Title;
    - (iii) descriptions of parental and/or guardian visits with a child, and any missed visits and the reasons therefor;
    - (iv) descriptions of other visits with the child, including but not limited to visits with siblings and/or half-siblings not placed with the child, potential permanency resources and any other persons of significance to the child;
    - (v) chronological documentation of diligent efforts, as required under section 430.12 of this Title, by an authorized agency to assist, develop and encourage a meaningful relationship between the parent(s) or the guardian and the child;
    - (vi) efforts by parent(s) or guardian to provide an adequate home and provide parental care for the child, or when it is determined that permanency for a child cannot be achieved within the child's own family, discussions between the parent(s) and the authorized agency regarding the pursuit of adoption or another permanency planning goal for the child; and
    - (vii) documentation that the parent(s) or guardian were advised of the possible consequences if a child remains in foster care for 15 of the most recent 22 months, and of discussions with the parent(s) or guardian regarding the possible deleterious effects of foster care on the child and the child's need for permanency.

- (11) For children in foster care with certified or approved foster parent(s):
  - (i) documentation that the foster parent(s) have been informed of the visiting plan for the child's parent(s), guardian(s), siblings or half-siblings, or others for whom a visiting plan with the child exists;
  - (ii) documentation that the foster parent(s) or prospective foster parent(s) have been asked whether they will accept a sibling group, if appropriate;
  - (iii) documentation that the foster parent(s) have been provided with information on the existence and location of all siblings or half-siblings of any child placed with them;
  - (iv) documentation that the foster parent(s) have been apprised of any special needs that the foster child has and the available supports and services to address the special needs; and
  - (v) documentation that the foster parent(s) have been informed that diligent efforts will be made to facilitate regular biweekly visitation or communication between minor siblings or half-siblings who have been placed apart, unless such contact would be contrary to the health, safety or welfare of one or more of the children or unless the lack of geographic proximity precludes visitation.
- (d) Progress notes need not include clinical notes, daily logs or other written material created by service providers who act in roles other than caseworker, child protective services monitor, case planner or case manager.

Section 428.6 is repealed and a new section 428.6 is added to read as follows:

§ 428.6 Family assessments and service plans (content)

- (a) The purpose of family assessments and service plans is to record information gathered about family members in receipt of child welfare services, including preventive services, child protective services, foster care and/or adoption services; assist with evaluations and assessments of the family; assist with determining the family's need for services necessary to achieve the child(ren)'s permanency planning goal; assist with ascertaining family progress in meeting desired outcomes and assist with on-going planning with the family.
- (1) Each family assessment and service plan must include but is not limited to the following:
  - (i) a program choice or choices for each child receiving services;
  - (ii) a goal and plan for child permanency;
  - (iii) a description of legal activities and their impact on the case;
  - (iv) a thorough and comprehensive assessment or reassessment and analysis of the family members' strengths, needs and problems;

- (v) immediate actions or controlling interventions, as defined in section 428.2 (j) of this Part, which must be taken or have been provided;
- (vi) the family's view of its needs and concerns;
- (vii) a plan of services and assistance made in consultation with the family and each child over 10 years old, whenever possible, which utilizes the family's strengths and addresses the family members' needs and concerns;
- (viii) the status of the service plan including service availability and a description of the manner of service provision;
- (ix) the family's progress toward plan achievement;
- (x) essential data relating to the identification and history of the child and family members and a summary which documents the involvement of the parent(s) or guardian, child(ren) and any others in the development of the service plan including their input into the service plan;
- (xi) safety assessments in all cases, as defined in section 428.2 (i) and section 428.3 (g) of this Part;
- (xii) risk assessments in child protective services cases, as defined in section 428.2 (h) of this Part; and
- (xiii) assessments of family functioning.

(2) Family assessment and service plans prepared at the time a child enters foster care or is moved from one foster care placement to another, as applicable, must also include but are not limited to the following:

- (i) a description of the reasonable efforts made to prevent or eliminate the need for placement or the justification for the determination that reasonable efforts were not necessary;
- (ii) identification of all available placement alternatives and the specific reasons why they were rejected;
- (iii) the efforts made to locate any absent parents;
- (iv) the type and level of placement; documentation that the placement has been assessed to be one that can safely provide for the individual needs of the foster child; and the reasons for selecting the placement if it is not the least restrictive environment;
- (v) documentation that continuity in the child's environment has been maintained in accordance with the standards in section 430.11 (c) of this Title, or the reasons why this is not practicable or in the best interests of the child;

- (vi) information about whether the child will be placed with the child's siblings and half-siblings and, if not, the reasons which preclude the placement and the arrangements made for contact between the siblings and half-siblings;
- (vii) an estimate of the anticipated duration of the placement and the circumstances and conditions that must be met to safely discharge the child from placement;
- (ix) a visiting plan for the child with his or her parent(s), guardian, siblings, half-siblings and other significant family members, potential permanency resources and/or any other persons of significance to the child;
- (x) a description of the compelling or other reasons identified for not filing a petition to terminate parental rights for any child in foster care for at least 15 of the most recent 22 months, if such petition has not been filed or the child is not already free for adoption;
- (xi) where concurrent planning is determined through assessment to be warranted in the case, a description of the alternate plan to achieve permanency for the child if the child cannot be safely returned home.

(3) For a child in foster care, in a manner consistent with Article 27-F of the Public Health Law regarding HIV confidentiality, within ten days of the preparation of the complete initial family assessment and service plan, a copy of the following components of that document must be given to the child's parent(s) or guardian, counsel for such parent(s) or guardian, and the child's law guardian: the family and children's service plan as described in subparagraphs (vii) and (viii) of paragraph (1) of this subdivision, the visiting plan and those parts of the uniform case record where the information described in paragraph (2) of this subdivision are contained.

(4) In addition to the requirements set forth in paragraph (1) of this subdivision, each family reassessment and service plan must also include but is not limited to:

- (i) a review of the prior assessments and analysis including necessary revisions to the prior assessment and analysis, and
- (ii) an evaluation of the efficacy of the service plan and necessary modifications, additions or other revisions needed to the service plan.

(5) In addition to the requirements set forth in paragraphs (1) and (2) of this subdivision, family reassessment and service plans where a child is in foster care must also include but are not limited to the following:

- (i) a description of the progress toward achievement of the permanency goal, including the compelling or other reasons identified for not filing a petition to terminate parental rights for any child in foster care for at least 15 of the most recent 22 months, if such petition has not been filed or the child is not already free for adoption;
- (ii) where concurrent planning is determined through assessment to be warranted in the case, a description of the alternate plan to achieve permanency for the child if the child cannot

be safely returned home; and

(iii) an evaluation of the visiting plan.

(6) In addition to the requirements set forth in paragraphs (1), (2), (4) and (5) of this subdivision, for children freed for adoption, individual reassessments and service plans must be maintained in a child case record and such record must also include but is not limited to:

- (i) a description of activities related to the exploration of alternative permanency resources, including the child's foster parent(s), if any;
- (ii) a description of activities undertaken to prepare the child for adoption or other permanency plan;
- (iii) actions taken to place the child in an adoptive home or other permanent living arrangement, including barriers to such placement and activities undertaken to overcome the barriers; and
- (iv) for children placed in an adoptive home or in an other permanent living arrangement, a description of efforts to finalize the adoption or other permanency living arrangement;
- (v) except that the requirements of Paragraphs (1), (2) and (5) of this subdivision do not apply where they relate to the child's parents(s) or to a foster child who is not free for adoption.

(b) All family assessment and service plans, including the initial and comprehensive family assessment and service plans, and all family reassessments and services plans, must include the signature(s) or electronic equivalent(s) of the case planner, the case planner's supervisor and the case manager, and, where required pursuant to section 432.2(b)(5) of this Title, the signature of the child protective services monitor.

Sections 428.7 is repealed. Section 428.10 is renumbered section 428.7 and amended to read as follows:

§ [428.10] 428.7 Plan amendments (status changes).

- (a) The purpose of [the] a plan amendment is to describe and document significant changes in the status of a case and to direct a reassessment of the family and/or child's situation so that any necessary revisions to the service plan can be made. [When it is determined that one or more of the status changes specified in subdivision (b) of this section have occurred in a case, the procedures set forth in this section must be followed unless the social services district has obtained prior written approval of equivalent procedures from the department.]
- (b) Changes in case status that require a plan amendment [that the steps set forth in this section be followed. Such changes must] include, but are not limited to situations where:
  - (1) preventive services are started for a child;

- (2) preventive services are ended for a child;
  - (3) a case is opened for child protective services;
  - [(3)] (4) [a case is closed to the State Central Register of Child Abuse and Maltreatment] child protective services are ended for a case;
  - [(4)] (5) a child [is entering] enters or [reentering] reenters foster care;
  - [(5)] (6) a child is moved from one foster care setting to another;
  - [(6)] (7) a child becomes legally free for adoption; or
  - [(7)] (8) a child is discharged (trial or final) from foster care (includes finalization of adoption) [when finalized]; and
  - (8) a child in a foster care placement is absent without consent as defined in section 431.8(a) of this Part].
- (c) If a status change occurs prior to the completion of the initial family assessment and service plan as required in section 428.3(f)(4) of this Part, the change [shall] must be documented in a progress note entry.
- (d) If a status change occurs subsequent to completion of the initial family assessment and service plan, it must be documented and approved by the social services district having case management responsibility for the case within 30 days [of the occurrence] of the change, except for the [change] changes designated in paragraph (b)(3) and (4) of this section which must be documented and approved by the social services district having case management responsibility for the case [at the time] within seven days [of the occurrence] of the change [the change occurs]. If any status change occurs at the time of, or within 60 days prior to, the due date of the next family assessment and service plan, the status change may be documented and approved as part of the next family assessment and service plan. Documentation within the family assessment and service plan must include all information regarding the status change required by OCFS. Such documentation must be [on the plan amendment and must:] provided in the form and manner as required by OCFS and, where appropriate, include an update of the service plan for the family.
- [(1)] describe the change;
  - (2) describe the effect of the change on the assessment of the family;
  - (3) describe the effect of the change on the service plan for the family;
  - (4) include, where appropriate, an update of the service plan for the family;
  - (5) where services are being discontinued, describe the progress of the family and the expected impact of the discontinuation of services, and where protective services are

- being discontinued, describe the reason(s) for the action and an assessment of the child's present safety and of the likelihood of future abuse or maltreatment;
- (6) where a child is entering or reentering foster care, document:
- (i) the reasonable efforts made to prevent or eliminate the need for placement or the reason such efforts were not made;
  - (ii) the identification of all available placement alternatives and the specific reasons why such alternatives were rejected;
  - (iii) the kind and level of placement and the reasons therefor, and where placement in an institution or a group home has been made or recommended, the reasons a less restrictive placement is not appropriate;
  - (iv) that continuity in the child's environment has been maintained in accordance with the standards for utilization review as set out in section 430.11 of this Title, or the reasons why this is not practicable or is not in the best interests of the child; and
  - (v) an estimate of the anticipated duration of placement, if it is other than the anticipated date of achievement of the permanency planning goal;
  - (vi) that a diligent effort has been made to place minor siblings or half-siblings together and/or that justification is clear for placing minor siblings or half-siblings apart after a careful assessment in accordance with section 431.10 of this Title has determined that placement together would be contrary to the health, safety or welfare of one or more of the children; and
  - (vii) a visiting plan which must include, but not be limited to:
    - (a) the names of parent(s) and other people who plan to visit the child on a regular basis;
    - (b) the frequency and location of planned visits;
    - (c) any special transportation and/or monitoring arrangements for such visits;
    - (d) documentation of the arrangements made for contact between the siblings and half-siblings if siblings and half-siblings are placed apart;
    - (e) when natural parents do not live together, the visiting plan for each parent; or
    - (f) where plans are not to maintain contact with the parents or caretakers, the amended written instrument relating to the transfer of

care and custody of the child, or the court order justifying such plan, which must be contained in the record and referenced in the plan amendment, and documentation establishing that any termination or limitation of parental visiting by a district or authorized agency has met the requirements of sections 431.9 and 431.14 of this Title; and]

- (e) [(7)] All plan amendments must [contain] include the signature(s) or electronic equivalent(s) of the case planner, the case planner's supervisor and the case manager, and where required pursuant to section 432.2(b)(5) of this Title, the signature of the child protective services monitor.
- [(e)] (f) When services are started for a family member previously not receiving foster care[,] or when preventive services are started in an existing case, the case initiation date for the case will remain the [same as that] date [which] that was previously established for the case according to the requirement of section 428.2(a) of this Part. [A plan amendment must be completed, in accordance with the requirements of this section, documenting the provision of services to the individual family member and the date such services were authorized and/or provided, whichever is earlier.
- (f) If a status change occurs at the time of, or within 30 days prior to, the due date of the comprehensive assessment and service plan or a reassessment and service plan review, the plan amendment must be completed along with the comprehensive assessment and service plan or the reassessment and service plan review, except as designated in subdivision (g) of this section.
- (g) When the only status change(s) occurring at the time of or within 30 days of the due date of the comprehensive assessment and service plan or reassessment and service plan review relate to a child being legally free for adoption, a child being discharged from foster care and other services are continuing, the addition of preventive services, or the closing of a child's case to preventive services and other services are continuing, a plan amendment need not be completed. However, such changes shall be noted in the assessment portion of the comprehensive assessment and service plan or reassessment and service plan review.
- (h) (g) In a manner consistent with Article 27-F of the Public Health Law regarding HIV confidentiality, within [10] ten days of the preparation of the complete plan amendment prepared for a child who enters or reenters foster care, a [complete] copy of the following components of that document [most recently prepared family and children's service plan and visiting plan, including any modifications to such plans necessitated by the placement or replacement,] must be given to the child's [parent] parent(s) or guardian, counsel for such [parent] parent(s) or guardian, and the child's law guardian, if any: the most recently prepared family and children's service plan as described in section 428.6 (a) (1) (vii) and (viii) of this Part, the visiting plan, including any modifications to such plans necessitated by the placement or replacement, [ . Included with the family and children's service plan and visiting plan, such persons also must be given: ] and those parts of the uniform case record where the information described in section 428.6 (a) (2) of this Part are contained.
- (1) a copy of the relevant pages of the plan amendment which include the information referenced in subparagraphs(i), (ii), (iii), (v) and (vi) of paragraph (6) of subdivision (d) of section 428.10; or

- (2) a document or documents other than the plan amendment, or in combination with any sections or parts of the plan amendment, which contains the family and children's service plan, the visiting plan and the information referenced in subparagraphs (i), (ii), (iii), (v) and (vi) of paragraph (6) of subdivision (d) of section 428.10].

Section 428.8 is repealed and a new section 428.8 is added to read as follows:

§ 428.8 Access to foster care records by a former foster child. (a) Purpose. This section establishes the standards and process whereby a former foster child may receive access to foster care records from an authorized agency.

(b) Definitions. As used in this section:

(1) Former foster child means a person 18 years of age or older, who has been discharged from foster care on either a trial or final basis and was not adopted.

(2) Foster care record means the following:

(i) health and medical records, including clinical records and medical histories of the foster child and his or her birth parents, to the extent available, and in accordance with section 373-a of the Social Services Law and section 357.3 of this Title;

(ii) educational records;

(iii) social history, assessment and service plan documents and plan amendments in the form and manner required at the time such documents were completed, or which predate uniform case recording requirements pursuant to this Part;

(iv) face sheet or equivalent, and any other documents which identify and describe family members, including but not limited to parents, guardians, siblings and half siblings, and grandparents; and

(vi) placement information pursuant to section 372(1)(e) of the Social Services Law.

(3) Authorized agency includes those entities defined in section 371 (10) (a) and (b) of the Social Services Law.

(c) An authorized agency must grant a former foster child's request for access to his or her foster care record, subject to the provisions of this section. A former foster child is entitled to receive all items in the foster care record as that term is defined in paragraph (2) of subdivision (b) of this section, except for confidential HIV-related information concerning any person other than the former foster child. The former foster child may gain access to child protective services information regarding the former foster child, including reports to the Statewide central register of child abuse and maltreatment in accordance with section 422 of the Social Services Law.

(d) Access by a former foster child to his or her foster care record must be granted in one of the following methods as chosen by the authorized agency:

- (1) a summary statement containing the requested information;
- (2) a copy of the entire foster care record;
- (3) a copy of the portions of the record containing the requested information;
- (4) a personal review of the applicable records by the former foster child within the agency facility, when mutually convenient to the authorized agency and the former foster child; or
- (5) any combination of the above.

(e) The former foster child must submit a written request detailing the specific information sought and include a copy of a document verifying the identity of the former foster child such as a current valid driver's license or other commonly accepted form of identification which provides proof of the name and date of birth of the former foster child. Nothing precludes the former foster child from requesting all available agency foster care records that pertain to the former foster child.

(f) Upon the receipt by an authorized agency of a written request from a former foster child for information concerning the former foster child, the authorized agency must verify the identity and age of the former foster child by reviewing the submitted identification documentation; the authorized agency must search its foster care records to determine whether a foster care record exists for such a person.

(g) Within 30 days of the receipt of the written request, the authorized agency must provide the former foster child with the requested information or a written explanation of the delay including the date the information will be provided.

(h) An authorized agency may impose reasonable and customary charges, not to exceed the actual costs incurred by the authorized agency, for making copies of and/or mailing case record documents. No charge may be imposed for providing personal review of the records or preparing a summary.

Section 428.9 is amended to read as follows:

§ 428.9 Service plan review for foster care cases.

The service plan review and case conference must be conducted in accordance with the requirements of section 430.12 of this Title and must be documented in the uniform case record [in accordance with the requirements of sections 428.7(b)(8) and 428.8(b)(10) or, in child protective cases, in accordance with the requirements of sections 428.12(b)(11) and 428.13(b)(12) of this Part and section 430.12 of this Title]. The term foster care case includes children who are legally free for the purpose of adoption and children not in the care and custody or custody and guardianship of the local commissioner of social services who reside with their minor parents in the same foster family home or residential facility.

Sections 428.11 through 428.14 are repealed and section 428.15 is renumbered section 428.10. Paragraph (4) of subdivision (a) of the newly renumbered section 428.10 is renumbered

paragraph (5), paragraphs (1) and (2) of subdivision (a) of such section are amended, and a new paragraph (4) is added to subdivision (a) of such section to read as follows:

- (1) All social services districts [shall] must submit to [the department] OCFS the records required [by the department] in this Part in the form, manner and at such times as required by [the department] OCFS.
- (2) All [such] records [shall] must be maintained in a manner consistent with the confidential nature of such records in accordance with sections 136, 372(4) and 422(4) of the Social Services Law and Part 357 and section 423.7 of this Title.
- (3) [Such records] Records, whether maintained by a district or provider agency pursuant to a purchase of service agreement, [shall] must be available at all reasonable times for inspection by representatives of [the department] OCFS, and photostatic copies of such records [shall] must be forwarded to [the department] OCFS upon request.
- (4) Uniform case records maintained in the CONNECTIONS system are available to OCFS and may be accessed by authorized OCFS personnel without prior notice to the district or provider agency.

Paragraphs (1), (2) and (3) are amended and new paragraphs (4) and ( 5) are added to subdivision (b) of section 428.10 to read as follows:

- (1) Local social services districts may require agencies[, ] with whom they have entered into a purchase of service agreement for family and children's services, to maintain all or [some] a portion of the forms required to be maintained in accordance with this Part. [However, nothing] Nothing contained in [such] a purchase of service agreement [shall be construed to limit] limits the right of the local social services district and [the department] OCFS to receive copies of all information and records required to be kept pursuant to this Part and the local social services district's responsibility to monitor the recordkeeping of [such] the purchase of service agency[, assuring both adequacy of access and detail].
- (2) A purchase of service agreement [entered into between a local social services district and an] that requires an agency [which will] to maintain all or part of the uniform case record [shall] must set forth the respective responsibilities of the district and agency to maintain such uniform case record, including the forms and additional information and/or documents identified in paragraphs (1)[, (3) and (4)] and (2) of section 428.3(b) of this Part. [In cases where] Where the purchase of service[s] agreement has delegated case planning responsibility to [a] the purchase of service agency, [such purchase of service] the agency [shall be required to] must comply with the provisions of this Part to the same extent as a local social services district, except as may be set forth in the purchase of service agreement.
- (3) Nothing contained in a purchase of service agreement entered into pursuant to this subdivision [shall relieve] relieves the local social services district of its responsibilities under this Part to provide a uniform case record for all children [for whom a uniform case

record] as is required by this Part.

- (4) Purchase of service agreements between local social services districts and public agencies to provide preventive services in non-foster care and non-child protective services cases may allow a waiver of the use of the uniform case recording forms, so long as the substitution is agreed by the contracting parties and the substitution is approved by an authorized representative of OCFS, in writing, prior to its use. Purchase of service agreements between local social services districts and private voluntary agencies to provide preventive services in non-foster care and non-child protective services cases may allow a waiver of the use of the uniform case recording forms so long as the agency uses a model program with prescribed case recording requirements and the substitution is agreed by the contracting parties and is approved by an authorized representative of OCFS, in writing, prior to its use.

(i) Substituted forms must contain but not be limited to essential data related to family history and identification of the child(ren) and family members; an assessment of child and family circumstances and functioning; a family service plan; descriptions of care, maintenance, or services provided to the child(ren) and family and the dates of service provision; and any court related activity.

(ii) Family assessments and service plans must occur at 30 days, 90 days and six months from the case initiation date, and every six months thereafter.

- (5) Directly provided or purchased community optional preventive services, as defined in subdivision (k) of section 428.2 of this Part, may be exempt from the uniform case record requirements if a waiver is requested by the local social services district and approved, in writing, by an authorized representative of OCFS.

Clause (b) of subparagraph (ii) of paragraph (3) of subdivision (b) of section 432.2 is amended to read as follows:

(b) the obtaining of information from the reporting source and other collateral contacts such as hospitals, schools, police and social services agencies; provided, however, the name or other information identifying the reporter and/or source of a report of suspected child abuse or maltreatment, as well as the agency, institution, organization, and/or program with which such person(s) is associated must only be recorded or documented in progress notes and such documentation must be recorded in the manner specified by OCFS pursuant to section 428.5(c)(2) of this Title;

Subdivision (a) through (e) are amended and new subdivisions (f) and (g) are added to section 441.7 to read as follows:

§ 441.7 Records and reports.

- (a) All authorized agencies [shall] must:

(1) maintain current case records for each child in its care, in accordance with the

requirements of section 372 of the Social Services Law[.], [which] The records [shall] must be conveniently indexed and retained [until such child becomes 21 years of age] in accordance with the requirements set forth in paragraph (5) of subdivision (a) of section 428.10 of this Title[;]. [such] The records [shall] must also include the intake study, the plan of service, plan for discharge and aftercare where applicable, the care and services provided, including social, psychiatric and psychological services, social history of the child and [his] the child's family, certification of birth, medical and surgical consent from parent or guardian, record of school placement, reports from other agencies, all pertinent correspondence, and periodic progress reports which [shall] must consist of social information, psychological or psychiatric reports, if applicable, medical and dental reports, reports from staff, and aftercare reports. The requirements of this paragraph [shall] must not be construed to require agencies to maintain duplicate records for those maintained by them pursuant to Part 428 of this Subchapter.

- (2) maintain a record from which an accurate roll call of all children in care may be readily made; and
- (3) maintain a record of the names, addresses and dates of visit of every person visiting any child in care; such names and addresses [shall] must be recorded at the time of each visit.
- (b) All authorized agencies [shall] must [submit] make available to [the department] OCFS reports of admission, transfer and discharge in accordance with the requirements of [the department] OCFS.
- (c) [A child care] All authorized [agency] agencies [shall] must:
  - (1) report the death of any child in [its] foster care to [the department] OCFS, within 24 hours of such death, [on a] in the form and [in accordance with instructions] manner prescribed by [the department] OCFS; and
  - (2) report to [the department] OCFS within 24 hours any injury to a child in [its] foster care which requires the services of a physician and which, in the opinion of such physician, may cause death, serious disability or disfigurement.
- (d) Local social services districts [shall] must maintain records required pursuant to Part 428 of this Subchapter.
- (e) All records and reports required by this section [shall] must be available for inspection by [the department] OCFS at any reasonable time in accordance with section 428.10 of this Title.
- (f) Prior to an authorized agency ceasing operation, all foster care case records pertaining to children currently in its care must be transferred to the authorized agencies that have legal custody of such children. The authorized agency must provide OCFS with a plan for maintenance foster care case records regarding children who had previously been in the care of the authorized agency.
- (g) Access to foster care case records by a former foster child must be provided in accordance with the requirements of section 428.8 of this Title.

Paragraph (5) of subdivision (a) of section 465.1 is repealed and a new paragraph (5) is added to read as follows:

- (5) All child care review records must be retained in accordance with the requirements of paragraph (5) of subdivision (a) of section 428.10 of this Title.

Paragraph (1) of subdivision (a) of section 466.4 is amended to read as follows:

Individual identifiable information regarding children in foster care and their families is confidential and access to such information is allowable only pursuant to the standards set forth in sections 372, 373-a, 409-e and 409-f of the Social Services Law and applicable OCFS regulations including sections 357.3, 428.8, 430.12 and 431.12 of this Title.