Revision #12

CHILDREN'S ADMINISTRATION

OPERATIONS

MANUAL

Table of Contents

CHAPTER 1000 INTRODUCTION 2
1100 CONTEXT AND PURPOSE 1-1
1200 MISSION AND STRATEGIC PLAN 1-1
1210 Mission 1-1
1220 Strategic Plan 1-1
1221 Goals and Objectives 1-2
1300 APPLICATION OF DEPARTMENT POLICY 1-2
1400 MANUAL MAINTENANCE AND POLICY ISSUANCE 1-2
CHAPTER 2000 ORGANIZATIONAL RESPONSIBILITIES 2-1
2100 CHILDREN'S ADMINISTRATION ORGANIZATIONAL STRUCTURE 2-1
2200 ORGANIZATIONAL UNITS 2-1
2210 Office of the Assistant Secretary 2-1
2211 Information Services 2-1
2212 Constituent Relations 2-1
2220 Division of Management Services 2-1
2221 Office of Children's Administration Research 2-1
2222 Office of Federal Funding 2-2
2223 Operations Support 2-2
2224 Fiscal and Budget Management 2-2
2225 Contracts 2-3
2226 Diversity 2-3
2227 Quality Initiative 2-3
2230 Division of Program and Policy Development 2-4
2231 Office of Quality Assurance and Training 2-6
2232 Correspondence 2-6
2240 Division of Licensed Resources 2-6
2241 Office of Child Care Policy 2-6
2242 Office of Foster Care Licensing 2-7
2243 Facility Investigations Unit 2-8
2300 REGIONS 2-8
2310 Regional Responsibilities 2-8
2320 Exceptions to Policy/Waivers 2-10
2330 Community Interagency Protocols 2-10
2340 Business Management 2-10
2341 Purpose and Scope 2-10
2342 Business Manager Responsibilities 2-11
2400 COMMUNICATION 2-12
2410 Correspondence 2-12
2420 Telephone Calls 2-12
2421 Response Times 2-12
2422 Collect Telephone Calls 2-12
CHAPTER 3000 CUSTOMER RELATIONS AND COMMUNICATION 3-1
3100 COMMUNICATIONS 3-1
3110 Citizen Participation 3-1
3120 Legislative Relations 3-1
3130 Media Relations 3-1
3140 Publications Management 3-1
3200 CITIZEN COMPLAINTS 3-1
3210 Expectation 3-1
3220 Review Process 3-1

3230 Confidentiality 3-2
3240 Non-Retaliation 3-2
3250 Definitions 3-3
3300 ADVISORY COMMITTEES 3-3
3310 CA Advisory Committees 3-3
3311 State Children's Services Advisory Committee 3-3
3312 Regional Committees 3-3
3320 Child Care Coordinating Committee 3-3
CHAPTER 4000 NON DISCRIMINATION – MINORITY AFFAIRS 4-1
4100 DSHS NON-DISCRIMINATION POLICY 4-1
4200 WORK FORCE DIVERSITY 4-1
4300 CULTURALLY RELEVANT SERVICES 4-1
4310 Placement 4-1
4320 Limited English Proficiency (LEP) 4-3
4330 Serving Persons with Disabilities 4-4
4400 NON-DISCRIMINATION RESPONSIBILITIES OF CONTRACTORS 4-5
4500 FOSTER AND ADOPTIVE HOME RECRUITMENT 4-5
4510 Inter-Ethnic Placement Act of 1996 (42 USC 671a) 4-5
4520 Recruitment Plans 4-6
CHAPTER 5000 HEALTH AND SAFETY 5-1
5100 CRITICAL INCIDENT MANAGEMENT 5-1
5110 Procedures 5-1
5111 Reporting Methodology 5-1
5112 Licensing Complaints 5-1
5113 Allegations of Child Abuse/Neglect in Facilities 5-1
5114 Serious Child Injury or Fatality 5-2
5120 Provider Reports 5-2
5121 Purpose 5-2
5122 Elements of Protocol 5-3
5200 CHILD DEATH REVIEW 5-5
5210 Policy 5-5
5220 Deaths to be Reviewed 5-6
5221 Anticipated 5-6
5222 Unanticipated 5-6
5223 Other DSHS Divisions 5-6
5224 Summary Table 5-7
5230 Procedures 5-7
5231 Fact-Finding 5-7
5232 Community Child Death Review 5-8
5232 Community Child Death Review Team Membership 5-8
5234 Staff Support 5-9
5235 Confidentiality 5-9
5240 Information to be Reviewed - Suggested Guidelines for Both Fact-Finding and Community Review 5-10
5241 Children's Administration-Specific Issues 5-10
5242 Systemic and Community Issues 5-10
5250 Findings and Recommendations 5-11
5260 Regional Administrator Submittals 5-12
5270 Children's Administration Responsibilities 5-12

5300 INVESTIGATING ABUSE AND NEGLECT IN STATE REGULATED CARE 5-12
5310 Introduction 5-12
5321 Purpose and Scope 5-13
5400 HEALTH AND SAFETY REVIEWS 5-14
5500 BACKGROUND INQUIRIES 5-14
5510 Authority 5-14
5511 Definition 5-14
5512 Required Record Checks 5-14
5513 CA Records Check 5-15
5514 Local Law Enforcement Check 5-15
5515 Criminal History Background Check 5-15
5520 Circumstances for Inquiries 5-15
5521 CPS Investigation and Unlicensed/Unexpected Placements 5-16
5522 Relative Placements 5-16
5523 Parental Placements 5-17
5524 Adoption 5-17
5525 Licensure or Re-licensure 5-17
5526 Non-licensed Contractors, Employees, Volunteers, and Other Persons 5-18
5527 CA Employees, Volunteers, Students, Interns, and Other Persons 5-19
5530 Name and Date of Birth Inquiry - Service Providers 5-20
5531 Service Providers To Be Checked 5-20
5532 Regular Name and Date of Birth 5-20
5533 Expedited Inquiry Process 5-21
5534 Cost 5-22
5540 Fingerprint-Based Background Inquiry Process 5-22
5541 Providers To Be Checked 5-22
5542 FBI Fingerprint Cards 5-24
5543 Applicant Responsibility 5-24
5544 CA Licenser Responsibility 5-24
5545 Payment 5-25
5550 Background Check Documentation and Record Retention 5-27
5560 Evaluation and Disposition 5-27
5561 No Record 5-27
5562 Child Abuse Record 5-27
5563 Enforcement Record 5-28
5564 use of Non-Conviction Information 5-31
5564 disposition 5-31
5566 Right of Appeal 5-31
5570 Information Sharing 5-32
5580 State Office Responsibilities 5-33
5590 Offenses 5-33
5600 TRANSPORTATION FOR CHILDREN 5-34
5700 BLOOD BORNE DISEASES 5-34
5710 Blood Borne Pathogens Protection Plan 5-34
5711 Purpose and Scope 5-34
5712 Definitions 5-35
5713 Methods of Implementation 5-35
5720 Blood Borne Infections 5-39
5721 Purpose and Scope 5-39

5722 Definitions 5-39
5723 Implementation Practices/Procedures 5-40
CHAPTER 6000 ACCOUNTABILITY AND QUALITY ASSURANCE 6-1
6100 STANDARDS FOR QUALITY ASSURANCE 6-1
6110 Accountability 6-1
6120 Shared Decision Making 6-1
6130 Continuous Quality Improvement 6-1
6200 PROGRAM OVERSIGHT 6-1
6210 Field Responsibilities 6-1
6220 DCFS Field Responsibilities 6-2
6221 Regional Administrator 6-2
6222 Area Manager Responsibilities 6-2
6223 Supervisory Monitoring 6-2
6230 DLR Responsibilities 6-3
6231 Office of Childcare Policy 6-4
6232 Office of Foster Care Licensing 6-4
6233 Child Abuse and Neglect Investigations 6-6
6240 Division of Program and Policy Development Responsibilities 6-6
6241 Office of Quality Assurance and Training 6-6
6250 Management Services Division Responsibilities 6-6
6251 Operations Support 6-7
6252 Office of Children's Administration Research 6-7
6300 PROGRAM REVIEWS 6-7
6310 Assistant Secretary Quarterly Regional Reviews 6-7
6320 Office of Quality Assurance Program Reviews 6-7
6330 Regional Program Reviews 6-8
6340 DLR Program Reviews 6-8
6400 PERFORMANCE ACCOUNTABILITY AND REPORTING 6-8
6410 Regional Expectations and Quarterly Reporting 6-8
6420 Benchmark Reporting 6-8
6430 Client Based Outcome Measure Reporting 6-9
6500 PERFORMANCE AUDITS 6-9
6510 Criminal History Record Inquiry Audit 6-9
6520 Operations Review and Consultation Services 6-9
6600 QUALITY IMPROVEMENT INITIATIVE 6-9
6610 Executive Order 6-9
6620 Quality Steering Committee 6-10
6630 Quality Improvement Teams 6-10
CHAPTER 7000 RESOURCE MANAGEMENT 7-2
7100 ACQUISITION AND INVENTORY MANAGEMENT 7-1
7110 Purpose and Scope 7-1
7120 Standards 7-1
7121 Approval to Purchase 7-1
7122 Responsibility for Purchasing and Inventory 7-1
7123 Responsibility for Managing/Using Inventory 7-1
7130 Procedures 7-2
7131 Requesting a Purchase 7-2
7132 Ordering 7-2
7133 Receiving, Paying, Inventorying, and Surplusing 7-2
7200 FACILITIES 7-2

7210 Purpose and Scope 7-2
7220 Standards 7-3
7221 Management of Facilities 7-3
7222 Planning for New Facilities 7-3
7300 USE OF RESOURCES 7-3
7310 Electronic Files 7-3
7320 Computer Hardware, Software, and Related Equipment 7-5
7321 Purpose and Scope 7-5
7322 Standards 7-5
7323 Procedures 7-5
7330 Vehicles 7-8
7331 Purpose and Scope 7-8
7332 Standards/Procedures 7-8
7340 Telephones 7-9
7341 Standards 7-9
7350 Cellular Telephones 7-9
7360 Telefacsimile 7-10
7361 Standard 7-10
7362 Procedures 7-11
7400 CONTROL OF FIXED ASSETS 7-11
7410 Purpose And Scope 7-11
7420 Policy 7-11
7430 Procedures 7-13
7431 Purchasing Items Meeting Definition 7-13
7432 Receipt and Payment 7-13
7433 Issuance and Placement of State Tag 7-13
7434 Equipment Returned to Vendor 7-14
7435 Equipment Transfers 7-14
7436 Loaned Equipment 7-14
7437 Equipment Disposal 7-14
CHAPTER 8000 HUMAN RESOURCE MANAGEMENT 8-1
8100 ETHICAL STANDARDS 8-1
8110 General Provisions 8-1
8120 DSHS Employees -- Child Foster Care Licensing And Adoption 8-1
8200 TELECOMMUTING 8-1
8210 Purpose and Scope 8-1
8300 TRAINING 8-1
8310 Social Service Payment and Case and Management Information Systems 8-1
8320 Staff Training 8-2
8321 Training Tuition Reimbursement for Staff 8-2
8322 Leave Approval for Non-Reimbursed Staff Training 8-3
8323 Mandatory Training 8-4
8324 New Employee Orientation 8-5
8325 Academy Training 8-5
8326 Sex Abuse Investigation Training 8-6
8400 FLEXIBLE WORK HOURS 8-7
8410 Limited Scope 8-7
8420 Minimum Criteria for Alternate Work Schedules 8-8
8500 STAFF IDENTIFICATION 8-8
8510 Identification Cards 8-8

8520 Identification Tags 8-9
8600 EMPLOYEE SAFETY 8-9
8610 Safety Committees 8-9
8700 DISASTER RESPONSE 8-9
8710 Purpose and scope 8-9
8720 Standards 8-10
8721 Planning for Disaster Recovery 8-10
8722 Operations 8-10
8723 Essential Records 8-11
8724 LAN/WAN Recovery 8-12
8800 CHILDREN'S ADMINISTRATION STAFF LIABILITY 8-13
8900 OPPOSING TESTIMONY 8-13
8910 Purpose And Scope 8-13
8920 Standard and Procedure 8-13
CHAPTER 9000 PAYMENTS AND ACCOUNTS 9-1
9100 FOSTER CARE PAYMENTS 9-1
9110 Payments Above Base Rates 9-1
9111 Purposes 9-1
9112 Limitations 9-1
9120 Special Rates 9-1
9121 Justification and Approval 9-1
9122 Training Requirement 9-2
9123 Children with Behavioral/Emotional Problems 9-2
9124 Intellectually/Physically Challenged Children 9-2
9130 Exceptional Cost Plans 9-3
9131 Standards 9-3
9132 Training Requirement 9-4
9133 Appropriate Uses 9-4
9134 Regional Expectations 9-4
9140 Limitations on Out-of-Home Care Payments 9-5
9141 Disputed Overpayments 9-6
9142 Dual Payment Limitations 9-6
9200 VENDOR PAYMENTS 9-7
9300 VENDOR WARRANT REPLACEMENT 9-7
9310 Children's Administration Staff Tasks 9-7
9320 Disbursements Staff Tasks 9-7
9400 SOCIAL SERVICE PAYMENT SYSTEM 9-8
9410 Regional Office Responsibilities 9-8
9411 Regional SSPS Coordinator 9-9
9420 Area Manager Responsibilities 9-10
9430 Local Office Responsibilities 9-11
9431 Expectations and Procedure 9-11
9432 Social Worker/Designated Staff Responsibilities 9-11
9433 Input Staff Responsibilities 9-12
9434 Support Staff Responsibilities 9-13
9435 Supervisor Responsibilities 9-13
9436 Local SSPS Coordinator 9-15
9437 Problem Resolution 9-16
9440 Provider File Numbers 9-16
9500 SOCIAL SERVICE PAYMENTS 9-16

9510 Definition of Overpayment 9-16
9520 Overpayment and Underpayment Identification and Recovery 9-16
9530 Repayment 9-22
9540 Unsolicited Payments 9-22
9550 Interest on Vendor Debt 9-22
9600 ACCOUNTS RECEIVABLE 9-22
9610 Office of Financial Recovery Responsibility 9-22
9700 TRUST ACCOUNTS 9-23
9800 ADMINISTRATOR'S ACCOUNTS 9-23
9810 Purpose and Scope 9-23
9820 Establishment of an Administrator's Account 9-23
9830 Separation of Duties 9-24
9840 Operation of Administrator's Account 9-24
9841 Mail Person 9-24
9842 Accounts Receivable Coordinator 9-24
9843 Disposition Person 9-24
9844 Recording Person 9-25
9845 Reconciliation Person 9-25
9846 Review and Approval of Authorizations 9-25
9847 Fund Trustee 9-25
9850 Accessing Administrator's Account Funds 9-26
9900 FEES FOR VITAL STATISTICS 9-26
9910 Service Worker Tasks 9-26
9920 Social Work Supervisor Tasks 9-26
9930 Disbursements Staff Tasks 9-26
91000 FOSTER PARENT LIABILITY PLAN 9-27
91010 General information 9-27
91011 Purpose 9-27
91012 Eligibility 9-27
91013 Program Management 9-27
91014 inquiries 9-27
91020 Plan Summary 9-28
91021 Liability Coverage 9-28
91022 Representation by Attorney General 9-28
91023 Definitions 9-28
91024 Limitations 9-28
91025 Exclusions 9-29
91030 Liability Claim Filing 9-30
91031 Foster Parent Procedure 9-30
91032 Social Worker Procedure 9-30
91040 Liability Claim Payment 9-31
91050 LAWSUIT 9-31
91051 Foster Parent Procedures 9-31
91052 Social Worker Procedures 9-31
91060 Legal Defense 9-32
91061 Request for Defense 9-32
91062 Expense of Defense 9-32
91063 Procedures 9-32
91070 State Obligation 9-33
91080 FRAUD 9-33

91090 Actions Commenced by Foster Children or Their Parents 9-33
910100 Modification of Reimbursement Plan 9-33
91100 FOSTER PARENT REIMBURSEMENT PLAN 9-33
91110 General Information 9-33
91120 Eligibility 9-34
91130 Program Management 9-34
91140 Definitions 9-34
91150 Reimbursement Limitations 9-35
91160 Exclusions 9-36
91170 Claim Filing Procedures 9-37
91171 Foster Parent Procedure 9-37
91172 Social Worker Procedure 9-37
91180 Misrepresentation of Claims 9-38
91190 Investigation of Claims 9-38
911100 Reconsideration of Claim Determinations 9-38
911110 Exception Requests 9-38
91200 EMPLOYEE, VOLUNTEER, AND CLIENT TRAVEL 9-39
91210 Requirements for Travel 9-39
91220 Authorizations for Travel 9-39
91221 In-State Travel 9-39
91222 Out of State Travel 9-39
91223 Travel Out of the Country 9-43
91300 CHILD DAY CARE SUBSIDY PROGRAMS 9-44
91310 Introduction 9-44
91320 Definitions 9-44
91330 Office of Child Care Policy Child Care Programs 9-44
91340 Income Eligibility 9-44
91350 Co-Payments 9-44
91360 Qualified Child Care Providers 9-45
91370 Rates and Authorizations for Child Care 9-46
91371 Half-Day/Full Day Authorizations 9-47
91372 Registration Fee 9-47
91373 Special Needs Child Care 9-48
91374 Infant Bonus 9-49
91375 Nonstandard Hour Bonus 9-49
91380 Overpayment Procedures 9-50
91390 Advance and Adequate Notice 9-50
91391 When Required 9-50
91392 When Not Required 9-50
913100 Fair Hearing 9-50
913110 Child Care Rate Clusters Based on DSHS Regions 9-51
91400 The Good Cause Determination Process 9-51
91410 REFERRAL PROCESS 9-51
91420 basis for good cause 9-52
CHAPTER 10000 CONTRACT MANAGEMENT 10-1
10100 GENERAL POLICIES 10-1
10200 DSHS CONTRACTS 10-1
10210 Client Service Contract 10-2
10220 Personal Service Contract 10-2
10230 Interagency Agreement 10-3

10240 Indian Nation Intergovernmental Agreement 10-3
10250 Purchase Service Contracts 10-3
10300 CONTRACT MANAGEMENT RESPONSIBILITIES 10-3
10310 Statewide Programs 10-3
10320 Social Workers 10-4
10330 Contract Coordinators 10-4
10340 Regional Business Managers 10-5
10350 Program Managers 10-5
10360 Regional Administrators and Directors 10-5
10400 CONTRACT PROCUREMENTS 10-5
10410 Contracts Exempt from Procurement Requirements 10-5
10420 Procurement Requirements For Personal Service Contracts 10-6
10430 Methods of Procurement 10-6
10431 Evidence of Competition 10-6
10432 Formal Competitive Procurement 10-7
10433 Informal Procurement 10-8
10434 Opportunities For Minorities, Women, and Indian Nations 10-8
10435 Sole Source Contracts 10-8
10500 VERBAL AGREEMENTS 10-9
10600 NON-DISCRIMINATION RESPONSIBILITIES OF CONTRACTORS 10-9
10700 EQUAL ACCESS REQUIREMENTS FOR CONTRACTORS 10-10
10800 CONTRACTOR CONFIDENTIALITY 10-10
10900 BACKGROUND INQUIRIES 10-11
101000 EMPLOYEE/EMPLOYER RELATIONSHIP 10-11
101100 CONTRACTING WITH NON-PROFITS 10-11
101200 EMPLOYEE ETHICAL CONDUCT CONCERNING CONTRACTORS 10-11
101300 CONTRACT MONITORING 10-12
101310 Monitoring Guidelines 10-13
101311 Purpose And Scope 10-13
101312 Policy 10-13
10113 Definitions 10-14
10114 Procedures 10-15
101400 VENDOR INVESTIGATIONS 10-16
101500 CONTRACT DISPUTES 10-16
101600 CONTRACTOR EQUIPMENT/PROPERTY 10-17
101700 CONTRACTOR TRAVEL 10-17
101800 LIABILITY INSURANCE 10-17
101900 RESPONSIBILITIES FOR OVERSIGHT OF SUB-RECIPIENTS 10-17
1011000 CONTRACT FILES 10-18
CHAPTER 11000 FEDERAL FUNDING 11-1
11100 FEDERAL MATCHING FUNDS/OTHER BENEFITS 11-1
11110 Introduction 11-1
11120 Referral 11-1
11130 Determinations 11-1
11200 FEDERAL FUNDING PROGRAMS 11-1
11210 Title IV-E 11-1
11211 Categorical Title IV-E Eligibility Factors 11-1
11212 Other Eligibility Factors 11-4
11213 Referral Procedures for Social Workers 11-5
11214 Procedures for Federal Funding Specialists 11-6

11215 Other Eligibility Processes 11-7
11220 Title II/Retirement, Survivors, and Disability Insurance 11-7
11221 Eligibility Factors 11-7
11222 Referral Procedures for Social Workers 11-7
11230 Title XVI/Supplemental Security Income 11-8
11231 Referral Procedures for Social Workers 11-8
11232 Procedures for SSI Facilitators 11-9
11233 Electronic Data Entry and Record Keeping 11-9
11234 Appeals Cases 11-11
11240 Client Aged 18 through 20 11-11
11250 Title XIX/Medicaid 11-12
11251 Regional Responsibilities for Behavior Rehabilitation Services/Group Care 11-12
11252 Eligibility Factors for Behavior Rehabilitation Services/Group Care and Therapeutic Child Development 11-13
11253 Referral Procedures for Social Workers 11-14
11254 Procedures for Federal Funding Specialists 11-14
11300 GUARDIANSHIPS 11-15
11310 Title IV-E 11-15
11320 Title II/RSDI AND Title XVI/SSI 11-15
11330 Title XIX 11-16
11400 ADOPTION SUPPORT 11-16
11410 Title IV-E Adoption Support Eligibility Criteria 11-16
11420 Title XVI 11-17
11430 Title XIX 11-17
11440 Cobra Medical 11-17
11500 PLACEMENT WITH RELATIVES OF SPECIFIED DEGREE 11-18
11510 Payment Of Foster Care Funds To Parents 11-18
11520 Temporary Assistance For Needy Families Maintenance Payments 11-18
11530 Foster Care Maintenance Payments 11-19
11600 CORRECTION OF FUNDING SOURCE 11-19
11700 INCOME/RESOURCES OF CHILD IN DSHS PAID SUBSTITUTE CARE 11-19
11800 TRUST FUNDS ACCOUNTING 11-21
11810 Regional Coordination of Trust Funds Account 11-21
11820 Special Needs Trusts 11-22
11830 Establishing a Trust Fund Account 11-22
11840 Dedicated Accounts 11-23
11850 Benefits 11-23
11860 Resources 11-23
11870 Correspondence with Trust Fund Unit 11-24
11880 Disbursements from Trust Funds Accounts 11-24
11890 Client Placement Changes 11-25
118100 Youth Remaining in Care After 18th Birthday 11-25
118110 Child Leaving Care 11-26
118120 Releasing Client Account Information 11-27
118130 Trust Fund Information 11-27
11900 FINANCIAL REVENUE RECORD ARCHIVING OR STORAGE 11-27
111000 FINANCIAL REVENUE FILE TRANSFER 11-28
111100 RANDOM MOMENT TIME STUDY 11-28
111110 Purpose 11-28
111120 Participants 11-28

111130 Headquarters Responsibilities....11-28
111140 Local Office Responsibilities....11-29
111150 Regional Administrator Responsibilities....11-30
111160 RMTS Codes and Definitions....11-30
CHAPTER 12000 AGENCY LICENSING....12-1
12100 INTRODUCTION....12-1
12110 Basic Practice Considerations....12-1
12120 Legislative Intent....12-1
12130 Licensing of Department Employees....12-1
12200 PRE-APPLICATION INFORMATION....12-1
12300 LICENSING AND RE-LICENSING....12-2
12310 Application....12-2
12320 Licensing Study....12-2
12330 Decision on Licensure/Certification....12-4
12340 Re-licensing/Re-certification....12-5
12350 Re-Evaluation....12-6
12400 COMPLAINT INVESTIGATION....12-7
12500 ACTION ON LICENSES/CERTIFICATION....12-7
12600 SUPPORT SERVICES FOR AGENCIES....12-8
12610 Training....12-8
12700 PLACEMENT ACTIVITIES....12-9
12710 Licenser Role....12-9
12800 FILE MAINTENANCE....12-10
12900 PUBLIC DISCLOSURE....12-10
CHAPTER 13000 RECORD/PAPERWORK MANAGEMENT....13-1
13100 CASE AND MANAGEMENT INFORMATION SYSTEM AND CASE DOCUMENTATION....13-1
13200 INITIATING RECORDS....13-5
13210 Intake and Assessment Requirements for CPS....13-5
13220 Intake and Assessment Requirements for CWS AND FRS....13-6
13230 Records Management....13-6
13231 Record Establishment....13-7
13232 Definitions....13-7
13233 Master File/Case Record Clerical Responsibilities....13-7
13234 ACES....13-7
13235 Birth Certificate....13-8
13236 CAMIS Input....13-8
13300 ADMINISTRATIVE RECORDS....13-10
13400 COMPOSITION OF CLIENT RECORDS....13-10
13410 Social Service Record Make-up....13-10
13411 Federal Revenue File....13-15
13412 Assembly of Folders....13-16
13500 LICENSING RECORDS....13-17
13510 File Structure....13-17
13511 Section A - Licenses, Applications, and Related Documents....13-18
13512 Section B - Service Episode Record (SER)....13-18
13513 Section C - Personnel Documentation....13-18
13514 Section D - Complaints and Corrective Actions....13-18
13515 Section E - Application Attachments and Inspection Reports....13-18
13516 Section F - Miscellaneous Correspondence, Financial, and Training....13-19

13600 GENERAL RECORD MAINTENANCE 13-19
13610 Filing Records 13-19
13620 Creating Additional Volumes 13-19
13700 RECORD ACCURACY, PRIVACY, AND DISCLOSURE 13-19
13710 Expectations for Accuracy 13-19
13720 Public Disclosure 13-20
13722 Public Disclosure Responsibilities 13-20
13722 Public Disclosure Guidelines 13-21
13723 Requests for Disclosure 13-22
13724 Preserving Requested Records 13-22
13725 Approval or Denial of Request 13-22
13726 Disclosure to Client's Representative 13-22
13730 Cost of Disclosure 13-23
13731 Inspection 13-23
13732 Collection of Fees 13-23
13733 Fee Waivers 13-23
13740 Protection of Public Records 13-24
13750 Disclosure Procedure 13-24
13760 Review of Denial of Disclosure 13-24
13770 Non-disclosable Public Records 13-24
13780 Qualifications on Disclosure 13-26
13790 Disclosure for Program and Other Purposes 13-26
137100 Disclosure and Privacy 13-27
137110 Practice Considerations 13-27
137111 Client Records 13-29
137112 Licensing Files 13-29
137113 Disclosure of Police Reports 13-31
137114 Information Subject to Challenge 13-32
137115 Expungement of Information 13-32
13800 CASE ASSIGNMENT, TRANSFER, CLOSURE OF RECORDS 13-32
13810 Active Cases 13-32
13820 Case Numbers 13-33
13821 Case Files for Legally Free Children 13-33
13822 Family and Placement Cases 13-33
13830 Case Transfer 13-33
13831 Case Record Management 13-33
13840 Placement Out of Area - Record Maintenance 13-36
13850 Case Closure 13-36
13900 RECORD RETENTION AND ARCHIVING 13-36
13905 Destruction of Electronic and Hard Copies 13-36
139051 Purpose and Scope 13-36
139052 Policy 13-36
139053 Request for Destruction 13-37
139054 Procedures 13-37
13910 Case Record Purging or Storage 13-38
13920 Federal Revenue Record Archiving or Storage 13-41
13930 Archiving of Records of Legally Free Children 13-41
CHAPTER 14000 ADMINISTRATIVE SUPPORT 14-1
14100 RECEPTION 14-1
14110 Introduction 14-1

14111 Definitions 14-1
14112 Posters and Brochures 14-1
14120 Receiving Clients 14-2
14121 Expectations 14-2
14122 Procedure 14-2
14130 Requests for General Information 14-2
14131 Expectations 14-2
14132 Procedure 14-3
14140 Receipt of Negotiable Items 14-3
14150 Limited English Proficiency/Deaf, Deaf/Blind and Hard of Hearing Clients 14-4
14151 Expectations 14-4
14200 MAIL SYSTEM 14-4
14210 Introduction 14-4
14211 Definitions 14-4
14220 Incoming Mail 14-4
14230 Outgoing Mail 14-5
14231 Types of Mail Service 14-5
14232 Special Instructions 14-6
14240 Special Procedures 14-8
14241 Business Reply (BR) and Postage Due Accounts 14-8
14242 Certified Mail 14-10
14243 Express Mail 14-11
14244 Ordering Postage 14-11
14245 Security Procedures 14-11
14246 Unused Postage Reimbursement 14-11
14300 RECORDS MANAGEMENT 14-11
14310 Case Record Transfers 14-12
14320 Case Record Management 14-12
14330 CAMIS Trainer 14-12
14400 RANDOM MOMENT TIME STUDY 14-12
14500 REQUESTING A NOTARY 14-12
CHAPTER 15000 INFORMATION SYSTEMS STANDARDS 15-1
15100 INTRODUCTION 15-1
15200 STANDARDS 15-1
15201 Referrals (3/1/99) 15-1
152011 Purpose 15-1
152012 Procedure 15-1
15202 Case Assignment, Transfer, and Closure (3/1/99) 15-2
152021 Purpose 15-2
152022 Standard/Procedure 15-2
15203 Development and/or Installation of PC and LAN Based Systems for children's Administration (10/30/98) 15-6
152031 Purpose 15-6
152032 Standard 15-7
152033 Procedure 15-7
15204 CAMIS Administrative Files (11/15/00) 15-9
152041 Purpose 15-9
152042 Standard 15-9
152043 Procedure 15-10
15205 Rescinded (11/30/96) 15-11

15206 Files for Legally Free Children (11/1/98) 15-11
152061 Purpose 15-11
152062 Standard/Procedure 15-11
15207 Access to CAMIS (5/1/93) 15-12
152071 Purpose 15-12
152072 Standard 15-12
152073 Procedure 15-12
15208 Social Service Payment System (11/8/94) 15-13
152081 Purpose 15-13
152082 Procedure 15-13
15209 Network Equipment Relocation and Connections (3/1/95) 15-13
152091 Purpose and 15-13
152092 Applicability 15-13
152093 Standard 15-13
152094 Procedure 15-14
15210 Storage of Confidential or Mission Critical Data (3/1/95) 15-14
152101 Purpose 15-14
152102 Applicability-applies to all CA employees. 15-14
152103 Standard 15-14
152104 Procedure 15-14
15211 Program Code Definitions (11/1/98) 15-15
152111 Purpose 15-15
152112 Standard 15-15
152113 Procedure 15-17
15212 Residential Address for Children Served by Children's Administration (8/17/95) 15-17
152121 Purpose 15-17
152122 Standard/Procedure 15-17
15213 Courtesy Supervision (11/1/98) 15-18
152131 Purpose 15-18
152132 Standard 15-18
152133 Procedure 15-18
15214 Interstate Compact Cases/Referrals (11/1/98) 15-19
152141 Purpose 15-19
152142 Standard 15-19
152143 Procedure 15-20
15215 Usage of State-Owned Equipment at Home (3/10/95) 15-21
152151 Purpose 15-21
152152 Applicability-applies to all CA employees. 15-21
152153 Standard 15-21
152154 Procedure 15-21
15216 Standards for Input of Names (4/14/94) 15-22
152161 Purpose 15-22
152162 Standard 15-22
15217 State Licensed Facilities/Persons (7/19/94) 15-25
152171 Purpose 15-25
152172 Procedure 15-25
15218 Creating/Changing Log-in Id's For Users (3/1/00) 15-25
152181 Purpose 15-25
152182 Standard 15-25

152183 Procedure 15-25
15219 Securing Unattended Computer Terminals (7/1/99) 15-27
152191 Purpose 15-27
152192 Applicability 15-27
152193 Standard 15-28
15220 Updates to CAMIS Files (11/30/95) 15-28
152201 Purpose 15-28
152202 Applicability 15-28
152203 Standards 15-28
152204 Procedure 15-28
15221 Documentation of Legal Actions (11/30/95) 15-29
152211 Purpose 15-29
152212 Standard 15-29
15222 Documenting the Placement of Children in the Legal Custody of Children's Administration (2/17/99) 15-30
152221 Purpose 15-30
152222 Standard/Procedure 15-30
15223 Facility Complaints (2/1/98) 15-32
152231 Purpose 15-32
152232 Definition 15-33
152233 Standard 15-33
152234 Procedure 15-33
15224 Internet Access (11/1/96) 15-34
152241 Purpose 15-34
152242 Applicability 15-34
152243 Standard 15-35
15225 Service Episode Records (1/1/99) 15-35
152251 Purpose 15-35
152252 Standard 15-35
152253 Procedure 15-36
CHAPTER 16000 : DEFINITIONS 16-1
CHAPTER 17000 ACRONYMS 17-1
CHAPTER 18000 APPENDIX C-INDEX 18-1

Table of Contents

CHAPTER 1000 INTRODUCTION

CHAPTER 1000 INTRODUCTION 1-1

1100 CONTEXT AND PURPOSE 1-1

1200 MISSION AND STRATEGIC PLAN 1-1

1210 Mission 1-1

1220 Strategic Plan 1-1

1221 Goals and Objectives 1-2

1300 APPLICATION OF DEPARTMENT POLICY 1-2

1400 MANUAL MAINTENANCE AND POLICY ISSUANCE 1-2

1100 CONTEXT AND PURPOSE

A. The Children's Administration (CA) *Operations Manual* supports and implements the provisions contained in the CA *Case Services Policy Manual* and *Practices and Procedures Guide* and provides administrative guidance to the divisions and offices of the Administration. The *Operations Manual* identifies technical policy and procedure that supports the agency's social service delivery system and provides administrative direction consistent with state and agency directives.

B. This manual sets forth procedures and practices regarding implementation of policy within the context of the business environment of the Children's Administration.

1200 MISSION AND STRATEGIC PLAN

1210 MISSION

The Children's Administration (CA) is committed to the safe and healthy growth and development of children in their own homes, in out-of-home placement, and in child day care. CA provides a comprehensive range of services designed to protect children from abuse and neglect, to support families, and to assure quality of care. Services are intended to promote the safety of children and the preservation, rehabilitation, and reunification of families to the maximum extent possible.

1220 STRATEGIC PLAN

A. The Children's Administration strategic plan seeks to expand and improve its capacity to provide effective, quality services to protect children and strengthen families in crisis. Specific strategies for agency planning and making effective changes have been developed using the following basic, guiding principles to address the Administration's commitment to excellence in service delivery and programs:

1. Family centered.
2. Culturally relevant.
3. Coordinated and collaborative.
4. Locally planned.
5. Community-based and preventive.
6. Outcome-based.
7. Creative.
8. Customer service based.

B. The Administration's strategic plan establishes a clear, consistent direction and provides a structure for policy formulation, decision-making, and accountability.

1221 GOALS AND OBJECTIVES

The strategic plan includes the following goals and objectives:

A. Improved Administrative Structure: Delivery of services through an effective management structure that is based on a creatively decentralized administration with appropriate centralized oversight.

B. Family Centered Practice: The statewide delivery of culturally relevant services for children and families that are based on family centered practice.

C. Community Based Services: Locally planned and coordinated support services that address the unique needs of communities.

D. Quality Assurance: Accountable programs that are reflective of sound management practices and that strive for excellence.

E. Communication: Open communication and regular discussion of challenges and successes with staff, clients, communities, and the legislature.

1300 APPLICATION OF DEPARTMENT POLICY

A. Children's Administration staff are accountable for following applicable department policy. The primary source documents include, but are not limited to:

1. DSHS Administrative Policies
2. Case and Management Information System (CAMIS) Policies
3. Social Service Payment System (SSPS) Manual
4. DSHS Personnel Policies
5. DSHS Travel Manual
6. Paperwork Management Manual
7. Washington Management Service (WMS) Policies
8. Merit System Rules
9. Union Contract
10. Agency Inventory System Manual

B. Each regional office and each local office must retain and maintain a complete, current copy of each of the above manuals or policies. CA staff also must adhere to other directives that may be issued from time to time by the Secretary or the Assistant Secretary.

1400 MANUAL MAINTENANCE AND POLICY ISSUANCE

A. Each Director, Division of Children and Family Services (DCFS) Regional Administrator, and Division of Licensed Resources (DLR) Regional Manager is responsible for establishing and maintaining a system to assign a copy of the CA manuals to each specific employee within their span of control. This system will include a methodology for locating and updating each manual as revisions are issued.

B. As the manuals are available electronically through assigned computers to all CA staff, it will no longer be necessary to maintain a set of hard-copy manuals for each CA staff. At that point, each Director, Regional Administrator, and Regional Manager must maintain a set of hard-copy CA manuals available to each supervisory unit and other program management staff as they deem appropriate.

C. For guidelines regarding manual maintenance and policy issuance, see the CA *Practices and Procedures Guide*, Chapter 1000, section 1200

.

CHAPTER 2000 ORGANIZATIONAL RESPONSIBILITIES

CHAPTER 2000 ORGANIZATIONAL RESPONSIBILITIES 2-1
2100 CHILDREN'S ADMINISTRATION ORGANIZATIONAL STRUCTURE 2-1
2200 ORGANIZATIONAL UNITS 2-1
2210 Office of the Assistant Secretary 2-1
2211 Information Services 2-1
2212 Constituent Relations 2-1
2220 Division of Management Services 2-1
2221 Office of Children's Administration Research 2-1
2222 Office of Federal Funding 2-2
2223 Operations Support 2-2
2224 Fiscal and Budget Management 2-2
2225 Contracts 2-3
2226 Diversity 2-3
2227 Quality Initiative 2-3
2230 Division of Program and Policy Development 2-4
2231 Office of Quality Assurance and Training 2-6
2232 Correspondence 2-6
2240 Division of Licensed Resources 2-6
2241 Office of Child Care Policy 2-6
2242 Office of Foster Care Licensing 2-7
2243 Facility Investigations Unit 2-8
2300 REGIONS 2-8
2310 Regional Responsibilities 2-8
2320 Exceptions to Policy/Waivers 2-10
2330 Community Interagency Protocols 2-10
2340 Business Management 2-10
2341 Purpose and Scope 2-10
2342 Business Manager Responsibilities 2-11
2400 COMMUNICATION 2-12
2410 Correspondence 2-12
2420 Telephone Calls 2-12
2421 Response Times 2-12
2422 Collect Telephone Calls 2-12

2100 CHILDREN'S ADMINISTRATION ORGANIZATIONAL STRUCTURE

The Children's Administration (CA) management team is responsible for developing and implementing Administration policy and programs and for statewide resource management. Members of the management team include the Assistant Secretary, Division Directors, Office Chiefs, and the six DCFS Regional Administrators.

2200 ORGANIZATIONAL UNITS

2210 OFFICE OF THE ASSISTANT SECRETARY

2211 INFORMATION SERVICES

A. The Office of Information Services supports the Administration's personal computers (PC), networks, and the Case and Management Information System (CAMIS) applications.

B. PCs and networks are supported by Computer Information Consultants (CIC) who are located at various offices across the state. CICs install and maintain computers and desktop software. They also manage each office's local area network (LAN), including file servers and printers. These PCs and networks provide word processing, electronic mail, and access to CAMIS.

C. The CAMIS application is supported by a team of programmers and technical specialists based in Olympia. The programmers make modifications to CAMIS and work with the Department of Information Services (DIS) to operate CAMIS 24 hours a day.

2212 CONSTITUENT RELATIONS

The Office of Constituent Relations was created by the legislature in 1991 to provide timely, thorough, and objective resolution of complaints from clients, foster parents, legislators, and others regarding services or programs of the Administration. See chapter 3000, section 3200, for a description of the formal complaint process used when informal resolution of concerns is not possible.

2220 DIVISION OF MANAGEMENT SERVICES

The Division of Management Services provides statewide leadership and program support to the other divisions of the Children's Administration in administrative support functions, resource management, diversity, human resources, quality initiative, public disclosure, and department public relations and communications support.

2221 OFFICE OF CHILDREN'S ADMINISTRATION RESEARCH

A. The Office of Children's Administration Research (OCAR) conducts research and evaluation projects of selected policy and program issues for CA, the Juvenile Rehabilitation Administration (JRA), and other Administrations, as requested. Data from OCAR research are used to inform policy development, improve practice, and identify program effectiveness and client and provider satisfaction.

B. OCAR provides technical support and analysis to CA for management information and policy development.

2222 OFFICE OF FEDERAL FUNDING

2223 OPERATIONS SUPPORT

Operations Support staff:

A. Plans and manages projects related to statewide CA issues and management initiatives; evaluates issues; and conducts evaluations on specific topics, as requested.

B. Develops accountability mechanisms for statewide use, including regional performance expectations and benchmarks for office and regional performance; works closely with staff of the Office of Quality Assurance and Training.

C. Plans and develops strategic planning outcome based measures to meet state budgeting and performance requirements; develops reports and data mechanisms to collect and measure outcomes and performance.

D. Responds to data-based information needs and produces regular, special and *ad hoc* reports, including the monthly DSHS fiscal/program review, for Administration and agency requirements; develops improvements in management information tools.

E. Assists the Division of Program and Policy Development and the Division of Licensed Resources (DLR) in developing and implementing management tracking systems.

F. Provides background check services, described in chapter 5000, section 5500.

G. Responds to requests for the public disclosure of information and documentation within required time-frames.

2224 FISCAL AND BUDGET MANAGEMENT

A. Fiscal Management staff are responsible for the following activities:

1. Statewide fiscal, business, and contracts operation of CA to assure the effective and efficient use of federal and state general funds.

2. Development and direction of fiscal operations and standards for the Administration.

3. Development of strategies for allocating and monitoring resources.

4. Development of Administration budget proposals and forecast assumptions to identify and justify resource needs.

5. Coordination of statewide procurement, business management, facility management, and asset management activities.

B. Regional Business Managers work under the supervision of the Regional Administrators and have a matrix reporting relationship to the Director of Management Services.

C. Coordinate reporting of corrective actions resulting from audit findings with Regional Business Managers and contract coordinators.

2225 CONTRACTS

For responsibilities of staff involved in contracts and obtaining services through contracts, see chapter 10000, CONTRACT MANAGEMENT.

A. Headquarters staff in the Division of Management Services, DLR, or the Division of Program and Policy Development, as applicable, are responsible for the following:

1. Facilitate the resolution of problems, affecting contract performance, between the contractor and local CA staff when issues cannot be successfully resolved at the local or regional level.

2. Provide technical assistance and support to contractors and Administration field staff regarding issues arising from the provision of the contracted service(s).

3. Provide technical assistance and consultation to regional staff and contractors on contract issues as needed.

B. Staff in the contracts section of the Division of Management Services coordinate statewide contracting activities for the Division of Program and Policy Development, the Division of Children and Family Services (DCFS), and DLR.

C. The Division of Management Services contract management staff are the primary liaison with the department's contracts personnel in Central Contract Services (CCS).

2226 DIVERSITY

The diversity coordinator provides statewide coordination and oversight for diversity issues in CA. Specific requirements are identified in chapter 4000.

2227 QUALITY INITIATIVE

A. Executive Order 97-03 requires each agency to implement a quality improvement program. The continuous quality improvement approach has demonstrated improved performance in a wide range of public and private organizations. Successful quality efforts require effective leadership, strategic planning, customer focus, employee involvement, continuous improvement, and self-assessment of results.

B. Each agency is required to implement a program to improve the quality, efficiency, and effectiveness of the public service it provides. Improvement in quality is to be accomplished through:

1. Business process redesign, employee involvement (including involvement of recognized collective bargaining representatives), and other quality improvement techniques.

2. Provision of training to employees to enable them to successfully implement and complete their efforts in quality improvement.

3. Designation of a person in each agency to be responsible for improvement of the quality of the systems and work processes within the agency.

4. Establishment of a Quality Steering Committee composed of appropriate senior management, mid-management, front line staff, and support staff organizations.

C. The CA Quality Improvement Manager provides statewide coordination and technical assistance to support the Quality Initiative. The position is responsible for:

1. Planning, coordinating, and implementing activities to further the Quality Initiative.

2. Preparing the CA's annual quality improvement plan and revising as needed.

3. Providing training regarding continuous quality improvement (CQI) theory and practice for all organizational levels of CA.

4. Assisting quality improvement teams to use the continuous improvement strategy, including statistical process control.

5. Developing mechanisms to report on the status of implementation of the Quality Initiative and progress made by quality improvement teams.

6. Facilitating identification of priority areas for process improvement.

7. Designing, administering, and analyzing customer, client, and employee surveys.

2230 DIVISION OF PROGRAM AND POLICY DEVELOPMENT

The Division of Program and Policy Development provides statewide leadership, program support, and policy development to the major program areas directly administered by CA divisions. Program and Policy Development staff, under the leadership of the division director:

A. Facilitate staff support and respond to assigned tasks and projects at the direction of the Assistant Secretary or designee. Participate and coordinate with field staff in special project tasks.

B. Provide input to and staff support for policy development activity. Participate with and provide staff support to the process of writing policy and procedure for the CA Manuals, including the *Case Services Policy Manual*, the *Practices and Procedures Guide*, the *Indian Child Welfare Manual*, and this *Operations Manual*.

C. Review and interpret federal and state statutes for decision-makers and field staff. Inform decision-makers of needed changes and facilitate implementation of revised statutes.

D. Write Washington Administrative Code (WAC) rules in consultation with stakeholders.

E. Provide uniform interpretation and clarification of program policies and procedures for headquarters and field staff.

F. Assist field staff in the coordination and monitoring of service programs for compliance with statutes, regulations, and department policies to maintain program integrity and to evaluate system effectiveness. Monitor headquarters-managed contracts for compliance with contract terms.

G. Develop and design with regional staff and other department resources: pamphlets, brochures, and other materials necessary to improve the quality of programs and services.

H. Work with OCAR on the selection of research projects.

I. Provide information and program consultation to other department programs, regional staff, local offices, and community groups.

J. Perform public and community relations activities, in conjunction with other CA divisions.

K. Prepare, route for departmental, intergovernmental, and public review, as required, and submit to the funding source federal project grant applications and state plans and amendments.

L. In conjunction with the Regional Administrators and the headquarters management team, develop legislative proposals for Executive Management consideration.

M. Assign legislative bills for analysis, including those affecting other divisions and offices.

N. Coordinate requests from legislators and legislative staff to ensure that CA responses are timely and consistent.

O. Perform legislative bill analysis, analyze and comment on proposed regulations, and monitor legislation and legislative activity.

2231 OFFICE OF QUALITY ASSURANCE AND TRAINING

The Office of Quality Assurance and Training:

A. Develops internal evaluation systems and quality control mechanisms to improve existing CA programs and to promote and disseminate best social work practice within the Administration.

B. Develops tools, guidelines, and program standards for evaluating practice and program implementation.

C. Provides technical assistance and consultation to regions in developing and establishing regular program reviews, measures of program performance, workload tracking, and development of workload management strategies.

D. Conducts program reviews and provides ongoing assistance in implementing recommendations.

E. Identifies skills and characteristics that promote quality child welfare practice for line staff, supervisors, and management; utilizes information gathered to develop training plans for staff; shares information with regional managers for the purpose of improving hiring decisions. Identifies training needs on issues important to line staff, supervisors, management, and stakeholders and develops training resources to meet needs.

F. Provides Academy training for new social work staff, advanced social work skills, supervisory training, and training on special topics.

G. Edits and publishes a statewide *Practice Digest* that includes articles on practice strategies written by both CA staff and community sources.

2232 CORRESPONDENCE

The correspondence desk provides administrative assistance by reviewing, prioritizing, delegating, and coordinating assigned correspondence from the Governor's Office, the DSHS Secretary's Office, and the CA Assistant Secretary's Office. Correspondence desk staff coordinates manual distribution, manual updates, and records retention for headquarters. Staff also assigns and tracks Sunset Review Notices received from the Office of Forms and Records Management.

2240 DIVISION OF LICENSED RESOURCES

The Division of Licensed Resources (DLR) was established by Executive Order to improve the health and safety of children in out-of-home care, to strengthen monitoring and licensing of all licensed care resources, and to separate regulatory oversight from placement activities. The division is composed of the Office of Foster Care Licensing (OFCL), OCCP,-and a unit of investigators charged with investigation of allegations of child abuse and/or neglect in licensed childcare homes and facilities.

2241 OFFICE OF CHILD CARE POLICY

The duties of OCCP include:

A. Implementation of WAC minimum licensing requirements for family child day care homes and child day care centers to address health and safety of children in care.

B. Perform the activities necessary to license or certify family child day care homes and child day care centers as authorized under chapter 74.15 RCW.

C. Staff and assist the Child Care Coordinating Committee.

D. Work in conjunction with the state-wide Child Care Resource and Referral Network as well as local governments, nonprofit organizations, businesses, and community childcare advocates to create local childcare resource and referral organizations.

E. Actively seek public and private money for distribution to the statewide Child Care Resource and Referral Network and to existing or potential local childcare resource and referral organizations.

F. Adopt rules, in coordination with the Division of Program and Policy Development, regarding the application for and distribution of funds to local child care resource and referral organizations.

G. Arrange for the provision of training and technical assistance to childcare providers.

H. Develop and implement standards and procedures for OCCP childcare subsidy programs.

2242 OFFICE OF FOSTER CARE LICENSING

A. The duties of the Office of Foster Care Licensing (OFCL) include:

1. Implementation of WAC minimum licensing requirements for foster family child homes, staffed foster homes, group homes, child placing agencies, crisis residential centers, and overnight youth shelters to address health and safety of children in care.

2. Perform the activities necessary to license or certify family foster homes, residential facilities for youth, and child placing agencies as authorized under chapter 74.15 RCW.

3. Oversee and conduct Group Care Health and Safety Reviews, in conformity with chapter 5000, section 5400, of this manual.

4. Conduct and lead Health and Safety Reviews of foster family homes.

5. Conduct investigations of allegations of failures on the part of licensees to meet minimum licensing requirements.

6. Provide or arrange for the provision of Foster Parent Scope training for foster parents

B. See chapter 12000 of this manual and chapter 5000 of the CA *Practices and Procedures Guide* for the standards to be implemented by OFCL.

2243 FACILITY INVESTIGATIONS UNIT

The Facility Investigations Unit is responsible for conducting investigations of alleged child abuse and neglect (CA/N) in department-licensed, certified, and regulated facilities for children. The investigative staff conduct their investigations in accordance with the standards outlined in chapter 5000, section 5300, of this manual and the DLR *Child Abuse section Practice Guide - Investigating Abuse and Neglect in State-Regulated Care*.

2300 REGIONS

2310 REGIONAL RESPONSIBILITIES

The Regional Administrator for DCFS and the Regional Manager for DLR are responsible for regional performance expectations, service delivery, and administration of all activities related to DCFS or DLR services through the region's local offices and private contractors. The Regional Administrator is responsible for supervision and oversight of all DCFS activities in the region, while the Regional Manager is responsible for all OCCP or OFCL functions, as applicable. Specific responsibilities include the following:

A. Implement regional performance expectations and communicate Administration expectations to all staff.

B. For the Regional Administrator, participate as a member of the CA Management Team.

C. Develop regional allocation plans and manage expenditures of dollars and Full Time Equivalent (FTE) positions against the approved budget and allotments.

D. Establish adequate management oversight systems to ensure appropriate resource management, policy compliance, and monitoring and tracking of audit findings.

E. Develop and implement region-wide procedures to execute the policy provisions of federal and state law and the *Case Services Policy Manual*, the *Practices and Procedures Guide*, and this *Operations Manual* to maintain basic state-wide program consistency.

F. Disseminate state and regional office program and policy information to field staff.

G. Communicate the Administration's mission, goals, and objectives to all staff.

H. Communicate agency and Administration information to all staff to ensure adequate understanding of policy and resource issues.

I. Coordinate training opportunities for field staff with the Office of Quality Assurance and Training to ensure uniform implementation of state and regional programs and practices. Deliver regional training per CA policy, including monitoring compliance with mandatory training requirements.

J. Work to achieve satisfactory compliance with state and regional policy and procedure by monitoring service delivery in the region.

K. Respond to inquiries and provide policy interpretation and clarification for staff.

L. Identify, research, and implement solutions to problems affecting service delivery.

M. Develop community resources to assist and complement service delivery in the region.

N. Manage regional contracts for service provision and fiscal integrity, as applicable.

O. Appoint and provide support for regional committees as authorized by law or the Secretary.

P. Provide staff to participate in CA committees requiring regional representation to maintain a field-oriented approach to procedure development.

Q. Respond to media inquiries and to central office requests for information for other inquiries from the media and the legislature about children and family services issues or licensing issues, as applicable.

R. Develop and implement procedures for a system of adequate service delivery, within assigned responsibilities, within the region. Within available resources, this system shall be consistent with state workload standards and any applicable state policies and includes:

1. Local office organization and structure.

2. Reception and clerical support.

3. Intake and assessment

4. Case assignment.

5. Social service planning, delivery, and resolution.

6. Case consultation.

7. Case transfer.

8. Case resolution.

9. Privacy, security, and accuracy of social service and other records, including CAMIS.

10. Client and customer relations.

11. Quality improvement activities.

2320 EXCEPTIONS TO POLICY/WAIVERS

A. The department does not have the authority to waive provisions of the Revised Code of Washington (RCW) and federal laws and rules.

B. For DCFS programs and services, the Regional Administrator is delegated responsibility for granting all Exceptions to Policy (ETP) or waivers to rules, policies, or manual provisions, where such ETPs or waivers do not conflict with federal or state statute. The Regional Administrator may delegate all or selected subject areas to subordinate managers, if such delegation is done in writing.

C. For manual provisions and WAC relating to childcare licensing issues and other matters under his or her responsibility, the Director, DLR, is delegated responsibility for granting ETP or waivers. The Director, DLR, may delegate all or selected subject areas to subordinate managers, if such delegation is executed in writing.

D. The Director, DLR, is required to report monthly to the Assistant Secretary on all waivers regarding licensed or certified childcare facilities.

2330 COMMUNITY INTERAGENCY PROTOCOLS

A. The Regional Administrator is responsible for maintenance of active community involvement in the planning for services. Community resources and volunteers are part of the total resources available to fulfill service objectives.

B. The Regional Administrator or the DLR Regional Manager is authorized to enter into such interagency letters of agreement as deemed necessary to ensure the delivery of appropriate services to clients and to create and maintain improved working relationships with other agencies. The agreements may take a form determined by the Regional Administrator/Regional Manager or designee but must be in writing and signed by the parties. The agreements are not legal contracts and may not obligate the expenditure of state funds.

2340 BUSINESS MANAGEMENT

2341 PURPOSE AND SCOPE

A. Regional Administrators, Area Managers, and DLR Regional Managers are responsible for fiscal and resource oversight.

B. The Regional Business Manager plans and manages the business affairs of the region for DCFS and DLR, including fiscal and administrative planning, and administers management support services to field offices.

C. The Business Manager participates as an essential member of the region's management team, on vendor/community groups, and carries out statewide fiscal and resource activities under the direction of the CA Division of Management Services.

2342 BUSINESS MANAGER RESPONSIBILITIES

The Regional Business Manager performs the following and/or other functions as directed by the Regional Administrator or the Director, Management Services Division:

A. Supervision or oversight of administrative support functions, including: accounting/fiscal; budget; federal funding; contracts; personnel/payroll; procurement/purchasing; CAMIS training; facilities; equipment; and computer information.

B. Facility planning and management and/or coordination if co-located with other Administrations or divisions of the department.

C. Equipment management and procurement, including inventory oversight.

D. Preparation and justification of operating and program budget information. Development, with the regional administrative team, of distribution of allotments.

E. Timely preparation of regional monthly management reports, including the Monthly Management Report (MMR), new FTE report, and vacancy report, monitoring the region's total expenditures to the allotment. Analysis of the current data and project expenditures based on history, making recommendations to regional management. Review and determination of fiscal reporting needs for regional management staff's use in monitoring field office expenditures.

F. Development of regional procedures for contract administration, facility planning and management, accounting, procurement, disbursements, fiscal internal controls and audit responses; personnel and payroll; CAMIS training, and office automation/equipment.

G. Assistance to the SSPS regional coordinator in determining account codes as needed. Oversight of the review of SSPS payments. Review of SSPS codes and expenditure account coding to ensure accuracy.

H. Management and reporting on the monthly establishment of accruals, including review of the logic used, and accuracy of accruals.

I. Coordination and/or conduct of self-assessment; oversight and/or development of corrective action plans for findings of federal and state auditors pertaining to regional office operations; monitoring of local offices for timely compliance and completion of plans; coordination or conduct of internal control audits of local offices.

J. Determination and development of reports that will meet regional management information reporting needs.

K. Evaluation, development, and implementation of systems, policies, and procedures that will enhance client/staff services.

2400 COMMUNICATION

Communication among state, regional, and local offices occurs on an as-needed basis for purposes of consultation to carry out the job assignments of Children's Administration positions. However, staff must take direction from their own supervisor, or, in the supervisor's absence, through the established lines of reporting authority.

2410 CORRESPONDENCE

A. In recognition that each letter is an opportunity for improving public relations, CA staff assigned by the Headquarters Correspondence Desk to prepare responses to correspondence must meet due dates assigned by the Correspondence Desk.

B. Letters prepared by CA staff must respond to the pertinent issues. While point-by-point response for each issue may address the correspondent's stated concerns, these may miss the main point of the issues being raised. Accordingly, correspondence needs to address the larger issues raised.

C. CA staff preparing correspondence must ensure that editing, grammar, and content are accurate before submitting letters to the correspondence desk.

2420 TELEPHONE CALLS

2421 RESPONSE TIMES

To provide good customer service to clients, stakeholders, foster parents, and others, all CA staff must respond within 24 hours or the next business day of receipt to telephone calls within the staff's assigned responsibility, whether complaints or other types of calls. See DSHS Administrative Policy 14.18.

2422 COLLECT TELEPHONE CALLS

A. **Purpose and Scope**

1. This section establishes guidelines for CA staff to follow when asked to accept charges for a collect telephone call.

2. When receiving requests to accept charges for a collect telephone call, each CA employee must use the employee's best judgment in determining the necessity of accepting the charges.

B. **Guidelines**

1. The DCFS Area Administrator or DLR Regional Manager, as applicable, for field staff must establish criteria for acceptance of collect calls, including designation of staff authorized to accept the calls, so that appropriate calls are accepted and inappropriate calls are avoided.

Typically, CA staff may accept the charges for a collect telephone call from the following individuals:

a. A child/youth in the custody of CA;

b. A child/youth with a case open for services to CA;

c. The incarcerated parent of a child who is a CA client;

d. An individual with whom CA must make contact for case planning or investigative purposes; or

e. Other individuals with whom contact is necessary to promote the health and welfare of children served by CA.

2. The assigned social worker, the worker's supervisor, or other staff designated by the Area Manager will make efforts to reduce the number of collect telephone calls accepted by:

a. Providing clients with the toll-free number, where one is available, for his/her office;

b. Offering to call the client back immediately after initial contact has been made, if this would not jeopardize contact with the client;

c. Not accepting collect calls from individuals whose business would be expected to assume long distance telephone calls; and

d. Not accepting collect calls which are not necessary for case planning for a CA client.

3. After agreeing to accept the charges for a collect telephone call, the assigned social worker or the worker's supervisor will document in the client Service Episode Record (SER) that he/she agreed to accept the collect call and the reason for accepting the charges. The SER documenting the client contact may be used for this purpose. In addition, the person accepting the call will inform the business office or telephone billing coordinator of the call and anticipated bill by e-mail.

4. Staff of the Office of Children's Administration Research (OCAR) may accept collect telephone calls as part of research projects when such activities are part of the methodology designated for collection of data

CHAPTER 3000 CUSTOMER RELATIONS AND COMMUNICATION

CHAPTER 3000 CUSTOMER RELATIONS AND COMMUNICATION 3-1

3100 COMMUNICATIONS 3-1
3110 Citizen Participation 3-1
3120 Legislative Relations 3-1
3130 Media Relations 3-1
3140 Publications Management 3-1
3200 CITIZEN COMPLAINTS 3-1
3210 Expectation 3-1
3220 Review Process 3-1
3230 Confidentiality 3-2
3240 Non-Retaliation 3-2
3250 Definitions 3-3
3300 ADVISORY COMMITTEES 3-3
3310 CA Advisory Committees 3-3
3311 State Children's Services Advisory Committee 3-3
3312 Regional Committees 3-3
3320 Child Care Coordinating Committee 3-3

3100 COMMUNICATIONS

3110 CITIZEN PARTICIPATION

The department's requirements for creating, terminating, ensuring coordination of, and limiting duplication of advisory groups are contained in DSHS Administrative Policy 2.05.

3120 LEGISLATIVE RELATIONS

A. The department's expectations for staff relationships with legislative bodies and public officials are contained in DSHS Administrative Policy 1.01.

B. Departmental requirements regarding staff interaction with members of Congress and their staff is contained in DSHS Administrative Policy 1.04.

3130 MEDIA RELATIONS

The department's public information policy is contained in DSHS Administrative Policy 2.08. It requires maintenance of an open press policy and standardized procedures for media contact.

3140 PUBLICATIONS MANAGEMENT

The department's requirements for publications developed for distribution to audiences other than DSHS employees are contained in DSHS Administrative Policy 2.07. In addition, before publication, draft materials are to be reviewed and approved by the appropriate Director and the Assistant Secretary.

3200 CITIZEN COMPLAINTS

3210 EXPECTATION

Client and community complaints regarding Children's Administration (CA) actions, including those of the Division of Children and Family Services (DCFS) and the Division of Licensed Resources (DLR), will be reviewed in a timely, thorough, and fair manner. The department endeavors to resolve complaints at the lowest level possible but believes all levels of the organization must be accountable and responsible to individuals who are experiencing difficulties with CA's services.

RCW 74.13.045

3220 REVIEW PROCESS

A. To facilitate informal review and resolution of issues, CA will follow the steps outlined in chapter 388-74 WAC, Complaint Resolution, and will comply with the requirements of RCW 74.13.045, Complaint Resolution Process.

B. The citizen complaint procedures do not apply to:

1. Disputes regarding written personal service contracts or financial agreements;

2. Contested standard rate payments, contested rate payments, or exceptional payments above standard rates;

3. Decisions of the court;

4. Decisions regarding grant programs for which an appeal is available;

5. Decisions regarding civil rights actions covered under the department's civil rights complaint procedures;

6. A denial, suspension, or revocation of a license for which an appeal is available;

7. Child placement or removal actions of Children's Administration under RCW 26.44.050.

C. The citizen complaint procedures do not:

1. Create substantive rights in any person;

2. Create any rights to judicial or administrative hearings;

3. Constitute an "adjudicative proceeding" or an "agency action," defined in RCW 34.05.101;

4. Become subject to the provisions of the Administrative Procedure Act, chapter 34.04 RCW.

3230 CONFIDENTIALITY

A. The provisions of federal law, the Revised Code of Washington (RCW), the Washington Administrative Code (WAC), and CA policies regarding confidentiality of client records and information apply to this complaint procedure.

B. Participation does not affect a complainant's ability to access confidential client records and information.

C. Confidential records or information shall not be disclosed to complainants or other participants in the complaint review process unless authorized by law.

D. Review panel members who are not DSHS employees shall sign a confidentiality agreement prior to participating in the review process.

3240 NON-RETALIATION

CA and its staff shall not intimidate, threaten, coerce, or discriminate against any person who has complained, provided information, assisted, or participated in any manner in the complaint review process.

3250 DEFINITIONS

See Appendix A for definitions related to citizen complaints.

3300 ADVISORY COMMITTEES

3310 CA ADVISORY COMMITTEES

RCW 43.20A.360 and RCW 74.13.031 govern the creation and utilization of a statewide Children's Services Advisory Committee as well as Regional Oversight Committees.

3311 STATE CHILDREN'S SERVICES ADVISORY COMMITTEE

A. The task of the statewide committee is to assist the Secretary in the development of a partnership plan for utilizing resources of the public and private sectors and to advise on all matters pertaining to child welfare, adoption, and related services.

B. The statewide committee membership is a broad-based group of child and family advocates, at least one of whom is from the adoption community, who represent diverse geographic, cultural, political, service/treatment, and other professional constituencies.

C. The statewide committee consists of 18 members -- two from each region and six at-large. At least five members must be from Regions 1 and 2. One member of each regional committee shall represent the region as a member of the statewide committee.

D. Membership is by application to the Assistant Secretary, and members may serve a maximum of two three-year terms.

E. The statewide committee holds 10 regularly scheduled one-day meetings each year. Travel arrangements and reimbursement are handled through the state office for the committee.

3312 REGIONAL COMMITTEES

Regional committees meet on a regular or semi-regular basis, on a schedule determined by the Regional Administrator, based on local needs and activities.

3320 CHILD CARE COORDINATING COMMITTEE

A. The Child Care Coordinating Committee provides coordination and communication between state agencies responsible for childcare and early childhood education. Its membership includes representation from state agencies, family home childcare providers, childcare center providers, citizen groups concerned with childcare, resource and referral programs, educational institutions, and early child development programs, along with other interested sectors.

B. Among the committee's duties are to advise and assist OCCP in implementing childcare programs, to review rules regarding childcare facilities and services to identify those which unnecessarily obstruct the availability and affordability of

childcare in the state, and to perform other functions to improve the quantity and quality of childcare in the state.

CHAPTER 4000 NON DISCRIMINATION – MINORITY AFFAIRS

CHAPTER 4000 NON DISCRIMINATION – MINORITY AFFAIRS 4-1

4100 DSHS NON-DISCRIMINATION POLICY 4-1
4200 WORK FORCE DIVERSITY 4-1
4300 CULTURALLY RELEVANT SERVICES 4-1
4310 Placement 4-1
4320 Limited English Proficiency (LEP) 4-3
4330 Serving Persons with Disabilities 4-4
4400 NON-DISCRIMINATION RESPONSIBILITIES OF CONTRACTORS 4-5
4500 FOSTER AND ADOPTIVE HOME RECRUITMENT 4-5
4510 Inter-Ethnic Placement Act of 1996 (42 USC 671a) 4-5
4520 Recruitment Plans 4-6

4100 DSHS NON-DISCRIMINATION POLICY

Children's Administration (CA) shall comply with the Department of Social and Health Services (DSHS) non-discrimination policy and plan. See chapter 5000, section 5623, for non-discrimination provisions related to Blood Borne Infections.

A. No person shall be subjected to discrimination because of race, color, national origin, sex, age, religion, creed, marital status, disabled veteran or Vietnam era veteran status, disability, or sexual orientation. This policy applies to every aspect of CA programs, practices, policies, and activities, as well as to those of its contractors and licensees.

B. DSHS policy does not apply to religious corporations, associations, educational institutions, or societies with respect to employment of individuals of a particular religion. Marital status, disabled veteran status, and Vietnam Era Veteran status only apply to employment practices.

C. Sexual orientation is a criterion mandated by Governor's Executive Order #93-07. This criterion only applies to state government employment and does not apply to employment by contractors unless provided for under local law.

D. DSHS and CA policy are consistent with the Civil Rights Act of 1964, as amended; the Multi-Ethnic Placement Act (MEPA); the Inter-Ethnic Placement Act (IEPA); the Americans with Disabilities Act of 1990; Washington State Law Against Discrimination, chapter 49.60 RCW; and Governor's Executive Order 93-07.

4200 WORK FORCE DIVERSITY

A. CA is an equal opportunity employer and bases its employment practices on Affirmative Action requirements. The Administration's Affirmative Action Plan establishes hiring targets by job groups and protected group categories for all permanent classified positions.

B. The Administration's goal is to achieve a statewide workforce that reflects the ethnic and cultural composition of the client population in each service delivery area. In order to meet this goal, each region and headquarters maintains a staff recruitment plan which identifies hiring targets that are based on the ethnic and cultural composition of the client population and includes persons of disabilities.

4300 CULTURALLY RELEVANT SERVICES

CA respects and supports the ethnic identity and cultural diversity of the children and families it serves and seeks to provide culturally relevant services and to prevent discrimination on the basis or race, color, national origin, or disability in every aspect of service delivery.

4310 PLACEMENT

A. For adoption and out-of-home case planning, see CA *Case Services Policy Manual*, chapter 4000, section 4500.

B. For expectations regarding assessment of the suitability of prospective foster and adoptive parents to care for a particular child, see the CA *Case Services Policy Manual*, chapter 4000, section 4400, and chapter 8000, section 8300, and the CA *Practices and Procedures Guide*, chapter 4000, section 4200.

C. CA must not deny to any individual the opportunity to become an adoptive or a foster parent on the basis of the race, color, or national origin of the individual or of the child involved; and shall not delay or deny the placement of a child for adoption or into foster care on the basis of race, color, or national origin of the adoptive or foster parent or the child involved.

D. When family members cannot be located, foster or adoptive parents with the greatest ability to meet the child's psychological needs will be selected. In assessing the suitability of prospective foster and adoptive parents to care for a particular child, the CA social worker will consider the following factors:

1. The family's ability to form relationships and to bond with the child.

2. The family's ability to help the child integrate into the family.

3. The family's ability to accept the child's background and help the child cope with her or his past.

4. The family's ability to accept the behavior and personality of the child.

5. The family's ability to validate the child's cultural and ethnic background. A foster or adoptive family need not be of the same ethnic background as the child in order to meet the ethnic or cultural needs of the child. Unless CA staff identifies a compelling reason, the CA social worker will not match a child to a placement family on the basis of race of the child or family.

   a. The family's ability to cope with any forms of discrimination the child may encounter.

   b. The family's ability to care for or nurture self esteem in a child of a different race or ethnicity.

   c. The family's ability to maintain the child's ties to another racial, ethnic, or cultural community.

6. The family's ability to meet the child's educational, developmental, or psychological needs.

E. In order to assess culturally competent practice when reviewing cases for general practice considerations, the supervisor for the assigned social worker routinely will look for documentation of:

1. Consistent use of interpreters and translations when appropriate.

2. Use of culturally relevant resources.

3. Clear permanency planning that involves the child's family, their preferences, and ethnic community resources.

4. Family member placement resources and decisions made regarding the use of those resources.

5. Support services directed at increasing the capacity of family members to provide placement.

6. The ability of the foster or adoptive parents to nurture, support, and reinforce the child's identity.

7. The use of cultural consultation and resources by the social worker and the foster family.

8. All placement decisions and any placement changes.

9. Reasons for selection of a particular placement resource for a child. Unless CA staff identifies a compelling reason or ICWA applies, the CA social worker will not match children to a foster or adoptive family on the basis of race of the child or the family.

4320 LIMITED ENGLISH PROFICIENCY (LEP)

A. CA provides equal access to its services and programs to persons who do not speak English or have a limited ability to speak or read English well enough to understand and communicate effectively. Each limited English proficient (LEP) person must be provided oral and written information in their own language through certified or qualified interpreters and translators at every aspect of service delivery. LEP clients must be informed that they have the right to an interpreter or translator at no cost and without significant delay.

B. In order to ensure equitable service delivery to LEP clients, each DCFS and DLR region shall:

1. Post in each reception area multilingual signs which explain the availability of interpreter/translator services at no cost to the client.

2. Establish with the client the primary language in which the client prefers to communicate.

3. Record each client's primary language in the case file and in CAMIS.

4. Mark LEP on the outside of each limited English proficient client's file.

5. Indicate the name and date for each interpreter or translator used for each client in the service episode record (SER) or in the case file on the Client Language/Accommodation Assessment form.

6. File copies of translated documents in the case record with their corresponding English versions.

7. Obtain the services of an interpreter for limited English speaking clients, even though they have not requested the assistance of an interpreter, whenever there is difficulty in communication.

C. The following resources are available to CA staff to provide certified and qualified interpreters and translators for clients:

1. Identified staff members whose bilingual skills have been certified by passing a DSHS language fluency examination or by a DSHS recognized professional organization such as the American Translators Association or the State of Washington Administrator for the Courts.

2. AT&T Language Line Services which can access highly trained interpreters and linguists who speak more than 140 languages from any telephone, 24 hours a day. Toll free: 1-800-572-6096.

3. Certified or qualified interpreters or interpreter/translation agencies under contract to the Children's Administration.

4. DSHS Office of Language Interpreter Services and Translations (LIST) which will translate or coordinate translation of forms, publications, and information for clients.

D. Clients have the right to secure, at their expense, their own interpreter or to have a family member or friend serve as their interpreter. This does not waive CA's responsibility to arrange for a certified or qualified interpreter. CA staff shall not allow children to serve as interpreters for their parents.

4330 SERVING PERSONS WITH DISABILITIES

A. CA staff will provide equal access to its services and programs to persons who are deaf, deaf-blind, and hard of hearing in accordance with DSHS Administrative Policy 7.20.

B. CA provides equal access to its services and programs to persons with disabilities. The Administration will provide reasonable accommodations to all clients with disabilities and take steps to furnish appropriate auxiliary aids and services whenever necessary to make services accessible to persons with disabilities.

C. Primary consideration will be given to the preferences of the individual with the disability in determining what type of auxiliary aid or service is necessary. These auxiliary aids or services include, but are not limited to:

1. Telecommunications devices for the deaf (TDD). These devices are connected to telephone lines and enable persons who are deaf or hard of hearing to communicate through printed messages. Each local office must be equipped with a TDD or teletypewriter (TTY).

2. Washington State Telecommunications Relay Service, a statewide 800 service, which relays messages from TDD users to telephones. Telebraille is also available through the relay service.

3. American Sign Language (ASL), the native language of the deaf community in the United States. ASL is a visual-gestured language with vocabulary and grammar which is different from English.

4. Sign language interpreters. Whenever available, the services of an interpreter who is certified by the Registry of Interpreters for the Deaf (RID) and/or the National Association of the Deaf (NAD) is to be secured. If a certified interpreter is not available, a non-certified interpreter deemed qualified by the client may be used. A certified interpreter must be used for all medical and legal appointments.

5. Lip reading or note writing.

6. Qualified readers who read standard print materials to visually impaired or blind persons.

7. Extra large print versions of materials.

8. ASCII (American Standard Code for Information Interchange) text files for voice synthesizers and computer screen magnification.

9. Braille transcriptions.

4400 NON-DISCRIMINATION RESPONSIBILITIES OF CONTRACTORS

For responsibilities of contractors relative to non-discrimination, see chapter 10000, section 10600, and the DSHS Basic Contract, General Terms and Conditions.

4500 FOSTER AND ADOPTIVE HOME RECRUITMENT

4510 INTER-ETHNIC PLACEMENT ACT OF 1996 (42 USC 671A)

A. The Multi-Ethnic Placement Act (MEPA), as amended in 1996 by the Inter-Ethnic Placement Act (IEPA), mandates that race, culture, or ethnicity may not be used as the basis for any denial of placement, nor may such factors be used to as a reason to delay any foster or adoptive placement.

1. MEPA and IEPA, as amended, maintain~~s~~ a prohibition against delaying or denying the placement of a child for adoption or foster care on the basis of race, color, or national origin of the adoptive or foster parent, or the child involved.

2. The act also imposes a Title IV-E State Plan requirement prohibiting delay or denial of foster and adoptive placements on the basis of race, color, or national origin.

3. Failure to comply with these provisions of the Title IV-E State Plan requirements will subject the department to fiscal sanctions in cases where corrective action plans fai~~lure~~ to correct the problem within six months.

B. MEPA and IEPA, as amended, mandate agencies to provide for the diligent recruitment of potential foster and adoptive families that reflect the ethnic and racial diversity of children in the state for whom foster and adoptive homes are needed. Child welfare agencies must develop a recruitment plan that ensures that foster care and adoptive placements are available to dependent children and that dependent children are not subject to discrimination in their placement.

42 USC 671a

C. Children falling under the protections of the Indian Child Welfare Act of 1979 are exempt from the provisions of MEPA and IEPA.

D. CA shall provide for community based recruitment of foster and adoptive families who reflect the racial and ethnic diversity of the children served by the Administration through the Division of Children and Family Services (DCFS), with the assistance of the Division of Licensed Resources (DLR).

1. Each region will maintain a pool of potential foster and adoptive parents who are capable of promoting each child's development and case goals.

2. Regional recruitment efforts must reach all members of the community and provide potential foster and adoptive parents with information about the needs of available children, the nature of the foster care and adoption processes, and the supports available to foster and adoptive families.

3. Standards may not be used for foster and adoptive parents which are related to age, education, family structure, and size or ownership of housing or which exclude groups of prospective parents on the basis of race, color, or national origin.

4520 RECRUITMENT PLANS

Each DCFS Regional Administrator must develop a comprehensive recruitment plan which ensures that foster care placements and adoptive homes are available to dependent children, and that dependent children are not subject to discrimination in their placements. This plan will include:

A. A description of the characteristics of waiting children.

B. Specific strategies to reach all parts of the community.

C. Diverse methods of disseminating both general and child specific information.

D. Strategies for assuring that all prospective parents have access to the home study process, including location and hours of services that facilitate access by all members of the community.

E. Strategies for training staff to work with diverse cultural, racial, and economic communities.

F. Strategies for dealing with diverse linguistic barriers.

G. Non-discriminatory fee structures.

H. Procedures for a timely search for prospective parents for a waiting child, including the use of exchanges and other interagency efforts, provided that such procedures must ensure that placement of a child in an appropriate household is not delayed by the search for a same race or ethnic placement.

CHAPTER 5000 HEALTH AND SAFETY

CHAPTER 5000 HEALTH AND SAFETY 5-1

5100 CRITICAL INCIDENT MANAGEMENT 5-1
5110 Procedures 5-1
5111 Reporting Methodology 5-1
5112 Licensing Complaints 5-1
5113 Allegations of Child Abuse/Neglect in Facilities 5-1
5114 Serious Child Injury or Fatality 5-2
5120 Provider Reports 5-2
5121 Purpose 5-2
5122 Elements of Protocol 5-3
5200 CHILD DEATH REVIEW 5-5
5210 Policy 5-5
5220 Deaths to be Reviewed 5-6
5221 Anticipated 5-6
5222 Unanticipated 5-6
5223 Other DSHS Divisions 5-6
5224 Summary Table 5-7
5230 Procedures 5-7
5231 Fact-Finding 5-7
5232 Community Child Death Review 5-8
5232 Community Child Death Review Team Membership 5-8
5234 Staff Support 5-9
5235 Confidentiality 5-9
5240 Information to be Reviewed - Suggested Guidelines for Both Fact-Finding and Community Review 5-10
5241 Children's Administration-Specific Issues 5-10
5242 Systemic and Community Issues 5-10
5250 Findings and Recommendations 5-11
5260 Regional Administrator Submittals 5-12
5270 Children's Administration Responsibilities 5-12
5300 INVESTIGATING ABUSE AND NEGLECT IN STATE REGULATED CARE 5-12
5310 Introduction 5-12
5321 Purpose and Scope 5-13
5400 HEALTH AND SAFETY REVIEWS 5-14
5500 BACKGROUND INQUIRIES 5-14
5510 Authority 5-14
5511 Definition 5-14
5512 Required Record Checks 5-14
5513 CA Records Check 5-15
5514 Local Law Enforcement Check 5-15
5515 Criminal History Background Check 5-15
5520 Circumstances for Inquiries 5-15
5521 CPS Investigation and Unlicensed/Unexpected Placements 5-16
5522 Relative Placements 5-16
5523 Parental Placements 5-17
5524 Adoption 5-17
5525 Licensure or Re-licensure 5-17

5526 Non-licensed Contractors, Employees, Volunteers, and Other Persons 5-18
5527 CA Employees, Volunteers, Students, Interns, and Other Persons 5-19
5530 Name and Date of Birth Inquiry - Service Providers 5-20
5531 Service Providers To Be Checked 5-20
5532 Regular Name and Date of Birth 5-20
5533 Expedited Inquiry Process 5-21
5534 Cost 5-22
5540 Fingerprint-Based Background Inquiry Process 5-22
5541 Providers To Be Checked 5-22
5542 FBI Fingerprint Cards 5-24
5543 Applicant Responsibility 5-24
5544 CA Licenser Responsibility 5-24
5545 Payment 5-25
5550 Background Check Documentation and Record Retention 5-27
5560 Evaluation and Disposition 5-27
5561 No Record 5-27
5562 Child Abuse Record 5-27
5563 Enforcement Record 5-28
5564 Non-Conviction Information 5-31
5564 Disposition 5-31
5566 Right of Appeal 5-31
5570 Information Sharing 5-32
5580 State Office Responsibilities 5-33
5590 Offenses 5-33
5600 TRANSPORTATION FOR CHILDREN 5-34
5700 BLOOD BORNE DISEASES 5-34
5710 Blood Borne Pathogens Protection Plan 5-34
5711 Purpose and Scope 5-34
5712 Definitions 5-35
5713 Methods of Implementation 5-35
5720 Blood Borne Infections 5-39
5721 Purpose and Scope 5-39
5722 Definitions 5-39
5723 Implementation Practices/Procedures 5-40

5100 CRITICAL INCIDENT MANAGEMENT

A. The Children's Administration (CA) complies with DSHS Administrative Policies 8.02 and 9.01 for reporting and managing critical incidents as defined in Administrative Policy 9.01. See also the CA *Practices and Procedures Guide*, chapter 2000, section 2553.

B. This procedure outlines requirements for management and reporting of critical incidents in licensed facilities, or homes subject to licensing, homes certified for adoption, and incidents involving CA staff and facilities.

5110 PROCEDURES

5111 REPORTING METHODOLOGY

A. All reports of critical events alleged to have occurred in licensed facilities, or facilities subject to licensing, and homes certified for adoption shall be generated through the Case and Management Information System (CAMIS) Facility Complaint Module.

B. Incidents involving staff, volunteers, and other types of events are reported using the *Administrative Report of Incidents*, DSHS 20-192.

5112 LICENSING COMPLAINTS

A. Incidents which clearly reflect concerns about licensing (e.g., staffing ratios, cleanliness, menus) will be assigned to the licenser. If, during the course of the investigation, the licenser suspects child abuse/neglect, a new referral will be initiated and a joint Division of Licensed Resources (DLR) facility investigation/ licensing investigation will be conducted.

B. The results of investigations, including documentation of follow-up visits, compliance agreements, etc., will be recorded in the licensing file; i.e., CAMIS Facility Complaint Module.

5113 ALLEGATIONS OF CHILD ABUSE/NEGLECT IN FACILITIES

A. All complaints alleging child abuse/neglect in facilities shall be screened by CA intake. Complaints that do not meet sufficiency for CPS investigation shall be reviewed by the CA intake supervisor and referred to the licensing supervisor for assignment to the licenser for follow-up investigation and resolution. DLR facility investigation staff shall investigate all referrals meeting sufficiency for CPS investigation using the high standard of investigation without regard to the risk tag assigned to the referral. Investigative staff will route a copy of the referral to the licenser.

B. DLR CPS investigative and licensing staff will coordinate investigative activity with investigative staff assuming the lead responsibility.

C. As DLR investigative staff initiates the investigation, the investigative supervisor will report serious allegations to the Regional Manager and the Facility

Investigations Section Manager, who may decide to forward them further.

D. Progress reports will be verbal and in the CAMIS Facility Complaint Module from the investigative staff through the immediate supervisor to the Regional Manager and the Facility Investigations Section Manager, who reports to the DLR Director and Assistant Secretary/designee when appropriate.

E. If the investigator determines that CA/N occurred and risk of imminent harm exists relative to other children in the facility, an Area Manager is to be contacted immediately relative to removal of the children.

F. Investigative supervisors will consult with Regional Managers, the Facility Investigations Section Manager, Area Managers, and regional staff when appropriate, relative to suspension/revocation of licenses and stop placement orders. Assigned Assistant Attorneys General (AAG) will be consulted prior to final determinations.

5114 SERIOUS CHILD INJURY OR FATALITY

A. CA Intake will distribute information on serious child injury or fatality to the social worker or supervisor, the assigned licenser, and the appropriate Area Manager or, in that person's absence, the Regional Administrator, as well as the DLR Regional Manager when applicable.

B. In the case of an after-hours incident, the on-call supervisor is to be notified.

C. A report is to be generated through the Facility Complaint Module to be submitted to the Regional Administrator and the DLR Regional Manager, as applicable, the first working day following the incident.

D. DLR CPS investigative staff will coordinate all aspects of the investigation with the complete cooperation of licensing staff. Licensers will assist in the investigation and compilation of chronology as appropriate.

E. An incident chronology in the form of a final report with recommendations is due within two weeks of completion of the investigation, with copies to the DLR Regional Manager, the DLR Facility Investigations Section Manager, the Area Manager, and the Regional Administrator.

F. The Regional Administrator/designee and the DLR Regional Manager will report all serious and emergent incidents as defined in Administrative Policies 8.02 and 9.01 in accordance with those policies, with a copy of the report provided to the Director, Division of Program and Policy Development.

5120 PROVIDER REPORTS

5121 PURPOSE

A. Licensed or certified out-of-home care providers are required by WAC 388-73-056 to report serious incidents to the department.

B. To standardize reporting expectations, each DLR Regional Manager, in

consultation with the DCFS Regional Administrator and DLR facility investigation staff, develops a protocol with the region's out-of-home care providers and licensed child placing agencies (CPA) to identify what constitutes a critical incident and when they need to report an event or incident which occurs in their program.

5122 ELEMENTS OF PROTOCOL

A. The following occurrences are critical incidents which must be reported to CA Intake, with documentation kept on file by the provider. Contact by the provider with the child's assigned social worker occurs following notification to Intake.

1. Death of a child, in accordance with DSHS Administrative Policy 9-01.

2. Allegations of child abuse or neglect. (Failure to provide the level of supervision necessary to ensure a child's health or safety is considered an allegation of neglect by the caretaker which must be reported to CA Intake.)

3. Suicide attempts which result in injury requiring professional medical attention. Facilities which have on-site medical care staff are to report those injuries which require the attention of a physician.

4. Any use of physical restraint in which it is alleged that the restraint was improperly applied or excessive. Any physical restraint of a child by staff which results in child injury requiring professional medical attention. Facilities which have on-site medical care staff are to report those injuries which require the attention of a physician.

5. Sexual contact between two or more children. Developmentally typical play of pre-school age children with age-mates is exempt from this requirement and does not have to be reported to CA Intake.

6. Physical assaults between two or more children which result in injury requiring professional medical attention.

7. Unanticipated health problems caused by medications, resulting in the need for professional medical attention. Facilities which have on-site medical care staff are to report those injuries which require the attention of a physician.

8. Any medication incorrectly administered, resulting in the need for professional medical attention. Facilities which have on-site medical care staff are to report those injuries which require the attention of a physician.

9. Serious property damage which is not immediately corrected that may compromise the continuing health and safety of residents.

10. All violations of DLR licensing requirements must be reported to CA Intake except for non-abuse violations discovered by a licenser in the course of a licensing visit for which a deficiency statement is immediately

developed. Other licensing complaints are screened first by CA Intake to rule out the presence of allegations of abuse and neglect and then screened again by licensing staff for allegations of licensing violations.

B. The care provider shall report occurrences, not constituting child abuse/neglect or licensing deficiencies, to the child's DCFS social worker. Examples of such occurrences are:

1. Suicidal ideation, gestures, or attempts which do not require professional medical attention;

2. Unanticipated health problems outside the anticipated range of reactions, caused by medication, in which professional medical attention is not required;

3. Any medications incorrectly administered not resulting in the need for professional medical attention; and

4. Runaways.

C. The provider shall make all required reports to DCFS, and to DLR, as soon as the immediate crisis is resolved and in no case more than 48 hours after identification of the incident.

1. The following table summarizes the reporting and record retention requirements for the provider.

TYPE OF CRITICAL INCIDENT	REPORT NOW	HOLD ON FILE	CONTACT SOCIAL WORKER
Allegations of child abuse or neglect	X		X
Death of a child	X		X
Inflicted injury requiring outside medical attention or consultation		X	X
Inflicted injury	X		X
Physical altercations between residents that are not reported in another category of critical incidents		X	X
Restraint/take-down of a child by staff		X	X
Restraint/take-down resulting in injury	X		X
Police involvement of any kind		X	X
Property damage that compromises the health and safety of residents	X		X
Runaways		X	X
Illness: serious and communicable	X		X
Suicide: threats or attempts	X		X
Sexual contact involving residents	X		X

5200 CHILD DEATH REVIEW

5210 POLICY

Chapter 204, Laws of 1995 required the department, in conjunction with the Department of Health (DOH), local jurisdictions, coroners, medical examiners, and other appropriate entities, to develop a consistent process for review of unexpected deaths of minors in the state of Washington who are in the care of or receiving services described in chapter 74.13 RCW from Children's Administration (CA).

5220 DEATHS TO BE REVIEWED

5221 ANTICIPATED

A. The Regional Administrator, in coordination with the appropriate DLR Regional Manager, as applicable, must review all deaths that occur in CA licensed or certified homes or facilities.

B. The Regional Administrator must complete an internal fact-finding review of all expected or anticipated deaths of children whose families have received services from CA during the 12 months prior to the child's death or when there has been a CPS referral, whether accepted or not, within the previous 12 months.

C. The team developed must complete community child death review only after the Regional Administrator requests a review.

5222 UNANTICIPATED

A. The Regional Administrator must complete an internal fact-finding review of all unanticipated deaths of children whose families have received services from CA during the 12 months prior to the child's death.

B. All unexpected deaths involving minors in the care of or receiving child welfare services from DCFS or childcare services from DLR shall receive a community child death review. This includes not only deaths that may be a result of abuse or neglect, homicide or suicide, but also accidental trauma.

C. Sudden Infant Death Syndrome (SIDS) is a medical diagnosis, determined by autopsy and death scene investigation. SIDS deaths shall receive a community child death review.

D. The community child death review team must review deaths reported to CPS or CA Intake as being a possible result of child abuse or neglect.

5223 OTHER DSHS DIVISIONS

For child deaths in facilities owned, licensed, or certified by other divisions of DSHS, CA, by arrangement with that division, may participate with and assist the other division in the review of the death.

5224 SUMMARY TABLE

A. The following table summarizes death review activity:

CA CHILD DEATH REVIEW
Mandatory Fact-Finding by the Regional Administrator
▪ All unexpected deaths of minors receiving services from DCFS within the past year and unexpected deaths of children occurring in DLR-licensed facilities ▪ All anticipated deaths occurring in CA licensed or certified homes and facilities ▪ All anticipated deaths of children whose families received services from CA during the previous 12 months
Mandatory Community Child Death Review
▪ All unexpected deaths of minors receiving services from DCFS within the past year and unexpected deaths of children occurring in DLR-licensed facilities
Optional Community Child Death Review
▪ Requests for review of child deaths in facilities owned, licensed, or certified by other divisions of DSHS ▪ Anticipated deaths occurring in CA licensed or certified homes and facilities or in families that received services from CA within the previous 12 months

5230 PROCEDURES

A. Child death review requires at least two steps.

1. The first step is a **fact-finding** by the Regional Administrator. During this phase, the Regional Administrator gathers information about the death, including an examination of the case file and the status of the case. This activity may include community consultation and participation.

2. The second step is **community child death review**. If the death involves a felony, law enforcement will conduct an investigation as a third step.

5231 FACT-FINDING

A. Within 14 calendar days of notification of a child death, the Regional Administrator must designate staff to examine the circumstances of the child's death, with the review called a fact-finding. Community consultation and participation may occur as part of this activity. Within 45 calendar days, assigned staff will provide the Regional Administrator with a summary of the case, a chronology, and facts, consistent with criteria in section 5100, **CRITICAL INCIDENT MANAGEMENT.**

B. The fact-finding review should address practice issues as well as internal policy issues. Specific personnel issues should be addressed separately. Practice or policy issues requiring general corrective action should be addressed in an

accompanying action/corrective action plan. When that activity is completed, a case summary and chronology will be provided to the community review team.

C. For the fact-finding, the Regional Administrator may arrange for interview with any persons involved with the family or the deceased child, including:

1. Service providers;

2. Foster parents;

3. Therapists or staff from community agencies;

4. Parents or relatives of the child;

5. The assigned social worker, supervisor, Area Manager;

6. Any other person or persons considered to be relevant.

D. Fact-finding reports in the CA-prescribed format with action/corrective action plans must be sent electronically to the program manager for Child Fatality Review and to the Special Assistant to the Assistant Secretary in CA headquarters. Reports will be stored in an electronic filing system.

5232 COMMUNITY CHILD DEATH REVIEW

A. Community Child Death Review is a joint effort of CA and a multi-agency, multi-disciplinary team of professionals with two purposes:

1. To focus on both agency and community responses to the death and possible preventive steps to be taken.

2. To consider broader data, such as demographic information and systemic, community responses to the death.

B. When community child death review occurs, the information is referred to the region or community team responsible for review of CA child deaths. If such a team does not exist in the DCFS region or community, the Regional Administrator takes steps to establish such a team in conjunction with the local public health office and/or the technical assistance subcommittee of the State Child Death Prevention and Review Team. An *ad hoc* team may be used in the event a DOH/DSHS team cannot be assembled in a timely manner.

C. The Regional Administrator is responsible for tracking the progress and completion of child death reviews. Within 180 calendar days of the report of the death, the community child death review is to be completed. The Regional Administrator will inform the Assistant Secretary of any exceptions granted to this time frame.

5232 COMMUNITY CHILD DEATH REVIEW TEAM MEMBERSHIP

A. The team represents the community. CA is represented on the team as a full member, a resource, or as staff. The Regional Administrator will assure that

members have no conflict of interest with respect to the matters being reviewed. The representatives will not be in the lines of authority relative to the case being reviewed.

B. Members in sufficient numbers and diversity to ensure a full, competent assessment of the circumstances of the child's death will be included. Membership may include, but is not necessarily limited to, the following professional representatives.

1. Mental health;
2. Medical provider (pediatrics, obstetrics, or family practice);
3. Law Enforcement;
4. Child Protective Services;
5. Prosecuting Attorney;
6. Forensic pathology;
7. Public Health;
8. Social services;
9. The Military;
10. Chemical dependency specialists;
11. Medical Examiner/Coroner;
12. Tribes;
13. Schools;
14. Case or issue-specific professionals on an *ad hoc* basis.

5234 STAFF SUPPORT

Each Regional Administrator will reach agreement with the team chair on the provision of staff support, information, documents, and records as the team deems necessary to complete its review of each child death.

5235 CONFIDENTIALITY

A. All review team members must sign confidentiality statements before reviewing CA records or documents.

B. CA, not the community child death review teams, must release or make public findings or recommendations. Release of information is subject to laws regarding public disclosure and confidentiality. By statute, the deliberations of the DOH/DSHS fatality review teams are not disclosable. Aggregate information

without identifying data, including team recommendations, will be disclosed to the public in the annual report.

5240 INFORMATION TO BE REVIEWED - SUGGESTED GUIDELINES FOR BOTH FACT-FINDING AND COMMUNITY REVIEW

5241 CHILDREN'S ADMINISTRATION-SPECIFIC ISSUES

The purpose of reviewing these issues is to focus on practice-related issues. It identifies needed areas of agency and child protection system improvement and reviews case plans. The team may consider:

A. Were policies and procedures properly followed in any previous and current CPS investigation?

B. History of CA involvement with client and family.

C. A review of risk factors as identified on referrals and documented on summary assessments.

D. The social worker's assessment of the family and events immediately leading up to the incident.

E. Were case plans appropriate? Were services offered and provided? What was the family's level of participation in the case plan?

F. What was the juvenile court's role in this case?

G. What was the degree of follow-through and cooperation by the care provider in addressing corrective actions required as a result of earlier issues? Was CA staff follow-through on required corrective action adequate?

H. What commendable or outstanding work was done by workers and/or supervisors?

5242 SYSTEMIC AND COMMUNITY ISSUES

Since children and families are often served by several agencies or systems in a community, it is essential to consider how the family was served by the service network. The team may consider:

A. Did agencies involved with the family possess adequate information regarding the child or family in order to plan for protection of the child? If not, why not? Was important information available which was not gathered or used?

B. How did agencies interpret the available information? To what extent were the case plans based on accurate assessments?

C. What factors were most significant in increasing risk to the child and the child's siblings?

D. Did agency policies and procedures create obstacles to protecting the child? Are

there policies that would improve the agency's or community's ability to protect the child? Are there policies that would improve the agency's or community's protective service system?

E. Are there gaps in community resources which inhibited efforts to protect the child?

F. Were training needs identified and appropriate training provided?

G. Were the intervention strategies used consistent with accepted practice standards?

H. Are there changes in statute, policy, procedure, interagency collaboration, resource deployment or availability that would assist agencies in preventing deaths in similar situations?

I. Was the response following notification of the death appropriate for providing support to staff, foster parents, parents, and/or others?

J. The Regional Administrator, with participation from other CA divisions, may also formulate case-specific questions to be submitted to the team for review.

5250 FINDINGS AND RECOMMENDATIONS

Community Review findings and recommendations focus on identifying what can be learned to prevent future child deaths. The child death review team provides a written report to the Regional Administrator upon completion of the review.

A. Reviews are to identify system shortcomings and include review team recommended strategies and implementation steps.

B. Review findings are used to build community alliances, expertise, and commitments for program improvements, policy and procedural changes, and improved multi-disciplinary collaboration.

C. Findings can also identify program and system strengths, communication issues, and specific information regarding child mortality.

D. Findings and recommendations address the total community child protection system and are not limited to CA or DSHS programs.

E. Findings may address individual employee actions and decisions in the specific case under review.

F. CA headquarters must file reports with DOH in Olympia, using a CA-prescribed format. DOH will forward an aggregate report of findings and recommendations on DSHS cases collected by region to the CA headquarters program manager for Child Fatality Review on a quarterly basis.

G. Upon receipt of the DOH aggregate report, the program manager will send regional recommendations to the appropriate Regional Administrators for action.

5260 REGIONAL ADMINISTRATOR SUBMITTALS

The Regional Administrator will submit the following to the Assistant Secretary, with a copy to the Director, Division of Program and Policy Development and the program manager for Child Fatality Review:

A. Within 30 calendar days of receipt of the child death review team's findings and recommendation, a response to the team detailing plans for implementation and/or reasons for not implementing the recommendation(s).

B. An action or corrective action plan, if applicable, as well as quarterly progress reports as part of the regular regional quarterly reporting to the Assistant Secretary, with copies to the program manager for Child Fatality Review.

5270 CHILDREN'S ADMINISTRATION RESPONSIBILITIES

The Director, Division of Program and Policy Development, to fulfill CA responsibilities, completes the following steps:

A. Present community review recommendations that potentially affect statewide policy or procedure to the CA management team and appropriate DSHS program managers for review and action.

B. Provide written response to each community child death review team, subsequent to the team's submission of findings and recommendations. Provide updates to the team on implementation of recommendations.

C. Track and monitor actions to implement review team recommendations.

D. Provide regular reports of child death reviews to DCFS and DLR staff to increase their understanding of risks to children.

E. Prepare and distribute a report summarizing team findings.

F. Provide an annual report to the Secretary.

5300 INVESTIGATING ABUSE AND NEGLECT IN STATE REGULATED CARE

5310 INTRODUCTION

A. The Division of Licensed Resources (DLR) *Child Abuse and Neglect Section Practice Guide - Investigating Abuse and Neglect in State-Regulated Care* is a "how-to" guide to be used by the facility investigators in the course of investigations of alleged abuse and neglect in state-regulated care.

B. The guide expands the Washington State Risk Assessment Model, developed for investigation of abuse in biological families, to include risk factors specific to state-regulated care. Within the "state-regulated" care sub-group, there are many differences between types of care. The guide helps investigators assess the importance of those differences between types of care, while emphasizing the major similarities that need assessment in the course of an investigation.

5321 PURPOSE AND SCOPE

A. CA has a responsibility to ensure that high quality care is provided when a child is under state supervision or when a facility providing care is state-regulated. Minimum licensing requirements (MLR) define a higher standard of care than expected and legally allowed in a biological family unit. As a result, standards for accepting referrals for investigation of alleged abuse and neglect in state-regulated care encompass a wider range of allegations than those involving biological family units.

B. Child Protective Service (CPS) investigations of reports of alleged abuse or neglect in licensed, certified, and state-operated care facilities (child day care, foster care, group care, hospitals, and institutional care) have five main goals:

1. To ensure the immediate safety of alleged child victims;

2. To investigate allegations and make determinations regarding the existence of child abuse and neglect (CA/N);

3. To assess whether the child in question has been abused or neglected in a state-regulated setting in ways that have not been alleged;

4. To identify risk factors within the facility which create a substantial risk of future harm to children; and

5. To ensure consistency and equity toward providers in the investigation of abuse and neglect.

C. Investigations of alleged abuse or neglect must include assessments of the presence or absence of patterns of CA/N and/or inadequate care as well as documenting specific incidents of child maltreatment.

D. Investigations of alleged abuse or neglect in licensed care are distinct from investigations of compliance with MLR or certification standards. Nevertheless, when there is an investigation of alleged abuse or neglect in licensed care, the investigator must consider a history of compliance or non-compliance with MLRs or certification standards in his or her overall assessment.

E. Investigations of alleged abuse or neglect are expected to result in findings related to specific allegations of CA/N. The findings also include the presence or absence of other abuse or neglect in the licensed setting and record the important risk and protective factors present. Findings must have a strong factual basis, be supported by appropriate documentation, and include recommendations regarding disposition of the case.

F. See the DLR *Child Abuse and Neglect Section Practice* Guide - *Investigating Abuse and Neglect in State Regulated Care* for steps to follow for Intake, Investigation, Assessment, and Disposition of allegations of CA/N in state-regulated care.

5400 HEALTH AND SAFETY REVIEWS

CA staff must use the CA protocol *Health and Safety Review Standards - Procedures for Group Care and Therapeutic Foster Health and Safety Reviews* as the guideline for conducting health and safety reviews of this types of facilities. In addition, staff must comply with the provisions of the CA *Practices and Procedures Guide*, chapter 4000, section 4421, Health and Safety of Children.

5500 BACKGROUND INQUIRIES

5510 AUTHORITY

A. The department is required to safeguard the well-being of children, expectant mothers, and developmentally disabled persons receiving care away from their own homes, in licensed child caring agencies, and by contractors of the department by conducting background inquiries on those persons who would have contact with these vulnerable populations.

B. The essential requirements for conducting such checks are found in chapter 43.43 RCW, RCW 74.15.030, WAC 388-330, and DSHS Administrative Policy 9.04. This section elaborates on those requirements.

RCW 43.43.832; RCW 74.15.010; RCW 74.15.030

5511 DEFINITION

A required background check must include:

A. An investigation of CA records to determine if the person has a history of abuse or neglect of children; and

B. Criminal history convictions, pending charges, or other releasable information maintained by law enforcement.

5512 REQUIRED RECORD CHECKS

CA staff must not authorize unsupervised access to children until a satisfactory CA record check that meets CA standards to identify child abuse or neglect and a criminal history background check have been completed and documented in the following circumstances:

A. When placing a child or recommending about the suitability of a proposed or existing placement resource, including prospective placements approved by a licensed child placing agency (CPA);

B. When authorizing staff, volunteers, or other persons to have unsupervised access to children as part of the licensing or re-licensing of a facility or home;

C. When authorizing employees or volunteers of licensed facilities, who were not authorized during the license or re-license investigation, to have unsupervised access to children; and

D. When approving CA contractors, their employees, subcontractors, or volunteers to have unsupervised access to children.

E. Before authorizing payment for the care, supervision, or treatment of children up to age 18, including relative and in-home child day care providers. Such checks, with satisfactory results, must be completed annually.

5513 CA RECORDS CHECK

A. To complete a background inquiry, CA staff must include a check of CAMIS records to determine if the individual has a history with the department that may make issuance of a license, employment, contract, or placement inappropriate. CA staff must complete the CAMIS check according to local office procedure.

B. CA and licensed or certified child placing agency staff must not use unfounded reports of child abuse or neglect to deny employment or a license. CA staff must not disclose unfounded allegations of child abuse or neglect as defined in RCW 26.44.020 to a child placing agency, a private adoption agency, or any other provider licensed under chapter 74.15 RCW when that agency or provider is considering the alleged perpetrator of the unfounded child abuse or neglect as an employee, adoptive parent, or licensee.

RCW 74.15.030 and 74.15.130

C. CA staff may consider founded reports of child abuse or neglect in determining whether a person is disqualified from being licensed to provide childcare, employed by a licensed childcare agency, or authorized by the department to care for children.

RCW 26.44.100

5514 LOCAL LAW ENFORCEMENT CHECK

A. Local law enforcement agencies may have information in their records which has not been reported to the Washington State Patrol (WSP). Designated local office staff must do background inquiries with local law enforcement agencies where agreements have been executed to provide for the exchange of such information. As part of the criminal background check, the worker must contact local law enforcement agencies, including tribal police if the person resides or has resided on an Indian reservation or is known to be or may be affiliated with a particular Tribe. Assigned staff must document such checks in the applicable service file.

B. Law enforcement agencies generally expect CA staff to appear in person at their counter with appropriate identification, unless local agreements have been developed permitting other types of service.

5515 CRIMINAL HISTORY BACKGROUND CHECK

Assigned CA staff must complete a criminal history background inquiry of records of the WSP, local law enforcement records, and/or the Federal Bureau of Investigation (FBI) as specified in sections 5520 through 5580, below.

5520 CIRCUMSTANCES FOR INQUIRIES

Assigned CA staff must conduct criminal history background checks under the circumstances outlined below.

5521 CPS INVESTIGATION AND UNLICENSED/UNEXPECTED PLACEMENTS

Child Protective Services (CPS) has been designated as a limited purpose law enforcement agency by the WSP. As such, CPS has access to both conviction and non-conviction information about the perpetrator or alleged perpetrator of child abuse and unlicensed placement resources for placements contemplated under the authority of chapters 26.44 and 74.13 RCW.

A. A CPS criminal history background check may be completed for use:

1. In the investigation of an alleged perpetrator of abuse or neglect; or

2. To verify the safety of an unlicensed/unexpected placement resource as part of a CPS investigation or to approve an unexpected placement with an unlicensed caretaker.

B. Unlicensed/Unexpected Placements are those placements in which:

1. The placement was not anticipated or planned as part of the case plan for the child;

2. The caretaker is unlicensed and has been identified specifically for the child;

3. It is in the best interest of the child to be placed immediately; and

4. The safety of the caretaker will be initially assessed based on the results of a criminal history background check and the social worker's assessment of the persons suitability and competence. See the CA *Practices and Procedures Guide*, chapter 5000, section 5231.

C. When making an unexpected placement of a child with an unlicensed caretaker, the social worker shall complete a criminal history background check prior to the placement of the child, except for relatives exempted in section 5522.

D. Only authorized CPS and CWS workers may obtain a CPS level background check for the purposes specified in paragraph A of this section, by marking "CPS" or "CWS" on the DSHS 14-239(X) and by following the procedures outlined in section 5530, below.

E. CPS investigation and CWS unlicensed/unexpected placement requests for criminal history background checks are authorized to receive conviction and non-conviction information under the authority of chapter 26.44 and 74.13 RCW.

5522 RELATIVE PLACEMENTS

A. If a child is placed with a relative under RCW 13.34.060 or 13.34.130 and if such relative appears otherwise suitable, competent, and willing to provide care and treatment, the placing social worker need not complete the criminal history background check before placement, but must complete it as soon as possible after placement. RCW 74.15.030

B. When a child(ren) has been "placed" with a relative by their parent(s) prior to CA involvement, the social worker shall not immediately remove the child(ren), but assesses the risk to the child(ren) and the ability of the relative caretaker(s) to protect the child(ren) from further abuse and neglect. The social worker shall immediately initiate a CA case record check and a criminal history background check.

C. A relative placement check may be obtained by marking "CWS" on the DSHS 14-239(X) and by following the procedures outlined in section 5530.

5523 PARENTAL PLACEMENTS

A. CA is not required to conduct either a criminal history background check or a CA case record check when a child resides outside the parental home pursuant to an agreement between the parent(s) and the child, and the "placement" decision was made by the parent(s).

B. If CA becomes involved, is responsible for case planning, and the CA plan is for the child to continue residing in the home previously agreed to by the parent(s) and the child, the social worker shall initiate a criminal history background check and a CA case record check immediately.

C. A CWS placement check may be obtained by marking "CWS" on the DSHS 14-239(X) and by following the procedures outlined in section 5530.

5524 ADOPTION

A. All pre-placement adoption reports and CA authorized adoptive placements shall include a criminal history background check and a CA case record check which identifies convictions, pending charges, and disciplinary board final decisions of prospective adoptive parents.

B. Adoptive placements made by voluntary agencies do not require either a criminal history background check or a CA case record check through CA, unless CA authorizes the placement. The voluntary agency applies directly to WSP for checks on such placements.

C. Only authorized CA and CPA workers may obtain a background check for the purpose of adoption of a child by marking "Adoption" on the DSHS 14-239(X) and by following the procedures outlined in section 5530. It is critical to indicate "Adoption" on adoption checks to assure proper handling**.**

D. Adoptive placement requests for criminal history background checks are authorized to receive convictions and charges pending less than one year, under the authority of chapter 74.13 RCW.

5525 LICENSURE OR RE-LICENSURE

CA staff shall complete a criminal history background check prior to authorizing unsupervised access to children in licensed facilities and in accordance with the following:

A. When facilities are licensed or re-licensed under the authority of chapter 74.15 RCW, assigned CA staff shall complete a criminal history background clearance on the following persons prior to the licensing or re-licensing action:

1. Licensee, employees, volunteers, and other persons who may have unsupervised contact with children in care; and

2. All persons 16 years of age or older, excluding foster children placed by CA/DCFS or a licensed/certified CPA, and living with a licensed foster family or child day care provider.

B. All changes in persons not placed by CA and who may have unsupervised access to children in facilities licensed under chapter 74.15 RCW must be reported to the licenser immediately by the licensee. The licensed agency must forward the completed criminal history background check form to the CA licenser within seven calendar days for the following persons:

1. New employee hires and volunteers accepted by a facility; and

2. All persons 16 years of age or older, excluding foster children placed by CA/DCFS or a licensed/certified CPA, and living with a foster family or child day care provider.

WAC 388-330-040

3. Such persons must not have unsupervised access to children in care until a background check with satisfactory results is completed and documented.

C. Upon receipt of the background check inquiry, authorized CA licensers must initiate a licensing background clearance by marking "Licensing" on the DSHS 14-239(X) and by following the procedures outlined in section 5530, except for license applicants and employees of licensed agencies who have resided in Washington state less than three years, in which case licensers must follow the procedures outlined in section 5540, below.

D. Licensing requests for criminal history background checks are authorized to receive convictions and charges pending less than one year under the authority of chapter 74.15 RCW.

5526 NON-LICENSED CONTRACTORS, EMPLOYEES, VOLUNTEERS, AND OTHER PERSONS

A. Sections A-E have been rescinded and replaced by Policy 01-07 and WAC 388-06.

B. The department requires background checks on individuals who will have unsupervised access to children or to individuals with a developmental disability in homes, facilities, or operations licensed, re-licensed, or contracted by the department to provide care as required under chapter 74.15 RCW. Effective 10/01/01, all Children's Administration divisions, sections, and units must comply with WAC 388-06 for background checks. Refer to WAC 388-06 for the following:

1. Who must have a background check;
2. What is covered in the background check;
3. What criminal convictions permanently disqualify an person;
4. What criminal convictions disqualify a person for a limited time;
5. What elements are reviewed if a person has a non-disqualifying conviction;
6. Who has access to background check information; and
7. Implementation of the 120-day provisional-hire pending receipt of FBI background check results.

5527 CA EMPLOYEES, VOLUNTEERS, STUDENTS, INTERNS, AND OTHER PERSONS

A. Employees

1. CA supervisors, as part of the hiring process for prospective employees in covered positions directly responsible for the care, supervision, or treatment of children, shall initiate criminal history background checks in accordance with DSHS Personnel Policy 532.

2. Submissions shall **not** be made to the CA Background Clearance Unit, as it is not authorized to provide clearances in personnel matters.

B. CA Volunteers, Students, Interns, Other Persons

1. CA volunteers, students, interns, and other persons who may have unsupervised access to children and/or are authorized by CA or DSHS to provide care or supervision, including transportation, for children shall have a background check completed prior to having such access.

2. Authorized CA staff shall obtain a background check for the purpose of approving CA volunteers, students, and interns by submitting the Washington State Patrol form WSP-CRD-430 in accordance with the *Managers Manual*, Community Resource Development and Management, Volunteer Administration, Section 3.01.

3. Requests for criminal history background checks on CA volunteers are authorized to receive convictions of offenses against children or other persons, convictions for crimes relating to financial exploitation , but only if the victim was a vulnerable adult, adjudication of child abuse in a civil action, the issuance of a protection order against the respondent under chapter 74.24 RCW, and disciplinary board final decisions and any subsequent criminal charges associated with the conduct that is the subject of the disciplinary board final decision.

4. Submissions shall **not** be made to the CA Background Clearance Unit, as it is not authorized to provide clearances in CA volunteer matters.

5530 NAME AND DATE OF BIRTH INQUIRY - SERVICE PROVIDERS

5531 SERVICE PROVIDERS TO BE CHECKED

A. All criminal history background checks shall include a check of the **exact** name and date of birth match of WSP records, conducted through the CA Background Clearance Unit, except license applicants and employees of licensed agencies who have resided in Washington state less than three years.

B. While there are alternative methods of obtaining a state level background check, CA staff are expressly prohibited from using such alternatives, because they do not provide the same level of conviction and non-conviction information as is available through the WSP records.

5532 REGULAR NAME AND DATE OF BIRTH

A. Assigned CA staff initiate criminal history background checks by submitting a signed DSHS 14-239(X), *Criminal History & Background Inquiry* to the Background Clearance Unit.

1. The individual being checked must sign to authorize the check for licensing, contracts, and adoption.

2. The CPS or CWS worker may authorize the CPS or CWS check if the request to sign the form would in any way compromise the CPS investigation or placement.

B. CA staff shall verify the **exact** name and date of birth written on the form by the applicant by comparison to photo identification, preferably the applicant's Washington state driver's license.

1. Failure to submit an exact name and date of birth may result in the inability to link a record with an individual, resulting in a "no record" response on an individual with a record.

2. The social worker or other locally designated staff shall make all persons from whom CA is requesting a Social Security number aware that CA will be doing a criminal history record check. Should the individual choose not to disclose the Social Security number, the designated staff shall submit the check using whatever other indicators are available (i.e., birth date, maiden name, alias, etc.).

C. Within five working days of receipt of the completed DSHS 14-239(X) *Criminal History Background Check Request* form, the licenser, contracts coordinator, or other responsible CA staff, in accordance with regional procedures, shall submit the form with the original signature of the applicant to:

Children's Administration Background Clearance Unit
PO. Box 5712 - MS 45712
Olympia, WA 98504-5712

All requests for background inquiry information shall be made in writing and submitted by regular mail, except when meeting the criteria specified for an expedited background check in section 5533.

D. The licenser, contracts coordinator, or other responsible CA staff shall finalize actions, including written notification, to the licensee/applicant of the results of the check, within 10 working days of receipt of the completed form returned by the Background Clearance Unit.

5533 EXPEDITED INQUIRY PROCESS

Criminal history background checks may be expedited when the results are needed in the field in three days or less, and failure to do so would jeopardize child safety. There are two levels of expedited inquiries and they will be processed according to the following procedures:

A. **Priority Background Check**

1. Priority Background Checks are those inquiries for which:

   a. The request could not be anticipated; and

   b. The results are needed to complete a CPS investigation, an unlicensed/unexpected placement, or immediate service delivery; and

   c. Failure to respond within three days would jeopardize child safety.

2. CA staff complete the follow steps to request Priority Background Checks:

   a. Completion of the form, *Expedited Criminal History Background Check*, indicating "priority request";

   b. Signature by the social worker or designee that the request meets all three standards of paragraph 1, above; and

   c. Submission of the request to the CA Background Clearance Unit by fax at (360) 902-7931, or by mail under separate cover to M. S. 45712, Olympia, WA 98504.

3. The Background Clearance Unit will process priority requests within two working days of receipt whenever possible and will mail results back to the requester in the following day's mail.

B. **Emergency Background Check**

1. Emergency Background Checks are those inquiries for which:

   a. The request could not be anticipated; and

b. The results are needed immediately to complete a CPS investigation or an unlicensed/unexpected emergency placement; and

c. The imminent placement of a child depends on the results.

2. Social workers or designated staff request Emergency Background Checks by completing the following steps:

a. Completion of the form, *Expedited Criminal History Background Check*, indicating "emergency request";

b. Signature by a social worker, supervisor, or Area Manager that the request meets all three standards of paragraph 1, above; and

c. Faxed submission of the request to the Background Clearance Unit at (360) 902-7931.

3. Emergency requests which do not adhere to the procedures exactly will be processed as "priority requests."

4. The Background Clearance Unit will process emergency requests the day of receipt whenever possible and will mail results back to the requester in the next available outgoing mail or will fax the results back to the requester upon verification that the return fax maintains appropriate confidentiality standards.

C. When a background check is needed on an expedited basis and Background Clearance Unit staff are unavailable (e.g., after-hours or on weekends), the responsible social worker or other locally designated staff shall obtain criminal history information through a local law enforcement agency, in accordance with the local protocol between CA and law enforcement. This check will not include a fingerprint check.

5534 COST

All costs for processing and providing criminal history information matched by name and date of birth are charged to the CA Background Clearance Unit when the procedures outlined in this section are followed.

5540 FINGERPRINT-BASED BACKGROUND INQUIRY PROCESS

5541 PROVIDERS TO BE CHECKED

All criminal history background checks conducted on license applicants, employees, volunteers, and other persons with unsupervised access to children in care and who have resided in Washington state less than three years must include a fingerprint-based check of WSP and FBI records, conducted through the CA Background Clearance Unit.

A. Fingerprint checks must be completed on individuals who have resided in the state of Washington for less than three years from the date of their application for

license or employment in a licensed facility and who may have unsupervised access to children, expectant mothers, or developmentally disabled persons who are in the care of CA or in facilities licensed by CA, including, but not limited to, foster family homes, child day care homes and centers, and group homes.

1. These fingerprint checks must be completed prior to the issuance of a license or approval for employment in a licensed facility, except that an individual may be hired on a conditional basis if the individual will not have unsupervised access to children, expectant mothers, or developmentally disabled persons in care prior to completion of the check.

2. CA staff complete fingerprint checks on the following groups of individuals who have resided in the state less than three years:

   a. Applicants for agency license, licensees, their employees, and other persons who are present in the licensed facility, including volunteers.

   b. Individuals employed by licensed facilities, but who reside in other states, completed at initial employment and at each subsequent re-licensing of the facility.

3. If an FBI fingerprint check is required in addition to the state background check, an applicant for employment with an agency licensed or certified under chapter 74.15 RCW who has an acceptable state background check may be hired by the licensee for 120 days on a provisional basis, effective June 9, 2000, pending the outcome of the FBI check. The DLR regional manager may extend the provisional approval until receipt of the FBI check. If the FBI check disqualifies an applicant, the DLR licenser must notify the requesting licensee that the provisional approval to hire is withdrawn and the applicant may be terminated.

RCW 43.43.832

B. The following individuals do not need to have a duplicate FBI check done under the circumstances outlined:

1. Individuals who have had an FBI check completed, as authorized under RCW 74.15.030, showing no criminal record since moving to the state of Washington, and such check is documented in the CA licensing file, need not have another check completed at application for license or employment in a licensed facility.

2. Staff who move from one facility to another need not have the check redone if the completed check is documented in the licensing files. The individual shall complete the *Criminal History and Background Check*, DSHS 14-239(X), as with all other applicants.

3. If CA or the Division of Developmental Disabilities (DDD) has completed and documented an FBI check and the individual changes facilities and

documentation is needed by the other division, transfer of documentation will be completed by the centralized Background Clearance Units and forwarded to the regions. An applicant-signed request for transfer and licenser name must be submitted to the CA Background Clearance Unit prior to the transfer.

5542 FBI FINGERPRINT CARDS

A. CA staff shall use **Children's Administration-unique** fingerprint cards for obtaining fingerprints and information from the FBI. The use of unauthorized cards will prevent the results from being returned by the FBI to the CA Background Clearance Unit and a second FBI submission will be required.

B. Local office DLR staff will provide CPAs and group care agencies with CA-authorized FBI cards. The Background Clearance Unit has a supply of fingerprint cards and instructions. These supplies will be replenished on a request basis from the local offices and can be obtained by calling (360) 902-7927.

5543 APPLICANT RESPONSIBILITY

Persons for whom fingerprint checks are required shall take the steps outlined below to complete FBI fingerprint checks. If the instructions below are not followed **correctly**, the packet will be returned to the licenser, resulting in significant delay in the background clearance process. The applicant for license or employment shall:

A. Obtain from the local licenser for **each person** requiring fingerprinting:

1. Two FBI fingerprint cards, as the FBI requires WSP and FBI fingerprint card submission, to process the fingerprint check in Washington state prior to processing the FBI national check;

2. CA FBI Fingerprint Instruction Sheet; and

3. If applicable, a signed DSHS 05-220(X), *Children's Administration Fee Waiver.*

B. Complete the top section of the card in **black ink,** according to the CA FBI Fingerprint Instructions. Cards must be completed exactly as indicated in the instructions or they cannot be processed.

C. Have fingerprinting completed by any **local** police or sheriff's department, **not** the WSP. The local law enforcement agency will charge a processing fee of approximately $10 for the fingerprinting.

D. Submit proper payment to the WSP, as specified in section 5545, and the completed cards according to the CA Fingerprint Instructions.

5544 CA LICENSER RESPONSIBILITY

A. **No Contact With WSP or FBI**

1. The FBI background check investigation will take up to four months to complete. **There is no accelerated, expedited check capability** for this process due to WSP and FBI procedures outside the control of CA.

2. CA staff, not employed directly by the CA Background Clearance Unit, are expressly **prohibited** from contacting the WSP or FBI for any purpose related to the completion of a background check, due to WSP and FBI procedures to which CA must adhere.

3. CA licensers or other CA staff may check the status of a request pending more than four months by contacting the CA Background Clearance Unit. CA licensers or other CA staff shall **not** in any way support applicants or agencies in having direct contact with the WSP or the FBI, for any purpose related to the completion of a background check including inquiring about the status of a request or attempting to expedite the fingerprint process.

B. **Use of Information**

1. When the FBI/police and criminal history check is completed, the licenser will receive written documentation on the status of the WSP fingerprint check and the FBI fingerprint check from the Background Clearance Unit. This determination shall be maintained in the licensing file.

2. Disclosure of the information provided to the licenser on the WSP and FBI check shall be made in conformance with section 5570.

5545 PAYMENT

A. **Employer Payment**

Chapter 74.15 RCW specifies that the employer shall not pass on the cost of the fingerprint check to the employee, except in those cases when the results of the fingerprint-based background check results in the employee's disqualification from employment.

B. **Payment Method**

1. The applicant/licensee shall make payment for a fingerprint-based background check payable to the **Washington State Patrol**, submitted in the form of:

   a. Money order;

   b. Commercial business account check;

   c. Cashier's check; or

   d. Signed CA Waiver of Payment as specified in section 5545.C.3.

2. **No personal checks or cash will be accepted for payment.** Without a fee payment in the prescribed manner, the request for an FBI check will be rejected.

C. **Payment Amount**

1. There is no refund process if the applicant decides not to continue the licensing process or if the applicant is denied a license due to information contained in the FBI/police and criminal history check.

2. All applicants who do not meet the definition of volunteer or qualify for a CA Waiver shall submit payment of $55.

3. Unpaid agency volunteers who shall receive only cost reimbursement and no salary and licensed foster home applicants who do not qualify for a waiver of fees shall submit payment of $49.

4. **Fingerprint Fee Waiver for Foster Family Home Licensees**

a. CA has determined that a "hardship," as required by the authorizing statute, exists for the foster family home provider when the provider agrees to accept for placement children in circumstance outlined below. DLR will waive fee requirement for foster family home applicants when one of the following conditions exist:

i. The home is being licensed to take a child(ren) in the care and custody of CA;

ii. CA is or will be making payment for care of a child(ren) in the home;

iii. The home is a relative being approved to take a child(ren) in the care or custody of CA; or

iv. The home is a relative being approved to care for a child(ren) for whom CA is or will be making payment.

b. The approximate $10 fee for fingerprinting is paid to the local law enforcement agency performing the service and cannot be waived.

c. The licenser must approve the waiver using DSHS 05-220(X), *Children's Administration Fee Waiver*, and document it in the licensing record.

i. The completed form must accompany any fingerprint cards for which a waiver is being provided.

ii. Additional forms may be ordered from the Forms Warehouse.

iii. The waiver must be signed by the OFCL Regional Manager or the CA Regional Business Manager.

iv. Foster family homes certified by a CPA and licensed by DLR may have the fee waived only when the home meets the criteria specified in this section and the fingerprint submission is accompanied by a waiver form signed by the OFCL Regional Manager or CA Regional Business Manager.

5. **Other Waivers**

RCW 74.15.030 permits waiver of fees only for payment for foster family homes.

5550 BACKGROUND CHECK DOCUMENTATION AND RECORD RETENTION

A. Designated CA local office staff will keep sufficient information to show that appropriate required background inquiries have been completed where required. Licensers must maintain entries in appropriate records indicating who ultimately received the information and how it was disseminated.

B. CA local offices retain returned inquiry forms for the duration required of all licensing file records. Following revocation of a license, the form must be retained indefinitely in the licensing file.

C. Licensers must not issue full licenses nor authorize unsupervised access to children by licensees, employees, or volunteers until criminal history checks, including fingerprinting when required, have been completed and documented.

5560 EVALUATION AND DISPOSITION

Local or regional CA staff must take action based on information resulting from the background inquiries and must not license or authorize those persons to provide care who have been convicted of or have charges pending for offenses listed in section 5590 or who appear in child abuse records as perpetrators of founded child abuse or neglect.

5561 NO RECORD

If the background inquiry reveals no criminal convictions, no WSP or CAMIS child abuse record information, or pending charges, no further action is necessary to complete the background check. However, results of the background check are not the only indicators of character and suitability.

5562 CHILD ABUSE RECORD

If the background inquiry reveals that the person is identified as a perpetrator of founded Child Abuse or Neglect (CA/N) in CAMIS or in WSP files, that person must not be licensed, employed by licensees or contractors, serve in a volunteer

capacity for licensees or contractors, or otherwise be authorized by the department to provide care of or have access to children.

5563 ENFORCEMENT RECORD

A. Conviction for Disqualifying Offense

1. If the background inquiry reveals that the person has been convicted of any offenses listed in paragraph 2 or 3 below or section 5590, or their equivalents in other jurisdictions, or is listed in the WSP child abuse record information, the social worker must deny the license or authorization to provide care.

2. In any case, if the inquiry reveals a felony conviction for child abuse or neglect, for spousal abuse, for a crime against children (including child pornography), or for a crime involving violence, including rape, sexual assault, or homicide, but not including other physical assault or battery, the convicted felon is permanently prohibited from being a licensed out-of-home care provider or certified as an adoptive parent. The licenser or adoption worker must not license or certify the applicant. CA must not waive this provision because federal law requires the permanent prohibition. CA staff must never accept a certificate of rehabilitation that would excuse these crimes.

42 USC 671(a)

a. The crimes in Washington state law that constitute a felony for purposes of this paragraph include:

i. Abandonment of a Dependent Person – 1st degree
ii. Abandonment of a Dependent Person – 2nd degree
iii. Aggravated Murder – 1st degree
iv. Arson - 1st degree
v. Arson - 2nd degree
vi. Child Molestation – 1st degree
vii. Child Molestation – 2nd degree
viii. 5000-39
ix. Child Molestation – 3rd degree
x. Child Selling – Child Buying
xi. Criminal Mistreatment – 1st degree
xii. Criminal Mistreatment – 2nd degree
xiii. Dealing in Depictions of a Minor Engaged in Sexually Explicit Conduct
xiv. Family Abandonment
xv. Felony Communication with a Minor for Immoral Purposes
xvi. Felony Indecent Exposure
xvii. Homicide by Abuse
xviii. Incest – 1st degree
xix. Incest – 2nd degree
xx. Indecent Liberties
xxi. Kidnapping - 1st degree
xxii. Kidnapping - 2nd degree
xxiii. Luring

xxiv. Manslaughter – 1st degree
xxv. Manslaughter – 2nd degree
xxvi. Murder – 1st degree
xxvii. Murder – 2nd degree
xxviii. Patronizing a Juvenile Prostitute
xxix. Possession of Depictions of a Minor Engaged in Sexually Explicit Conduct
xxx. Rape – 1st degree
xxxi. Rape – 1st degree – domestic violence
xxxii. Rape – 2nd degree
xxxiii. Rape – 2nd degree – domestic violence
xxxiv. Rape – 3rd degree
xxxv. Rape – 3rd degree – domestic violence
xxxvi. Rape of a Child – 1st degree
xxxvii. Rape of a Child – 2nd degree
xxxviii. Rape of a Child – 3rd degree
xxxix. Sexual Exploitation of a Minor
xl. Sexual Misconduct with a Minor – 1st degree
xli. Sexual Violation of Human Remains
xlii. Unlawful Imprisonment

3. In any case in which a record check reveals a felony conviction for physical assault, battery, or a drug-related offense within the past five years from date of application for foster care license or adoption certification, the licenser or adoption worker must not license or certify the convicted felon. CA must not waive this provision because federal law requires the exclusion. CA staff must not accept a certificate of rehabilitation that would excuse the five year period.

42 USC 671(a)

a. Conviction of one the felonies listed below, as identified in Washington state law, within the past five years disqualifies a person from being approved for placement of a child:

i. Any felony violation of Imitation Controlled Substances Act
ii. Any felony violation of the Legend Drug Act
iii. Any felony violation of the Precursor Drug Act
iv. Any felony violation of Uniform Controlled Substances Act
v. Assault – 1st degree
vi. Assault – 1st degree – domestic violence
vii. Assault – 2nd degree
viii. Assault – 2nd degree – domestic violence
ix. Assault – 3rd degree
x. Assault – 3rd degree – domestic violence
xi. Assault of a Child – 1st degree
xii. Assault of a Child - 1st degree – domestic violence
xiii. Assault of a Child – 2nd degree
xiv. Assault of a Child – 2nd degree – domestic violence
xv. Assault of a Child – 3rd degree
xvi. Assault of a Child – 3rd degree – domestic violence

xvii. Assault or Reckless Endangerment in Violation of Protection Order
xviii. Assault or Reckless Endangerment in Violation of No Contact Order
xix. Controlled Substances Homicide
xx. Felony violation of a protection order
xxi. Felony violation of a no contact order
xxii. Unlawful Use of a Building for Drug Purposes

4. CA staff need to consult their assigned Assistant Attorney General or contracted County Prosecutor if the staff need clarification about the meaning of any of the listed crimes or their application to licensing or certification actions.

B. **Conviction for Non-Disqualifying Offense**

1. If the background inquiry reveals that the person has been convicted of an offense not listed in section 5590, the social worker must consider such information in determining the character, suitability, and competence of the prospective caretaker as required by chapter 74.15 RCW and WAC 388-73-030. The fact of such conviction must not in itself be the basis for denial of licensure or authorization to provide care.

2. Under exceptional circumstances, except as described in section 5563(2) and (3), an individual convicted of a crime may not automatically be prohibited from contact with children solely because of the conviction. The social worker may consider the following factors when contemplating whether to proceed with licensure:

a. The type of crime for which the individual was convicted;

b. The number of crimes for which the individual was convicted;

c. The nature of the offense(s);

d. The age of the individual at the time of conviction;

e. The length of time that has elapsed since the last conviction;

f. The relationship of the crime and the capacity to care for children;

g. Evidence of rehabilitation;

h. Opinions of community members concerning the individual in question.

C. **Pending Charges**

If the background inquiry reveals that charges are pending against the person for any of the offenses listed in section 5590 of this chapter, or their equivalents in

other jurisdictions, the social worker must withhold a care provider's license or authorization to provide care until dismissal or acquittal occurs.

1. Pending charges for other offenses may be grounds for withholding licensure or authorization to provide care.

2. Pending charges may be reason for suspending, summarily or otherwise, the license of an already licensed agency.

3. If the background inquiry reveals that pending charges are more than one year old, the designated CA staff person must make further inquiry with the charging law enforcement agency to determine the disposition or status of the charge.

4. Unless there is a disposition within the 90-day application period, the licenser or social worker must deny or close the application if the applicant has pending charges related to an offense which would adversely affect licensure. The individual may reapply following a disposition of the charge. CA staff may not take pending charges which are more than one year old as grounds for a licensing action unless the case is still active because of a continuance.

D. For purposes of background checks, CA staff may use convictions for crimes relating to drugs as a tool for investigation and may use these convictions for any decision regarding the person's suitability for a position in which the person may have unsupervised access to children or vulnerable adults. For the definition of "Crimes Related to Drugs," see Appendix A.

RCW 43.43.835

5564 USE OF NON-CONVICTION INFORMATION

Aside from a charge pending less than one year, CA staff must not use non-conviction information as the sole basis for a disciplinary action on a license. Non-conviction information may, however, create a basis for further investigation, especially background queries to other law enforcement agencies.

5564 DISPOSITION

A. CA will deny, suspend, or revoke the license of any applicant, chief executive, owner, operator, and/or administrator of any agency if the person has been found to fall under the provisions of WAC 388-73-036.

B. As required by WAC 388-73-030, CA staff must disqualify from providing care any person (including licensees, staff, or other persons on the premises) having a history of offenses which indicates that the person is not of good character and/or may not have the emotional stability and personality to meet the needs of persons in care.

5566 RIGHT OF APPEAL

See WAC 388-330-035 for standards for a disqualified person's right of appeal and steps to be followed.

5570 INFORMATION SHARING

Sections 5570 B and 5570 E4 are rescinded and replaced by Policy 01-07 and WAC 388-06. (April 2002)

CA staff may share information from the background inquiry only with the person whose background has been checked. Staff may share the information with others if the subject person has signed a specific authorization to do so. Such a release of information authorization is located on the back of the DSHS 14-239(X). All information received from the FBI or WSP is authorized for use by DSHS only for the purpose for which it was obtained, and, as such, it cannot be disclosed or disseminated to a third party.

A. Designated CA staff must notify the applicant of the WSP's response within 10 days after receipt of the information. The staff must provide a copy of the response to the applicant, if requested.

RCW 43.43.834

B. Staff must follow WAC 388-06-0250 with regard to the sharing of background check information with employers or approved care providers. (April 2002)

C. CA staff may provide information within DSHS on a need-to-know basis. Dissemination of conviction records and pending charges to individuals with a need to know is unrestricted within the department.

D. Department staff must not give a returned background inquiry form or "rap sheet" or a copy of such to any person who is not an employee of the department.

E. A person with convictions may have unsupervised access to children or individuals with a development disability in two situations. Refer to WAC 388-060-190 for details of the two situations and the criteria for considering approval of a person with a conviction history. (April 2002)

F. If a person is disqualified, the appointing authority or designee must give written notice of disqualification to the person. The appointing authority/designee must inform the individual before notifying the childcare agency.

1. The disqualified person's notice must state what the person is disqualified from doing, the reasons for the disqualification, and the applicable law under which the person is disqualified.

2. The notice must inform the disqualified person of their right to a fair hearing under RCW 43.20A.205.

3. A licensee or contractor may not allow a person disqualified under this policy to associate with the licensee or contractor's agency. Disqualification of a person may not be contested by a licensee or contractor.

4. Except as described in section 5563(2) and (3), above, the department may remove a disqualification based on conviction of a crime or other

reason if the disqualified person demonstrates by clear, cogent, and convincing evidence that the person is sufficiently rehabilitated to warrant public trust and to comply with the requirements of chapter 74.15 RCW.

5580 STATE OFFICE RESPONSIBILITIES

A. Designated Background Clearance Unit staff within the Division of Management Services conduct criminal history inquiries and review the WSP abuse record information system. They will check for criminal history against any name used by the subject, the subject's birth date, and the subject's Social Security Number, if provided.

B. Background Clearance Unit staff return findings to authorized personnel from the office which forwarded the background inquiry.

C. Background Clearance Unit staff maintain a log of persons for whom criminal history inquiries have been done.

5590 OFFENSES

Sections 5590 A and B have been rescinded and replaced by CA Policy 01-07 and WAC 388-06.

CA social workers and licensors must refer to the lists of crimes in Children's Administration Policy 01-07 when approving a person for unsupervised access to children or individuals with a developmental disability in addition to those listed above in section 5563(A)(2) and (3). (April 2002)

A. **Juvenile Rehabilitation Administration Facilities**

1. Engrossed Second Substitute Senate Bill 6445, Chapter 269, Laws of 1998, passed in the 1998 legislative session, amended chapter 72.05 RCW to prohibit regular access of employees or volunteers convicted of certain crimes to juveniles in facilities under Juvenile Rehabilitation Administration (JRA) jurisdiction. This provision is effective September 1, 1998.

   a. See WAC 275-37-010 for the definition of "regular access."

   b. This list of crimes differs somewhat from the list of crimes contained in WAC 388-06-170, 388-06-0180 and CA Policy 01-07.

   c. JRA has adopted, effective September 1, WAC 275-37-010 and 275-37-030 to implement the statutory requirement.

2. For facilities licensed by CA to serve JRA clients, in addition to the crimes listed in WAC 388-330-030, the DLR OFCL Regional Licenser must exclude as licensees or employees or volunteers of licensees, having regular access to youths in care, persons convicted of any of the following crimes:

a. Any conviction for a felony offense in effect at any time prior to July 1, 1976, that is comparable to a felony classified as a "violent offense" under RCW 9.94A.030Any federal or out-of-state conviction for an offense that, under the laws of the state of Washington would be a felony classified as a violent offense
b. Any felony defined under law as Class A Felony or an attempt to commit a Class A Felony, criminal solicitation of or criminal conspiracy to commit a Class A Felony
c. Assault of a child in the second degree
d. 5000-46
e. Drive-by shooting
f. Holding a corrections officer hostage
g. Indecent Liberties if committed by forcible compulsion
h. Sexually violating human remains
i. Vehicular Assault
j. Vehicular Homicide when proximately caused by the driving of any vehicle by any person while under the influence of intoxicating liquor or any drug defined by RCW 46.61.502 (legally drunk), or by the operation of any vehicle in a reckless manner

3. For any facility licensed to serve JRA youth, any licensee, employee, or volunteer of the facility who is convicted of any crime identified in CA Policy 01-07, must report this information to the individual's supervisor within seven days. The licensed agency must then notify the DLR OFCL Regional Licenser immediately upon receiving this information. The facility management must allow no contact by individuals convicted of these crimes with children in care.

5600 TRANSPORTATION FOR CHILDREN

Any CA staff, volunteers, interns, or foster parents transporting children, whether in a privately owned or state vehicle, shall ensure that the children use age-appropriate child safety seats or restraints. Such driver must also possess a current, valid driver's license and liability insurance.

5700 BLOOD BORNE DISEASES

5710 BLOOD BORNE PATHOGENS PROTECTION PLAN

5711 PURPOSE AND SCOPE

A. Employers must assess the risk to employees for a reasonably-anticipated potential for occupational exposure to blood and other potentially infectious materials during the course of performing their assigned duties. Although the risk of occupational exposure to blood borne pathogens (BBP) has been determined to be quite low for Children's Administration personnel, CA has stipulated this *Blood Borne Pathogens Protection Plan* to further minimize the risk of exposure, to provide guidance addressing unexpected exposure to blood and/or bodily fluids, and to meet requirements set forth by the Occupational Safety and Health Administration (OSHA), and the Washington Industrial Safety and Health Act (WISHA).

B. The plan applies to and is accessible to all employees and will be reviewed and updated annually, or as required by statute.

5712 DEFINITIONS

Definition of terms applicable to the Plan is found in Appendix A.

5713 METHODS OF IMPLEMENTATION

A. General

All employees will use *Universal Precautions* (see Appendix A) whenever there is reasonably anticipated contact with blood or other potentially infectious fluids.

B. Safe First-Aid Practices

1. The Regional Administrator or appropriate Director shall ensure that each office provides and maintains first aid kits and equipment which minimally include several sets of gloves, CPR protective shields, germicidal hand wipes, and plastic disposal bags.

2. First line supervisors in each office shall inform their employees of the location of, and ensure that they have immediate access to, first aid equipment and will encourage them to use it while rendering first aid.

3. Staff designated by the Regional Administrator or the applicable Director shall determine the location of first aid kits, to include placement in state cars and in office reception areas, bathrooms, and kitchens. Designated staff shall develop local procedures which include local office information and methods for documenting notification to staff.

4. The office procedures shall designate and identify staff responsible for stocking of the kit and include posting names of responsible staff.

5. Whenever blood or other potentially infectious materials may be present, the employee rendering first-aid shall use appropriate personal protective equipment, such as gloves. The employee shall immediately wash his/her hands after gloves are removed.

6. The person giving CPR shall use a one-way valve micro-shield and then appropriately discard it.

7. If there is more than one victim, the person giving assistance shall use new protective equipment, such as gloves and CPR micro-shields, for each victim.

C. Disposal of Contaminated Items

1. Staff shall handle all material exposed to and contaminated with blood or other potentially infectious materials with gloves. Staff shall place and transport contaminated material in a plastic bag that prevents soak-through and/or leakage to the exterior.

2. The employee shall label the bag as to contents with label prominently displayed and dispose of contents in trash bins unless contents meet the definition of regulated waste (See Appendix A). In that case, the employee shall dispose of contents in accordance with state and local regulations; e.g., by taking the bag to a local hospital or medical clinic for disposal, by depositing with the fire department's emergency response team on the scene, or by calling the local solid waste utility for further information.

D. **Laundry**

1. To prevent the spread of contamination, staff shall remove all clothing that has been contaminated with gloves and place it in a plastic bag that prevents soak-through and/or leakage. The bag shall be labeled as to contents with label prominently displayed.

2. The employee shall change out of contaminated clothing. CA shall provide temporary clothing, such as surgical scrubs, for the person to wear.

3. If the employee is in the field and not intending to return to the work site, he/she should remove contaminated clothing, place it in a plastic bag immediately on arriving home, and return it to the work site as soon as possible.

4. Employees shall not take contaminated personal clothing home for home-laundering.

5. The CA office, in accordance with local or regional procedures, shall arrange for professional cleaning, laundering, repair and/or disposal and replacement of the garment at no cost to the employee. Payment for the cleaning will be handled according to regional policy. Local procedures shall state to whom the contaminated laundry shall be given.

E. **Cleaning**

1. All CA property that may have been contaminated with blood or other potentially infectious materials shall be cleaned immediately or as soon as possible after the incident, in accordance with local procedures.

2. Employees shall wear gloves during all cleaning procedures.

3. Employees shall dispose of gloves used for cleaning procedures into a plastic bag. The employees shall wash their hands immediately after gloves are removed.

4. Each CA office shall provide and make available appropriate cleaning supplies, such as bleach, Lysol, AseptiCare, or MegaSol.

5. Employees shall use a household bleach solution in a mixture of one part bleach to 10 parts water made fresh for immediate use or an appropriate germicide, which may include Lysol Spray, AseptiCare, or MegaSol.

6. Staff shall handle all broken glass or other "sharps" with broom, dust pan, tongs, or forceps in order to reduce the risk of exposure. If items are contaminated, staff shall pour bleach solution or germicide over the area, prior to removal.

7. Staff shall dispose of broken glass and/or "sharps" into containers that are leak-, spill- and cut-proof.

F. **Training**

1. The Regional Administrator or Director, as applicable, shall arrange for all employees to be trained in order to become knowledgeable on the plan.

2. Training shall be provided during work hours and free of charge to all employees.

3. All new employees shall be trained during employee orientation.

4. The training shall address, at a minimum, the following subjects:

   a. Blood borne pathogens.

   b. Universal precautions.

   c. Safe first-aid practices.

   d. Blood borne Pathogens Protection Plan.

5. All employees who have received training shall sign a S. F. 141, *Developmental Training Report*.

G. **Post-Exposure Prophylaxis, Evaluation, and Follow-up**

Each Regional Administrator, Regional Manager, or Director, as appropriate, shall arrange for provision of post-exposure follow-up and prophylaxis to all employees who have an exposure to blood and/or other potentially infectious body fluids while on the job.

1. **Employee Self-Care**

   Every employee shall be informed during training of the following necessary self-care process:

   a. Exposure to the eyes - Flush eyes with water and/or appropriate solution.

b. Exposure to the nose - Blow nose and wipe inside of nostril.

c. Exposure to the mouth - Spit and rinse mouth.

d. Exposure to skin - If a hand washing facility is not available, wipe immediately with germicidal towelette and then, as soon as possible, wash in hand washing facility.

2. **Incident Reporting**

After every incident involving blood or other potentially infectious material, the employee shall report the incident to a supervisor. If exposure has occurred, the supervisor shall assist the employee in filling out a *Report of Employee Personal Injury*, DSHS 3-133.

3. **Medical Follow-up**

a. The supervisor shall ask the employee to go to a licensed health care professional immediately or at least within 24 hours of the incident for a post-exposure evaluation and follow-up.

b. The employee will take the following to the health provider:

i. A copy of the *Report of Employee Personal Injury*, DSHS 3-133.

ii. A post-exposure evaluation form for the health care professional's written opinion.

iii. A copy of the portion of WAC 296-62-08001(6) noting requirements for evaluation & follow-up.

c. The supervisor shall complete the *Report of Employee Personal Injury*, DSHS 3-133, and route copies following the instructions on the form, including forwarding a copy of the Department of Labor and Industries (L&I) report to the Office of Safety & Risk Management, once the completed copy is received from the health care provider.

d. Post-exposure evaluation and follow-up may consist of HIV counseling and testing, Hepatitis B immunoglobulin, and the offer of the full series of the Hepatitis B vaccine.

i. CA shall make available all post-exposure evaluation and follow-up, including hepatitis B vaccination, at no cost to the employee.

ii. Employees who decline to receive recommended HBV vaccination must sign a declination form.

e. The designee of the Regional Administrator or Director, as applicable, shall request that the source individual have his/her blood tested as soon as possible, with the test results disclosed to the exposed employee. The source individual is not required by law to have the tests or to disclose test results.

f. The designee shall remind the exposed employee that the test results are not to be disclosed to anyone, except for the health care provider providing the employee's medical evaluation. When the source individual is already known to be infected with hepatitis B virus or human immunodeficiency virus (HIV), blood testing for these viruses need not be requested.

4. **Record-Keeping**

a. The health care provider will report back to CA that appropriate post-exposure evaluation, prophylaxis, and follow-up has been offered.

b. All medical records of this exposure follow-up will be kept confidential by CA for the duration of the person's employment plus thirty years. Records will be maintained by the DSHS Office of Risk Management, Safety and Health Section, and will not be included in the employee's personnel file.

5. **Payment**

a. The regional office, for field staff, and state office, for headquarters staff, shall make payment for supplies, laundering, shots, and other expenses related to first aid practices, BBP exposures, and exposure preparations.

b. The Regional Administrator or Director, Division of Management Services, as appropriate, shall determine the method of payment and include funding in the appropriate budget.

c. The Regional Administrator, the Regional Manager, and the applicable Director shall ensure the development of local procedures, including identification of person to whom payment questions and requests shall be directed.

5720 BLOOD BORNE INFECTIONS

5721 PURPOSE AND SCOPE

This section provides guidelines for the implementation of procedures pertaining to infections carried in the blood, such as Sexually Transmitted Diseases (STDs), specifically Human Immunodeficiency Virus (HIV) and Hepatitis B Virus (HBV).

5722 DEFINITIONS

For definitions relating to this section, see Appendix A.

5723 IMPLEMENTATION PRACTICES/PROCEDURES

A. Non-Discrimination

1. CA shall not discriminate against persons with or perceived to have HIV infection. This policy includes discrimination against employees, clients, licensees, contractors, or volunteers. Procedures for persons who believe they have been subjected to discrimination because of HIV status are found in DSHS *Administrative Policy 6.09*.

2. Licensees are not required by law to share their HIV status with licensers. If this information is shared by the licensee or prospective licensee, licensers may request additional health information, as is the case with disclosure of any serious illness of a licensee. Decisions regarding continued licensing of an HIV infected person are made in the same manner as any serious illness.

B. Regional HIV/BBP Coordinator

1. Each Regional Administrator must designate an HIV/BBP Coordinator to oversee issues related to HIV, HBV, and other BBPs.

2. The social worker refers all HIV/HBV affected cases and issues related to BBP to the regional HIV/BBP Coordinator for consultation and staffing as appropriate.

3. The Coordinator:

   a. Provides information and consultation on CA policy.

   b. Provides consultation for case management.

   c. Serves as liaison with the health care community and AIDS service organizations.

   d. Convenes the HIV/BBP Advisory Team.

C. Regional HIV/BBP Advisory Team

Each Regional Coordinator must develop an HIV/BBP Advisory Team to advise on issues related to HIV, HBV, and other BBP.

2. The Regional HBV/BBP Advisory Team:

   a. Assists, as necessary, with development of regional guidelines on issues related to HIV/BBP.

   b. Provides case consultation, as needed.

D. **Universal Precautions**

All staff, out-of-home care providers, volunteers, licensees, and respite care providers must use universal precautions when dealing with children in care and treat all blood and body fluids containing blood as if known to be infectious. See section 5710, Blood Borne Pathogens Protection Plan.

E. **HIV Testing**

1. HIV testing of a child is a medical procedure and, therefore, must be done only in consultation with the Regional HIV/BBP Coordinator **and** on the recommendation of the local health department or a licensed health care provider knowledgeable about HIV infection.

   HIV testing of a child **under the age of 14** generally requires the written consent of the parent or legal guardian after the parent or guardian has received pre-test counseling.

   a. When HIV testing of a child under the age of 14 is being requested as a result of potential perinatal exposure, the social worker or HIV/BBP Coordinator shall inform the child's mother of the request and ask the mother to provide the results of her past HIV tests or to be tested in order to possibly eliminate the need for testing of the child. This testing is voluntary and will be confidential, consistent with this section.

   b. When parental rights have been terminated, the social worker of a child under the age of 14 may authorize HIV testing.

   c. The social worker shall obtain a court order for testing if the parent or legal guardian is unavailable or unwilling to provide consent for testing of a child under the age of 14 and if a medical reason for testing exists.

   d. If a child under 14 years of age tests positive for any STD, including HIV, the HIV/BBP Coordinator shall ensure that the medical professional or the local health department notifies the parent or legal guardian of the test results.

2. HIV/STD testing of a youth <u>age 14 or over</u> requires the written consent of the youth or a court order. The youth may request testing on his/her own authority.

   a. The written consent or court order shall authorize test results for HIV or HBV to be released to the social worker and out-of-home care provider.

   b. When obtaining a court order or a consent for HIV testing, the social worker shall, if needed, also gain authority to share the results with others who have a compelling "need to know" and are

not otherwise authorized to know under chapter 70.24 RCW. All such individuals shall be identified in the consent or court order. The consent or court order shall authorize treatment, as necessary.

F. **Confidentiality/Disclosure**

1. Infection with HIV and other sexually transmitted diseases is a personal and private matter. Staff, care providers, and volunteers shall treat information related to these issues in a confidential and respectful manner and shall not disclose this information except in accordance with state law and as provided in this section and paragraphs G and H, below.

2. **Disclosure Practices and Criteria**

a. CA staff shall not share the HIV/STD status of a parent with anyone, without that parent's written consent, other than CA staff with a need to know. See paragraph H, below, for exception criteria for prospective adoptive parents.

b. In order to facilitate appropriate health care for a child, the social worker may share HIV/STD status of a parent with the health care provider to help determine the appropriateness of testing the child, provided the parent's identity is not revealed.

c. CA staff shall not share information related to the HIV/STD status of a youth **14 years or older** with anyone, including parents, without the youth's written consent or a court order. However, the social worker shall inform the child that no placement may be made without full disclosure to the prospective residential care provider.

d. For children **under 14 years of age** in DCFS custody, DCFS shall share information related to HIV and other STDs with people making case planning decisions only as authorized by law.

i. RCW 70.24.105 authorizes disclosure to the DCFS worker, the child's private child placing agency worker, the child's *Guardian Ad Litem* in a dependency action, and the person, including the adoptive parent, providing residential care for the child.

ii. To document disclosure of HIV/AIDS information, the social worker will assist the residential care provider to complete and sign the *Disclosure of Confidential HIV/AIDS Information*, DSHS 09-837. The social worker will then place this form only in the child's confidential HIV/AIDS file.

iii. Disclosures to any individual other than those identified in subparagraph "i" requires parental or legal guardian

consent or a court order. The HIV/BBP Coordinator shall make decisions on a case by case basis regarding who has a "need to know" and who should, therefore, be listed in the court order or consent.

e. The social worker shall ensure that the child's current health care provider is aware of the child's exposure to HIV/HBV. If the health care provider knows the identity of the parent, neither DCFS nor the residential care provider has the authority to disclose the parent's HIV/HBV status without the parent's written consent or a court order.

f. Social workers shall not disclose information related to a parent or child's HIV or other STD status to other CA employees, except their immediate supervisor, manager, and HIV/BBP Coordinator.

g. When a written disclosure is made by a CA employee, as authorized by law, to other than another CA employee, the social worker or HIV/BBP Coordinator shall accompany it with the following statement and acknowledge it in writing on the form, *Disclosure of Confidential HIV* Information, DSHS 09-837:

> *This information has been disclosed to you from records whose confidentiality is protected by state law. State law prohibits you from making any further disclosure of it without the specific written consent of the person to whom it pertains or as otherwise permitted by state law. A general authorization for the release of medical or other information is* ***not*** *sufficient for this purpose.*

h. The social worker shall follow up any oral disclosure by a CA employee to other than another CA employee by sending, within 10 days, the *Disclosure of Confidential HIV Information,* DSHS 09-837*,* to the person(s) receiving the information.

i. Information on HIV or STD status shall not be recorded or stored electronically in CAMIS documentation files such as the Health Card. The social worker shall keep case recordings which disclose information related to the child's or parent's HIV or other STD status or exposure in a "privileged/confidential information" envelope used to safeguard sensitive case information. Access to this envelope is strictly limited to those authorized by law, with consent or as noted on a court order. Access to other parts of the child's record does not assume the right to access HIV/STD information.

j. Social workers shall not disclose HIV/STD information in written reports to the court without consultation with the assigned legal counsel.

k. When HIV/STD information is discussed in court, the social worker, through legal counsel, shall make special arrangements with the court to protect the confidentiality of the parties.

G. **Placement**

1. DCFS staff shall inform the residential care provider of the child's HIV/HBV status, if known. The social worker shall not inform the residential care provider of the HIV/HBV status of a child age 14 or older without the child's permission or a court order. However, the social worker shall inform the child that no placement will be made without disclosure of such status to the prospective residential care provider.

2. HIV exposed/infected children may be placed with other children unless otherwise advised by the health care provider. However, DCFS staff shall not place known HBV infected children or perinatally exposed infants in households with other unvaccinated persons.

3. The social worker shall strongly consider a child's and/or parent's wish not to disclose a child's positive HIV/HBV status to relatives when investigating a potential relative placement. However, if the child is actually placed, the social worker must disclose the child's HIV/HBV status. This revelation could negatively impact family relationships.

4. The social worker shall arrange for provision of medical attention for the HIV/STD infected/exposed child by a physician knowledgeable in this specialty area.

5. When placing a child known to be HIV/HBV exposed or infected, the social worker, in addition to providing the residential care provider with information regarding the child's current health status and names of all health care providers, shall inform the residential care provider of all resources involved and provide instruction in any special care needs of the child prior to placement.

   If exposure of infection is discovered after placement, the social worker shall immediately provide the above information to the residential care provider and ensure the provision of instruction in any special care needs.

6. When HBV infection is discovered in an individual living or working in a foster/receiving/group home, the social worker shall immediately notify the Regional HIV/BBP Coordinator and the local health department. Public health department recommendations for testing and immunization of household contacts shall be followed. DCFS staff shall place no additional unimmunized children in the home while the possibility of exposure exists.

H. Adoption

1. The adoption worker or HIV/BBP Coordinator shall provide prospective adoptive parents with all available information on the STD/HIV/HBV status of children under 14 years of age.

2. For children age 14 or above, the social worker shall not disclose status without the child's permission but shall not place the child without such disclosure.

3. Staff shall share the STD/HIV/HBV status, if known, of the parents, if the possibility of infection of the child by that parent exists. In such cases, the identity of the parents may not be disclosed.

4. CA staff shall identify children with HIV infection in adoption exchange books and/or media as having "serious medical problems." HIV exposure of uninfected children does not need to be noted in exchange books. Only when a serious inquiry is received and the social worker has determined that the family is a potential candidate should the child's specific medical history be discussed. The social worker shall not disclose the child's name until the family is selected as the adoptive family.

5. The social worker shall provide prospective adoptive parent(s) with the *Child's Medical and Family Background Report*, DSHS 13-041(X). The social worker shall include on the document all available medical information related to the child and biological parent, including HIV/STD information if possibility of exposure exists. The identity of the parent is not disclosed on this form.

6. When HIV testing is recommended, the social worker shall consult with the HIV/BBP Coordinator and arrange for completion of the test prior to finalization of the adoption.

7. The social worker shall inform the prospective adoptive parent that HIV I infection may qualify a child for adoption support.

I. Training

1. CA shall arrange for all employees to receive HIV/BBP training which covers prevention, transmission, infection control, treatment, testing, confidentiality CA-related policy and procedure, as it relates to adults and children.

2. All individuals and agencies licensed by CA shall receive HIV/BBP training which covers prevention, transmission, infection control, treatment, testing, confidentiality and CA-related policy and procedure, as it relates to adults and children.

CHAPTER 6000 ACCOUNTABILITY AND QUALITY ASSURANCE

CHAPTER 6000 ACCOUNTABILITY AND QUALITY ASSURANCE 6-1
6100 STANDARDS FOR QUALITY ASSURANCE 6-1
6110 Accountability 6-1
6120 Shared Decision Making 6-1
6130 Continuous Quality Improvement 6-1
6200 PROGRAM OVERSIGHT 6-1
6210 Field Responsibilities 6-1
6220 DCFS Field Responsibilities 6-2
6221 Regional Administrator 6-2
6222 Area Manager Responsibilities 6-2
6223 Supervisory Monitoring 6-2
6230 DLR Responsibilities 6-3
6231 Office of Childcare Policy 6-4
6232 Office of Foster Care Licensing 6-4
6233 Child Abuse and Neglect Investigations 6-6
6240 Division of Program and Policy Development Responsibilities 6-6
6241 Office of Quality Assurance and Training 6-6
6250 Management Services Division Responsibilities 6-6
6251 Operations Support 6-7
6252 Office of Children's Administration Research 6-7
6300 PROGRAM REVIEWS 6-7
6310 Assistant Secretary Quarterly Regional Reviews 6-7
6320 Office of Quality Assurance Program Reviews 6-7
6330 Regional Program Reviews 6-8
6340 DLR Program Reviews 6-8
6400 PERFORMANCE ACCOUNTABILITY AND REPORTING 6-8
6410 Regional Expectations and Quarterly Reporting 6-8
6420 Benchmark Reporting 6-8
6430 Client Based Outcome Measure Reporting 6-9
6500 PERFORMANCE AUDITS 6-9
6510 Criminal History Record Inquiry Audit 6-9
6520 Operations Review and Consultation Services 6-9
6600 QUALITY IMPROVEMENT INITIATIVE 6-9
6610 Executive Order 6-9
6620 Quality Steering Committee 6-10
6630 Quality Improvement Teams 6-10

6100 STANDARDS FOR QUALITY ASSURANCE

6110 ACCOUNTABILITY

The Children's Administration (CA) has a system of accountability wherein all levels of the organization have a role in assuring that services are provided to the clients of CA in compliance with policy and statute. The Office of Quality Assurance and Training has primary responsibility for statewide quality assurance reviews and oversight.

6120 SHARED DECISION MAKING

All Children's Administration staff are expected to perform in compliance with the CA *Case Services Policy Manual*, Appendix C, Shared Decision-Making.

6130 CONTINUOUS QUALITY IMPROVEMENT

CA shall demonstrate continuous quality improvement in services to children and families within legislatively determined parameters. CA Quality Improvement focuses on:

A. **Data Driven Decisions:** Service quality improvements are determined through the use of annual measurements of established regional performance benchmarks. Benchmarks are established in the areas of child safety, permanency, and child and family wellbeing.

B. **Customer Defined Services:** Within legislatively determined parameters, child and family needs determine what services are arranged or provided for by the Children's Administration. Clients are regularly surveyed to measure the accessibility and usefulness of services and the responsiveness and competence of agency staff.

C. **Quality Management:** The success of CA managers is regularly measured against improvements in quality results.

D. **Employee Involvement:** CA engages in an open, inclusive, information-based decision-making process where employees are afforded the opportunity to contribute to decision in areas of expertise. CA delegates decision making as deep into the organization as possible.

6200 PROGRAM OVERSIGHT

6210 FIELD RESPONSIBILITIES

Division of Children and Family Services (DCFS) Regional Administrators and Division of Licensed Resources (DLR) Regional Managers work together to provide their respective services in a manner which will best meet client outcomes and serve the best interests of the children and families served by Children's Administration.

6220 DCFS FIELD RESPONSIBILITIES

6221 REGIONAL ADMINISTRATOR

A. DCFS Regional Administrators establish systems and procedures designed to achieve regional expectations discussed in chapter 2000, section 2310, and to improve client outcomes.

B. Regional Administrators are responsible for service delivery, management of regional personnel, implementation of all CA policy, oversight of practice, and compliance with CA manual requirements.

6222 AREA MANAGER RESPONSIBILITIES

A. DCFS Area Managers are expected to review one case per unit supervised per month.

B. Area Managers report to the Regional Administrators on a monthly basis regarding the status of the monthly reviews and the quality of the records reviewed.

C. The Area Manager meets with each supervisor on a monthly basis to review casework supervision and practice.

D. The Area Manager monitors achievement toward CA goals and strategies through tracking benchmarks, regional expectations, or other performance measures.

6223 SUPERVISORY MONITORING

CA social work supervisors are expected to monitor services and expenditures authorized by their staff.

A. **Monthly Case Review Consultation**

1. Supervisors will be available to social workers regularly during the month for case consultation.

2. Supervisors will meet with each case-carrying social worker monthly to complete a 100 percent case review consultation. The detail and thoroughness of each case review will vary from case to case as determined by the social worker and the supervisor. All cases will be reviewed to the mutual satisfaction of both the supervisor and the social worker.

3. The supervisor documents monthly case reviews. The form of documentation may include:

   a. Case lists in *Microsoft Word* with conference notes entered; or

   b. Notes on Service Episode Record (SER)/Narrative for the client; or

c. Notes in a worker's file; and

d. A log of cases discussed.

4. Supervisors discuss case closures with the social workers during the monthly case review consultation. The supervisors use the following case review guidelines for assessing closure:

a. Legal action has been terminated.

b. All appropriate Social Service Payment System (SSPS) authorizations have been closed.

c. The risk to the child is sufficiently low to justify closure.

d. Further intervention is not warranted.

B. **Monthly Case Audit**

1. Supervisors must audit, with documentation, at least one case per worker per month for audit compliance using the *SUPERVISORY AUDIT TOOL* provided by the state office. The audit will cover the six-month period prior to the review date.

2. The supervisor will retain the Audit Review instrument in an Administrative File and will use it as a method to identify areas of training needs, clarification of policy, and practice issues for the individual social workers and for the unit. The instrument is retained for the employee's performance evaluation period, a minimum of one year.

6230 DLR RESPONSIBILITIES

A. DLR Regional Managers establish systems and procedures designed to improve the health and safety of children in out-of-home care and to monitor and license placement and childcare resources in compliance with CA policies and applicable federal and state statutes, and quality assurance as described in this chapter, section 6100.

B. The Supervisory staff will schedule a conference with each worker at least once a month.

1. The details and thoroughness of each case review will vary from case to case as determined by the social worker and supervisor.

2. Supervisors will be available on an as-needed-basis to workers regularly during the month for case consultation on issues of:

a. Health and safety of children;
b. Placement; and
c. Resource decisions.

6231 OFFICE OF CHILDCARE POLICY

Office of Childcare Policy (OCCP) Regional Managers establish systems and procedures designed to address the health and safety of children in childcare and implement WAC minimum licensing requirements in compliance with CA policies and applicable federal and state statutes, and quality assurance as described in this chapter, section 6100.

6232 OFFICE OF FOSTER CARE LICENSING

A. Office of Foster Care Licensing (OFCL) Regional Managers establish systems and procedures designed to achieve the implementation of WAC minimum licensing requirements, oversee and conduct group care and family foster home health, and safety reviews in compliance with CA policies and applicable federal and state statutes, and quality assurance as described in this chapter, section 6100.

B. The following is a guide for monthly meetings between supervisor and worker:

1. Facility Incident Reports:

   a. Discuss all new and outstanding reports;

   b. Find out if all CAMIS licensing/incident Report Modules are up to date, and if not, what are the barriers and the plan for addressing the barriers.

2. Health & Safety Concerns:

   a. Is any additional support needed to particular homes?

   b. Are any additional monitoring calls, visits and/or evaluations needed to determine quality home environment?

   c. Are there revocations or denials to be reviewed and considered?

3. Health and Safety Reviews

   a. How many Health and Safety reviews have been conducted this month?

   b. What were the concerns, and did any child report not feeling safe?

   c. Was there a case in which there was serious professional disagreement, including disagreement by the foster parents(s), regarding:

      i. risk of death,;
      ii. serious injury;
      iii. out-of-home placement of a child; or
      iv. child's return home as a result of a decision to leave a child in the home or to return the child to the home.

4. Licensing/ Re-licensing

   a. Is there a backlog of applications over 90 days or pending re-licenses?

   b. Is there a backlog of Criminal History Background and FBI Clearance – average wait for licensing?

   c. Is there a plan for catching up on any backlog?

5. Morale & Training needs

   a. Are there any problems or other issues of concern?

   b. Are there plans for employee development?

6. Documentation:

   a. Supervisors will read 100% of files when the home is licensed/re-licensed to review for:

      i. any health and safety concerns;
      ii. to track both individual worker and unit practice patterns;
      iii. record maintenance and written work.

   b. Supervisors will read 100% of incident reports to review for risk factors and to track for completeness and closures within a timely manner.

   c. Supervisors will document monthly case reviews. Forms of documentation may include:

      i. Pull a CAMIS list of cases & "com tics";
      ii. Case lists in Word with conference notes entered; or
      iii. Notes on Service Episode Record (SER) Narrative for the client; or
      iv. Notes in the worker's file; and
      v. A log of cases discussed.

7. Supervisors must audit, with documentation, a minimum of one case per worker per month for audit compliance in addition to those reviewed for licensing/relicensing.

8. The supervisor will retain the audit review instrument in a Supervisor's desk to be used as a method to identify areas of training needs, clarification of policy, and practice issues for the individual workers and for the unit.

9. Supervisors are expected to monitor services and expenditures authorized by their staff.

10. Regional managers will review three records per month that the first line supervisor has reviewed, in addition to meeting the above requirements for the licensors they directly supervise.

6233 CHILD ABUSE AND NEGLECT INVESTIGATIONS

A. The CPS Facility Investigation Section Manager establishes systems and procedures designed to implement facility investigations in accordance with the standards outlined in chapter 5000, section 5300, of this manual.

1. Supervisors review 100% of case closures and transfers.

2. Supervisors will complete a case file audit of at least one open case per month per worker.

6240 DIVISION OF PROGRAM AND POLICY DEVELOPMENT RESPONSIBILITIES

A. Under the direction of the division director, program and policy development, managers assist field staff in the coordination and monitoring of programs for compliance with statutes, regulations, and policies to maintain program integrity and evaluate program effectiveness.

B. Program and policy development managers monitor headquarters-based contracts for compliance and participate in quality assurance activities in conjunction with field staff and the Division of Management Services.

6241 OFFICE OF QUALITY ASSURANCE AND TRAINING

A. Office of Quality Assurance and Training (OQAT) managers monitor service delivery to improve the quality of DCFS and DLR programs and support compliance with law and policy. OQAT provides technical assistance to field and program managers when developing systems for internal improvements in social work practice or for internal evaluation.

B. OQAT develops tools to evaluate casework and to identify practice improvements that increase statewide consistency and reliability in the achievement of child welfare outcomes. OQAT develops and implements systematic reviews of child welfare cases and improves the use of data management in the assessment of performance. OQAT provides technical assistance on specific practice issues and cases, conducts program reviews, and identifies child welfare "best practices."

6250 MANAGEMENT SERVICES DIVISION RESPONSIBILITIES

Under the direction of the division director, Management Services staff coordinate statewide contract and accountability functions to support field and headquarters operations in conjunction with the Divisions of Program and Policy Development, Licensed Resources, and Children and Family Services.

6251 OPERATIONS SUPPORT

A. Operations Support managers develop and implement data collection, data reporting, and accountability mechanisms including regional performance expectations, quarterly reporting systems, and client-based outcome measures. The managers provide feedback to regions regarding their performance.

B. Operations Support works with the Division of Program and Policy Development, DLR, and the Office of Children's Administration Research (OCAR) to plan and implement policies, procedures, and systems that achieve CA program implementation in compliance with policies, applicable federal and state statutes, and quality assurance, as described in this chapter, section 6100.

6252 OFFICE OF CHILDREN'S ADMINISTRATION RESEARCH

A. The Office of Children's Administration Research (OCAR) conducts research, implements surveys, and provides data collection and evaluation in support of CA quality improvement activities.

B. OCAR works with the Division of Program and Policy Development, DLR, and Operations Support to develop policies, procedures, and systems that achieve CA program implementation in compliance with policies, applicable federal and state statutes, and quality assurance, as described in this chapter, section 6100.

6300 PROGRAM REVIEWS

6310 ASSISTANT SECRETARY QUARTERLY REGIONAL REVIEWS

The CA Assistant Secretary conducts reviews quarterly in each region, reviewing the performance of the regions on established performance measures and regional expectations. Regional Administrators and Regional Managers shall report required information using the designated format.

6320 OFFICE OF QUALITY ASSURANCE PROGRAM REVIEWS

OQAT reviews programs at the request of Area Managers, Regional Administrators, Division Directors, and the Assistant Secretary. OQAT may provide technical assistance, upon request, to regions in completing their own program reviews.

A. An analysis of strengths and weaknesses of the program;

B. Implications to statewide structure, services, or training needs;

C. An evaluation of performance on client-based outcome measures concerning child safety, permanency planning, and child and family health and well-being; and

D. Recommendations for practice and management improvements in areas identified as problematic.

6330 REGIONAL PROGRAM REVIEWS

Regional Administrators shall establish a system of regular performance review for major program areas such as Child Protective Services, Child Welfare Services, and Family Reconciliation Services. Each region shall have a biennial review plan that is updated annually. Program reviews shall be conducted on a schedule to be determined by the Assistant Secretary or Regional Administrator. Program reviews shall be conducted by a team of knowledgeable staff and community representatives, and shall include:

A. An analysis of strengths and weaknesses of the program;

B. An evaluation of performance on client-based outcome measures concerning child safety, permanency planning, and child and family health and well-being;

C. Recommendations for practice and management improvements in areas identified as problematic; and

D. Quarterly reporting on implementation of recommendations until completed.

6340 DLR PROGRAM REVIEWS

A. The Director, DLR, shall regularly review the performance of division operations, including an evaluation of progress on strategic planning goals, objectives, and strategies and client-based performance measures utilized in bench-marking and CA performance reports.

B. The Director shall establish a system of regular performance review for major program areas such as Foster Care Licensing, Child Day Care Licensing, and Child Abuse and Neglect Investigations. Each office/section shall have a biennial plan which is updated annually. The reviews will be conducted consistent with the requirements for DCFS in section 6330, above.

6400 PERFORMANCE ACCOUNTABILITY AND REPORTING

6410 REGIONAL EXPECTATIONS AND QUARTERLY REPORTING

Operations Support maintains a system for the quarterly collection and reporting of data on performance measures related to program operations, client-outcomes, and policy compliance as directed by the Assistant Secretary, who reviews regional performance information with each regional management team during quarterly reviews.

6420 BENCHMARK REPORTING

A. Benchmarking is the process of continuously comparing one's own performance against the best. The Divisions of Program and Policy Development, Management Services, and Licensed Resources collaborated on the identification of permanency planning, child safety, and child and family health and well-being performance measures for CA bench-marking.

B. Regional Administrators and Managers are responsible for establishing and progressing towards performance targets on bench-marked measures at the regional, area, and office level.

6430 CLIENT BASED OUTCOME MEASURE REPORTING

Operations Support is responsible for collecting and reporting progress on client-based child safety, child and family health and well-being, and permanency planning outcome measures associated with the CA budget.

6500 PERFORMANCE AUDITS

6510 CRIMINAL HISTORY RECORD INQUIRY AUDIT

A. The Criminal History Record Inquiry (CHRI) Unit is subject to a Washington State Patrol (WSP) system audit every two years.

B. While previous audits have been limited to the CHRI Unit's terminal site at headquarters, the audit may include field offices, licensers, social workers, etc.

C. The Federal Bureau of Investigation (FBI) may, at its discretion, audit the CHRI Unit.

6520 OPERATIONS REVIEW AND CONSULTATION SERVICES

A. The DSHS Management Services Administration's Operations Review and Consultation Services section is available, upon request by the Assistant Secretary, to conduct special audits of and consultations on Administration operations as well of Administration contractors.

B. Audits and consultations may include assessment of program performance as well as fiscal management, as requested by the Administration. Directors, Regional Administrators, and Office Chiefs present requests for these services, through the Director of Management Services, to the Operations Review and Consultation Services section.

6600 QUALITY IMPROVEMENT INITIATIVE

CA has identified the importance of continuously improving services, outcomes, and resource management for its clients, customers, and citizens.

6610 EXECUTIVE ORDER

A. Executive Order 97-03 requires every state agency to develop and implement a program to improve the quality, efficiency, and effectiveness of the public services it provides through quality improvement, business process redesign, employee involvement, and other quality improvement techniques.

B. Agencies are required to use the tools of strategic business planning and performance measurement to establish their priorities and measure their progress toward their stated goals. Each agency must develop performance measures to assess customer satisfaction, progress toward accomplishing outcomes specified in agency budgets per RCW 43.88.090 and necessary to provide feedback on the impact of quality improvement, employee involvement, and management improvement initiatives.

6620 QUALITY STEERING COMMITTEE

A. Executive Order 97-03 requires every agency to have a steering committee comprised of appropriate senior management, mid-management, front line staff, and support staff organizations.

B. DSHS has established one agency-wide Quality Leadership Council chaired by the DSHS Secretary and Deputy Secretary. Each DSHS administration has established a Quality Steering Committee.

C. The CA Quality Steering Committee (QSC) complies with Executive Order 97-03, including representatives of the employees' union. The QSC includes management, front line, and support staff. The Federation of State Employees appoints the participants from classes included in the bargaining unit.

D. The purpose of the QSC is to work in partnership with the regions, headquarters, quality improvement teams, employees, providers, suppliers, and the community. The QSC providers support for implementation of continuous improvement consistent with CA's mission to protect and serve children. To this end, the QSC develops and implements infrastructure, projects, and processes which:

1. Ensure awareness and communication of philosophies, strategies, information, and results related to the improvement initiatives at all levels;

2. Provide tools, expertise, resources, and training to support the pursuit of innovative improvement initiatives;

3. Provide recognition and reward for individuals, teams, and regions that achieve results;

4. Recognize and respect diversity;

5. Mentor, motivate, encourage, and empower people who pursue, support, and demonstrate continuous improvement;

6. Focus on implementation for results while fostering innovation;

7. Eliminate barriers to empowerment and staff/management partnership;

8. Promote cross-functional and statewide performance improvement; and

9. Minimize oversight and non-productive interference with delivery processes.

6630 QUALITY IMPROVEMENT TEAMS

A. Members of the CA Quality Assurance Steering Committee may sponsor, lead, or facilitate Quality Improvement Teams. Teams are expected to have a firm commitment to quality improvement and a willingness to participate in finding new ways of doing things. Team members are required to receive training in quality improvement processes.

B. Every Quality Assurance Team will establish a charter that documents ground rules and clarifies roles and responsibilities. The major elements of the charter are:

1. Vision;
2. Organization;
3. Team structure and operation;
4. What teams can work on;
5. What teams cannot work on;
6. Support structure roles;
7. Expectations for specific groups (managers, supervisors, employees).

CHAPTER 7000 RESOURCE MANAGEMENT

CHAPTER 7000 RESOURCE MANAGEMENT 7-2
7100 ACQUISITION AND INVENTORY MANAGEMENT....7-1
7110 Purpose and Scope....7-1
7120 Standards....7-1
7121 Approval to Purchase....7-1
7122 Responsibility for Purchasing and Inventory....7-1
7123 Responsibility for Managing/Using Inventory....7-1
7130 Procedures....7-2
7131 Requesting a Purchase....7-2
7132 Ordering....7-2
7133 Receiving, Paying, Inventorying, and Surplusing....7-2
7200 FACILITIES....7-2
7210 Purpose and Scope....7-2
7220 Standards....7-3
7221 Management of Facilities....7-3
7222 Planning for New Facilities....7-3
7300 USE OF RESOURCES....7-3
7310 Electronic Files....7-3
7320 Computer Hardware, Software, and Related Equipment....7-5
7321 Purpose and Scope....7-5
7322 Standards....7-5
7323 Procedures....7-5
7330 Vehicles....7-8
7331 Purpose and Scope....7-8
7332 Standards/Procedures....7-8
7340 Telephones....7-9
7341 Standards....7-9
7350 Cellular Telephones....7-9
7360 Telefacsimile....7-10
7361 Standard....7-10
7362 Procedures....7-11
7400 CONTROL OF FIXED ASSETS....7-11
7410 Purpose And Scope....7-11
7420 Policy....7-11
7430 Procedures....7-13
7431 Purchasing Items Meeting Definition....7-13
7432 Receipt and Payment....7-13
7433 Issuance and Placement of State Tag....7-13
7434 Equipment Returned to Vendor....7-14
7435 Equipment Transfers....7-14
7436 Loaned Equipment....7-14
7437 Equipment Disposal....7-14

7100 ACQUISITION AND INVENTORY MANAGEMENT

7110 PURPOSE AND SCOPE

A. This section establishes a system for compliance with state procurement guidelines and inventory accountability. It is intended to ensure that Children's Administration (CA) organizational units effectively manage CA's resources and maintain an audit trail for the ordering, receiving, returning, partial ordering, making full payment, inventory, and surplus of equipment and supplies.

B. See section 7400, below, for additional requirements for control of fixed assets.

7120 STANDARDS

7121 APPROVAL TO PURCHASE

A. All equipment purchases must comply with the requirements and limitations of DSHS Administrative Policy 14.13, *Equipment Purchases*.

B. All other purchases require the approval of the Regional Administrator, Regional Manager, or Director or their respective designee, as applicable.

7122 RESPONSIBILITY FOR PURCHASING AND INVENTORY

A. The Regional Administrator, Regional Manager, or Director, as applicable, shall implement procedures indicating staff responsibility for purchase of office supplies, equipment, and services in compliance with state guidelines, for maintenance of proper inventory controls, and for surplus of state-owned property.

B. In exercising these responsibilities, the designated staff must:

1. Adhere to the separation of duties guidelines in Generally Accepted Accounting Principles (GAAP) when ordering, receiving, inventorying, and surplusing equipment and supplies.

2. Maintain a level of inventory consistent with use and reorder items as necessary to avoid depletion of supplies.

3. Maintain a desk manual detailing all the necessary procedures for purchasing, inventorying, and surplusing equipment and supplies.

4. Retain a copy of all purchasing documents; e.g., request notes, purchase order copies, invoices, and packing lists.

5. Update information on the Agency Inventory System (AIS) computer program.

7123 RESPONSIBILITY FOR MANAGING/USING INVENTORY

Children's Administration staff must:

A. Use property assigned to the staff only for official state purposes.

B. Take precautions necessary to protect state property from theft and damage.

C. Report lost or stolen property immediately to staff designated in regional or state office procedures.

7130 PROCEDURES

7131 REQUESTING A PURCHASE

A. Staff shall request purchase of an item through their immediate supervisor, except that those positions reporting directly to the Assistant Secretary shall receive sign-off from the Director, Division of Management Services.

B. The supervisor or Director, Division of Management Services, shall confirm the need for the purchase and transmit the approved request to the staff person designated in regional or state office procedure.

7132 ORDERING

Staff designated by the Regional Administrator, Regional Manager, or Director shall prepare the purchase order and route it for required approvals according to regional or state office procedures.

7133 RECEIVING, PAYING, INVENTORYING, AND SURPLUSING

Staff designated by regional or state office procedures shall:

A. Record items received, as required, in the automated inventory system, noting the item(s) location and assignee, if appropriate.

B. Tag items according to requirements in the *AIS Manual*.

C. Process the order for payment through regional or headquarters accounting staff, as applicable.

D. When surplusing items, complete a *Property Disposal Request*, SF 267A, in accordance with the AIS Manual and submit it through the regional business office or headquarters property control to the Office of Staff Services for processing.

E. Conduct biennial property inventories as required by the *AIS Manual* using computer print-outs from the AIS system.

7200 FACILITIES

7210 PURPOSE AND SCOPE

Field facility management and planning are responsibilities of the regional business manager. This section outlines those responsibilities.

7220 STANDARDS

7221 MANAGEMENT OF FACILITIES

A. Requests for changes affecting the physical structure or layout of a facility are to follow DSHS facility guidelines and CA regional office protocol. Changes include repairs, additions, and/or improvements to the building or equipment; moving or rearranging panels, shelves, modular equipment, computers, copy machines; and requesting telephone services, such as the addition of a new line or switching existing numbers.

B. Each CA office will have a representative to the local office safety committee. This person is responsible to ensure that changes to existing facilities follow regional office protocol and do not place staff or equipment safety at risk.

7222 PLANNING FOR NEW FACILITIES

A. CA shall co-locate with other DSHS and/or other state agencies whenever feasible.

B. Regional business managers are responsible for coordinating and/or projecting office staffing levels based on staffing history and anticipated growth.

C. All space requests are generated by the regional office with input from the local offices, the Regional Manager, and area manager, as applicable, and forwarded to the CA headquarters facility coordinator.

D. Space requests must be approved by the Director of Management Services before submittal to the DSHS Capital Facilities Section.

E. The CA management team will prioritize requests for new facilities.

7300 USE OF RESOURCES

7310 ELECTRONIC FILES

A. Following the procedures outlined in this section and in the DSHS *Information Technology Security Manual* does not guarantee that staff's messages and files will be protected. If a user fails to maintain their password security or leaves their terminal unattended while logged into the system, their messages and files are vulnerable. Also, staff need to be aware that messages that are sent can be forwarded to others, printed where others may read them, or sent to the wrong user.

B. Electronic message systems, including voice mail, FAX, e-mail, the CAMIS bulletin board, and the CA Intranet server, may be used only for state business purposes. Use of state resources for private gain or benefit is specifically prohibited by RCW 42.52.160. Records created through these systems are legally the property of the state. In the use of computer technology, staff are to comply with the provisions of DSHS Administrative Policy 15.10; chapter 15000, section 15224, of this manual; and the DSHS *Information Technology Security Manual*, a copy of which is available in each region through its Computer

Information Consultant (CIC). However, WAC 292-110-010 provides for the occasional use of state resources when:

1. There is no actual cost to the state; or

2. The cost to the state is *de minimus*; i. e., so small as to be insignificant or negligible.

C. The following points apply to CA staff:

1. A manager, in the supervisory line of the employee, with reasonable justification, has access to data within CA's systems to carry out required business functions.

2. State-provided electronic message systems may not be used to transmit or store information that promotes:

   a. Discrimination on the basis of age, race, color, gender, creed, marital status, national origin, disability, or sexual orientation;

   b. Harassment;

   c. Copyright infringement;

   d. An employee's personal political beliefs or personal business interests; or

   e. Any activity prohibited by federal, state, or local law or regulation.

3. Transmission of e-mail messages containing confidential or privacy-protected data (e. g., confidential client or employee data) shall:

   a. Be marked private;

   b. Not be proxied or forwarded, except in "need to know" situations.

4. Supervisors shall not disclose to third parties the contents of electronic files under an employee's control, except under unusual circumstances; for example:

   a. Compliance with applicable public disclosure laws, discovery rules, or pertinent law; or

   b. When disclosed as part of an official department, state, or external investigation.

5. Staff shall not disclose confidential passwords used to gain access to local, wide area, and CAMIS networks. If the password is compromised, staff shall change it immediately.

6. In order to assure confidentiality of client information, staff will not print CAMIS client information at any location other than a CA work site.

7320 COMPUTER HARDWARE, SOFTWARE, AND RELATED EQUIPMENT

7321 PURPOSE AND SCOPE

This section establishes policies and procedures for the security, use, and maintenance of computer hardware/software and printers. See also the CA *CAMIS User's Manual*.

7322 STANDARDS

A. **Protection**

Staff to whom computers and printers are permanently or temporarily assigned shall:

1. Ensure protection of data processing equipment from theft or damage.

2. Protect division software from theft or unauthorized, accidental, or malicious use, modification, or destruction.

3. Protect division confidential documents from theft or unauthorized disclosure.

4. If an employee, through personal negligence, causes damage to state equipment, CA may require the employee to pay for repair or replacement of the damaged equipment.

B. **Appropriate Use**

Staff shall use department computers, peripheral equipment, and software only for official state purposes.

7323 PROCEDURES

A. **General Protection**

1. Regional Administrators, Regional Managers, and Directors shall ensure that portable fire extinguishers -- preferably a Halon type -- suitable for treating electrical fires are located near data processing equipment in their areas of responsibility.

2. Users of computers shall:

   a. Protect diskettes from excess cold, heat, direct sunlight, electromagnetic sources such as telephones and static electricity, and from ball point pens and pencils.

   b. Remove all diskettes from the computer when they are no longer in use.

3. Computer users shall utilize surge control devices to protect all computer and peripheral equipment.

4. Staff shall not plug coffee pots, hot plates, or other high current devices into a surge protector serving computer equipment.

5. Staff shall secure computer hardware and software when not in use. See chapter 15000, section 15219.

6. User staff shall secure lap-top computers in file cabinets or closets at the end of each work day.

7. When in travel status, staff shall not ship computers or printers as general luggage through the airlines.

B. **Security of Data**

1. Staff shall store confidential documents or data in accordance with chapter 15000, section 15210.

2. Staff shall not leave documents or diskettes containing confidential information unattended in areas readily accessible to persons without authorization to see such documentation.

3. Computer users shall save important documents and those for which there may future need in CAMIS or on their F Directory, as applicable, to assure automatic back-up of files.

4. When an employee ends employment in a location, supervisory personnel shall review all files on hard drive, main frame, and floppy diskettes controlled by the employee to determine which files to delete or retain.

C. **Software Use**

1. Computer users shall not use programs obtained through shareware or from a bulletin board until they have been certified as free of computer virus by the user's Computer Information Consultant (CIC) or other authorized staff.

2. Staff shall install and/or use only software purchased, distributed, or approved by the department.

D. **Prohibited Activities**

Staff are prohibited from the following activities:

1. Unauthorized copying or use of software.

2. Unauthorized entry into restricted data bases.

3. Use of state computer resources for private business purposes.

4. Loan of computer hardware or software to unauthorized individuals.

5. Use of recreational computer games during work periods for other than supervisor-approved training purposes.

6. Use of privately owned personal computer hardware during business hours except as part of a pre-approved telecommuting project.

E. Accountability and Tracking of Laptop Computers

CA Directors and Regional Administrators are responsible for the accountability and tracking procedures. To assure accurate tracking and accounting for laptop computers, laptop computers must either be assigned to specific staff or signed out to staff following the procedures below.

1. For managing laptop inventory:

   a. Each CA office will designate one specific employee, plus one backup employee, to be responsible for tracking laptop computers.

   b. Any lost, stolen, or missing equipment must be reported immediately to the designated staff, who will immediately report to the Regional Business Manager or headquarters property manager for reporting in the *Tracks* inventory system.

   c. Designated staff for the office must send a lost, stolen, or missing equipment report to the Regional Administrator or applicable Director on a monthly basis.

2. **Laptop Computers Signed Out by Staff**

   a. All laptop computers will be kept in a locked cabinet or area unless checked out by staff.

   b. The designated staff responsible for tracking will ensure that each laptop has a sign-out log, which will be kept with the laptop in the locked area. When the equipment is signed out, the log sheet will remain in the locked area.

   c. Staff checking out the laptop will do so only through the designated staff. The designated staff will completely fill out the log sheet immediately upon a staff person checking out or returning the equipment.

d. The staff person who signed out the equipment is responsible for the computer until it is returned to the designated staff and properly logged in and returned to the locked area.

3. Laptop Computers Permanently Assigned to Specific Staff

a. The designated staff person will maintain a current list recording the name of the staff person assigned the equipment, the date assigned, and the equipment's make, model, and State Tag Number.

b. The staff person assigned to the equipment is responsible for it.

c. If staff assigned to the equipment allow other staff to use it, the staff person assigned remains responsible for the equipment.

7330 VEHICLES

7331 PURPOSE AND SCOPE

This section requires accountability for state-owned vehicles, including correct inventory, tracking of location and sub-assignment, and replacement of vehicles.

7332 STANDARDS/PROCEDURES

A. Staff shall use state vehicles in accordance with state vehicle regulations and the department travel manual. Responsible staff shall ensure that each vehicle receives sufficient use each month to justify retention of the vehicle.

B. All operators of state-owned vehicles, or private owned vehicles used for state business, shall:

1. Have a valid driver's license in their possession.

2. Maintain sufficient property damage and personal liability insurance to protect the employee and the state.

3. Use state vehicles for official state business only. Travel between official work station and official residence is prohibited unless approved by the Secretary or designee for one of the reasons cited in Office of Financial Management (OFM) *Policies, Regulations, and Procedures*, 4.2.5.2.2.

4. Lock vehicle doors when not in use.

5. Adhere to careful driving practices and observe traffic laws and regulations, including mandatory use of seat belts.

6. Maintain state vehicle in a clean and presentable condition, interior and exterior, in accordance with Motor Pool regulations.

7. Report all accidents in state vehicles on *State Vehicle Accident Report* (SF 137) within 24 hours and *State Motor Vehicle Collision Report* (WSP 161) if damage exceeds $500.

8. Prohibit smoking in state vehicles.

9. In accordance with office procedures, obtain supervisory approval prior to checking out a vehicle from a State Motor Pool, and return the yellow copy of the *Trip Ticket* to the designated accounting staff person.

10. Refer to *State Motor Pool Rules and Regulations* and DSHS *Travel Manual* for additional guidelines for the use of state-owned vehicles.

11. For state vehicles assigned to a CA office, staff must follow local procedures for check-out of the vehicles.

C. When sub-assigning a vehicle (e.g., regional offices to local offices), the business manager must notify the Agency Transportation Officer, MS 45813.

D. No CA staff may have a permanently assigned vehicle. Individual staff may be designated for priority use of state vehicles in accordance with regional procedures.

7340 TELEPHONES

7341 STANDARDS

A. Telephones provided to employees are state property, with usage paid by the state. Therefore, employees must use them only for official department business.

B. Each Regional Administrator, Regional Manager, or Director, as applicable, must ensure that a different SCAN authorization number is assigned to each individual staff member who may place long distance telephone calls.

C. CA staff conducting state business must place long distance telephone calls using the SCAN or SCAN-PLUS system. They must not place personal or private business long distance calls through the system. The sole exception would be when an employee is detained on state business beyond normal work hours and is expected elsewhere.

D. To use the SCAN or SCAN-PLUS system, volunteers must receive authorization in advance from the DCFS Regional Administrator or designee or DLR Regional Manager and use their own individual access code.

7350 CELLULAR TELEPHONES

A. CA will purchase cellular telephones for staff use, and staff will utilize the telephones in conformity with DSHS Administrative Policy 14.11, *Cellular Telephone Purchasing and Management*.

B. RCW 42.52.160 provides that no state employee may employ or use any property under the employee's official control or direction, or in the employee's official custody, for the private benefit or gain of the employee.

C. This section prohibits the addition of personal lines of service to state-owned cellular telephones while continuing the practice of use of approved state telephone lines on private cellular telephones. Employees' use of state-paid telephone lines on the employees' personal cellular telephones is not an entitlement, and CA may rescind authorization for such use at any time.

D. CA staff must not install a personal cellular telephone line of service on a state telephone.

E. Any CA staff who has a second, personal line of service installed on a state-owned cellular telephone must immediately remove the service from the state telephone. If the employee does not immediately remove the personal line, the applicable Director or Regional Administrator must take appropriate action under applicable department personnel policies.

F. Upon authorization by the applicable CA Director or Regional Administrator, a CA employee may have a state telephone line on the employee's private cellular telephone. The employee must use the state-paid telephone line only for official department business.

G. The applicable CA Director or Regional Administrator must implement a system to review all telephone charges to the state coming from use of state telephone lines to ensure that all billed charges are for department business and not for personal business.

H. If the employee uses the state telephone line for personal business, the applicable Director or Regional Administrator must recover from the employee any state funds improperly spent for the personal telephone calls.

I. The applicable Director or Regional Administrator may cancel an employee's use of a state telephone line on a private phone at any time because of employee's abuse of the privilege or for other reason based on the needs of the Administration.

J. **Accountability and Tracking of Cellular Telephones**

Requirements for accountability and tracking of cellular telephones are exactly the same as those for laptop computers. See section 7323, paragraph E, for those requirements.

7360 TELEFACSIMILE

7361 STANDARD

Telefacsimile (FAX) machines in CA offices are state equipment. Staff, volunteers, and others must use the machines only for official state business.

7362 PROCEDURES

A. Each Regional Administrator and DLR Regional Manager must ensure that each of their respective local and regional offices develops and implements written procedures for use and maintenance of its FAX machines.

B. Staff must not use FAX machines for the transmission of Criminal History Record Inquiry (CHRI) and other sensitive information unless both sending and receiving machine are protected from access by unauthorized personnel.

7400 CONTROL OF FIXED ASSETS

7410 PURPOSE AND SCOPE

A. The purpose of this section is to establish guidelines and internal controls necessary to promote efficiency and accountability of fixed assets within the Children's Administration (CA) and to protect fixed assets against loss. This section applies to all organizational units within Children's Administration.

B. Assets covered in this policy include:

1. All items with a total initial cost of $5,000 or more;

2. Software costing $5,000 or more;

3. All cellular telephones regardless of cost;

4. "Small and attractive" items costing $300 or more; and

5. All computer equipment considered vulnerable to loss according to the Office of Financial Management (OFM) Manual, Chapter 1, Part 3.1.2.2.8, and the Asset Management (AM) Manual, Appendix 1.

C. Purchase cost includes transportation charges, sales tax, installation costs, maintenance contracts, and costs required to place the asset in its intended state of operation.

7420 POLICY

A. The Director, Management Services Division, for CA headquarters, or the applicable Division of Children and Family Services (DCFS) Regional Administrator or Division of Licensed Resources (DLR) Regional Manager must:

1. Appoint an Asset Inventory Coordinator (AIC) to be responsible for the inventory control activities listed in the DSHS Asset Management Manual and *TRACKS*, the DSHS inventory system;

2. Appoint an Asset Inventory Representatives (AIR) to be responsible for the oversight of inventory at the regional and local levels;

3. Ensure annual completion of a physical fixed asset inventory and reconciliation and that each inventory is documented by a signed "Certificate(s) of completion";

4. Ensure that staff with no direct responsibility for assets subject to the inventory count performs physical inventories;

5. Ensure the AIC is informed of any changes in the physical locations of the division or region's organizational units or their mailing addresses; and

6. Attest to the completion of all biennial inventories by co-signing a "Certification of Completion" with the AIC.

B. The AIC must:

1. Facilitate exchange of information between CA and the DSHS Asset Management Section;

2. Return the quarterly *TRACKS* confirmation packet of location code information and other inventory data updates to Asset Management within 15 working days of issue;

3. Provide guidance to the AIRs on implementing division or regional and *TRACKS* procedures;

4. Conduct inventory training necessitated by staff turnover;

5. Coordinate the annual and biennial physical inventories with the AIRs and Asset Management;

6. Compile the CA physical inventories and attach a "Certificate of Completion," co-signed with the division director or regional administrator and send to Asset Management.

7. Notify Asset Management in writing of any changes in the AIRs, locations, phone numbers, organization, and security levels for access to *TRACKS*; and

8. Perform inventory control tasks, including timely computer input and reconciliation, according to the guidelines in the Asset Management Manual.

C. The AIR must:

1. Account for the receipt, tagging, maintenance, and disposition of inventory according to the guidelines in the Asset Management Manual;

2. Notify the AIC immediately of any changes in fixed assets, inventory staff, or the organization that might affect *TRACKS*; and

3. Confirm the completion and reconciliation of the annual inventory by the signature of the regional administrator.

D. The Headquarters Local Area Network (LAN) Administrator and the regional Information Technology Application Specialist/Information Technology System Specialist (ITAS /ITSS) or designee must:

1. Share responsibility for the inventory control functions associated with the coordination of transfers, loans, surplusing, and disposal of computers and related equipment initiated by them;

2. Send the correct information to the AIC/AIR. The AIC/AIR will prepare the proper documentation, verify information, and send to Asset Management; and

3. Assist in the annual physical inventories of all IT equipment.

7430 PROCEDURES

7431 PURCHASING ITEMS MEETING DEFINITION

A. CA staff must complete all purchases in compliance with the DSHS purchasing guidelines published annually by Purchased Service Contracts.

B. In addition to following other applicable DSHS guidelines, CA staff must request all IT purchases as follows:

1. Assigned staff must forward the completed Information Technology Purchase Request (ITPR) with appropriate signatures to the CA IT Manager with proper justification and include the inventory location on the ITPR to ensure accurate issuance of state tags on applicable equipment.

2. The CA IT Manager will approve or disapprove the purchase. If disapproved, the IT Manager will send the ITPR back to the originator. If approved, the It Manager will forward the ITPR to Purchase Services Contracts, where staff will complete the purchasing process and forward to the originator of the ITPR a copy of the Field Order/Purchase Order (FO/PO). The Purchase Services Contracts staff will return the FO/PO with state tags, if applicable, for the item being purchased.

7432 RECEIPT AND PAYMENT

A. Upon receipt of the equipment and signing by the appropriate staff, the receiving copy of the FO/PO will go to the staff responsible for payment.

B. Staff responsible for payment will send a copy of the received FO/PO and invoice to the AIC/AIR.

7433 ISSUANCE AND PLACEMENT OF STATE TAG

The AIC/AIR must:

A. Verify the number of state tags issued;

B. Return excess tags to Asset Management for removal from inventory using the *TRACKS* disposal function;

C. Refer to the Asset Management Manual for recommended placement location of inventory tags.

7434 EQUIPMENT RETURNED TO VENDOR

The AIC/AIR must request disposal of state tags and new state tags upon receipt of the replacement product or prior to the return of equipment if not being replaced. The AIC/AIR may do both requests on the *TRACKS* disposal function. The department will maintain a history record electronically for six years.

7435 EQUIPMENT TRANSFERS

A. **Transfer outside of CA Cost Center**: Upon notification, the AIC will initiate the request to transfer on *TRACKS* from present location to the new location across cost centers.

B. **Transfer within CA Cost Center**: Depending on the AIR's level of access, the AIR may have transfer authority to and from all locations and sub-locations in a given region.

C. Assigned staff must process and complete transfers as soon as possible. For CA IT equipment to be properly insured, the state tag's location must match the physical address of the location code where the equipment resides. Otherwise, CA's insurance company will not reimburse the agency for the equipment.

D. An AIS Representative Inventory Log has been developed to enhance communications between CIC staff and AIS Representatives in relation to movement of computer equipment. CIC staff responsible for initiating the movement of computer equipment must complete this log, which CA will use for movements between offices as well as movements from cubicle to cubicle within the same office.

7436 LOANED EQUIPMENT

A. CA may loan an inventory item to another cost center location or state agency for a period not to exceed 90 working days by completing the *Equipment Loan Agreement*, DSHS 17-058(X), subject to Asset Management approval.

B. The loaning location will notify Asset Management within 14 working days of the loan expiration date, if the borrowing location has not returned the inventory on time.

C. The borrowing location must certify that the borrowed inventory item will be returned in the same condition as received less normal wear and tear.

7437 EQUIPMENT DISPOSAL

All equipment, whether or not it has a state tag, must be disposed of using the *TRACKS* disposal function.

CHAPTER 8000 HUMAN RESOURCE MANAGEMENT

CHAPTER 8000 HUMAN RESOURCE MANAGEMENT 8-1

8100 ETHICAL STANDARDS 8-1
8110 General Provisions 8-1
8120 DSHS Employees -- Child Foster Care Licensing And Adoption 8-1
8200 TELECOMMUTING 8-1
8210 Purpose and Scope 8-1
8300 TRAINING 8-1
8310 Social Service Payment and Case and Management Information Systems 8-1
8320 Staff Training 8-2
8321 Training Tuition Reimbursement for Staff 8-2
8322 Leave Approval for Non-Reimbursed Staff Training 8-3
8323 Mandatory Training 8-4
8324 New Employee Orientation 8-5
8325 Academy Training 8-5
8326 Sex Abuse Investigation Training 8-6
8400 FLEXIBLE WORK HOURS 8-7
8410 Limited Scope 8-7
8420 Minimum Criteria for Alternate Work Schedules 8-8
8500 STAFF IDENTIFICATION 8-8
8510 Identification Cards 8-8
8520 Identification Tags 8-9
8600 EMPLOYEE SAFETY 8-9
8610 Safety Committees 8-9
8700 DISASTER RESPONSE 8-9
8710 Purpose and scope 8-9
8720 Standards 8-10
8721 Planning for Disaster Recovery 8-10
8722 Operations 8-10
8723 Essential Records 8-11
8724 LAN/WAN Recovery 8-12
8800 CHILDREN'S ADMINISTRATION STAFF LIABILITY 8-13
8900 OPPOSING TESTIMONY 8-13
8910 Purpose And Scope 8-13
8920 Standard and Procedure 8-13

8100 ETHICAL STANDARDS

8110 GENERAL PROVISIONS

A. Legal provisions regarding standards of ethical conduct for employees are contained in chapter 42.52 RCW, Ethics in Public Service. In addition, Executive Order (EO) 93-02 addresses ethical conduct of state employees.

B. Departmental policy regarding ethical conduct of its employees is found in DSHS Administrative Policy 6.04. This policy provides an overview of ethical conduct expected of departmental staff. Other Administrative Policies, DSHS Personnel Policies, and the department's non-discrimination policy provide further detail on specific areas.

C. Children's Administration (CA) staff must not access any person, case, or referral information without a need to know. "Need to know" means that information is necessary in the discharge of the employee's professional responsibilities.

8120 DSHS EMPLOYEES -- CHILD FOSTER CARE LICENSING AND ADOPTION

A. The CA *Practices and Procedures Guide*, chapter 5000, section 5138 outlines conditions under which CA employees may be licensed as foster family home parents. Section 5312 outlines conditions under which CA employees may be certified as adoptive parents.

B. See those sections for limitations on licensing of employees as foster parents or on their certification as adoptive parents and steps to follow in the licensing and certification processes.

8200 TELECOMMUTING

8210 PURPOSE AND SCOPE

A. Large employers are required to reduce single occupant vehicle commuting and to reduce employee commute trips.

B. Telecommuting, which involves working at home or at an alternative work site close to home, contributes toward achievement of these goals.

C. Some CA employees may be considered for telecommuting which must be done in accordance with DSHS Personnel Policy 590.

8300 TRAINING

8310 SOCIAL SERVICE PAYMENT AND CASE AND MANAGEMENT INFORMATION SYSTEMS

A. Supervisors are responsible for arranging for their staff to receive training in the use of the Social Service Payment System (SSPS) and CAMIS.

1. Social service staff training includes:

a. Selecting appropriate service codes;

b. Completing SSPS forms;

c. Obtaining provider numbers and updates;

d. Using SSPS worker reports;

e. Requesting duplicate invoices;

f. Using the SSPS manual;

g. Edit error corrections;

h. Input of DSHS 14-154A/159s.

2. Training for support staff who will be undertaking SSPS duties includes:

a. Input of DSHS 14-154A/159s;

b. Edit error procedures;

c. Distribution of DSHS 14-159 documents;

d. Obtaining provider numbers and updates;

e. Distribution of reports.

B. The local SSPS coordinator, in conjunction with the regional SSPS coordinator, addresses training needs as requested and utilizes outside training resources as needed.

C. Training coordinators report training through the Human Resource Development Information System (HRDIS) and the CA training data base.

D. Supervisors are responsible for assuring the accuracy and timeliness of SSPS payments.

8320 STAFF TRAINING

8321 TRAINING TUITION REIMBURSEMENT FOR STAFF

A. DSHS Personnel Policy 561 allows DSHS managers to authorize tuition reimbursement if the employee can demonstrate need. CA Division Directors and Regional Administrators may, at their discretion and within available funds, approve reimbursement for cost of short term training for staff that would directly improve an individual's ability to perform his or her current job. Short term training does not include general education classes or classes taken for the sole purpose of earning credit hours toward a degree or certificate.

B. CA may reimburse up to 100 percent of the actual cost of tuition of the approved training course, with the actual amount approved in advance by the Director or Regional Administrator. CA will reimburse only the pre-approved costs of tuition and registration fees.

C. Each Director and Regional Administrator shall develop procedures to implement this section and to ensure equity in the utilization of such training resources by staff among all classifications.

D. CA managers and staff will adhere to the following guidelines when requesting or considering tuition reimbursement:

1. The employee must submit a request in writing, using the *Tuition Reimbursement Request*, SF 30, to the manager outlining how the course directly relates to a function of state government.

2. The course needs to relate to the long-term development of an employee as indicated and agreed to on the employee's performance evaluation.

3. The manager needs to consider whether the employee has attempted to receive waiver of tuition and fees through the state classified employee tuition exemption process under RCW 28B.15.558.

4. The manager needs to consider whether the employee has made an effort to receive other grants and scholarships from the prospective institution.

5. The employee must provide a statement of basic financial need for tuition reimbursement, which is the employee's own explanation of why the department should reimburse the cost of tuition, based on the employee's perceived need.

8322 LEAVE APPROVAL FOR NON-REIMBURSED STAFF TRAINING

A. When staff are away from their normal duties at training, either in-state or out-of-state, for which the department is not providing cost reimbursement for the training or for travel costs, the employee does not need to follow the travel request procedures contained in chapter 9000, section 9120.

B. At the discretion of CA and considering program needs, the Regional Administrator, for Division of Children and Family Services (DCFS) staff, or the applicable division Director, for other divisions, may approve educational leave for the employee under the following conditions:

1. The employee submits, through the supervisor and appropriate lines of authority, to the Regional Administrator or Director, as appropriate, a *Leave Request*, SF-6953, with the "Other" box checked and specifying "training."

2. The employee prepares and attaches to the *Leave Request* a brief summary of the training to be attended and its relevance to the

employee's job assignment or career development.

C. The Regional Administrator or Director, as appropriate, will approve or disapprove the request.

8323 MANDATORY TRAINING

In addition to New Employee Orientation, which is required of all new employees, CA staff must participate in mandatory training as outlined below.

A. Mandatory training for DCFS social workers includes:

1. For new social workers, three weeks of Academy training. All new employees must attend the first two weeks of Academy, regardless of their past work experience. The third "track" week may be waived with the approval of the Regional Administrator and Assistant Secretary for staff who have had extensive child welfare experience in other states.

2. For a social worker transferring from one program area to another (e. g., CPS to Licensing), the one week Academy "track" week in the new program area as soon as possible.

3. For new social work staff, each individual must complete the training contained on the "first year training ticket" within the first year of employment.

4. Among the training requirements on the "training ticket" are:

   a. Two days of basic substance abuse training;

   b. Two days of *Indian Child Welfare (ICW) Manual* training;

   c. A one to two day training session on permanency planning; and

   d. For CPS social workers only, two days of sex abuse/ child interview training.

5. For new staff, additional basic training provided by the Regional Administrator regarding regional policies and procedures, court rules, and local resources.

B. Mandatory training for DLR social workers includes:

1. For new employees, three weeks of Academy as described in paragraph A.1; DLR social workers transferred into their licensing positions from DCFS must attend the DLR "track" week as soon as possible after the transfer.

2. Within the first year of employment, two days of basic substance abuse training and two days of ICW manual training.

3. For DLR child abuse and neglect investigators, two days of sex abuse/disclosure interview training.

C. Each DCFS and DLR region will maintain information to track mandatory training on the statewide training tracking system.

8324 NEW EMPLOYEE ORIENTATION

A. DSHS Administrative Policy 6.13, *New Employee Orientation Program*, requires that each employee receive an introduction to state service. CA supervisors and managers are responsible to see that new employees receive New Employee Orientation (NEO) in accordance with department policy. The purpose of NEO is to provide staff with the initial phase of personnel processing and job familiarization.

B. Supervisors and local offices are required to ensure that staff receive training on the following topics:

1. Agency Mission and Philosophy;
2. Children's Administration Policy and Procedures;
3. Risk Assessment;
4. AIDS;
5. Diversity;
6. Blood Borne Pathogens;
7. Americans with Disabilities Act (ADA);
8. First/Aid;
9. Sexual Harassment;
10. SSPS;
11. CAMIS;
12. Community Resources/Relations;
13. Working With Local Court/Legal training;
14. Homelessness;
15. Federal Revenue Requirements.

8325 ACADEMY TRAINING

A. Academy provides new social workers an overview of agency mission, programs, client populations, and job specific training to enable them to meet minimum

standards established by the department. This training fulfills requirements of RCW 74.14B.010. Changes have been made in requirements for Academy training to ensure that new employees consistently receive a minimum of basic training before being given case management responsibilities.

B. New social work staff must begin the Academy no more than eight work days after beginning employment. These staff cannot be assigned cases or perform case aide functions prior to attending the first week of the Academy; they cannot be assigned cases for the first 30 days of employment with CA.

1. Supervisors of new employees are expected to arrange for complete coverage of cases assigned to new staff during Academy weeks so that new staff can concentrate fully on training activities.

2. This training structure requires that field offices plan as they fill vacancies. New social work staff can and should be enrolled in the Academy by appointing authorities as soon as possible after an individual has accepted employment with CA and, if possible, well before the employee's start date.

3. These requirements apply to all permanent and temporary employees but not to emergency hires. Exceptions to policy on temporary hires must be approved by the DCFS Regional Administrator or DLR Director and the Assistant Secretary.

C. Supervisors will have their staff attend job specific training, subject to availability, in the following topics after attending the Academy:

1. Family Reconciliation Services;

2. Child Welfare Services;

3. Child Protective Services;

4. Adoption Services;

5. Indian Child Welfare Services.

D. Supervisors will make reasonable efforts to achieve the following:

1. Have social worker staff receive Academy training as soon as possible after employment begins.

2. Have intermittent, temporary, part-time, and stand-by workers meet the same minimum standards of training.

8326 SEX ABUSE INVESTIGATION TRAINING

A. CA must provide ongoing specialized training for CPS staff responsible for investigating child sexual abuse. Training participants must have the opportunity to practice interview skills and receive feedback from instructors.

B. The training must:

1. Be based on research-based practices and standards;

2. Minimize the trauma of all persons who are interviewed during abuse investigations;

3. Provide methods of reducing the number of investigative interviews necessary whenever possible;

4. Assure, to the extent possible, that investigative interviews are thorough, objective, and complete;

5. Recognize needs of special populations, such as persons with developmental disabilities;

6. Recognize the nature and consequences of victimization;

7. Require investigative interviews to be conducted in a manner most likely to permit the interviewed persons the maximum emotional comfort under the circumstances;

8. Address record retention and retrieval; and

9. Documentation of investigative interviews.

RCW 74.14B.010

8400 FLEXIBLE WORK HOURS

8410 LIMITED SCOPE

A. A Regional Administrator, Regional Manager, Director, or Office Chief may authorize an individual or group of employees to work an alternative work week as described in WAC 356-15-020(2). An alternative work schedule is voluntary on the part of the employee. It is not a universal benefit available to all employees. It is a management prerogative available to the employee when, in the opinion of the supervisor and manager, specified conditions are met.

B. Alternative work schedules are subject to approval of the Appointing Authority (Director, Regional Administrator, or Assistant Secretary), who must ensure that the following conditions are met:

1. The practice must conform with applicable collective bargaining agreements.

2. The responsible manager must issue written procedures governing use of alternative work schedules in each area of the manager's jurisdiction.

3. Each employee seeking an alternative work schedule and the regional or state office's approving manager/supervisor shall sign a negotiated

agreement outlining the terms of the revised work week. The agreement shall include, at a minimum, the following:

a. The days and hours of work each week to total 40 hours or the total number of hours required of an individual part-time employee.

b. Use of a personal holiday equivalent to the employee's work shift on the day used.

WAC 356-18-025

c. A description of how the employee will be compensated for a holiday that falls on a regularly scheduled day off.

WAC 356-18-025

4. The regional and state office procedures must include methods to verify that the employee is meeting the provisions of the agreement, including fulfilling the obligation to work the required minimum hours per week.

8420 MINIMUM CRITERIA FOR ALTERNATE WORK SCHEDULES

Alternate work schedules are a management option and may be considered for an employee when the following criteria are met:

A. The employee's job, or tasks on that job, can be readily accomplished in an alternate schedule.

B. The employee's absence from the office will not be detrimental to the work group's productivity or the needs of clients nor have a disruptive or negative impact on working conditions of other employees. Adequate coverage must be provided at all times during the standard work week without the presence of the alternate work week employee for the plan to be approved.

C. The supervisor considers the employee's performance to be satisfactory.

D. The supervisor and employee are willing to sign and abide by a mutually defined alternate work schedule agreement.

8500 STAFF IDENTIFICATION

8510 IDENTIFICATION CARDS

A. Each CA employee who may be in travel status at any time, who makes home visits, who makes visits to facilities, or who may have access to confidential records, either internal or external, shall obtain an official department identification card with the employee's photograph.

B. The identification card, DSHS 03-046 DOL(X)(8/50), shall be completed by administrative support staff, shall be signed by the Appointing Authority, and the employee will make an appointment with the local licensing center of the Department of Licensing to have their photograph taken and attached to the card or follow regional procedures.

8520 IDENTIFICATION TAGS

When a CA manager requires that CA staff wear name tags for purposes of identification, the name tag shall identify staff persons as employees of Children's Administration, not the individual division.

8600 EMPLOYEE SAFETY

Each office shall establish a safety program consistent with the requirements of the department's *Safety Program Manual* and tailored to the office's unique environment and needs.

8610 SAFETY COMMITTEES

A. The manager of each office is required to establish and operate a safety committee for that office to meet monthly. The membership is to include equal representation of employer-selected and employee-selected representatives in accordance with the Washington Industrial Safety and Health Act (WISHA). The manager shall make clear the expectations for each new member to the employee and their supervisor. Sufficient time off from regular duties shall be authorized to facilitate employee participation. The agenda for these meetings will include, but not be limited to, the following:

1. Monitoring and discussion of regular safety inspections and investigations of job sites, materials, and equipment alleged to be unsafe.

2. Discussion of appropriate operating procedures relative to maintaining a safe work environment.

3. Monitoring of formal training to ensure safety awareness and skill improvement, as well as on-the-job instructions prior to the assignment of duties in areas of higher accident risk.

4. Reviewing all reports of accidents and illnesses that occurred since the previous meeting.

B. The manager may obtain a waiver from the Safety Section, Office of Risk Management, to authorize quarterly safety committee meetings if office size and/or safety record justify such a change. The address is 1949 South State Street, MS N27-14, Tacoma, WA 98405.

8700 DISASTER RESPONSE

8710 PURPOSE AND SCOPE

A. Disaster response, preparedness, and recovery plans are the responsibility of all supervisors and management staff.

B. Each office identifies how the operations of the office will return to full service following a disaster and who in the organization is responsible for each of the steps.

C. Each office is responsible to train their staff in emergency and disaster recovery procedures.

8720 STANDARDS

8721 PLANNING FOR DISASTER RECOVERY

A. **Expectations**

1. In the event of a disaster, CA will ensure that essential records are protected, stored, and retrievable in accordance with its Essential Records Plan.

2. Offices will initiate procedures to ensure worker and client safety, minimize damage to equipment and files, and restore critical functions for service delivery within seven working days. Basic levels of services are to resume at the earliest possible time.

B. There are three levels of disaster:

1. Water damage, contaminant damage (food, dust, etc.) to equipment or to a work station or area that renders it unusable.

2. HVAC system outages, computer, phone and power outages.

3. Bombing, terrorism, violence, toxic fumes, and the like that render the facility unusable; fire, earthquake, flooding, and other natural disasters that leave the facility unusable; or death or severe injury that would incapacitate a work group.

8722 OPERATIONS

A. Operations essential to CA are the work site, telecommunications, and social service programs. Within 24 hours basic services are to begin. The designated staff for the operational recovery will identify media sources which can be used to keep the public notified of CA operational recovery.

B. Director of Management Services, DCFS Regional Administrator, and DLR Regional Manager Responsibilities:

1. Prepare an emergency mission statement with implementation procedures.

2. Prepare regulations and announcements for immediate issuance in the event of an emergency to enable the office to carry out its operational mission.

3. Designate an Operational Coordinator for each work site.

4. Approve the Operational Coordinator's selection of necessary steps to resume normal operations following an emergency.

5. Provide adequate resources to support the recovery of CA office operations in the most cost effective manner.

C. Local Operational Coordinator's Responsibilities:

1. Identify and select work site, telecommunication methods, and the recovery of social services programs that are necessary to carry out:

   a. Emergency mission, and

   b. Resume normal operations following an emergency.

2. Submit a listing of selected work site, telecommunications, and social services program implementation to the Director, Regional Administrator, or Regional Manager, as applicable, for approval.

3. Yearly, review the Operational Recovery Schedule. If needed, update and get the required approval.

8723 ESSENTIAL RECORDS

A. Records essential to CA are a combination of paper and electronic files. Client records and payments processed through CAMIS are in electronic files with criminal history background checks, court reports, and other client reports from outside sources in paper form. The journal voucher, vendor payments, personnel attendance, and payroll, Agency Inventory System (AIS), numeric registers, contract, administrator's accounts, regional financial reports, and position action requests are recorded in electronic files with paper authorization forms/back-up.

B. Responsibilities of each Division Director, Regional Administrator, and Regional Manager include:

1. Preparation of an emergency mission statement with implementation procedures.

2. Preparation of regulations and announcements to issue immediately in the event of an emergency to enable the office to carry out its emergency mission.

3. Approval of the Records Coordinator's selection of essential records necessary to carry out or resume normal operations following an emergency.

4. Provision of adequate resources to support the protection of selected essential records in the most cost effective manner.

C. Local Office Records Coordinator's responsibilities include:

1. Identification and selection of essential records for the office that are necessary to carry out:

   a. Emergency mission, and

b. Resume normal operations following an emergency.

2. Submission of a listing of selected essential records to the Division Director, Regional Administrator, or Regional Manager for approval. When it is approved, forward the list to the DSHS Records Officer, Forms & Records Management, MS 45805.

3. Yearly review of the Essential Records Schedule. If needed, update, obtain required approval, and forward as shown above in C.2.

8724 LAN/WAN RECOVERY

A. Identify essential Local Area Network (LAN)/Wide Area Network (WAN) operations for operation of program and administration. The designated staff for the LAN/WAN recovery will identify software and alternate system access.

B. Office of Information Services Manager responsibilities include:

1. Preparation of a technology emergency mission statement with implementation procedures.

2. Preparation of regulations and announcements to issue immediately in the event of an emergency to enable the Administration and each office to carry out its mission.

3. Approval of the LAN/WAN Coordinator's selection of system recovery necessary to carry out or resume normal operations following an emergency.

4. Provision of adequate resources to support the recovery of CA office system technology in the most cost effective manner.

C. Local LAN/WAN Coordinator's responsibilities include:

1. Identification and selection of facility based and alternative computer systems to carry out:

a. Emergency mission, and

b. Resume normal operations following an emergency.

2. Submission of a listing of selected LAN/WAN software/system(s) essential to recovery operations to the Regional Administrator or the Regional Manager, as applicable, for approval. Submission of the final approved LAN/WAN software/system(s) recovery to the Office of Information Services Manager, MS: 45710

3. Yearly review of the LAN/WAN Recovery plan. If needed, update, obtain required approval, and forward as shown above in C.2.

8800 CHILDREN'S ADMINISTRATION STAFF LIABILITY

See the CA *Practices and Procedures Guide*, chapter 4000, section 43073, for information regarding staff liability and responsibility for complying with court orders.

8900 OPPOSING TESTIMONY

8910 PURPOSE AND SCOPE

A. This standard and procedure establishes guidelines for Children's Administration (CA) staff who may be called upon or wish to provide testimony or documentation opposing the department's official position in an administrative hearing or court action, usually as a result of an adverse action against a childcare license or as part of a child or family case specific action.

B. This standard does not apply to cases brought by or against a department employee. The standard does not apply to nor limit employee participation in any role in other, non-licensing or non-case specific, actions, including employee disciplinary, Personnel Appeals Board, and court hearings or related actions.

8920 STANDARD AND PROCEDURE

A. Division of Licensed Resources (DLR) adverse licensing action constitutes a decision by the department that the licensee is not suitable to care for children.

B. CA staff, including Division of Children and Family Services (DCFS) social workers, shall not knowingly take action that directly subverts or undermines the department's position in a licensing or other family or child case specific action.

C. If CA staff has information that is relevant to the licensing or other case specific determination in question, including contacts from opposing counsel, that staff will provide that information to the DLR licenser or other responsible CA employee, as applicable. When contacted by opposing counsel, the CA employee will also notify the assigned Assistant Attorney General (AAG).

D. CA staff will not knowingly share department documents related to the dispute with any licensee or other party who is the subject of the licensing or other department case specific action or with the licensee/party's attorney/agent/ advocate except as currently provided in public disclosure statutes and regulations. If CA staff receives a request for documents from the licensee/party or his/her attorney/ agent/advocate, the staff will immediately refer the request to his/her supervisor, the DLR licenser for licensing issues, and the AAG assigned to the licensing or other family or child specific case.

E. CA staff will not knowingly share confidential information with the licensee who is the subject of licensing action. CA staff will also not knowingly share confidential information with the opposing party to any other child or family case specific action. In addition, CA staff will not knowingly share confidential information with the licensee/party's attorney/agency/advocate.

1. "Confidential information" includes, but is not necessarily limited to, attorney/client communications; information pertaining to the

department's strategy or decision-making in the licensing case or other matter under litigation; agency memoranda, e-mail, or other communication related to the case; and client (child or child's family) information.

F. If CA staff are contacted by a licensee who is the subject of licensing action or other party to a department-related child or family case-specific litigation, the licensee/party's attorney/ agent/advocate or by any person who has information regarding the licensing or other child or family specific case in dispute, that staff will immediately notify his/her supervisor, the DLR licenser or other involved CA staff, as applicable, and the AAG assigned to the case.

G. CA staff will not testify in support of a licensee who is the subject of licensing action or other party in opposition to the department unless subpoenaed to do so. CA staff will not provide any written letters of support for the opposing party on DSHS letterhead. The CA staff will specifically state that his/her testimony, whether by subpoena or not, or letter sets forth his/her personal opinion and is not the position of the department.

H. The department, in consultation with the assigned AAG, determines the department's position in any action. The assigned AAG represents the department and not any particular CA staff. If CA staff testifies in support of a licensee who is the subject of a licensing action or other party to a child or family specific action in opposition to the department's position, he/she may be cross-examined as a hostile witness by the AAG, who may attempt to discredit the employee's testimony.

CHAPTER 9000 PAYMENTS AND ACCOUNTS

CHAPTER 9000 PAYMENTS AND ACCOUNTS 9-1

9100 FOSTER CARE PAYMENTS 9-1
9110 Payments Above Base Rates 9-1
9111 Purposes 9-1
9112 Limitations 9-1
9120 Special Rates 9-1
9121 Justification and Approval 9-1
9122 Training Requirement 9-2
9123 Children with Behavioral/Emotional Problems 9-2
9124 Intellectually/Physically Challenged Children 9-2
9130 Exceptional Cost Plans 9-3
9131 Standards 9-3
9132 Training Requirement 9-4
9133 Appropriate Uses 9-4
9134 Regional Expectations 9-4
9140 Limitations on Out-of-Home Care Payments 9-5
9141 Disputed Overpayments 9-6
9142 Dual Payment Limitations 9-6
9200 VENDOR PAYMENTS 9-7
9300 VENDOR WARRANT REPLACEMENT 9-7
9310 Children's Administration Staff Tasks 9-7
9320 Disbursements Staff Tasks 9-7
9400 SOCIAL SERVICE PAYMENT SYSTEM 9-8
9410 Regional Office Responsibilities 9-8
9411 Regional SSPS Coordinator 9-9
9420 Area Manager Responsibilities 9-10
9430 Local Office Responsibilities 9-11
9431 Expectations and Procedure 9-11
9432 Social Worker/Designated Staff Responsibilities 9-11
9433 Input Staff Responsibilities 9-12
9434 Support Staff Responsibilities 9-13
9435 Supervisor Responsibilities 9-13
9436 Local SSPS Coordinator 9-15
9437 Problem Resolution 9-16
9440 Provider File Numbers 9-16
9500 SOCIAL SERVICE PAYMENTS 9-16
9510 Definition of Overpayment 9-16
9520 Overpayment and Underpayment Identification and Recovery 9-16
9530 Repayment 9-22
9540 Unsolicited Payments 9-22
9550 Interest on Vendor Debt 9-22
9600 ACCOUNTS RECEIVABLE 9-22
9610 Office of Financial Recovery Responsibility 9-22
9700 TRUST ACCOUNTS 9-23
9800 ADMINISTRATOR'S ACCOUNTS 9-23
9810 Purpose and Scope 9-23
9820 Establishment of an Administrator's Account 9-23
9830 Separation of Duties 9-24
9840 Operation of Administrator's Account 9-24
9841 Mail Person 9-24

9842 Accounts Receivable Coordinator....9-24
9843 Disposition Person....9-24
9844 Recording Person....9-25
9845 Reconciliation Person....9-25
9846 Review and Approval of Authorizations....9-25
9847 Fund Trustee....9-25
9850 Accessing Administrator's Account Funds....9-26
9900 FEES FOR VITAL STATISTICS....9-26
9910 Service Worker Tasks....9-26
9920 Social Work Supervisor Tasks....9-26
9930 Disbursements Staff Tasks....9-26
91000 FOSTER PARENT LIABILITY PLAN....9-27
91010 General information....9-27
91011 Purpose....9-27
91012 Eligibility....9-27
91013 Program Management....9-27
91014 Inquiries....9-27
91020 Plan Summary....9-28
91021 Liability Coverage....9-28
91022 Representation by Attorney General....9-28
91023 Definitions....9-28
91024 Limitations....9-28
91025 Exclusions....9-29
91030 Liability Claim Filing....9-30
91031 Foster Parent Procedure....9-30
91032 Social Worker Procedure....9-30
91040 Liability Claim Payment....9-31
91050 Lawsuit....9-31
91051 Foster Parent Procedures....9-31
91052 Social Worker Procedures....9-31
91060 Legal Defense....9-32
91061 Request for Defense....9-32
91062 Expense of Defense....9-32
91063 Procedures....9-32
91070 State Obligation....9-33
91080 Fraud....9-33
91090 Actions Commenced by Foster Children or Their Parents....9-33
910100 Modification of Reimbursement Plan....9-33
91100 FOSTER PARENT REIMBURSEMENT PLAN....9-33
91110 General Information....9-33
91120 Eligibility....9-34
91130 Program Management....9-34
91140 Definitions....9-34
91150 Reimbursement Limitations....9-35
91160 Exclusions....9-36
91170 Claim Filing Procedures....9-37
91171 Foster Parent Procedure....9-37
91172 Social Worker Procedure....9-37
91180 Misrepresentation of Claims....9-38
91190 Investigation of Claims....9-38

911100 Reconsideration of Claim Determinations....9-38
911110 Exception Requests....9-38
91200 EMPLOYEE, VOLUNTEER, AND CLIENT TRAVEL....9-39
91210 Requirements for Travel....9-39
91220 Authorizations for Travel....9-39
91221 In-State Travel....9-39
91222 Out of State Travel....9-39
91223 Travel Out of the Country....9-43
91300 CHILD DAY CARE SUBSIDY PROGRAMS....9-44
91310 Introduction....9-44
91320 Definitions....9-44
91330 Office of Childcare Policy Childcare Programs....9-44
91340 Income Eligibility....9-44
91350 Co-Payments....9-44
91360 Qualified Childcare Providers....9-45
91370 Rates and Authorizations for Childcare....9-46
91371 Half-Day/Full Day Authorizations....9-47
91372 Registration Fee....9-47
91373 Special Needs Childcare....9-48
91374 Infant Bonus....9-49
91375 Nonstandard Hour Bonus....9-49
91380 Overpayment Procedures....9-50
91390 Advance and Adequate Notice....9-50
91391 When Required....9-50
91392 When Not Required....9-50
913100 Fair Hearing....9-50
913110 Childcare Rate Clusters Based on DSHS Regions....9-51
91400 The Good Cause Determination Process....9-51
91410 REFERRAL PROCESS....9-51
91420 Basis For Good Cause....9-52

9100 FOSTER CARE PAYMENTS

Revisions to the sections regarding foster care payments are currently under revision to reflect the new Foster Care Rate Structure, which was effective January 1, 2001.

9110 PAYMENTS ABOVE BASE RATES

9111 PURPOSES

A. Additional funding beyond basic rates may be necessary to maintain a child in foster family care or a relative placement.

B. Funding is intended to enable care in the most family-like, least restrictive setting. However, it is also appropriately used to enable care pending placement into a specialized, more restrictive, appropriate care setting when such resources are not immediately available.

9112 LIMITATIONS

A. Additional funding beyond basic rates is an exception and not an entitlement to all children in care who have extraordinary needs.

B. The Division of Children and Family Services (DCFS) social worker, the supervisor, and/or the Area Administrator must determine that the need is critical and that funding is available within regional allotments.

C. The DCFS Regional Administrator is responsible for all allotted service delivery funds and determines the level of additional funding available to meet special needs. All expenditures must be within regional allotments.

9120 SPECIAL RATES

See the interim *Foster Care Redesign Handbook* for requirements, instructions, and tasks for implementation of Foster Care rate restructuring. Restructuring of foster care rates will be phased in through June 2001.

9121 JUSTIFICATION AND APPROVAL

A. The private agency or DCFS social worker may authorize a special rate, up to state authorized maximum amounts, in addition to the basic rate for board and room, for a child in need of special and specific care. The private agency or DCFS social worker must write a justification for approval by the DCFS supervisor.

B. The supervisor must approve the special rate before payment is made. If the special rate is approved, the supervisor must review the need for continued payment every six months. The supervisor must document approval of the special rate in the child's case file at initiation and renewal.

C. Documentation contained in the child's Health & Education database of the child's behavior, emotional, intellectual, and/or physical problems is sufficient justification for a special rate.

9122 TRAINING REQUIREMENT

To be eligible to receive the special rate on behalf of a child in their care, the foster parent(s) are not required to complete Foster Parent Scope training provided by the Division of Licensed Resources (DLR).

9123 CHILDREN WITH BEHAVIORAL/EMOTIONAL PROBLEMS

A. To be eligible for special rate foster care, children with behavioral/ emotional problems need to exhibit at least three of the following behaviors, which are documented in the Behavior Issues section of the child's CAMIS Health & Education database:

1. Recurring use of illicit drugs;
2. Regular overuse of alcohol;
3. Poor school adjustment and/or truancy;
4. Sexual acting out;
5. Frequent shoplifting and/or other theft;
6. Chronic running away;
7. Demonstrated property destruction in own home and/or foster home;
8. Regular, frequent peer conflict which may require action by foster parent;
9. Significant sleep problems which may cause disruption in the normal sleep patterns of the foster parent(s);
10. Destructive attention-seeking behavior which may demand extra attention by foster parent(s);
11. Frequent noncompliance with requests of parent(s), foster parent(s), teacher, or other authority figures;
12. Failure to use normal cautions in using potentially flammable substances;
13. Soiling and enuresis over age six;
14. Extremely bizarre behavior, reflecting psychosis or other severe mental disorder.

9124 INTELLECTUALLY/PHYSICALLY CHALLENGED CHILDREN

A. To be eligible for special rate foster care, intellectually and/or physically challenged children need to exhibit at least two of the criteria listed below, which are documented in the child's record. If Foster Care Passport Program (FCPP) staff has constructed a Passport for the child, the child's social worker must have documented any of the following dysfunctions, except "awaiting institutional placement," in the child's Health & Education database:

1. Requires physical assistance, inappropriate to the child's age, of foster parent in feeding, dressing, bathing, or toileting;

2. Needs the physical help of foster parent in order to be mobile;

3. Needs regular and organized physical therapy by foster parent under the orders/direction of a professional;

4. Needs medication administered by foster parent on a regular basis per physician's orders;

5. Needs physical assistance by foster parent for drainage of ileum conduit, colostomy;

6. Requires suctioning, mist tent, etc., care which is provided by a foster parent;

7. Non-ambulatory;

8. Epileptic child who has uncontrollable seizures;

9. Awaiting institutionalization placement;

10. Habitually wanders unless closely supervised;

11. Failure to thrive below third percentile;

12. Born addicted to drugs requiring additional care and support during the withdrawal period.

9130 EXCEPTIONAL COST PLANS

See the interim *Foster Care Redesign Handbook* for requirements, instructions, and tasks for implementation of Foster Care rate restructuring. Restructuring of foster care rates will be phased in through June 2001.

9131 STANDARDS

A. CA uses Exceptional Cost funds to enable children with highly individual needs to be cared for in the least restrictive setting.

B. CA staff must use the funds only after all other potential sources of financial and other support for the needed services have been exhausted.

C. Children with severe physical and/or intellectual impairments and those with acute emotional/ behavioral problems may need funds beyond the special rate in order to succeed in out-of-home care. These funds may reimburse foster parents for unusual, highly demanding activities/supervision the foster parents provide and for purchase of special services or supplies.

D. CA always considers purchase of a foster parent's time/activities an exceptional cost plan (ECP).

9132 TRAINING REQUIREMENT

To be eligible to receive Exceptional Cost Payments (ECP) on behalf of a child in their care, the foster parent(s) are not required to complete Foster Parent Scope training provided by the Division of Licensed Resources (DLR).

9133 APPROPRIATE USES

A. The DCFS or private agency social worker may seek approval from the DCFS supervisor and Area Manager or other regional designee for an ECP when the child has unique documented needs which require unusual, very special care on the part of the foster parent and/or support services, equipment, and supplies. Before seeking approval of an ECP, the social worker needs to determine that the child's needs may be met only through an ECP.

B. The social worker must document the plan and appropriate approvals in the child's case record before payment is made. For children enrolled in FCPP, the social worker must attach a copy of the child's current Passport, including the current Health Recommendations Letter, to the ECP.

C. The social worker and the supervisor must review the ECP at a minimum of once every six months and obtain approval of the Area Administrator or other regional designee for continuation of the plan and payment.

D. For more than one child in the home to receive ECP, the Area Administrator and the Regional Administrator or designee must, as an expenditure accountability measure, review the proposed plans for each child to ensure that each child is in need of and will receive all authorized services, without duplication of payments to the foster parent.

9134 REGIONAL EXPECTATIONS

A. The Regional Administrator determines the procedures by which the social worker authorizes these funds. The procedures will address the following:

1. The prescribed form or format for documentation.

2. The rationale/justification for additional funding for a specific child.

3. The specific services being requested through the ECP and the rate levels for each service. The social worker must categorize services as either Maintenance (direct care/supervision of child) or Non-Maintenance in order to obtain federal matching funds.

4. Exploration of alternative resources, including services or funds that community agencies and DSHS divisions may contribute toward the plan of care.

5. The total amount of additional funds and the period of time such plans may cover.

6. The delegated approval level, if not the Regional Administrator.

9140 LIMITATIONS ON OUT-OF-HOME CARE PAYMENTS

A. To prevent overpayments when children leave one residential placement to go to another or to return home, the CA social worker shall make payment only through the day before the date of discharge. No double payments are to occur by paying for the same date of care in two different facilities.

B. CA shall pay for temporary absences of children from foster family and group care only in compliance with WAC 388-70-054. In addition, the following conditions shall apply:

1. CA shall not pay for absences of a child from foster family care, unless there is an agreement with the foster family for the child to return to their home within 15 days.

2. When a child leaves a foster care placement, unless there is agreement by DCFS and the foster parent to place the child back into the foster home, the social worker shall prorate the foster care payment, including special rate and exceptional cost, for the month, paying only for the actual days of care provided, not including the last day of placement. Acceptable absences, where the plan is to return the child to the foster home within 15 days, include:

   a. Planned visitation;

   b. Hospitalizations;

   c. Attendance at summer camps and similar activities;

   d. Respite placements;

   e. Temporary placement while foster parent(s) is vacationing or receiving medical treatment;

   f. Juvenile detention placement of youth; or

   g. Runaways when the bed is being held for the return of the child.

3. An exception to policy (ETP) may be submitted to the Regional Administrator to continue payment beyond 15 days of absence or when a planned absence is for a reason other than listed above, if continued payment is necessary to continue a plan of care which is in the child's best interests.

4. In the event of an unplanned absence from the foster family home, if the created vacancy remains unfilled, the social worker may authorize up to three days of payment to determine if the child will be returned to the foster home.

C. Overpayments also occur in foster family or group care when the authorized goods or services are not provided but payments are made. Examples include payments

for Exceptional Cost or Medicaid Personal Care Services that are paid but not delivered.

D. The social worker or other staff designated by the Regional Administrator will need to calculate an overpayment when payments are made for services not delivered and for those days paid if the child is absent from the foster family home for reasons other than those listed in paragraph A, above.

1. The designated staff completes a *Social Service Overpayment Notice*, DSHS 18-398.

2. The designated staff sends a copy of the form to the foster parent with instructions to forward repayment directly to the Office of Financial Recovery (OFR).

3. The designated staff also sends copies of the forms to OFR, along with documentation supporting the finding of an overpayment and the calculations and retains a copy of the overpayment notice in the client and/or vendor file.

E. Each Regional Administrator will put into place regional controls that identify placements that have ended and which require overpayments to be collected in accordance with this standard.

F. Each Regional Administrator will put into place regional controls that identify how foster care payments above base rates are monitored to achieve improved outcomes.

9141 DISPUTED OVERPAYMENTS

Foster parents, as non-contracted care providers, do not have a right to a fair hearing.

A. When a foster parent believes no overpayment has occurred, the overpayment has been computed in error, or the overpayment should not have to be repaid, the foster parent requests review by the department.

B. The Foster Care Program Manager, in the CA Division of Program and Policy Development, reviews the overpayment dispute and determines the amount of overpayment to repaid or forgiven. The Program Manager uses as the basis of the decision information provided by the social worker, OFR, and the care provider.

C. DCFS regional staff shall respond promptly and completely to all requests for additional information from the Foster Care Program Manager.

9142 DUAL PAYMENT LIMITATIONS

A. Payment of foster care is for 24-hour care. Payment of both foster care and child day care for the same child to a dually licensed home is a double payment. Trading children between dually licensed homes would similarly result in double payments.

B. Before authorizing childcare payments for a child in foster care, the child's social worker will verify the employment of the foster parent(s) outside the home or in the home in an occupation that would normally be performed outside the home. The social worker will document in the child's record through wage stubs or other appropriate means verification of the employment. The social worker will include the name of the employer, the hours worked, and the telephone number at the work site where the foster parent can be contacted. The social worker will verify the foster parent(s) employment status every six months while payments continue.

C. For foster parents whose work site is their home, the social worker will verify the actual hours of employment and limit child day care payments to those hours only.

D. Any Foster Parent Employment Childcare payments to be continued to dually licensed homes must be reviewed and approved by the Area Manager, with justification and documentation of the approval included in the child's record.

9200 VENDOR PAYMENTS

Payment must be made through SSPS when service authorization codes are available. Social workers, program managers, and Regional Business Managers shall not use Invoice Voucher A-19s to make payment in such cases as federal revenue will be lost and/or fiscal expenditure information will be inaccurate.

9300 VENDOR WARRANT REPLACEMENT

9310 CHILDREN'S ADMINISTRATION STAFF TASKS

When a vendor makes a request for a replacement warrant, the responsible staff:

A. Sends/gives the vendor a copy of *Vendor Affidavit of Lost, Stolen, or Destroyed Warrant*, DSHS 9-013(X), with instructions to complete the top half of the form, sign, notarize, and return the original affidavit and one copy to the local CA office.

B. Mails the original affidavit to DSHS, Disbursements Section, MS 45843, Olympia, WA 98504.

C. Attaches a copy of the affidavit to a copy of the original payment authorization document (DSHS 14-154A/159) and places it in the social service record or payment batch file.

D. Under no circumstances initiates another voucher. CA workers are to ensure only the proper affidavit is completed and submitted to Disbursements.

9320 DISBURSEMENTS STAFF TASKS

DSHS Disbursements staff checks with the State Treasurer's Office to determine if the warrant is outstanding. If staff finds that the warrant has been cashed, an investigation is undertaken before reissuing a warrant.

9400 SOCIAL SERVICE PAYMENT SYSTEM

9410 REGIONAL OFFICE RESPONSIBILITIES

A. The DCFS Regional Administrator and the Division of Licensed Resources (DLR) Regional Manager establish controls to ensure that only properly designated personnel input to the Social Service Payment System (SSPS) via the Case and Management Information System (CAMIS).

B. The Regional Administrator and Regional Manager, through written procedures, designate staff to maintain security for CAMIS and for SSPS in their respective areas of responsibility.

C. The Regional Administrator and the Regional Manager see that the following are done:

1. Current written SSPS procedures are available to staff, and staff are aware of their location.

2. Appropriate staff have a copy at their desk.

3. Each office has at least one current copy of the SSPS Manual.

4. Staff are appropriately trained in using SSPS.

5. SSPS payments are adequately monitored.

D. The Regional Administrator and Area Manager are responsible to see that no SSPS payments are made to vendors without a valid contract in place, unless otherwise allowed by the specific SSPS service and payment code.

E. The Regional Administrator and the Regional Managers establish procedures to retain the following reports in the regional and local offices:

REPORT	NUMBER	RETENTION
Purged But Not Paid Report	SSPS22N26 microfiche	6 years
Client Payment Detail	SSPS40N40 microfiche	6 years
Provider Services Summary	SSPS142	1 year
All Services Summary	SSPS182	1 year
Client Payment Detail Listing	SSPS40N40	1 year or 5 years*
Client Payment by Service Code	SSPS40N20	1 year
Service Code by Reporting Unit	SSPS40N21	1 year
Adoption Family Services	SSPS180-A SSPS180-B SSPS180-C	1 year
FRS Services	SSPS181-A-D	1 year
Payee by Reporting Unit	SSPS40N31	1 year

1. *This report must be retained for five years if the office does not have a microfiche machine.

F. The Regional Administrator and the Regional Manager provide for all of their respective employees to have access to terminal alerts broadcast through CAMIS.

9411 REGIONAL SSPS COORDINATOR

The Regional Administrator designates a regional SSPS Coordinator whose responsibilities include:

A. Monitor a sample of SSPS output reports on a quarterly basis.

B. Act as the primary contact person with SSPS Control in the Management Services Administration.

C. Clarify SSPS information coming into CA from Management Services Administration.

D. Act as a resource to local SSPS coordinators and supervisors for training and/or payment problems.

E. Assist in developing SSPS procedures, providing SSPS training, and completing corrective action in response to paragraph A, above.

9420 AREA MANAGER RESPONSIBILITIES

A. The Area Manager is responsible to assign a staff person in each office to maintain the following lists:

LISTS	FORM	RETENTION
Duplicate Invoice List	DSHS 07-056(X)	4 months
Paper Batch Transmittal List	DSHS 01-137(X)	2 years
SSPS Transaction Input List	SSPS0017	2 years

1. The use of each form is described in *SSPS Manual*, Section 99.

B. **Area Manager Reports**

1. The Area Manager uses the following reports to monitor local office and unit activity on a monthly basis:

REPORT	NUMBER	RETENTION
Administrative Report	SSPS015-1	5 months
Worker/Supervisory Activity Reports	SSPS014-1 SSPS014-2	6 months
Authorization in Error Weeks Elapsed without Correction	SSPS057-A SSPS057-b	1 month

C. Area Managers assign a gatekeeper in each office to control the creation of provider numbers and to see that the following steps are taken:

1. The assigned staff always conduct a provider file clearance before creating a new provider number, using the first three letters of the provider's name. This will pick up alternate spellings and minimize the creation of duplicate provider files.

2. To change information on an existing provider file, the appropriate individual (i.e., Local SSPS Coordinator, Regional SSPS Coordinator, Regional Contracts Coordinator, or assigned licenser) must give authorization.

D. Operator Numbers

1. Operator numbers allow administrative support and social work staff to complete SSPS authorization and provider file input through CAMIS. Each employee with an operator number is required to keep his/her

password secret. Only selected terminals have entry to these transactions by use of operator numbers and passwords. Area Managers determine which employees are to be assigned operator numbers and access to selected terminals. The unit supervisor sees that SSPS Control, MS 45812, is notified within five working days after an employee leaves or changes job functions.

2. The Area Manager designates security staff to document changes, additions, or deletions to operator numbers and terminal access, with documentation available for review by federal, state, and internal auditors. Designated security staff retain this documentation for at least two years.

9430 LOCAL OFFICE RESPONSIBILITIES

9431 EXPECTATIONS AND PROCEDURE

A. Local offices (reporting units) will establish and maintain auditable controls of SSPS and have written procedures for staff functions relating to SSPS. Local office procedures are to contain all information required herein. Local offices will add to these requirements the specific information that pertains to their office procedures.

B. Local offices are to have procedures for approval by management of exception payments prior to authorization, including signatures as required.

9432 SOCIAL WORKER/DESIGNATED STAFF RESPONSIBILITIES

A. For contracted services, the supervisor shall be responsible to see that the social worker or other designated staff verifies, through the CAMIS contracts module, that the proposed vendor is a contractor in good standing with the department before processing SSPS payment or service authorizations.

B. Designated staff perform the following in authorization preparation:

1. Authorize payment of appropriate services for clients to whom they are assigned.

2. When asked to authorize emergency services for a social worker who is unavailable, the designated staff uses that other worker's SSPS worker identification (ID). The authorizing worker must sign the authorizations prior to data input. The designated staff give copies of all authorizations to the clerical staff responsible for reconciling the transactions.

3. Correct errors on authorizations.

4. For one-time service authorizations, verify that goods or services were delivered prior to authorizing payment. Appropriate receipts must be present before payment and closure of the DSHS 14-159.

5. For those services requiring supervisory approval, as identified in the *SSPS Manual*, Appendix C, obtain such approval prior to input.

Appropriate authorizing documents may be attached to the *Social Service Authorization* (SSA), DSHS 14-154(X), or the CAMIS "Print Screen."

6. Should complete authorizations for input on a daily basis but shall complete them for input no less often than every fifth work day.

C. **Social Worker Reports**

1. Social workers or other designated staff shall use the following reports to monitor services and to track status:

REPORT	NUMBER	RETENTION
Worker Service Report	SSPS032	1 month
Expired & Expiring Service Tickler	SSPS013	1 month
Birthday Tickler	SSPS039	1 month

D. Social workers initiate and maintain CAMIS placement information.

E. Each social worker or other designated staff reviews the *Worker Service Report* (SSPS032) and:

1. Identifies any services, providers, or clients he/she did not authorize.

2. Identifies any unusual authorizations, unusual payments, or authorizations in the wrong amount.

3. Resolves discrepancies or reports discrepancies to the immediate supervisor when resolution is not possible.

F. Each social worker or other designated staff reviews the *Expired and Expiring Service Report* (SSPS013) and the *Birthday Tickler* (SSPS039) to identify services which need to be terminated, extended, or changed.

G. Social workers and other designated staff participate in offered training.

9433 INPUT STAFF RESPONSIBILITIES

A. Input should be done on a daily basis but shall be done no less than every fifth work day.

1. The input clerk or other authorized personnel initials, dates, and records the authorization number on the DSHS 14-154A or prints the CAMIS screen and initials and dates it. Assigned staff distribute copies as required. Assigned staff prioritize input with attention to the following deadlines: ACES, monthly invoice, expired services, and supplemental invoice.

2. Social workers doing their own input print the CAMIS screen and sign and date the printed copy. The workers file one copy in the case file and give one copy to clerical support to use in checking the Transaction Listing. The social workers distribute other copies as required by regional or local procedures.

B. Staff doing input must verify current enrollment for medical coverage before inputting medical authorizations.

C. When staff doing input are entering a paid service via CAMIS for which a license is required and the license expiration date is prior to the service end date, the input staff may change the service end date to reflect the license expiration date without sending the authorization back to the social worker for correction.

D. When input staff is entering a placement-related service via CAMIS for which the placement module has not been updated to reflect current status, the input staff returns the authorization to the authorizing worker. It is the social worker's responsibility to ensure that placement information is entered.

E. Assigned staff other than the one doing input checks input documents against the *Transaction Listing* (SSPS 017) and signs and dates the document upon completion of the review. Assigned staff bring discrepancies to the attention of the appropriate supervisor. Offices are to retain the *Transaction Listing* for 24 months after the daily work has been checked off by clerical and appropriate supervisor. Assigned staff destroy all clerical copies of authorizations not needing further review.

9434 SUPPORT STAFF RESPONSIBILITIES

A. Support staff, within one workday of receipt, forward SSPS output reports to unit supervisors. If two sets of reports are received, support staff will distribute one set to the supervisor for review and forward the other set to the social worker.

B. A designated staff is responsible for distribution of SSPS reports and for storing reports and microfiches in accordance with established retention requirements. The assigned staff maintains billing reports, including microfiche, in a location accessible to staff.

C. A designated staff is responsible for ordering and distributing all SSPS manuals and policies required to support program operations.

D. Staff are to be aware of procedures for batching SSPS authorizations which are outlined in the *SSPS Basics Manual*, Section 10.10.

9435 SUPERVISOR RESPONSIBILITIES

A. **SSPS Worker ID**

1. The six (6) digit SSPS Worker Identification allows social work staff to authorize services for eligible clients in designated reporting units. Supervisors are to notify designated security staff within five working days

of the need for any additions, deletions, or changes to the SSPS Worker ID in their unit. The required data includes:

a. Employee's name;

b. SSPS Worker ID (old and new if being changed);

c. Position number;

d. Worker telephone number;

e. Reporting unit number.

2. The supervisor oversees security staff input of changes, additions, and deletions via CAMIS. Retention of all changes, additions, and deletions are maintained in the CAMIS data base.

B. The unit supervisor or other employee designated by the Area Manager and knowledgeable of documentation requirements and payment policies randomly checks, co-signs, and dates at least 25 percent of the services that meet the following criteria:

1. Services opened and closed at the time of initial input.

2. One time payments that are terminated with a termination code that will cause a payment to be made (1A, 1B, 2A, 3B).

3. Service which is authorized as an exception to the normal payment amount, including any service code beginning with a "9."

C. The staff reviewing the sample of services retains all DSHS 14-154A/159s randomly checked and attaches them to the signed and dated *Transaction Listing*. The office retains these DSHS 14-154A/159s with the *Transaction Listing* for <u>two years</u>.

D. The supervisor of each unit reviews monthly each social worker's *Worker Service Report* (SSPS032) and *Expired Services Report* (SSPS013) to monitor authorizations and expenditures.

E. The supervisor reviews SSPS reports received from support staff within five working days, then immediately distributes to social workers.

F. **Reports for Supervisory Use in Monitoring**

1. Supervisors use the following reports as part of their monitoring of social workers' activities:

REPORT	NUMBER	RETENTION
Expired & Expiring Service Tickler	SSPS013	1 year
Local Office Client listing by Service	SSPS041	1 year
Provider Listing by Paid Service	SSPS031	1 year
Worker Service Report	SSPS032	1 month
Birthday Tickler	SSPS039	1 month

G. Each supervisor:

1. Has transactions checked promptly and discrepancies resolved.

2. Discerns and resolves discrepancies reported by social workers or clerical staff.

3. Reviews the *Worker Service Report* (SSPS032) monthly for accuracy and appropriateness of services.

4. Discusses with each social worker on a monthly basis the expectation to review the following SSPS reports for accuracy and to take appropriate action as needed to prevent late payments and other errors:

   a. *Expired and Expiring Service Report* (SSPS013);

   b. *Worker Service Report* (SSPS032);

   c. *Birthday Tickler Report* (SSPS039);

   d. Arranges for staff participation in training.

9436 LOCAL SSPS COORDINATOR

The local SSPS coordinator, designated by the Area Manager:

A. Provides technical assistance to social services and support staff in their local office.

B. Acts as back-up support for the regional SSPS coordinator.

C. Assists in developing and coordinating SSPS policies and procedures.

9437 PROBLEM RESOLUTION

A. Assigned staff review the *Morning Report* and resolve any errors using *Correction* procedures in the *SSPS Manual*, Appendix T. Medical Assistance Administration (MAA) staff review the *Morning Report* and will correct any errors regarding eligibility or information for medical assistance.

B. Social workers and clerical staff have the capability to verify payments made, invoices sent, and check for possible errors on returned invoices. Designated staff request duplicate invoices from SSPS Data Control, MS 45812, Olympia. Only local and regional SSPS coordinators may request expedited payments.

C. Payment problems that cannot be resolved at the local level must be referred to the regional SSPS coordinator.

9440 PROVIDER FILE NUMBERS

Basic instructions/information for provider file numbers are found in *SSPS Basics Manual*. All provider numbers are created and updated through CAMIS.

9500 SOCIAL SERVICE PAYMENTS

9510 DEFINITION OF OVERPAYMENT

"Overpayment" means any money paid by the department for services or goods not rendered, delivered, or authorized or where the department paid too much for services or goods or services rendered, delivered, or authorized.

9520 OVERPAYMENT AND UNDERPAYMENT IDENTIFICATION AND RECOVERY

A. **PURPOSE AND SCOPE**

1. These procedures establish guidelines for CA staff in the resolution of vendor or foster parent disputes regarding payments through an administrative hearing and pre-hearing process. It provides direction when staff determines that an overpayment to a vendor or foster parent exists, for staff participation in steps to recover the overpayment, and for staff participation in the settlement of any overpayment disputes. The procedures also provide direction for pre-hearing efforts to mediate and resolve payment disputes prior to proceeding to hearing.

2. Contracted and non-contracted service providers, including foster parents, may seek dispute resolution through these procedures, under the Administrative Procedure Act and RCW 43.20B.675, with respect to overpayments. However, the following limitations apply:

   a. The right of vendors or foster parents to seek an administrative hearing to contest alleged overpayments applies only to overpayments for goods or services provided on or after July 1, 1998.

b. These procedures do not create a right to a hearing where no dispute right previously existed except as provided in RCW 43.20B.675. These procedures and department policy limit disputes for foster family and child day care providers to:

i. Alleged overpayments;

ii. Perceived failure of the department to pay for services actually provided under an agency service authorization; and

iii. Licensing actions taken under WAC 388-73-036 or WAC 388-155-090, as applicable.

c. Adoptive parents who receive assistance through the Adoption Support Program are not vendors within the meaning of the law. They have hearing rights under other provisions of law and WAC. Accordingly, payment disputes involving the Adoption Support Program do not fall within the scope of these procedures.

3. Discovery or recovery of overpayments has no time limit. The department may identify and initiate recovery of overpayments without regard to the length of time that may have elapsed since the overpayment actually occurred or was discovered.

4. CA employees do not initiate recovery of overpayments for cumulative totals of $300.00 or less if the overpayment(s) did not result from fraud. Such recoveries are not cost effective.

5. CA employees do not have authority to forgive or waive overpayments, except as provided in paragraph 4 above, nor to offset overpayments from future payments. All such authority rests with the Office of Financial Recovery (OFR). Designated CA staff may mediate a disputed payment with the vendor, but final approval for any negotiated proposed settlement rests with OFR.

6. Governmental entities, including Indian Tribes, with an Inter-local Agreement with the department do not have the right to an adjudicative hearing through the Office of Administrative Hearings (OAH). The dispute process described in the agreement between the entity and the department governs the resolution process.

B. Policy

1. RCW 43.20B.675 and DSHS Administrative Policy 10.02 provide that all vendors have the right to request an adjudicative proceeding if they have a bona fide dispute. Disputes involving rates set in rule or Washington Administrative Code (WAC) are not subject to resolution through an adjudicative hearing held by OAH. The responsible CA organizational

unit must routinely offer a pre-hearing conference to all clients and vendors that request an administrative hearing.

2. The department and CA must, when undertaking activities relating to overpayment identification and recovery as well as adjudicative proceedings, comply with:

   a. DSHS Administrative Policy 7.02, Equal Access to Services for Individuals with Disabilities

   b. DSHS Administrative Policy 7.20, Communication Access for Persons Who Are Deaf, Deaf/Blind, and Hard of Hearing

   c. DSHS Administrative Policy 7.21, Provision of Services to Limited English Proficient (LEP) Clients

C. Procedures

1. Regional and Headquarters Procedures

   a. Each DCFS Regional Administrator, DLR Regional Manager, or division Director, as applicable, must establish procedures to provide for consistency in the handling of vendor/contractor disputes in accordance with the *Children's Administration Pre-hearing Procedures*. Procedures must include:

      i. Methods to informally notify vendors of their right to request a formal adjudicative proceeding if they have a bona fide contract dispute and to provide all appellants with a copy of the CA written pre-hearing process. (OFR provides formal notification of overpayments.) The department limits adjudicative disputes for foster parents to those issues identified in paragraph A.2., above;

      ii. Pre-hearing/alternative dispute resolution that incorporates routine offers of a pre-hearing conference to all clients or vendors who have requested an administrative hearing;

      iii. Identification of overpayments and steps to initiate recovery of amounts due to the department as a result of overpayments;

      iv. Designation of staff to represent CA in behalf of the department in pre-hearing/alternative dispute resolution and administrative hearings for disputes resulting from activities or actions of the applicable organizational unit;

      v. Identification of staff to mediate overpayment and other disputes prior to a formal administrative hearing;

vi. A system to identify overpayments in a timely manner;

vii. A method to document that an overpayment has occurred;

viii. A method to notify the vendor/provider that an overpayment has occurred and to determine the vendor's agreement or disagreement with that determination; and

ix. Identification of staff assigned to review overpayments and to refer them to OFR for collection.

b. CA expects disputes to be resolved at the lowest possible level in the organization. Therefore, CA staff will handle disputes at the following organizational levels:

i. The DCFS Regional Administrator is responsible for the dispute resolution process for all payments authorized by local office social workers and all payments authorized under regionally managed contracts and service agreements. Regional DCFS staff will coordinate pre-hearing conferences, mediation activities, and administrative hearings for regionally-managed contracts.

ii. For CA childcare subsidy program payment disputes, DLR Office of Child Care Policy (OCCP) headquarters staff represent the department in pre-hearing conferences, mediation activities, and administrative hearings.

iii. Assigned CA Division of Program and Policy Development or Office of Foster Care Licensing (OFCL) headquarters staff, as applicable, will handle pre-hearing conferences, mediation activities, and administrative hearings arising from headquarters-managed contracts and service agreements.

2. Determination of Existence of an Overpayment and Documentation of Referral

a. If any CA employee has reason to believe that the department has overpaid a contractor or vendor, that employee must contact the employee who authorized the payment and the authorizing employee's supervisor by written memo or e-mail.

i. The CA employee identifying the overpayment must inform the authorizing employee and that employee's supervisor that the employee has reason to believe an overpayment has occurred and must provide the information that led the employee to that conclusion.

ii. If the authorizing employee identifies an overpayment, that employee must inform and provide supporting information to the supervisor.

b. The authorizing employee, or other employee designated in DCFS or DLR regional procedures or CA headquarters procedures must contact the vendor/provider directly to inform the vendor/provider of the identified overpayment and the reason the payment constitutes an overpayment.

i. This contact provides the CA employee and the vendor/provider an opportunity to identify any errors in the conclusion that an overpayment occurred and to enable the CA employee to discontinue overpayment procedures if CA incorrectly identified an overpayment.

- This contact serves as an opportunity for CA to educate the vendor/provider in correct methods to complete invoices in order to prevent overpayments from recurring.

- In addition, the CA employee can support the vendor/provider in continuing to offer services to CA and its clients.

ii. If the vendor/provider is a foster parent who disagrees with CA determination of an overpayment, the CA employee informs the foster parent of the foster parent liaison program and provides the contact telephone number for the CA office's liaison.

iii. If the CA employee, after contact with the vendor/ provider, continues to believe that an overpayment occurred, the authorizing worker or other employee designated by regional procedures informs the vendor/ provider that the employee will notify OFR of the overpayment. OFR will send an official notice of overpayment to the provider/vendor. This notice will include instructions for the vendor/provider to return the overpaid funds to the department and information on steps to dispute the overpayment.

c. The employee who originally authorized the payment gathers written documentation of the overpayment. This may include gathering payment records through the SPAYMENT procedure in CAMIS.

d. The authorizing employee refers to the regional designee any overpayments, with supporting documentation. This information will include documentation of the vendor/ provider's agreement or

disagreement with the determination of overpayment. The regional designee reviews the referral information to ensure that supporting documentation adequately supports the conclusion that an overpayment in the amount stated did occur.

3. Referral to the Office of Financial Recovery

   a. The applicable CA designee sends the completed *SSPS Overpayment Notice*, DSHS 18-398A, (dated 7/1998) along with the documentation of the overpayment, to OFR.

   b. OFR then issues formal notice of the overpayment by certified mail to, and tracks responses from, the vendor/provider. If the vendor/provider wants to formally dispute the overpayment, the vendor/provider must respond to OFR within 28 days of the notice of overpayment.

   c. If the vendor/provider does not dispute the overpayment, OFR establishes a schedule for repayment with the vendor/provider. In accordance with RCW 43.20B.695, interest will not accrue when the overpayment results from department error.

4. Disputed Department Actions

   a. OAH schedules a hearing when a vendor/provider requests a hearing. After a vendor/provider requests a hearing, the CA authorized staff person offers a pre-hearing conference. The pre-hearing conference may be a telephone call, a meeting, or a mediation session with a third party mediator.

   b. The responsible CA organizational unit must identify individuals authorized to mediate a disagreement between the department and the vendor/provider. Those persons designated to refer overpayments to OFR for collection may not serve in the role of mediator for overpayment disputes.

   c. If the CA authorized staff and the vendor/provider reach a settlement, the CA representative and the vendor/provider may execute a stipulated agreement in writing, signed by the parties. If the parties do not resolve the dispute, the formal hearing with OAH takes place as scheduled.

   d. For overpayments:

      i. If the vendor/contractor and the CA representative reach an agreement, before signing the agreement, the CA representative must contact OFR at (360) 664-5557 to obtain verbal approval for the stipulated agreement if it forgives an identified overpayment.

ii. If the OFR representative approves the agreement, the CA representative and the vendor/contractor representative sign the agreement, and the CA representative mails it to the OFR representative for signature. Once the OFR representative signs the agreement, it takes effect.

iii. If the administrative hearing occurs, the CA employee who authorized the payment must participate in the administrative hearing. Regional or headquarters procedures, as applicable, determine if additional individuals will participate in the administrative hearing to represent the department.

9530 REPAYMENT

A. The vendor or client must send the repayment directly to OFR. If a CA office receives money that is to be applied to a vendor overpayment, assigned accounting staff in the office transmits the money to OFR on a *Daily Funds Transmittal*, DSHS 18-320(X).

B. Accounting staff indicates the nature of the overpayment in the comment section of the *Daily Funds Transmittal*.

9540 UNSOLICITED PAYMENTS

A. When OFR receives payments from vendors for whom it has not received an overpayment packet, OFR staff will send notification to the appropriate CA office.

B. If CA determines that the payment or any portion was submitted in error or that OFR applied funds incorrectly, responsible staff transmits this information to OFR in writing within 30 days. OFR will then initiate appropriate action.

C. If CA staff determines that the payment or any portion was a program donation, designated staff transmits this information to OFR, including the identity of the program to which the donation was made to enable OFR to credit the proper account.

9550 INTEREST ON VENDOR DEBT

Interest on vendor debt is administered in accordance with DSHS Administrative Policy 10.02, *Vendor or Provider Overpayment and Debt Policy*.

9600 ACCOUNTS RECEIVABLE

9610 OFFICE OF FINANCIAL RECOVERY RESPONSIBILITY

A. Under DSHS Administrative Policy 4.02, OFR is delegated responsibility and authority for managing the department's Accounts Receivable in a manner outlined in Administrative Policy 12.04.

B. Each Regional Administrator/designee will determine the region's own policy on receipt of cash.

9700 TRUST ACCOUNTS

See chapter 11000, section 11800, TRUST FUNDS ACCOUNTING, for requirements relating to client trust accounts.

9800 ADMINISTRATOR'S ACCOUNTS

9810 PURPOSE AND SCOPE

A. RCW 43.88.195 allows agencies to establish new accounts with the permission of the Office of Financial Management (OFM). Administrator's Accounts are expendable trusts that are local fund accounts available to provide instant assistance to eligible clients. Their sources of funds are usually donations and fund raisers.

B. Please Note: If funds are given for a specific purpose, moneys can only be dispensed for that specific purpose. Accounting records must be maintained so that moneys donated and spent for a specific purpose may be audited.

9820 ESTABLISHMENT OF AN ADMINISTRATOR'S ACCOUNT

A. CA local offices are to:

1. Develop a statement of purpose for the account; for example, "The sole purpose of this account is to provide direct needs and opportunities for children and their families when no other resource is available."

2. Stipulate the criteria for use, the amount available per request, and the process that will be developed to allow access to Administrator Account funds.

3. Write a memo to the Regional Administrator requesting the establishment of an Administrator's Account. In the request, include the fund's purpose, criteria for use, and process for accessing funds. The Regional Administrator or designee will send a written request to the Chief, DSHS Office of Accounting Services, with a copy to the CA Director of Management Services. The written request must include the name of the bank, name and classification of individuals authorized to sign account checks, and the name and classification of the individual responsible for reconciling monthly bank statements with the office records.

B. Once the DSHS Office of Accounting Services has granted authority to establish the account, the local office identifies staff to be the:

1. Accounts Receivable Coordinator;

2. Committee or Person(s) to review/approve requests for funds;

3. Disposition Person;

4. Fund Trustee;

5. Mail Person;

6. Recording Person, and

7. Reconciliation Person.

9830 SEPARATION OF DUTIES

A. To the extent possible, the duties listed in section 9920(B) are to be separated.

B. If the duties cannot be separated due to a lack of staffing, a "Separation of Duties" waiver which includes compensating controls to show safeguard of the account must be on file in the regional office.

C. The waiver must be signed by the Fund Trustee, the trustee's supervisor, the second line supervisor, and the Regional Administrator.

D. Please note: Any cash or negotiable items received are to be deposited within 24 hours.

9840 OPERATION OF ADMINISTRATOR'S ACCOUNT

The Regional Administrator, usually through the Regional Business Manager and/or the Clerical Supervisor, designates staff to carry out the duties outlined below.

9841 MAIL PERSON

The Mail Person logs any cash or negotiable items in the *Cash Items Mail Log*, DSHS 19-48, and gives it to the Accounts Receivable Coordinator.

9842 ACCOUNTS RECEIVABLE COORDINATOR

The Accounts Receivable Coordinator:

A. Receives the *Cash Items Mail Log* and the cash/negotiable items from the mail person.

B. Verifies that the cash/negotiable items are shown on the *Cash Items Mail Log* and, after verification, dates and signs the mail log, retaining the pink copy.

C. Issues a pre-numbered and sequential receipt for all cash/negotiable items requiring a receipt. If the cash/negotiable items received are for a specific purpose, they are to be referred to as a restricted donation, with a note of the restriction on the receipt issued to the donor.

D. Prepares the disposition documents required for the disposal of cash and negotiable items. The disposition documents will include the bank deposit slip, the *Cash Items Mail Log*, and a copy of the receipt issued to the donor.

E. Secures all cash and negotiable items until transferred to the Disposition Clerk along with the disposition documents.

9843 DISPOSITION PERSON

The Disposition Person:

A. Verifies that the cash and/or negotiable received from the Accounts Receivable Coordinator equals the amount shown on the disposition documents. Completes the disposition entries on the various receipt and disposition documents. Signs and dates the disposition documents.

B. Secures the deposit until it can be taken to the bank. Gives bank-validated deposit slips along with the copies of the receipt and disposition documents to the recording person on the same day the deposit is made.

C. Receives approved disbursement authorizations from committee or person(s) responsible for reviewing and approving requests for funds.

D. Prepares check (in ink) and writes the check number on the Disbursement Authorization. Has the check signed by at least two people who are authorized on the bank account signature card.

E. Gives the completed Disbursement Authorizations to the Recording Person.

9844 RECORDING PERSON

The Recording Person:

A. Reconciles the daily cash receipts and bank validated deposit slips.

B. Records all deposits in the Cash Receipts Journal and Ledger Sheet.

C. Verifies the amounts of checks to disbursement authorizations and completes entries to the check register, Cash Disbursements Journal, and the Ledger Sheet. Secures signed checks until they are mailed or given to the appropriate person.

9845 RECONCILIATION PERSON

The Reconciliation Person:

A. Upon receiving the Administrator's Account monthly bank statement, reconciles the statement to the Ledger Sheet and other journals. Completes the reconciliation on the back of the bank statement.

B. Prepares the Administrator's Account Monthly Activity Report and the Bank/Reconciliation Report. Gives them and the appropriate ledgers and journals, along with the bank statement, to the Fund Trustee for review.

9846 REVIEW AND APPROVAL OF AUTHORIZATIONS

The committee or person(s) responsible for review and approval of Disbursement Authorizations approves, modifies, or denies the completed Disbursement Authorization based on the local office use-of-funds criteria and any restrictions that may have been placed on the funds by the donor.

9847 FUND TRUSTEE

The Fund Trustee:

A. Oversees the management and accountability of the Administrator's Account.

B. Reconciles the accounting records to the trustee's records on a quarterly basis. If there are variances, the trustee researches and documents, corrects, or takes appropriate action. He/she prepares the *Trustee's Reconciliation Report*, DSHS 19-207, and signs and dates it.

9850 ACCESSING ADMINISTRATOR'S ACCOUNT FUNDS

A. A CA staff person submits a completed *Request for Disbursement Authorization* form to the committee or person(s) assigned by the Regional Administrator the duties of approving these requests.

B. The completed form includes the amount, case name, case number, and purpose of the requested funds. The form is signed and dated by the worker.

9900 FEES FOR VITAL STATISTICS

9910 SERVICE WORKER TASKS

When it is necessary to pay advance fees to vital statistics agencies in other states for records of birth, death, marriage, or other events, the social worker:

A. Verifies the amount of fee required for the information needed and obtains the address of the state vital statistics agency.

B. Prepares a letter in duplicate to the agency for the supervisor's signature indicating:

1. The type of record/information requested.

2. The name and case number (if applicable) of the party for whom the record is requested.

3. The CA address to which the vital statistics agency shall mail the record.

9920 SOCIAL WORK SUPERVISOR TASKS

A. The supervisor signs and forwards both copies of the letter, along with a memorandum requesting that a check be issued for the appropriate fee, to:

Department of Social and Health Services
Supervisor, Disbursements Section
Attn.: Administrative Revolving Fund
Mail Stop 45843
Olympia, Washington 98504

9930 DISBURSEMENTS STAFF TASKS

Disbursements staff:

A. Issues a check on the DSHS Administrative Revolving Fund and mails it with the requesting letter to the vital statistics agency indicated.

B. Returns the copy of letter to the originator notifying them that the request has been forwarded to the vital statistics agency.

91000 FOSTER PARENT LIABILITY PLAN

91010 GENERAL INFORMATION

91011 PURPOSE

A. The Foster Parent Liability Plan establishes guidelines for distribution of funds under RCW 74.14B.080. This program provides a mechanism for financial relief to foster parents who incur liability from third party personal injury and property damages caused by the foster parent in their role as foster parent or their foster/respite care children.

B. The legislature acknowledges that foster parents assume some level of risk by taking foster/respite care children into their homes.

91012 ELIGIBILITY

Eligibility is defined in WAC 388-70-033.

91013 PROGRAM MANAGEMENT

A. 91014 Inquiries. The Liability Plan is administered by the department through the Employee Services Division's Office of Risk Management (ORM). The department will pay claims subject to available funds, individual claim limits, and eligibility requirements.

B. Claims management services for the Liability Plan are provided through the Liability Plan Intra-Agency Agreement with ORM, CA, and the Division of Developmental Disabilities (DDD). DDD participates on behalf of foster parents who provide respite care services to eligible foster children.

C. Pursuant to this Agreement, CA and DDD each bears responsibility for developing and updating necessary written instructions, guidelines, procedures, and forms to implement the terms of the Liability Plan and to provide for timely and efficient distribution of claims (and their documentation) to ORM.

91014 INQUIRIES

A. Foster parents who have questions concerning completion of the claim forms are referred to their social worker for assistance.

B. Social workers who have questions regarding general policy, interpretation of the Liability Plan, submission of claims, or action in response to claims or lawsuits need to address them to ORM at P. O. Box 45844, Olympia, WA 98504-5844.

91020 PLAN SUMMARY

91021 LIABILITY COVERAGE

A. **Third Party:** Coverage is authorized for payment to third parties who have incurred expenses as a result of the action(s) of foster parents or their foster/respite care child(ren) for personal/bodily injury and property damage.

B. **Foster Parents:** Coverage is authorized for payment of claims arising from a foster parent's acts or omissions while performing, or in good faith purporting to perform, provision of family foster care and supervision of a foster child, to include respite care child(ren).

91022 REPRESENTATION BY ATTORNEY GENERAL

A. Legal representation by the state for foster parents, eligible under chapter 74.15 RCW, is granted in RCW 4.92.060 and 4.92.070.

B. Foster parent defense is allowed for actions against foster parents if it is determined that their acts or omissions were while in good faith performing, or in good faith purporting to perform, provision of foster care services.

C. The foster parent must fully cooperate in such defense. No defense is allowed for any action against the foster parent by the department.

91023 DEFINITIONS

For definitions related to the Liability Plan, see Appendix A, DEFINITIONS, under FOSTER PARENT LIABILITY PLAN.

91024 LIMITATIONS

Limits of coverage are outlined in WAC 388-70-034.

A. DEDUCTIBLE - There is no deductible. However, it is necessary for the foster parent(s) to access their homeowner's liability insurance or any other valid and collectible insurance prior to payment under this plan.

B. DOLLAR AMOUNT - Limited to $25,000 per occurrence. If there are multiple claims arising from the same occurrence they shall be considered one occurrence, and the dollar limit shall apply. A claim against one or more foster parents occupying the same household shall be considered a single claim and the dollar limit shall apply.

C. EXCESS COVERAGE - Payment above and beyond that which may be collected from any other valid and collectible liability insurance available to the foster parent.

D. FUNDS AVAILABLE - The department is authorized to pay claims subject to available funds. In addition, payment can only be made in excess of other valid and collectible liability insurance available to the claimant.

E. NO LEGAL OBLIGATION - DSHS makes these payments without assuming any legal obligation for the action(s) of the foster parent or foster/respite care

child(ren). Such payments are not an admission of liability by DSHS or the foster parent(s), nor does DSHS assume any obligation for incurring any other liability expenses other than those specifically set forth within the Liability Plan.

F. PER OCCURRENCE LIMITS - The total financial payment shall not exceed the dollar limits stated on a "per occurrence" basis. Regardless of the number of third party persons who sustain damages or personal/bodily injury, they will be considered one occurrence. Liability payment for property damages shall be for the reasonable repair, or depreciated value, of damaged property.

THIRD PARTY LIABILITY	MAXIMUM $ LIMITS
Total excess coverage	$25,000 per occurrence

G. PERIOD OF COVERAGE - No funds are available for occurrences prior to July 1, 1991.

91025 EXCLUSIONS

Exclusions from coverage are described in WAC 388-70-035. Expenses of any kind related to claims, suits, actions, or other legal proceedings brought against the foster parent(s) which arise out of, or are related to the following are specifically excluded from payment under the Liability Plan:

A. ALCOHOL/ILLEGAL SUBSTANCES - Any injury or damage arising out of the actual giving of any alcoholic beverages, or other illegal substances, to a foster child, for whatever reasons or causes.

B. ALIENATION OF AFFECTION - Alleged or actual alienation of affection.

C. GROSS NEGLIGENCE - Any action that is performed in bad faith, or of gross negligence, by a foster parent or foster/respite care child(ren) that causes, or results in, damage or personal/bodily injury for which the foster parent is, or may be held, legally liable.

D. ILLEGAL ACTS - Violation of any statute, ordinance, or regulation by foster parent or foster/respite care child(ren) for which the foster parent is, or may be held, legally liable.

E. JURISDICTION - Any damage or injury caused by foster/respite care child(ren) while temporarily out of the jurisdiction (care, custody, or control) of the foster parent. This includes visits to the foster child(ren)'s parents, *guardian ad litem*, or legal guardian. Also, any claim based on any occurrence which does not arise from the family foster care relationship.

F. MOTOR VEHICLES, AIRCRAFT, WATERCRAFT - For property damages, losses, and emergency medical treatment costs arising out of any act of the foster/respite care child(ren), with or without the permission of the foster parent, which related to the ownership, operation, or maintenance of any owned motor vehicle or owned aircraft/water craft.

G. SEXUAL ABUSE - Any injury arising from any sexual abuse, or licentious, immoral, or other sexual behavior by a foster parent or foster/respite care child(ren) for which the foster parent is, or may be held, legally liable.

H. UNSUBSTANTIATED - For any mysterious or unsubstantiated damages or personal/bodily injury.

91030 LIABILITY CLAIM FILING

91031 FOSTER PARENT PROCEDURE

When foster parents are notified by a third party of a property damage or personal/bodily injury incurred as a result of an action(s) by their foster/respite care child(ren) for which the foster parent(s) is, or may be held, legally liable, the foster parent:

A. Requests from their social worker a *Foster Parent Claim* form, DSHS 18-400A(X).

B. Completes the claim form, attaches the requested documents, and submits the claim to their social worker within 30 days of being informed of the notification. Failure to submit claims within the designated time limits may invalidate payment under the Liability Plan. Claims cannot be adjudicated until all necessary documentation is received.

91032 SOCIAL WORKER PROCEDURE

Upon receipt of a claim from a foster parent, the social worker:

A. Reviews the claim for accuracy, completeness, and timeliness. Claims are to be returned to the foster parent if:

1. Not on the correct DSHS 18-400A(X);

2. Information is incomplete;

3. Appropriate documents are not attached; or

4. Claim is not signed and dated.

B. Completes the requested information on the form:

1. Identification of CA office;

2. Name of the contact person within the CA office who can be contacted should clarification or additional information become necessary during review of the claim;

3. Total dollar amount requested by the foster parent on behalf of the third party claimant;

4. Telephone number of the CA contact person; and

5. Indicate that the claim is a third party claim.

C. Completes the social worker section on the form.

1. Identify any other liability funds or accounts available.

2. Indicate whether or not social worker concurs with payment of the claim. State the reason(s) if does not concur.

3. Print social worker name, office, county, and Mail Stop, or address for offices without a Mail Stop, in the space provided.

4. Sign and date the claim form.

5. Forward the ORIGINAL claim form with documents attached to:

DSHS Office of Risk Management
Office Building 2, Mail Stop 45844
Olympia, Washington 98504-5844

91040 LIABILITY CLAIM PAYMENT

A. For third party claims, payment for approved liability claims will be made directly to the third party.

B. If the foster parent can provide proof that full and satisfactory payment/restitution was paid to the third party for the identified claim and the third party satisfactorily accepted such payment/ restitution in full, the foster parent can be reimbursed for the amount approved by ORM.

C. Payment by a foster parent to a third party for satisfaction of a claim without the prior approval of ORM may be at the full risk and expense of the foster parent.

91050 LAWSUIT

91051 FOSTER PARENT PROCEDURES

Upon notification of any legal action by a third party against the foster parent(s) for personal/bodily injury or damage caused by the foster parent, or foster/respite care child(ren) while in the care and custody of the foster parent, the foster parent must notify their social worker (or, in their absence, the worker's assigned representative) within one work day.

91052 SOCIAL WORKER PROCEDURES

A. Upon receipt of notification from a foster parent of an impending lawsuit, the social worker must then notify ORM within 24 hours from the initial notification by the foster parent of an impending lawsuit. The social worker must satisfy the mandatory requirement of notifying ORM in writing to the address in section 91032, above, or by fax transmittal to the Claims Program Manager, ORM, (360) 586-5199. To contact the Claims Program Manager, call (360) 664-3249.

B. The social worker must also contact the Office of the Attorney General, Torts Division, within the initial 24-hour period. The address is: Office of the Attorney General, Torts Division, 4407 Woodview SE, 3rd Floor (or P. O. Box 40126), Olympia, WA 98504-0126; or fax to 360-459-6967; telephone number is (360) 459-6600.

91060 LEGAL DEFENSE

91061 REQUEST FOR DEFENSE

Under RCW 4.92.060, whenever an action or proceeding for damages is instituted against a foster parent licensed under chapter 74.15 RCW, the foster parent may request the Attorney General to authorize defense of the action or proceeding at the expense of the state, if the claim resulted from acts or omissions while in good faith performing, or in good faith purporting to perform, provision of foster care services.

91062 EXPENSE OF DEFENSE

A. Under RCW 4.92.070, if the Attorney General finds that, in the case of a foster parent, the occurrence arose while in the good faith provision of foster care services, the request will be granted.

B. The necessary expenses of the defense of the action or proceeding will be paid from the appropriations made to the department. In such cases the Attorney General will appear and defend the foster parent, who must assist and cooperate in the defense of the suit.

C. The Attorney General may not represent or provide private representation for a foster parent in an action or proceeding brought by DSHS against that foster parent.

91063 PROCEDURES

A. Foster Parent

1. The foster parent must contact their social worker to request legal defense. The foster parent needs a *Request for Defense* form mailed to them.

2. Upon receipt, the foster parent must complete the *Request for Defense* form and submit it to their social worker with the original Summons and Complaint.

B. Social Worker

1. The social worker supplies the foster parent with a *Request for Defense* form provided to DCFS by the Office of the Attorney General.

2. The social worker must contact ORM within 24 hours of notice of lawsuit.

3. The social worker must contact the Office of the Attorney General, Torts Division, within 24 hours of notice of lawsuit.

4. The social worker forwards the original *Request for Defense* form and the Summons and Complaint to the Office of the Attorney General, Torts Division, and retains copies in CA.

C. Attorney General

1. The *Request for Defense* form and the Summons and Complaint are reviewed by the Office of the Attorney General, and appropriate DSHS staff persons, and a determination is made to approve or disapprove the *Request for Defense* application.

2. If approved, the foster parent is informed by the Office of the Attorney General that the state will provide defense, and an Assistant Attorney General is assigned to handle the case.

3. The assigned Assistant Attorney General will keep CA and ORM apprised of developments in the case.

91070 STATE OBLIGATION

The state does not assume any other obligation for payment other than those made under approval through the Foster Parent Liability Plan.

91080 FRAUD

A. In the event any material fact or circumstance is misrepresented or willfully concealed by either the foster parent (or foster parent household member) or third party, DSHS shall be entitled to recover any payments made under the Liability Plan.

B. Claims found to be fraudulent involving theft or collusion are subject to criminal investigation.

91090 ACTIONS COMMENCED BY FOSTER CHILDREN OR THEIR PARENTS

Per RCW 4.24.590, in actions for personal injury or property damage commenced by foster children or their parents against foster parents licensed pursuant to chapter 74.15 RCW, the liability of foster parents for the care and supervision of foster/respite care children is the same as the liability of biological and adoptive parents for the care and supervision of their children.

910100 MODIFICATION OF REIMBURSEMENT PLAN

Nothing in this Liability Plan is intended to modify the Foster Parent Reimbursement Plan in place on the effective date of the statute (except for transferring the responsibility for third party claims to the Liability Plan).

91100 FOSTER PARENT REIMBURSEMENT PLAN

91110 GENERAL INFORMATION

A. The Foster Parent Reimbursement Plan provides limited financial relief to foster parents who incur property damages, losses, and emergency medical treatment

expenses caused by their foster/respite care children during placement in their foster home. Reimbursement made under the Plan is considered a foster care maintenance expense. It constitutes a portion of the reasonable and proper cost of maintenance paid on behalf of foster/respite care children and is made strictly in accordance with the terms, limitations, and exclusions specified.

B. Reimbursement under the Plan is provided to foster parents voluntarily by DSHS and is not an admission of liability for the action(s) of any foster/respite care child(ren), and nothing in the Plan shall be construed to create in any foster parent an enforceable right to reimbursement nor is it meant to impose upon DSHS a legal payment obligation.

91120 ELIGIBILITY

Foster parents are eligible for reimbursement under the Plan if they are:

A. Licensed by DSHS or a DSHS-certified child-placing agency pursuant to chapter 74.15 RCW; and

B. Providing approved DSHS-funded foster care to children in the care, custody, and supervision of DSHS or a DSHS-certified child-placing agency; or

C. Providing approved DSHS-funded respite care to developmentally disabled children.

91130 PROGRAM MANAGEMENT

A. The Plan is funded by CA. DDD participates in the Plan on behalf of licensed foster parents who provide respite care services in their home to developmentally disabled children.

B. Claims management services for the Plan are provided by the Risk Management Services Section (RMSS) within the Office of Risk Management (ORM) through an Intra-Agency Agreement among the Employee Services Division, CA, and DDD.

C. Information Sources

1. Foster parents who have questions concerning completion of claim forms and required substantiating documentation should contact their social worker for assistance. A copy of the Plan is provided to foster parents in their *Foster Parent Handbook*.

2. CA social workers who have questions regarding reimbursement available to foster parents under the guidelines of the Plan or on the filing of claims need to address them to the Claims Program Manager, RMSS, P. O. Box 45844, Mail Stop 45844, Olympia, WA 98504-5844 (Telephone 360-664-3249).

91140 DEFINITIONS

For definitions of terms used in the Foster Parent Reimbursement Plan, see Appendix A, DEFINITIONS.

91150 REIMBURSEMENT LIMITATIONS

The following reimbursement limitations are applicable for claims filed under the Plan:

A. PER OCCURRENCE/AGGREGATE: The total amount payable as the result of any one occurrence shall not exceed $5,000 for all property damages and losses or $1,000 for all personal bodily injuries regardless of the number of foster parents or their household members who sustain property damages, losses, or personal injuries.

B. PROPERTY DAMAGE ITEMS: Limited to the repair/cleaning cost or the depreciated value. Depreciated value is paid if the item cannot be repaired or cleaned as substantiated by a detailed retailer estimate or if the repair cost exceeds the depreciated value of the item. DSHS may request the final repair bill from foster parents for payments made from estimates provided for purposes of recovery.

C. PROPERTY LOSS ITEMS: Limited to the depreciated value, as substantiated by the original purchase document or replacement bill/retailer estimates for comparable item. If the claim is the result of a theft, a police report must accompany the claim form.

D. PERSONAL BODILY INJURIES: Limited to the costs incurred for receiving emergency medical treatment services which are not payable or required to be provided under any workmen's compensation or disability benefits law, or under any similar law, or provided under a personal/business medical plan.

E. POLICY DEDUCTIBLES: There is no deductible which means there is first dollar coverage. However, foster parents must disclose if their property damages or losses were paid or will be paid under their homeowner, automobile, or other personal/business insurance policy. Reimbursement would be limited to the policy deductible. Insurance companies do not have subrogation rights into the Plan.

F. DENTAL EXPENSES: Limited to costs not payable under a dental plan. Depreciation applied on dental appliances. A dental injury is considered a personal bodily injury.

G. VISION EXPENSES: Limited to costs not payable under a medical plan. Depreciation applied on vision appliances. An injury is considered a personal bodily injury.

H. LABOR EXPENSES: Limited to out-of-pocket costs, materials, incurred by foster parents which are substantiated by a retailer. DSHS may request the final repair bill from foster parents for payments made from estimates provided for purposes of recovery.

91160 EXCLUSIONS

A. The following are specifically excluded from reimbursement under the Plan. Property damages, losses, or emergency medical treatment costs incurred by foster parents or their household members which arise out of, or are related to:

1. ALCOHOL/ILLEGAL SUBSTANCES - The alleged or actual giving to a foster/respite care child(ren) of any alcoholic beverage, or other illegal substance including tobacco products for whatever reason.

2. ILLEGAL ACTS - The alleged or actual violation of any statute, ordinance, or regulation by the foster/respite care child(ren).

3. INADEQUATE SUPERVISION - The primary or contributing cause was the failure of the foster parent to give directions, instructions, or to provide proper/adequate supervision to the foster/respite care child(ren). Foster parents, as determined by the DCFS social worker, must exercise all reasonable means to save and preserve property from damage or loss and to protect themselves and their household members from injury.

4. SEXUAL ABUSE - The alleged or actual sexual abuse, or licentious, immoral, or other sexual behavior of a foster/respite care child(ren).

B. The following are also excluded from reimbursement under the plan:

1. FOLLOW-UP MEDICAL TREATMENT EXPENSES - Follow-up medical treatment expenses incurred by foster parents or their household member for a personal bodily injury sustained as a result of an action of the foster/respite care child(ren). Only emergency medical treatment costs not payable elsewhere are reimbursable under the PLAN.

2. FOSTER/RESPITE CARE CHILDREN ITEMS - For items which belong to foster/respite care child(ren).

3. JURISDICTION - For acts of foster children that occur while temporarily assigned outside the jurisdiction of their foster parent (includes visits to parents and guardians).

4. MOTOR VEHICLES, AIRCRAFT, WATERCRAFT - For property damages, losses, and emergency medical treatment costs arising out of an act of the foster/respite care child(ren), with or without the permission of the foster parent, which is related to the ownership, operation, or maintenance of any owned motor vehicle, or owned aircraft/water craft.

5. RUNAWAYS - For occurrences after a foster child has voluntarily left the foster home. For purposes of the Plan, a foster child is considered to be in runaway status if it has been more than 24 hours since the foster child left the residence. The *Foster Parent Handbook* instructs that, if a foster child runs away or is otherwise unaccounted for, the foster parent is to notify the agency and law enforcement. Foster parents should

immediately take the necessary precautions to safeguard against any occurrences.

6. THIRD PARTY CLAIMS - For property damages, losses, or personal injuries sustained by any person other than the foster parent or their household member. Third party claims are to be filed under the Liability Plan.

7. UNSUBSTANTIATED - For property damages or losses resulting from occurrences which are alleged but not substantiated to have been caused by the foster/respite care child(ren). A copy of the police department report or fire department report, along with any follow-up investigative findings, must be submitted for claims relating to theft, assault, vandalism, or fire.

8. UNTIMELY FILING - For property damages, losses, or emergency medical treatment costs for which a claim was not received in the RMSS within a year after the date of occurrence, regardless of the reason for the delay in filing the claim.

9. VALUABLE ITEMS - For property damages or losses of items that are valued or for items that do not depreciate which include, but are not limited to, antiques, heirlooms, jewelry, figurines, and coin collections. Foster parents should take special precautions to secure/guard against the loss of these items.

91170 CLAIM FILING PROCEDURES

91171 FOSTER PARENT PROCEDURE

A. Foster parents who incur property damages, losses, or emergency medical treatment expenses as a result of an action of their foster/respite care child(ren) shall:

1. Request from their social worker a *Foster Parent Reimbursement Plan Claim* form, DSHS 18-400A(X) to file a claim under the Plan.

2. Submit the completed claim to their social worker within 30 days of an occurrence. All requested information is to be provided on the claim form with the required substantiating documentation attached.

3. Documentation on claims filed more than 30 days after an occurrence must include a statement to their social worker from the foster parent indicating the reason for the delay in filing the claim.

91172 SOCIAL WORKER PROCEDURE

Social workers who receive a claim from a foster parent:

A. Review the claim for accuracy, completeness, and timeliness. Claims are to be returned to the foster parent if:

1. An outdated claim form was received;

2. All the requested information was not provided on the claim form;

3. All the required substantiating documents were not attached to the claim; or

4. The claim form was not signed/dated by the foster parent.

B. Complete the social worker section on the claim form. Failure to provide all the required information will cause a delay in reimbursement to the foster parent.

C. Social workers must indicate on the claim form the reason for the delay in submitting claims to RMSS more than 90 days after an occurrence.

91180 MISREPRESENTATION OF CLAIMS

A. DSHS shall deny any claim in which any material fact or circumstance of a property damage, loss, or personal injury is misrepresented or willfully concealed by the foster parent and shall be entitled to recover any payments made under the Plan.

B. Claims found to be fraudulent involving theft or collusion are subject to criminal investigation.

91190 INVESTIGATION OF CLAIMS

DSHS shall be permitted upon request to inspect the damaged property and retains the right to have an inspector of its choice make a damage estimate when, and as often as, DSHS may require.

911100 RECONSIDERATION OF CLAIM DETERMINATIONS

A. Reconsideration of a claim determination made must be submitted by the foster parent in writing within 30 days of the determination to the Claims Program Manager, Office of Risk Management, Department of Social and Health Services, P. O. Box 45844, Olympia, WA 98504-5844.

B. The request must include substantiating new factors or additional information/documentation not previously provided for reconsideration of the claim determination. All determinations made by the Claims Program Manager are final and do not constitute a basis for requesting or obtaining an administrative fair hearing.

911110 EXCEPTION REQUESTS

Written requests for exceptions to the terms, limitations, and exclusions specified in the Plan must be made through the Children's Administration Director of Management Services, P. O. Box 45710, Olympia, WA 98504-5710, to the Claims Program Manager, DSHS-ORM, Mail Stop 45844, Olympia, WA 98504-5844, and must include the justification for the request and alternatives explored.

91200 EMPLOYEE, VOLUNTEER, AND CLIENT TRAVEL

91210 REQUIREMENTS FOR TRAVEL

A. All CA employee, volunteer, advisory committee member, and subsidized client travel must comply with the provisions of the Office of Financial Management (OFM) travel regulations contained in Part Four, chapter two, of the *OFM Financial and Administrative Policy, Regulations, and Procedures* manual and the DSHS *Travel Manual*, including completion of the *Travel Authorization*, DSHS 03-337.

B. **Adult Travelers Accompanying Children**: The assigned social worker for the child must complete a criminal history and background check, including review of DCFS records, on the non-employee adult, excluding the child's parent, before the department authorizes the person to accompany the child. See chapter 5000, section 5500, Background Inquiries.

91220 AUTHORIZATIONS FOR TRAVEL

91221 IN-STATE TRAVEL

A. For employees, the employee's immediate supervisor must pre-approve in writing all travel that includes lodging costs of more than one night. The employee and supervisor document the advance approval of the lodging expenditure by completing and signing the *Travel Authorization*, DSHS 03-337.

B. For volunteers, the supervisor of the unit for which the volunteer is providing service pre-approves lodging expenses. The volunteer and the supervisor document advance approval of the lodging and other expenses by completing and signing the *Authorization for Expenditure (Non-Employee)*, DSHS 9-415(X).

C. Individual non-employees appointed to serve on any state board or committee authorized by law are entitled to travel expenses. The provisions of paragraph B above apply, with the manager responsible for the activity pre-approving lodging costs.

91222 OUT OF STATE TRAVEL

A. Scope

1. This out-of-state travel section applies to all CA staff, volunteers, foster parents, and clients or relatives of clients. Out-of-state travel requires prior written approval via the *Travel Authorization Form*, DSHS 03-337.

2. Travel must comply with the OFM *State Administrative and Accounting Manual* and the DSHS *Travel Manual*. Out-of-state travel means travel in areas within the Continental USA, Alaska, and British Columbia, Canada. The Continental USA is defined as all areas in the 48 contiguous states and the District of Columbia.

B. Client Related Travel

1. Approval for all client-related travel will be authorized in advance at the Regional Administrator or applicable division Director level for the following purposes:

   a. To relocate a department client;

   b. To relocate a department client - accompanied by an employee;

   c. To relocate a department client - accompanied by a companion;

   d. Temporary out-of-state travel by client;

   e. Temporary out-of-state travel by client - accompanied by an employee;

   f. Temporary out-of-state travel by client - accompanied by a companion;

   g. Temporary out-of-state travel by family member of client - without the client;

   h. Temporary out-of-state travel by staff - without the client - for case planning.

2. Types of travel may include the following:

   a. **Dependent children** traveling as a result of a court order and to complete a case plan:

      i. Children being returned to their parents;

      ii. Children being placed out-of-state through Interstate Compact on Placement of Children (ICPC);

      iii. Children visiting out-of-state;

      iv. Native American children being returned to their Tribe.

   b. **Non-dependent Children**:

      i. Children being returned to their parents;

      ii. Native American children being returned to their Tribe;

      iii. Cases when custodial parent is making the placement to prevent foster care placement.

iv. DCFS-involved cases where the custodial parent is making the placement to prevent foster care placement and information is insufficient for dependency.

c. **Adult travelers**:

i. Parents living out of state returning to Washington for court ordered visits.

ii. Parent or other adults, directly related to case planning, traveling to Washington for evaluations.

iii. Relatives, prospective adoptive parents, and foster parents traveling to Washington for pre-placement visits with a specific child(ren).

iv. Staff, volunteers, foster parents, or relatives accompanying children who are unable to travel alone.

d. **Runaways**:

i. A child identified as a runaway is handled by the social worker in the local office. All runaways are handled the same regardless of state of residency.

ii. When the child arrives in the DCFS office, every attempt is made by the responsible social worker to locate the custodial parent and to return the child as soon as possible.

iii. If placement is required, the worker contacts the police and places the child under 72 hour police protective custody or obtains a signed voluntary placement agreement from the custodial parent.

iv. When the custodial parent is unable to pay for the child's return and there is no other funding source, the social worker arranges for the child's return and to pay any associated costs, including, plane, bus, or train tickets.

v. The social worker contacts the parent(s) and makes the travel arrangements. Following receipt of the approvals for the travel as outlined in this section, the region pays for these costs by SSPS, travel voucher, or credit card, as appropriate.

vi. Calls from out of state regarding the return to Washington of non-dependent children who are listed with law enforcement as a runaway are referred to the Juvenile Rehabilitation Administration (JRA), Interstate Compact for

Juveniles, (360) 902-8094. The local DCFS office may continue to supply information and assistance in contacting the custodial parent, but assistance in making arrangements for the physical return and/or other questions are directed to JRA.

e. Family Group Conferences

i. A family group conference may occur when one or more family members have been invited to attend a meeting to discuss a child's case plan.

ii. Social workers are expected to explore the option of families funding their own travel expenses (subsistence, lodging, mileage, airfares, etc.). If financial resources do not permit that, the Regional Administrator may approve travel expenses for up to five family members.

iii. If travel expenses are requested for more than five family members, the request will be submitted to the Assistant Secretary. Funding requests for more than five family members will contain justification, including how participation by more than five family members in a family group conference contributes to the case plan.

C. Regional Responsibilities

1. CA expects social workers to explore the option of families funding their own travel expenses (subsistence, lodging, mileage, airfares, etc.). Social workers must use state contracts wherever available and use lodging and per diem rates published in the DSHS *Travel Manual*.

2. The requesting social worker, the supervisor (first line supervisor), **or** the Area Administrator (second line supervisor), **and** the Regional Administrator or the applicable division Director must sign the Travel Authorization form.

3. Regional Administrators or the applicable division Directors must:

a. Use a tracking system approved by the CA Director of Management Services;

b. Retain hard copies of the completed *Travel Authorization* forms in the regional office for a period of six years (See General Records Retention Schedule Authority Numbers GS 07001 and GS 07002);

c. Periodically review and audit approvals; and

d. Make *Travel Authorization* forms easily available to the Management Services Division if requested.

4. Regional Administrators and division Directors will ensure that the electronic version of the *Travel Authorization* form is available to all staff on regional template directories, along with clear instructions regarding how to complete and use the form.

D. Travel for Other Reasons

Travelers must receive *prior* authorization for travel from the DSHS Secretary/Deputy Secretary and the CA Assistant Secretary levels in accordance with the DSHS *Travel Manual* for the following reasons:

1. To maintain required certification;

2. To obtain mandatory job-related professional development or training not obtainable within the state;

3. To maintain or secure a grant;

4. To attend conferences/professional association meetings that benefit the department and/or its clients;

5. To audit out-of-state records that pertain to department business;

6. To share knowledge or expertise with other government and community organizations;

7. To investigate allegations of fraud in department programs; and

8. In response to subpoena or court order in cases involving investigations of fraud in department programs.

The *Travel Authorization* form should be faxed to the Assistant Secretary a minimum of three weeks before the travel dates.

91223 TRAVEL OUT OF THE COUNTRY

A. This out-of-country travel section applies to all staff, volunteers, foster parents, and clients or relatives of clients and requires prior written approval via the *Travel Authorization* Form, DSHS 03-337. Travel must comply with the OFM *State Administrative and Accounting Manual* and the DSHS *Travel Manual*. Out-of-country travel applies to travel **outside** the Continental USA, Alaska, and British Columbia, Canada. The Continental USA is defined as all areas in the 48 contiguous states and the District of Columbia. Hawaii is treated as out-of-country travel.

B. Once travel has been approved at the Regional Administrator or applicable division Director level, the travel request must be submitted to the Assistant Secretary accompanied by a memo written to the Governor's Staff Director from the DSHS Secretary. The purpose of the memo is to request prior approval for out-of-country travel and summarize the purpose of the travel. Once the

Governor's Office has approved the travel, the Assistant Secretary's Office will notify the Regional Administrator. The *Travel Authorization* form should be faxed to the Assistant Secretary a minimum of three weeks before the travel dates.

91300 CHILD DAY CARE SUBSIDY PROGRAMS

91310 INTRODUCTION

A. The Children's Administration (CA) offers a variety of child day care subsidy programs to support children and families. See the *Practices and Procedures Guide*, chapter 4000, for descriptions of the programs. Among the CA subsidy programs are:

1. Child Protective Services Child Care
2. Child Welfare Services Child Care
3. Employed Foster Parent Child Care
4. Homeless Child Care
5. Seasonal Child Care
6. Teen Parent Child Care
7. Therapeutic Child Development

91320 DEFINITIONS

For definitions relating to child day care payments, see Appendix A, DEFINITIONS.

91330 OFFICE OF CHILD CARE POLICY CHILD CARE PROGRAMS

A. The Office of Child Care Policy (OCCP) is responsible for program management of Child Protective Services Child Care, Child Welfare Services Child Care, Employed Foster Parent Child Care, Teen Parent Child Care, Seasonal Child Care, and Homeless Child Care.

B. To seek Exceptions-to-Policy (ETP) in these programs, send requests to OCCP at Mail Stop 45700, P. O. Box 45700, Olympia, WA 98504-5700.

91340 INCOME ELIGIBILITY

A. Families must have an income at or below 225% of Federal Poverty Level (FPL) adjusted for family size to qualify financially for CA childcare subsidies. See the Co-Payment Calculation Table column 2 for 225% of FPL adjusted by family size.

B. The social worker may waive income eligibility, on a case by case basis, only for CPS Child Care subsidy program. CA provides Employed Foster Parent Child Care without regard to the foster parent(s)' income.

91350 CO-PAYMENTS

A. Families that receive childcare subsidies from CA pay co-payments that are:

1. Based on the family's income;

2. Per family, regardless of the number of children in the family or the amount of care needed;

3. Paid by the family directly to the childcare provider.

B. See the following Co-Payment Calculation Table for income guidelines and co-payment calculation. The social worker may waive co-payments, on a case by case basis, only for CPS Child Care subsidy program.

CO-PAYMENT CALCULATION TABLE – GROSS INCOME EFFECTIVE 4-1-00								
	COLUMN 1	COLUMN 2	COLUMN 3		COLUMN 4		COLUMN 5	
If family size is	137.5 % FPL	If countable income is over 225% FPL	If countable income is 0 to 82% FPL		If countable income is 83% to 137.5% FPL		If countable income is 137.6% to 225% FPL	
1	$957	$1,566	$0	$571	$572	$957	$958	$1,566
2	$1,290	$2,111	$0	$769	$770	$1,290	$1,291	$2,111
3	$1,621	$2,653	$0	$967	$968	$1,621	$1,622	$2,653
4	$1,954	$3,197	$0	$1,165	$1,166	$1,954	$1,955	$3,197
5	$2,287	$3,742	$0	$1,364	$1,365	$2,287	$2,288	$3,742
6	$2,618	$4,284	$0	$1,561	$1,562	$2,618	$2,619	$4,284
7	$2,951	$4,829	$0	$1,760	$1,761	$2,951	$2,952	$4,829
8	$3,284	$5,373	$0	$1,958	$1,959	$3,284	$3,285	$5,373
9	$3,616	$5,918	$0	$2,157	$2,158	$3,616	$3,617	$5,918
10	$3,949	$6,462	$0	$2,355	$2,356	$3,949	$3,950	$6,462
		Not Eligible	$10 Co-Pay		$20 Co-Pay		See #5 below	

C. STEPS TO CALCULATE CHILD CARE SUBSIDY CO-PAYMENTS:

1. Determine total income. This is gross income plus any child support paid to the family and minus any child support the family pays.
2. Compare total income to Column 2. If amount is greater, client is not eligible.
3. If the family income falls in column 3, the co-payment is $10.00.
4. If the family income falls in column 4, the co-payment is $20.00.
5. To calculate co-pay for families with an income in column 5:

   a. Subtract 137.5% of FPL (column 1) from the total income;
   b. Multiply by .44; and
   c. Add $20.00.

91360 QUALIFIED CHILD CARE PROVIDERS

A. CA pays childcare subsidies to:

1. Licensed or certified family childcare homes;

2. Licensed or certified childcare centers; or

3. Exempt in-home/relative providers.

91370 RATES AND AUTHORIZATIONS FOR CHILD CARE

A. CA pays for childcare at the provider's rate or the appropriate DSHS rate, whichever is less. See the following charts to determine the appropriate rate for the age of the child and the region where the childcare is located. The maximum rate for a five year old child is:

1. The preschool rate for a child who has not entered kindergarten; or

2. The school-age rate for a child who has entered kindergarten.

B. **In-Home Child Care Subsidy Rates** **Dollars Per Hour**

1.	First Child	$2.06
2.	Each Subsequent Child	$1.03

C. LICENSED CHILD CARE CENTERS

MAXIMUM SUBSIDY RATES FOR CHILD CARE
Daily Rates – Effective November 1, 1999

		Infants (0-11 Mos.) $	Toddlers (12-29 Mos.) $	Preschool (30 Mos. – 5 yrs.) $	School-age (5-12 yrs.) $	Monthly NSB* All Ages $
Region 1	Full-Day	$22.73	$19.85	$18.00	$16.70	$74
	Half-Day	11.36	9.93	9.00	8.35	74
Region 2	Full-Day	23.18	20.45	17.75	16.82	73
	Half-Day	11.59	10.23	8.88	8.41	73
Region 3	Full-Day	30.18	26.00	22.00	19.77	91
	Half-Day	15.09	13.00	11.00	9.89	91
Region 4	Full-Day	37.80	29.55	26.14	23.40	108
	Half-Day	18.90	14.77	13.07	11.70	108
Region 5	Full-Day	25.82	22.18	19.45	17.50	80
	Half-Day	12.91	11.09	9.73	8.75	80
Region 6	Full-Day	25.59	22.73	20.00	20.00	83
	Half-Day	12.80	11.36	10.00	10.00	83

*NSB=Non-Standard-Hour Bonus ($/month). See section 91375 for information on the Non-Standard Hour Bonus.

D. LICENSED FAMILY CHILD CARE HOMES

MAXIMUM SUBSIDY RATES FOR CHILD CARE Daily Rates – Effective November 1, 1999						
		Infants (0-11 Mos.) $	**Toddlers (12-29 Mos.) $**	**Preschool (30 Mos. – 5 yrs.) $**	**School-age (5-12 yrs.) $**	**Monthly NSB* All Ages $**
Region 1	Full-Day	$19.00	$17.60	$17.00	$15.00	$74
	Half-Day	9.50	8.80	8.50	7.50	74
Region 2	Full-Day	18.00	18.00	16.00	15.00	73
	Half-Day	9.00	9.00	8.00	7.50	73
Region 3	Full-Day	28.00	24.00	22.00	20.00	91
	Half-Day	14.00	12.00	11.00	10.00	91
Region 4	Full-Day	30.00	27.27	25.00	22.50	108
	Half-Day	15.00	13.64	12.50	11.25	108
Region 5	Full-Day	21.00	20.00	19.00	17.00	80
	Half-Day	10.50	10.00	9.50	8.50	80
Region 6	Full-Day	20.50	20.00	18.00	17.00	83
	Half-Day	10.25	10.00	9.00	8.50	83

*NSB=Non-Standard-Hour Bonus ($/month). See section 91375 for information on the Non-Standard Hour Bonus.

91371 HALF-DAY/FULL DAY AUTHORIZATIONS

A. CA authorizes for half-days or full-days, based on the total number of hours of childcare needed monthly.

1. If a child needs fewer than 110 hours of care per month, DSHS authorizes half-day childcare. A half-day of care is fewer than 5 hours a day. A full monthly half-day authorization is for 22 days a month. Depending on the family's needs, DSHS may authorize up to 30 half-days of childcare per month. The extra eight half-days allows the provider to claim an additional half day when 5 or more hours of care are provided for that child on any given day.

2. If a child needs 110 or more hours of care per month, DSHS authorizes full-day childcare. DSHS may authorize up to 22 full-days of care each month. A full-day is five to 10 hours of care per day. If more than 10 hours of care are needed to support a DSHS approved activity, additional hours may be authorized.

B. See the SSPS Manual for the correct service and reason codes.

91372 REGISTRATION FEE

A. If the provider's policy is to charge all families a registration fee, CA childcare subsidy programs authorize a registration fees:

1. When the child enters care; and

2. Annually.

3. The department pays a registration fee of $50.00 per child or the provider's usual rate, whichever is less.

B. See the SSPS Manual for the correct service and reason codes.

91373 SPECIAL NEEDS CHILD CARE

A. CA childcare subsidy programs pay an additional amount for the care of children with documented special needs who require a higher level of care. See the following chart "Special Needs Rate for Child Care" to determine the appropriate rate for the age of the child and the region where the childcare is located. CA will pay the rate on the chart or the provider's documented additional cost of care, whichever is **greater**, in addition to the rates contained in section 91370.

B. LICENSED CHILD CARE CENTERS

SPECIAL NEEDS RATES FOR CHILD CARE
Additional Daily Rate for Children with Documented Needs
Effective November 1, 1999

		Infants (0-11 Mos.) $	**Toddlers (12-29 Mos.) $**	**Preschool (30 Mos. – 5 yrs.) $**	**School-age (5-12 yrs.) $**
Region 1	Full-Day	$6.82	$5.96	$5.40	$5.01
	Half-Day	3.41	2.98	2.70	2.51
Region 2	Full-Day	6.95	6.14	5.33	5.05
	Half-Day	3.48	3.07	2.66	2.52
Region 3	Full-Day	9.05	7.80	6.60	5.93
	Half-Day	4.53	3.90	3.30	2.97
Region 4	Full-Day	11.34	8.86	7.84	7.02
	Half-Day	5.67	4.43	3.92	3.51
Region 5	Full-Day	7.75	6.65	5.84	5.25
	Half-Day	3.87	3.33	2.92	2.63
Region 6	Full-Day	7.68	6.82	6.00	6.00
	Half-Day	3.84	3.41	3.00	3.00

C. LICENSED FAMILY CHILD CARE HOMES

SPECIAL NEEDS RATES FOR CHILD CARE Additional Daily Rate for Children with Documented Needs Effective November 1, 1999					
		Infants (0-11 Mos.) $	**Toddlers (12-29 Mos.) $**	**Preschool (30 Mos. – 5 yrs.) $**	**School-age (5-12 yrs.) $**
Region 1	Full-Day	$5.70	$5.28	$5.10	$4.50
	Half-Day	2.85	2.64	2.55	2.25
Region 2	Full-Day	5.40	5.40	4.80	4.50
	Half-Day	2.70	2.70	2.40	2.25
Region 3	Full-Day	8.40	7.20	6.60	6.00
	Half-Day	4.20	3.60	3.30	3.00
Region 4	Full-Day	9.00	8.18	7.50	6.75
	Half-Day	4.50	4.09	3.75	3.38
Region 5	Full-Day	6.30	6.00	5.70	5.10
	Half-Day	3.15	3.00	2.85	2.55
Region 6	Full-Day	6.15	6.00	5.40	5.10
	Half-Day	3.08	3.00	2.70	2.55

D. **In-Home Care** **Dollars Per Hour**

1. $0.62

E. See the SSPS Manual for the correct service and reason codes.

91374 INFANT BONUS

A. CA authorizes a $250.00 infant bonus to licensed or certified facilities when the:

1. Child is under one year old;

2. Child care facility has not already received a bonus for that child; and

3. Child needs a minimum of 5 days of care.

B. See the SSPS Manual for the correct service and reason codes.

91375 NONSTANDARD HOUR BONUS

A. CA authorizes the nonstandard hour bonus to a licensed or certified facility when the child needs 15 or more hours of nonstandard care per month. Nonstandard hours are:

1. Before 6:00 a.m.;

2. After 6:00 p.m.; or

3. Any time on Saturday or Sunday.

B. The nonstandard hour bonus is the same for the region regardless of the child's age group. The nonstandard hour bonus rates are listed on the chart "Maximum Subsidy Rates for Child Care."

C. See the SSPS Manual for the correct service and reason codes.

91380 OVERPAYMENT PROCEDURES

See section 9500 for procedures regarding identification and recovery of overpayments.

91390 ADVANCE AND ADEQUATE NOTICE

91391 WHEN REQUIRED

A. The authorizing worker uses the DSHS 14-039(X*), Notice of Planned Action*, to provide 10-day advance and adequate notice to a parent/guardian when the department reduces or terminates childcare benefits prior to the end of the established benefit period.

B. When unable to provide advance and adequate notice prior to the end of the month, the authorizing worker:

1. Continues benefits unchanged through the end of the 10-day period.

2. Establishes an overpayment for the amount of overpaid benefits.

C. The DSHS 14-259(X), transmitted before the fact, and generated by SSPS after the authorizing worker terminates childcare benefits for the parent/guardian, meets the requirement for adequate notice.

91392 WHEN NOT REQUIRED

Advance notice is not required when:

A. The parent's/guardian's childcare benefits will terminate at the end of the established benefit period, **and**

B. The parent/guardian is previously notified of the eligibility ending date. When benefits are initially authorized, the payee (the licensed provider or the client in the case of in-home childcare) receives the *Social Service Notice*, DSHS 14-259(X), directly from SSPS. A copy of the *Social Service Notice* is sent to the authorizing worker. This copy may be sent to the parent/guardian by the local office.

913100 FAIR HEARING

A. If a childcare client disagrees with an eligibility determination, the client has the right to a fair hearing. See section 9520.

B. The department pays childcare while the case is pending.

C. The authorizing social worker or fair hearing coordinator must make the client aware that continuing payment may result in significant overpayment if the judgment is for the department.

913110 CHILD CARE RATE CLUSTERS BASED ON DSHS REGIONS

A. Counties are grouped into rate clusters. These clusters are contiguous with the six DSHS regions, with the exception of Garfield and Asotin Counties.

B. DSHS maximum childcare rates are consistent for counties within each cluster. The table on the following page identifies each county by cluster and region.

Cluster/Region	Counties	
Cluster I Region 1	Adams Asotin Chelan Douglas Ferry Garfield	Grant Lincoln Okanogan Pend Oreille Spokane Stevens Whitman
Cluster II Region 2	Benton Columbia Franklin	Kittitas Walla Walla Yakima
Cluster III Region 3	Island San Juan Skagit	Snohomish Whatcom
Cluster IV Region 4	King	
Cluster V Region 5	Kitsap	Pierce
Cluster VI Region 6	Clallam Clark Cowlitz Grays Harbor Jefferson Klickitat	Lewis Mason Pacific Skamania Thurston Wahkiakum

91400 THE GOOD CAUSE DETERMINATION PROCESS

91410 REFERRAL PROCESS

A. DCFS is required to make a referral to the Division of Child Support (DCS) whenever a child is placed in out of home care for more than 72 hours.

B. The electronic referral sent by IV-E Coordinator staff initiates the process for establishment and collection of support from the child's parents to reimburse DCFS for foster care expenditures.

C. In certain cases there may be ***Good Cause*** for not pursuing collection and for those situations DCS will not collect support to reimburse the FC expenditures.

91420 BASIS FOR GOOD CAUSE

A. Basis for a good cause determination as defined in CA's WAC 388-25-0225 include the following scenarios:

1. Division of Developmental Disability (DDD) has determined the child is developmentally delayed (These do not have to be referred for a determination as this exemption is based on the *Jacobs v Soliz* settlement. DCS has a process already in place to check on the DD status of a child when they are placed initially into foster care. If the child is DD DCS will not collect for that child regardless of a claim of good cause.);

2. The Juvenile Rehabilitation Administration (JRA) has discharged the child who has served time for an offense against a removal home family member and is being placed directly into foster care to protect that family member;

3. Adoption proceedings for the child are pending in court or a public/private agency is assisting the custodial parent to decide if the child will be placed for adoption;

4. The child's birth is a result of incest or rape and establishing paternity would not be in the child's best interest;

5. The custodial parent or the child may be placed in danger of domestic abuse, perpetrated by the other parent or responsible person;

6. A child in the Adoption Support Program and the case plan is reunification with the adoptive parents;

7. During a Dependency proceeding, the Juvenile or Tribal Court finds the parents will be unable to comply with agreed reunification plans due to financial hardship caused by paying support;

8. The social worker determines that paying DCS foster care support causes undue financial hardship that will delay or prevent family reunification. The basis for this determination must be documented in the child's case file.

B. The DCFS social worker or IV-E Specialist discovering a possible good cause situation will notify each other of the need for a determination. The IV-E Specialist will also notify the DCS Foster Care Coordinator of the pending decision and ensures an electronic referral has been sent to DCS.

C. Both parties (social worker and IV-E Specialist) will decide whether or not the case meets the criteria for good cause. The IV-E Specialist will then notify the Federal Funding Coordinator (FCC) of their recommendation and the need for a final determination.

D. The FFC will review the information and recommendation from the social worker and IV-E Specialist to verify the case is appropriate for a good cause determination and will make the final decision. The FFC, after affirming their decision with the social worker and IV-E Specialist, will notify the DCS Foster Care Coordinator via e-mail of the determination either approving or denying the claim. The e-mail will explain:

1. Which parent(s) the decision applies to, the reason for the approval or denial and if approved that the case for the parent(s) is not subject to collection.

E. In some cases Community Services Office (CSO) staff approve a claim of good cause when authorizing TANF prior to a child entering out of home care. In such cases DCS will notify the DCFS social worker of the CSO's good cause determination.

CHAPTER 10000 CONTRACT MANAGEMENT

CHAPTER 10000 CONTRACT MANAGEMENT 10-1
10100 GENERAL POLICIES....10-1
10200 DSHS CONTRACTS....10-1
10210 Client Service Contract....10-2
10220 Personal Service Contract....10-2
10230 Interagency Agreement....10-3
10240 Indian Nation Intergovernmental Agreement....10-3
10250 Purchase Service Contracts....10-3
10300 CONTRACT MANAGEMENT RESPONSIBILITIES....10-3
10310 Statewide Programs....10-3
10320 Social Workers....10-4
10330 Contract Coordinators....10-4
10340 Regional Business Managers....10-5
10350 Program Managers....10-5
10360 Regional Administrators and Directors....10-5
10400 CONTRACT PROCUREMENTS....10-5
10410 Contracts Exempt from Procurement Requirements....10-5
10420 Procurement Requirements For Personal Service Contracts....10-6
10430 Methods of Procurement....10-6
10431 Evidence of Competition....10-6
10432 Formal Competitive Procurement....10-7
10433 Informal Procurement....10-8
10434 Opportunities For Minorities, Women, and Indian Nations....10-8
10435 Sole Source Contracts....10-8
10500 VERBAL AGREEMENTS....10-9
10600 NON-DISCRIMINATION RESPONSIBILITIES OF CONTRACTORS....10-9
10700 EQUAL ACCESS REQUIREMENTS FOR CONTRACTORS....10-10
10800 CONTRACTOR CONFIDENTIALITY....10-10
10900 BACKGROUND INQUIRIES....10-11
1010000 EMPLOYEE/EMPLOYER RELATIONSHIP....10-11
101100 CONTRACTING WITH NON-PROFITS....10-11
101200 EMPLOYEE ETHICAL CONDUCT CONCERNING CONTRACTORS....10-11
101300 CONTRACT MONITORING....10-12
101310 monitoring guidelines....10-13
101311 PURPOSE AND SCOPE....10-13
101312 POLICY....10-13
10113 DEFINITIONS....10-14
10114 PROCEDURES....10-15
101400 VENDOR INVESTIGATIONS....10-16
101500 CONTRACT DISPUTES....10-16
101600 CONTRACTOR EQUIPMENT/PROPERTY....10-17
101700 CONTRACTOR TRAVEL....10-17
101800 LIABILITY INSURANCE....10-17
101900 RESPONSIBILITIES FOR OVERSIGHT OF SUB-RECIPIENTS....10-17
1011000 CONTRACT FILES....10-18

10100 GENERAL POLICIES

A. Children's Administration (CA) may purchase services, which are not provided by the department. The services are to be consistent with the mission and values contained in the CA *Case Services Policy Manual*, chapter 1000, section 1200. CA staff responsibilities are delineated in section 10300, below.

B. Purchases shall be made in accordance with chapters 39.29 and 43.19 Revised Code of Washington (RCW); *Washington Financial and Administrative Policies, Regulations and Procedures Manual*; Office of State Procurement General Authorities; *DSHS Procurement Manual*; and DSHS Administrative Policies 13.06, 13.07, and 13.08.

C. The department shall pay a provider after goods or services have been delivered. Payment before costs are incurred constitutes loaning the state's credit, a violation of the state's constitution and is, therefore, illegal.

D. Total expenditures and obligations of purchases shall not exceed the CA allotment.

E. No contract may be executed or renewed if it would have the effect of terminating classified employees or classified employee positions existing at the time of execution or renewal of the contract.

RCW 41.06.380

F. The regional business manager or Headquarters fiscal manager, or designee, shall determine if goods or services to be purchased are:

1. On a mandatory state contract; or

2. A mandatory Central Stores item; or

3. Authorized to be purchased under "General" or "Specific" Authorities; or

4. Requires a contract for purchase.

10200 DSHS CONTRACTS

A. DSHS policy requires a written agreement prior to the commencement of any work by a contractor if the service cannot be purchased by methods stated under section 10100.

B. CA contracts are developed under the direction of contracts coordinators and must be processed through the CA Contracts Manager.

C. Contracts must be processed in accordance with requirements established by the DSHS Central Contracts Services and the Office of Administrative Resources.

10210 CLIENT SERVICE CONTRACT

A. A Client Service Contract is used to acquire direct services for department clients (as opposed to department staff). Examples of client services include, but are not limited to, resource intensive services (group care), therapeutic child development, family preservation services, etc.

B. Most Client Service Contracts are either presigned "form" contracts (single document) or a two-part contract instrument employing Basic Terms and Conditions and a Client Service Work Order.

1. "Basic Contract Terms and Conditions" contain the basic terms and conditions under which two parties will do business. It has no maximum consideration and no statement of work; those are added by Client Service Work Orders. Each contractor has only one executed Basic Contract Terms and Conditions.

2. "Client Service Work Orders" describe services which are being purchased from a contractor; consideration to be paid; payment and billing instructions; how the contractor will be evaluated; consequences for non-compliance; rules regarding sub-contracting; required credentials and minimum requirements; and requirements for audits.

C. Client Service Contracts are exempt from the competitive procurement and filing requirements in chapter 39.29 RCW, but sometimes a competitive procurement or informal solicitation is completed in the best interest of the department.

D. The DSHS Secretary has delegated authority to sign Client Service Work Orders to only the following CA staff:

1. Assistant Secretary;

2. Directors;

3. Regional Administrators;

4. Regional Business Managers;

5. Contract Coordinators.

10220 PERSONAL SERVICE CONTRACT

A. A Personal Service Contract acquires professional or technical services for the department and department staff (as opposed to clients). Personal services are those provided by a consultant to accomplish a specific study, project, task, or provide employee training. A Personal Service Contract is a single document, which includes special and general terms and conditions and a statement of work.

B. These contracts are governed by chapter 39.29 RCW and must comply with competitive procurement and Office of Financial Management (OFM) filing requirements.

10230 INTERAGENCY AGREEMENT

A. An Interagency Agreement is a contract between the department and any public agency, political subdivision, or unit of local government of Washington State.

B. These include but are not limited to, municipal corporations, quasi-municipal corporations, special purpose districts, and local service districts; any agency of the state government; any agency of the United States; and any political subdivision of another state.

10240 INDIAN NATION INTERGOVERNMENTAL AGREEMENT

A. As with Basic Client Service Contracts, the Indian Nation Intergovernmental Agreement is a two-part contract composed of a Basic Agreement containing general terms and conditions and an Indian Nation Work Order.

B. The Indian Nation Intergovernmental Agreement is used to contract with any federally recognized tribe in the state of Washington.

C. This type of contract may be used to provide client services, but they are not referred to as Client Service Contracts because the services are provided by a sovereign nation.

10250 PURCHASE SERVICE CONTRACTS

A. Purchase Service Contracts are used when purchasing goods, equipment, or services outside of delegated authority.

B. Services purchased under a Purchase Service Contract must be essential to accomplish routine, continuing, and necessary functions within the department. Purchase Service Contracts are governed by chapter 43.19 RCW and the Department of General Administration (GA).

10300 CONTRACT MANAGEMENT RESPONSIBILITIES

10310 STATEWIDE PROGRAMS

A. The responsibility for development and administration of boilerplate contracts for statewide programs is a coordinated effort between headquarters and regional staff.

B. Program managers and contracts coordinators collaborate in developing contracts and in notifying contractors when there is a mandated vendor rate increase.

C. CA Directors and the Assistant Secretary shall approve boilerplate contracts prior to implementation of contracted programs.

D. Regional contract coordinators oversee negotiations and processing of contracts. If a contract warrants revision, headquarters staff coordinates the revision with regional staff.

E. The CA Assistant Secretary shall approve all contracts.

10320 SOCIAL WORKERS

A. Social workers have the following responsibilities with respect to contracts:

1. If a service is needed, obtain direction from the regional business manager regarding method for purchasing. See section 10100, paragraph F.

2. If a contract is required, review CAMIS SBUS for a current contract. If there is no current contract for the service, submit a written contract request to the regional contracts coordinator.

3. Once the contract is signed by both the contractor and DSHS, initiate client referrals for contracted services in accordance with regional procedures, including provision of basic client information consistent with the requirements of the CA *Practices and Procedures Guide*, chapter 4000, section 4422.

4. Initiate "Shared Decision Making" staffings with contractors when deemed appropriate.

5. Authorize payments to contractors in a timely, accurate manner.

6. If a contractor initiates a CPS referral, transfer the contractor to CPS intake to complete the referral. CPS staff will notify the contractor of actions taken as a result of the referral. See the CA *Practices and Procedures Guide*, chapter 2000, section 2330.

7. Document and report potential contract violations, late reports, problems, etc., with a contractor to the regional contracts coordinator through the CAMIS Contract Complaints Module.

10330 CONTRACT COORDINATORS

A. Contract coordinators have the following responsibilities:

1. Negotiate, develop, and write contracts;

2. Process contract documents;

3. Ensure contract information is entered into CAMIS;

4. Request background clearances for contractors, their employees, subcontractors, and volunteers who may have unsupervised access to children.;

5. Provide technical assistance to CA staff and contractors;

6. Facilitate monitoring of contractors' performance;

7. Facilitate corrective action process for contractors;

8. Initiate investigation of complaints concerning contractors;

9. Maintain contract files;

10. In coordination with headquarters staff, notify contractors when there is a change in fees or rate schedules; and

11. Obtain appropriate approvals for contracts.

10340 REGIONAL BUSINESS MANAGERS

A. The regional business manager, under direction of the Regional Administrator:

1. Establishes allotments for contracted services; and

2. Monitors payments to contractors against allotments and contract obligations.

10350 PROGRAM MANAGERS

A. Program managers perform the following functions:

1. Provide technical assistance in the coordination and monitoring of contracted programs for compliance with statutes, regulations, and department policies; and

2. Monitor performance of contractors under contracts for which they are responsible.

10360 REGIONAL ADMINISTRATORS AND DIRECTORS

Regional Administrators and Directors shall have a system in place to monitor contacts within their area of responsibility.

10400 CONTRACT PROCUREMENTS

A. Chapter 39.29 RCW and *Washington Financial and Administrative Policies, Regulations and Procedures Manual*, Part 4, chapter 3, set forth procurement requirements for state contracted services.

B. OFM electronically maintains a "Guide to Personal Service Contracting" which is located on the OFM Home Page at http://www.wa.gov/ofm.

10410 CONTRACTS EXEMPT FROM PROCUREMENT REQUIREMENTS

A. The following types of contracts are exempt from procurement requirements.

1. Client Service Work Orders;

2. Interagency Agreements;

3. Indian Nation Intergovernmental Agreements;

4. Expert witnesses for the purpose of litigation; and

5. Collaborative research where prior approval of the contractor is granted by the funding source.

10420 PROCUREMENT REQUIREMENTS FOR PERSONAL SERVICE CONTRACTS

A. The following methods of procurement, lead times, and approvals are required for personal service contracts, which are not sole source. The amounts indicated are **cumulative** contract awards per fiscal year.

1.	Up to $2,499	Competition not mandated Approvals: Regional Administrator, Director, and DSHS Central Contracts Services (CCS).
		Lead Time: 10 days
2.	$2,500 to $9,900	Evidence of Competition Approvals: Regional Administrator, Directors
		Lead Time: 30 days
3.	$10,000 or more	Competitive Procurement (RFP or RFQ/Q) Approvals: Directors, Assistant Secretary, CCS, OFM 10 Day Advance Filing with OFM Lead time: 90 days

10430 METHODS OF PROCUREMENT

A. Competitive procurements for personal services are governed by chapter 39.29 RCW and OFM; purchase services are governed by chapter 43.19 RCW and the Department of General Administration.

B. Information technology purchased goods and services are governed by chapter 43.105 RCW and the Department of Information Services (DIS).

10431 EVIDENCE OF COMPETITION

A. Evidence of Competition is accomplished by issuing a written letter of solicitation to, at a minimum, three prospective contractors. The letter includes:

1. A description of the type of services required;

2. The proposed contract period of performance;

3. A request for information regarding prospective contractor's qualifications;

4. A request for a quotation of cost to perform the service; and

5. The due date and location for responses to be submitted.

B. The contracts coordinator shall document the process used in selection of the contractor as follows:

1. The names of firms contacted;

2. A copy of the solicitation letter;

3. Information on how the prospective contractors responded;

4. A description of the evaluation and selection process; and

5. The reasons(s) for selection of the successful contractor.

10432 FORMAL COMPETITIVE PROCUREMENT

A. A formal competitive procurement is used when required by law, or, in the judgment of the Assistant Secretary, it would be the best way to:

1. Obtain quality services and products for the best price;

2. Maintain trust and good faith with the provider community; and/or

3. Minimize controversy.

B. Formal competitive procurement is accomplished through a Request for Proposal (RFP) or Request for Qualifications/Quotation (RFQ/Q).

1. In an RFP, the needed project or service is identified. Prospective contractors submit competitive proposals which explain how the project or service can be accomplished, their qualifications and experience, and a cost proposal. Each proposal submitted is evaluated through a formal review process. The successful bidder is usually selected based upon cost and ability to perform the proposed service in the most effective, efficient manner.

2. In an RFQ/Q, the needed service is explained in detail. Prospective contractors submit their qualifications and experience to perform the service along with a cost proposal. The successful bidder is selected through a review process based upon qualifications, experience, and cost.

C. Competitive procurements are managed by CCS to ensure procurements meet legal and regulatory requirements. **CA staff must not reply to potential bidder's questions, inquiries, etc.,** concerning a particular competitive

procurement. Instead, CA staff instruct potential bidders to contact CCS directly for answers concerning questions, inquiries, etc.

10433 INFORMAL PROCUREMENT

A. An informal solicitation is a shorter, more flexible procurement process than the formal competitive procurement. Subjective criteria may be used to evaluate potential contractors rather than applying points and scores to responses. Unlike formal competitive procurements, CA staff may participate in the evaluation and selection of the contractor. Informal solicitations can be structured similar to "evidence of competition" and may include an interview process.

B. Informal solicitation may **not** be used for Personal Service Contracts. See section 10420.

C. Informal solicitation may be used at the department's discretion to procure client services when:

1. A large amount of money is involved;

2. The providers historically prefer this method of selection;

3. The service being contracted for is sensitive or controversial; and/or

4. A maximum "arms-length" process is desirable.

10434 OPPORTUNITIES FOR MINORITIES, WOMEN, AND INDIAN NATIONS

A. In accordance with chapter 39.19 RCW, certified Minority and Women-Owned Business Enterprises (MWBE) and other minority organizations shall have the opportunity to participate in procurements and contracts. Refer to DSHS Administrative Policies 7.09, 7.10, and 7.12 for more information.

B. There are 27 federally recognized Indian Nations in the state of Washington. These Indian Nations shall be notified of any CA procurement that might be of interest to them.

10435 SOLE SOURCE CONTRACTS

A. Sole Source Contracts are initiated for personal services which are unique, and the Sole Source contractor is justifiably the only practical source to provide the service. The following requirements and approvals apply for Sole Source Contracts:

1. Up to $2,499 — Sole Source Documentation
   a. Approvals: Regional Administrator, Directors, and CCS
   b. Lead Time: 10 days

2. $2,500 to $9,999 — Sole Source Documentation

a. Approvals: Regional Administrator, Directors, and Assistant Secretary
b. 10 Day Advance OFM Filing
c. Lead Time: 20 days

3. $10,000 or more

Newspaper Advertisement
a. Sole Source Documentation
b. Approvals: Regional Administrator, Directors, Assistant Secretary, CCS, OFM
c. 10 Day Advance OFM Filing
d. Lead Time: 30 days

4. The Director, CA Division of Management Services, needs to approval **all** sole source contracts.

B. *Washington Financial and Administrative Policies, Regulations and Procedures Manual*, section 4.3.1.3.3, fully explains the rules and regulations concerning sole source contracts/work orders. Any Personal Service Contract for $2,500 or more that is procured as a sole source must be justified to the OFM. OFM reviews and approves these Personal Service Contracts prior to execution.

10500 VERBAL AGREEMENTS

A. Staff shall **not** enter into verbal agreements with contractors which are inconsistent with the terms and conditions of the Basic Contract and/or Client Service Work Order.

B. All other verbal agreements shall be reiterated in writing to the contractor.

C. Staff shall not rely on trust, verbal understandings, or traditions.

10600 NON-DISCRIMINATION RESPONSIBILITIES OF CONTRACTORS

A. Contractors must comply with the DSHS Non-Discrimination Plan, as amended, and with the requirements of federal and state laws on which it is based. The laws include:

1. 1964 Civil Rights Act, Titles VI and VII;

2. Executive Order 11246, as amended by Executive Order 11375;

3. 1973 Rehabilitation Act, sections 503 and 504;

4. 1975 Age Discrimination in Employment Act;

5. 1974 Vietnam Era Veterans Readjustment Assistance Act;

6. 1990 Americans with Disabilities Act (ADA), as amended, including the provisions of Title II as applied to a public entity;

7. 1991 Civil Rights Act; and

8. Washington State Law Against Discrimination, chapter 49.60 RCW.

10700 EQUAL ACCESS REQUIREMENTS FOR CONTRACTORS

A. All agencies under contract with CA must ensure that clients have equal access to services and programs administered with funding from CA.

1. Contracted agencies must post multilingual signs to inform clients that interpretation/translation and accommodation services are available without cost to the clients.

2. Contracted agencies must ensure equal access to services for clients through appropriate assessment of client interpretation/translation and special accommodation needs, identified and recorded in a manner which provides for consistent services to clients and data collection. Client records must include information regarding the dates interpreters, translations, or accommodations were provided and the names of the providers.

3. Contracted agencies must develop and implement procedures for obtaining interpreters, translations, and accommodations for clients who need them in order to provide services as expediently as they are provided to other clients.

4. The contracted agency must provide all necessary interpretation, translation, and accommodation services at no cost to the client. These costs are allowable provider costs that the contractor may bill to the agency's contract with CA. Billable costs may not exceed any rates that may be determined by the Regional Administrator. CA will reimburse all costs for interpretation, translation, and accommodation to contractors up to the amount of the contract award. CA will not reimburse funds in excess of the total amount of an agency's contract. Contracted agencies may not charge the department, as a discrete charge, for interpreter/translation services provided to clients by the contractor's staff. The cost of the service by contractor staff is incorporated into basic reimbursement from the department.

10800 CONTRACTOR CONFIDENTIALITY

A. Contractors **must** maintain information concerning individuals in strictest confidence and safeguard all information, electronic and hard copy.

B. The contractor **must** not disclose information on individuals directly or indirectly except in compliance with state and federal law and department policy. See chapter 13000, section 13720, PUBLIC DISCLOSURE.

10900 BACKGROUND INQUIRIES

A. Background inquiries are to be completed pursuant to RCW 43.43.832 and 43.43.834 for all contractors, their employees, subcontractors, and volunteers who may have unsupervised access to children during the course of delivery of CA contracted services.

1. If the contractor is licensed by CA, the licensing background clearance, if completed, is sufficient for this purpose.

2. For those contractors not licensed by CA, an initial clearance will be completed before any contracted services may be delivered by the person being cleared.

3. Background inquiries must be repeated no less than every three years for ongoing service providers.

B. See chapter 5000, section 5500, BACKGROUND INQUIRIES, for the processing of background inquiries.

101000 EMPLOYEE/EMPLOYER RELATIONSHIP

A. A contractor is an independent person or business—**not** an employee of the department. CA staff must avoid the implications of an employer-employee relationship with non-public agency contractors.

B. Generally, CA should not furnish the contractor a place to work or state resources, such as a office work space, state vehicles, computers, telephones, etc. CA **must** not control or direct the day-to-day activities of individuals who perform contracted services. For more information, consult the *20 Common Law Factors* published by the Internal Revenue Service (IRS) to determine whether an individual is an independent contractor or is considered to be an employee.

101100 CONTRACTING WITH NON-PROFITS

A. Organizations that are non-profit have received tax-exempt status from the IRS. These organizations cannot be "owned" by a sole proprietor or shareholders and must be governed by a board of directors. The term "non-profit" has nothing to do with whether an organization earns less money than it expends in a given year.

B. Non-profit entities must put back all revenue into the operation of the entity. To do otherwise is termed "self-dealing" by the IRS, and this is roughly translated as "using dollars for personal gain." However, the entity does not need to expend all its revenue each year—It can be accumulated, as long as it is eventually used for the organization. Potential or suspected abuses of non-profit status are to be reported to appropriate the contracts coordinator through the CAMIS Complaints Module.

101200 EMPLOYEE ETHICAL CONDUCT CONCERNING CONTRACTORS

A. CA staff must adhere to the Washington State Ethics in Public Service Law, chapter 42.52 RCW, throughout the contract process. See chapter 8000, section

8110, for additional information. Legal requirements with special impact on contracting include, but are not limited to, the following:

1. A contractor cannot be a current DSHS employee except by approved exception.

2. A contractor cannot be a current state employee except in cases where the contract was competitively procured or the Employee Ethics Board (EEB) has approved the contract.

3. A contractor cannot be a former state employee who developed or administered a contract for the service within the last two years of his or her state employment.

4. An AAG opinion is required before contracting with a provider if a state employee is associated with the contractor in the capacity of an employee, board member, officer, or partner.

5. CA staff must not accept an offer of employment or other compensation if there is reason to believe the offer is linked to performance or non-performance of official duties.

101300 CONTRACT MONITORING

CA must monitor its contracts with service providers in accordance with DSHS Administrative Policy (AP) 13.11, General Contract Monitoring Policy.

A. Each CA Division Director and DCFS Regional Administrator must develop and implement contract monitoring plans for those contracts for which each Director or Regional Administrator is responsible. The types of contracts include Client Service Contracts, Personal Services Contracts, Purchased Services Contracts, and Interlocal Agreements for each program. The monitoring plans must include the elements contained in AP 13.11(A)(2).

B. Each CA Division Director and DCFS Regional Administrator must assign contract monitoring staff to each of the contracts for which the Director or Regional Administrator is responsible. Among the responsibilities of the assigned monitoring staff will be those outlined in the division or region's monitoring plan, AP 13.11(A)(3) and the following requirements.

1. CA must, through contracts coordinators and designated program managers, undertake the following tasks to determine the satisfactory delivery of contracted services according to the terms and conditions of contracts:

   a. Provide consultation and technical assistance to vendors.

   b. Monitor and periodically review services for compliance with contract terms and conditions, consistent with the following priorities: **RCW 43.20A.420**

i. Monitoring of contractors about whom there have been health or safety concerns.

ii. Monitoring of contractors about whom there are concerns expressed by staff or the community with respect to contract compliance.

iii. All other contractors.

2. Document monitoring visits and/or episodes, corrective action plans, and management decisions regarding completion of corrective actions.

101310 MONITORING GUIDELINES

101311 PURPOSE AND SCOPE

A. Guidelines for Children's Administration (CA) staff have been established to ensure that the department receives the services paid for through the contracting process and that the contractor is meeting the scope of work and specifications identified in the contract. This policy also establishes guidelines to determine which level of monitoring to apply to contracts and identifies tools that are available for use in contractor monitoring.

B. The guidelines apply to all CA employees who have responsibility for contractor monitoring and to contracts, and Interlocal Agreements of the department, including agreements with Indian Nations.

101312 POLICY

A. Effective monitoring assists in identifying and reducing fiscal and program risk as early as possible, thus protecting both public funds and clients being served.

1. CA views monitoring as a preventative function, an opportunity to determine the need for and provide technical assistance, and a valuable source of information concerning the effectiveness of services and service delivery methods.

2. CA considers the contractor a strategic partner and encourages contractors to innovate, improve, and deliver better services.

B. CA has developed a contractor monitoring approach to determine contractor compliance with the terms, conditions, and requirements of a contract, including state and federal requirements. CA also must verify documentation of work performance or outcomes in accordance with the contract.

C. Based on staff resources and the Contractor Risk Assessment tool, each region and headquarters must develop a monitoring plan. For Client Service contracts, staff must utilize Level 1, Contract Compliance Self-Assessment, and/or Level 2, Contract Performance Checklist. Responsible CA staff must review all information gathered in monitoring activities in both levels, take action where appropriate, and document outcomes.

1. Level 1, Contract Compliance Checklist, consists of self-reporting by the contractor.

2. Level 2, Contract Performance Checklist, consists of on-site CA staff review of records, files, and other written documentation, and interviews of staff, and clients.

D. CA staff must, when undertaking activities related to contractor monitoring, also comply with:

1. Executive Order 98-02, Training and Protocols for State Investigators;

2. Administrative Policy 7.14, Civil Rights Compliance Reviews;

3. Administrative Policy 13.11 General Contract Monitoring Policy;

4. Administrative Policy 14.07 Control of Fixed;

5. Administrative Policy 16.01, Internal Audit;

6. Administrative Policy 16.05, Internal Control Risk Assessment and Self-Evaluation; and

7. Administrative Policy 16.07, Single Audit Act Responsibilities Administrative Policy 16.09, Audit.

E. Staff assigned to conduct complete investigations on specific complaints filed against specific contractors must attend Investigator Training provided by the Department of Personnel as required by Executive Order 98-02 and as determined by the Administration.

10113 DEFINITIONS

A. "Client Service Contract" means services provided directly to agency clients. Examples of client services include Family Preservation Services, Psychological Evaluations, and visitation/supervision services.

B. "Contractor Monitoring" includes any planned, ongoing, or periodic activities such as reviewing, observing, and reporting that measure and ensure contractor compliance with the terms, conditions, and requirements of a contract. The planned activities may include responding to unanticipated concerns or stakeholders' complaints.

C. "Contractor Monitoring Plan" means a written plan for monitoring contractor compliance with contract requirements.

D. "Interlocal Agreement" means a contract or agreement between the department and any public agency, political subdivision, or unit of local government of this state including, but not limited to:

1. Municipal corporations, quasi-municipal corporations;

2. Special purpose districts, and local service districts;

3. Any agency of state government;

4. Any agency of the united states;

5. Any Indian tribe recognized as such by the federal government; and

6. Any political subdivision of another state.

Interlocal Agreements are governed by chapter 39.34 RCW, Interlocal Cooperation Act.

E. "Personal Service Contract" means an agreement to purchase services provided by a consultant to accomplish a specific study, project, task, or other work assignment. This term does not include purchased services as defined in RCW 43.19.190 or 43.105.041. This term does not include client services. These contracts must comply with procurement and filing requirements of chapter 39.29 RCW, Personal Service Contracts.

F. "Risk Assessment" means the process of evaluating exposures to the chance of harm or loss that could arise from some activity. Usually risk assessment consists of (1) identifying the risks and their classification based on characteristics, (2) measurement and evaluating the consequences of the risks, and (3) prioritizing risks based on evaluation. The purpose of risk assessment is to prioritize contract-monitoring activities.

10114 PROCEDURES

A. Each CA Division of Children and Family Services (DCFS) Regional Administrator and CA Division Director must designate responsible staff to monitor contracts that fall within the responsibility of the respective organizations. Headquarters program staff will be responsible for contracts managed out of Headquarters and regional program staff will be responsible for contracts managed in the regions.

B. Primary staff designated to monitor contracts must attend contracts training to include at a minimum Contractor Monitoring training offered by Central Contracts Services.

C. Staff designated to monitor contracts must use approved monitoring tools and related instructions located on the CA Intranet home page. Staff must also utilize a Contracts Risk Assessment Tool to assist them in deciding which contracts to monitor at Level 1 and/or Level 2

D. Regions and Headquarters must submit their annual monitoring plans to the Assistant Secretary each fiscal year, due no later than October 31st each year. This monitoring plan must be based on the Risk Assessment tool. These plans are subject to revision due to emergencies and unforeseen findings

E. Regions and Headquarters must submit their summaries of monitoring conducted during the previous fiscal year, due no later than September 30th each year.

F. As part of the monitoring process, staff must review relevant material when available. Such documents include audits performed by other divisions or state agencies or single audits.

G. Staff designated to monitor contracts must coordinate efforts with other divisions or agencies when appropriate. This coordinated effort should include both monitoring activities and corrective action plans.

H. Headquarters program managers must develop program specific monitoring tools as new programs are implemented.

I. Staff designated to monitor contracts must follow up on any findings that necessitate corrective action, using designated forms located on the CA Intranet

J. Staff must retain documentation in accordance with the record retention schedule specified by DSHS Central Contracts Services.

101400 VENDOR INVESTIGATIONS

A. CA staff must report concerns about possible criminal activity on the part of contractors to their immediate supervisor, to the appropriate contracts coordinator, and to the appropriate program manager.

B. The employee's supervisor immediately reports the allegation to CCS. The supervisor then immediately reports to the Area Administrator, who, in turn, immediately informs the Regional Administrator.

C. The Regional Administrator determines whether the allegation warrants notification to the CA Assistant Secretary/designee and takes appropriate steps, which may include requesting the involvement of the Office of Special Investigations (OSI) under the provisions of DSHS Administrative Policy 10.06.

101500 CONTRACT DISPUTES

A. Generally, differences between the department and contractors will be worked out between the parties as close to the point of service delivery as possible. Contracts coordinators or program managers will handle resolution of differences, as necessary.

B. When a dispute arises over an issue related to a contract and it cannot be resolved, either party may submit a request for dispute resolution to CCS. Instructions regarding the dispute process are outlined in the Basic Terms and Conditions. The dispute resolution process administered by staff at CCS serves as the sole administrative remedy available to the disputing parties.

C. The CA staff person responsible for management of the contract, either a contracts coordinator or a program manager, represents the administration at the hearing and prepares and submits a written statement of the Administration's

position, with supporting documentation, to CCS according to procedures established by CCS.

101600 CONTRACTOR EQUIPMENT/PROPERTY

Absent federal or state law or regulation governing a particular type of contract, ownership of all assets purchased in conjunction with a contract must be transferred to the contractor as part of the consideration for the contract.

101700 CONTRACTOR TRAVEL

A. Contractor travel paid under the provisions of contracts or agreements with the department must be no higher than rates established in current State of Washington Travel Regulations.

B. Contractors who provide transportation of department clients must ensure that:

1. Drivers are at least 18 years of age, have a current driver's license that is valid for the classification of motor vehicle operated, have a good driving record, and have proof of liability and medical insurance coverage in accordance with DSHS Office of Risk Management requirements.

2. Children use age and weight-appropriate child safety seats or restraints which comply with Washington state law.

3. Vehicles used to transport clients are maintained in safe operating condition.

4. Number of passengers does not exceed the seating capacity of the motor vehicle(s).

101800 LIABILITY INSURANCE

A. Contractors must carry and maintain liability insurance in accordance with the terms of their contracts with the department.

B. Contractors must submit a Certificate of Insurance showing compliance with contract insurance requirements before providing services to the DSHS Risk Manager, Office of Risk Management, P. O. Box 45882, Olympia, WA 98504-5882.

101900 RESPONSIBILITIES FOR OVERSIGHT OF SUB-RECIPIENTS

A. Contractors that receive federal financial assistance pass-through funds under a contract are considered sub-recipients and must comply with the federal Single Audit Act. For a definition of "sub-recipient," see Appendix A, DEFINITIONS.

B. CA staff must obtain appropriate single audit reports from its sub-recipients (contracted agencies), to provide contract monitoring, and to follow up any corrective action plans. Refer to DSHS Administrative Policy No. 16.07 for requirements regarding sub-recipient oversight.

1011000 CONTRACT FILES

A. The original, signed copy of the contract is retained by CA Division of Management Services, which is the Office of Record for all contracts.

B. The official CA file for each contract is located in the office of origin: headquarters or the regional office. The CA file contains a copy of the contract, all contract reports, correspondence, action requested and taken, and all other documents and records relating to the contract.

C. File retention is according to the following schedule:

1. The Division of Management Services must retain all contract files for a minimum of four years past their end date if contract compliance has been satisfactory. Contract files will be maintained in Archives for an additional three years.

2. The Division of Management Services must keep contract files of contractors where there have been health and safety concerns, compliance issues, or audit findings indefinitely or for a minimum of four years following the end date, with the files retained in Archives for an additional three years.

CHAPTER 11000 FEDERAL FUNDING

CHAPTER 11000 FEDERAL FUNDING 11-1
11100 FEDERAL MATCHING FUNDS/OTHER BENEFITS 11-1
11110 Introduction 11-1
11120 Referral 11-1
11130 Determinations 11-1
11200 FEDERAL FUNDING PROGRAMS 11-1
11210 Title IV-E 11-1
11211 Categorical Title IV-E Eligibility Factors 11-1
11212 Other Eligibility Factors 11-4
11213 Referral Procedures for Social Workers 11-5
11214 Procedures for Federal Funding Specialists 11-6
11215 Other Eligibility Processes 11-7
11220 Title II/Retirement, Survivors, and Disability Insurance 11-7
11221 Eligibility Factors 11-7
11222 Referral Procedures for Social Workers 11-7
11230 Title XVI/Supplemental Security Income 11-8
11231 Referral Procedures for Social Workers 11-8
11232 Procedures for SSI Facilitators 11-9
11233 Electronic Data Entry and Record Keeping 11-9
11234 Appeals Cases 11-11
11240 Client Aged 18 through 20 11-11
11250 Title XIX/Medicaid 11-12
11251 Regional Responsibilities for Behavior Rehabilitation Services/Group Care 11-12
11252 Eligibility Factors for Behavior Rehabilitation Services/Group Care and Therapeutic Child Development 11-13
11253 Referral Procedures for Social Workers 11-14
11254 Procedures for Federal Funding Specialists 11-14
11300 GUARDIANSHIPS 11-15
11310 Title IV-E 11-15
11320 Title II/RSDI AND Title XVI/SSI 11-15
11330 Title XIX 11-16
11400 ADOPTION SUPPORT 11-16
11410 Title IV-E Adoption Support Eligibility Criteria 11-16
11420 Title XVI 11-17
11430 Title XIX 11-17
11440 Cobra Medical 11-17
11500 PLACEMENT WITH RELATIVES OF SPECIFIED DEGREE 11-18
11510 Payment Of Foster Care Funds To Parents 11-18
11520 Temporary Assistance For Needy Families Maintenance Payments 11-18
11530 Foster Care Maintenance Payments 11-19
11600 CORRECTION OF FUNDING SOURCE 11-19
11700 INCOME/RESOURCES OF CHILD IN DSHS PAID SUBSTITUTE CARE 11-19
11800 TRUST FUNDS ACCOUNTING 11-21
11810 Regional Coordination of Trust Funds Account 11-21
11820 Special Needs Trusts 11-22
11830 Establishing a Trust Fund Account 11-22
11840 Dedicated Accounts 11-23
11850 Benefits 11-23
11860 Resources 11-23

11870 Correspondence with Trust Fund Unit....11-24
11880 Disbursements from Trust Funds Accounts....11-24
11890 Client Placement Changes....11-25
118100 Youth Remaining in Care After 18th Birthday....11-25
118110 Child Leaving Care....11-26
118120 Releasing Client Account Information....11-27
118130 Trust Fund Information....11-27
11900 FINANCIAL REVENUE RECORD ARCHIVING OR STORAGE....11-27
111000 FINANCIAL REVENUE FILE TRANSFER....11-28
111100 RANDOM MOMENT TIME STUDY....11-28
111110 Purpose....11-28
111120 Participants....11-28
111130 Headquarters Responsibilities....11-28
111140 Local Office Responsibilities....11-29
111150 Regional Administrator Responsibilities....11-30
111160 RMTS Codes and Definitions....11-30

11100 FEDERAL MATCHING FUNDS/OTHER BENEFITS

11110 INTRODUCTION

The Children's Administration (CA) Federal Funding staff shall review the circumstances of every child placed in out-of-home care to determine the child's eligibility for federal matching funds and/or other benefits.

11120 REFERRAL

A. The social worker initiates referrals to the Federal Funding Unit (or Specialist) by entering the required child/family demographics, placement, and legal action data into the appropriate CAMIS modules.

B. Paper referrals are required only in the absence of automated data.

11130 DETERMINATIONS

A. The Federal Funding Specialist (FFS) analyzes data, makes eligibility determinations, assists in the application for other financial benefits, and notifies appropriate parties of the results of these actions. Following the initial determination, the FFS provides ongoing coordination of the various funding sources that may be used in combination with one another. The FFS performs required redetermination specific to each funding source.

B. The Supplemental Security Income (SSI) Facilitator (SSIF) reviews referrals made electronically or by the FFS or child's social worker to analyze funding sources already available. SSIFs review the child's case file and speak with the social worker, foster parent, or others to screen for potential impairments to warrant an SSI application. The SSIF completes applications for Title XVI/SSI and Title II Social Security benefits and requests payee changes for children already receiving benefits.

11200 FEDERAL FUNDING PROGRAMS

A. A number of federal programs provide opportunities for claiming federal financial participation matching funds to reimburse state expenditures for eligible services. Each program has individual criteria and guidelines.

B. Below is a listing of the federal programs currently providing reimbursement (matching) funds, their individual eligibility criteria, the referral procedures, and the required follow-up by the FFS and SSIF.

11210 TITLE IV-E

11211 CATEGORICAL TITLE IV-E ELIGIBILITY FACTORS

A. Title IV-E is a federal entitlement program designed to reimburse States the maintenance and administrative costs of eligible children who are placed into department-paid substitute care. There are three categorical criteria which must be met to establish the IV-E claim: Judicial protections for the child and family; Aid to Families with Dependent Children (AFDC)-relatedness of the child in the Eligibility month; and Reimbursability criteria.

B. AFDC Relatedness

1. In the Eligibility Month the child must have had a relatedness to the AFDC program under the rules in existence as of July 16, 1996.

2. Eligibility Month: The eligibility month is the month during which a court petition for removal of the child was filed that led directly to removal of the child, or during which a voluntary placement agreement was signed. The date the child enters care does not necessarily define the Eligibility Month. See Appendix A for the definition of "Original Placement Date."

3. AFDC-relatedness test: A child meets the AFDC-relatedness test if, in the Eligibility Month, the child would have received AFDC by application of the AFDC rules in existence on July 16, 1996.

4. Living with a relative of specified degree-During the Eligibility Month:

   a. The child's home must have been with a relative of specified degree; or

   b. The child must have lived with a specified relative in any of the six months directly preceding the Eligibility Month; and

   c. The child must be physically removed from his/her home.

5. Deprivation of the support of one or both parents-The child must meet the June 1995 AFDC deprivation factors of:

   a. Death;

   b. Disability;

   c. Continued Absence; and/or

   d. Under/unemployment.

6. Need-The income and resources available to the child must be less than the July 16, 1996 State AFDC Need Standard.

C. **Judicial Determination Protections**

1. **Court Ordered Placements**

   a. In the first order of removal, the court must enter a judicial determination (finding) to the effect that continuation in the home would be "**contrary to the welfare**" of the child. Failure by the court to make this judicial determination at the proper time makes a child ineligible for IV-E funds for the entire placement episode.

   b. Prior to CA making a claim for IV-E reimbursement funds, the

court must also enter a finding that DCFS made "**reasonable efforts**" to prevent the placement of the child from his/her home. The fact that the placement was emergent in nature does not negate this judicial determination requirement.

c. Additionally, the child must be placed in the sole responsibility of DSHS/DCFS for the care and supervision of the child.

2. **Voluntary Placements**

a. The voluntary placement agreement must be signed by the parent(s) and a representative of DCFS.

b. If the child meets the AFDC-relatedness requirements, the child is eligible for IV-E matching funds during the first 180 days of placement.

D. **Reimbursability**

1. Once IV-E eligibility is established, a child is IV-E reimbursable if, in any particular month the child is in care, he/she meets a number of on-going criteria. Meeting all the following criteria qualifies the child for Title IV-E funds:

a. The court has entered a judicial determination that DSHS/DCFS made "reasonable efforts" to prevent the placement of the child; or

b. If the child was placed on a voluntary placement agreement, and the child has been in placement more than 180 days, the court must have entered an order by the 180th day of placement that continuation in care is in the child's "best interest"; and

c. The child is placed in the sole care and supervision of DSHS/DCFS; and

d. The child is under age 18, or under age 19 and in school full time and reasonably be expected to graduate before their 19th birthday; and

e. The child continues to be deprived of parental care and support in AFDC terms; and

f. The child continues to be in financial need; and

g. The child is placed in a licensed childcare facility or in the home of a relative "certified" as meeting minimum licensing requirements.

2. This is only a general overview of the IV-E eligibility criteria. The Eligibility Specialist assigned to each area has detailed information on claiming IV-E funds for children placed in department-paid substitute care.

11212 OTHER ELIGIBILITY FACTORS

A. **Repeat Removals**

1. Whenever the child is returned to the home of any biological or adoptive parent, or to the removal home of a specified relative other than the parent, with the intent that the parent assume the on-going daily supervision and control of the child, the placement episode is terminated, even if court supervision continues. If the child is re-placed into out-of-home care, all the judicial protections and AFDC-relatedness criteria must be met in order for the child to again be eligible for IV-E reimbursement funds.

2. See Appendix A for the definition of "Original Placement Date."

B. **Guardianship**

1. The entry of a guardianship order on any child in out-of-home care completes the permanent plan for the child; the Placement Episode must be closed effective the date of the guardianship order. If foster care maintenance payments will continue, the Placement Event remains open, and the source of funds is State Only.

2. In the event the child is re-placed into out-of-home care from the guardian's home, a new Placement Episode is noted in CAMIS. New "contrary to the welfare" and "reasonable efforts" judicial determinations must be obtained, even though the underlying dependency is still in effect. If the child is re-placed into care via a VPA, a court order (i.e., at a dependency review hearing) must be obtained by the 180th day of placement with the finding that it is in the child's best interest to remain in care. See Appendix A for the definition of "Original Placement Date."

C. Teen parent and infant residing together in same out-of-home facility

1. When a teen parent and infant reside in the same facility, the infant's "home" is considered to be his/her parent, NOT the foster home or other out-of-home care facility. A legal authorization-to-place is not required in order to include an amount sufficient for the infant's maintenance in the maintenance payment made for the teen parent, or to issue medical coupons for the infant. For protection of the infant, a dependency order placing the child in the temporary custody of DCFS may in some instances be appropriate.

2. Maintenance payments for teen parents residing with their infants shall be increased to also provide for the maintenance of the infant.

3. In every instance when the teen parent and infant are residing together, even if dependency is already established on the infant, a legal authorization-to-place must be obtained to keep the infant in out-of-home care should the teen parent's placement setting change so as not to include the infant.

4. **SSI Eligibility and IV-E eligible-**Any child for whom a Title XVI/SSI application is in process or for whom SSI eligibility has been established and benefits are "in pay" must have his/her source of funds coded to "state only." Exception: If maintenance payments are high cost, IV-E funding may be substituted. Please refer to IV-E and SSI desk manuals for detailed information.

11213 REFERRAL PROCEDURES FOR SOCIAL WORKERS

A. The social worker takes the following actions, or causes such actions to be taken, within 10 working days of a child's Original Placement Date (OPD).

1. Enter the appropriate child/family demographic profile information onto the child's "PERSONCARD" in CAMIS; and

2. Enter all required information in the CAMIS Legal History (ACTNLA) and Placement (PLACECR) modules. (NOTE: CAMIS will not process any SSPS payments until the required information in 1 and 2 has been entered into the system); and

3. For voluntary placement cases only, both parents sign and date a VPA. Unless legal custody resides with one parent, a good faith effort must be made and documented to have both parents sign the VPA. The social worker shall also sign and date the VPA.

4. Transmit copies of the following items, on all children placed into department-paid substitute care, **including licensed or non-licensed relative care**, within ten working days of the OPD to the FFS and/or Unit:

   a. Copies of the legal authorizations to place. Include the VPA and/or the petition and signed court order that initially authorized the out-of-home placement.

   b. If the child is re-entering foster care from an in-home dependency or from a dependency guardianship status, forward a copy of the legal document that authorizes re-entry into out-of-home care.

5. Referrals for Title IV-E eligibility determinations are not required for placement episodes that are 72 hours or less (excluding weekends and holidays) from the OPD.

B. Referrals initiated by a private Child Placing Agency in which the CPA retains responsibility for placement and care.

1. CPA referrals for maintenance payments shall be submitted within 10 working days to the DCFS local office nearest the residence of the child's legal caretaker. The referral from the CPA shall consist of:

   a. The DSHS 14-024(x) Family Face Sheet;

b. The *Source of Funds Application for Child in Placement,* DSHS 14-281; and

c. Legal authorization for placement.

2. The source of funds code for all children for whom the CPA retains sole or joint responsibility for placement and care is State Only.

11214 PROCEDURES FOR FEDERAL FUNDING SPECIALISTS

A. The Eligibility Specialist must take the following actions upon notification of each new Placement Episode:

1. Review and evaluate all the available child demographic, placement, legal action and SSI information;

2. Utilize the above information to determine the correct funding source;

3. Enter the correct funding source in the IVEUP module, and change all outstanding SSPS authorizations to coincide with the correct funding source;

4. Send an electronic referral for child support enforcement to the Division of Child Support (DCS);

5. Document eligibility information in the child's Financial Revenue File using the *Title IV-E Initial Eligibility AFDC & Legal Relatedness Summary*, DSHS 14-297, and the *Title IV-E Initial Eligibility Income Calculation Worksheet*, DSHS 14-293, where appropriate, and record the eligibility information in CAMIS;

6. Maintain the Financial Revenue File in accordance with the IV-E Eligibility Desk Manual;

7. If the child was removed from a TANF household, send a *Coordinated Benefits Referral* form, DSHS 14-226, to the appropriate CSO.

B. Re-determinations of IV-E Eligibility

1. Children who are eligible for Title IV-E funding shall have their eligibility redetermined semi-annually. The procedure replicates the procedure for new eligibility determinations, except that a new referral to DCS is not required if the Placement Episode has continued uninterrupted.

2. The information is recorded on the *Title IV-E Reimbursability Summary*, DSHS 14-298; that form, along with other supporting documents, is filed in accordance with the procedures outlined in the IV-E Eligibility Desk Manual.

B. **Title XIX-**Children who are eligible for Title IV-E funding are deemed eligible for Title XIX medical coverage.

11215 OTHER ELIGIBILITY PROCESSES

A. Adoption Support -- See section 11420.

B. Guardianships -- See section 11320.

C. COBRA Medical -- See section 11450.

11220 TITLE II/RETIREMENT, SURVIVORS, AND DISABILITY INSURANCE

A. Retirement, Survivors, and Disability Insurance (RSDI) is a federal entitlement program for adults who have worked and become disabled, retired, or died.

B. A child of an eligible parent may be a beneficiary for auxiliary benefits based on the parent's earnings record.

11221 ELIGIBILITY FACTORS

A. Title II/RSDI benefits are paid before Title XVI/Supplemental Security Income (SSI).

B. If a child's Title II/RSDI benefit is less than the current Title XVI/SSI payment and the child is also disabled, an SSI application should be made.

C. There are no income or resource limits for Title II/RSDI benefits.

D. Parental relationship(s) must be established prior to Title II/RSDI application.

E. Title II/RSDI benefits remain with the child regardless of the adoption or termination of parental rights, provided that application for the child's benefits was made prior to finalization of adoption, pursuant to Washington state inheritance law.

F. If Title II/RSDI has been established prior to a child coming into DSHS care, the SSIF will request that DSHS be made the Representative Payee, if placement will exceed 90 days.

G. If a Title II/RSDI application is needed, the SSIF will call the Olympia Branch Office to make an appointment for a teleclaim application with the local Social Security Administration (SSA) office.

11222 REFERRAL PROCEDURES FOR SOCIAL WORKERS

A. Social workers refer to the SSIF/Federal Funding Unit (FFU) all children in placement who are known or suspected to be receiving Title II/RSDI, Title XVI/SSI, or VA benefits, so that a change in representative payee can be made to "DSHS - Trust Fund Unit."

B. To screen for potential Title II/RSDI or VA benefits, social workers refer to the SSIF/FFU all children whose parents, step-parents, or adoptive parents are deceased, over 65, or disabled.

C. Social workers inform SSIFs by e-mail, in writing, or verbally, of changes in the child's placement, resources, or income or when the child emancipates, returns

home, transfers to another division, or is adopted.

11230 TITLE XVI/SUPPLEMENTAL SECURITY INCOME

A. SSI is a SSA federal entitlement program for persons with medically determinable physical or mental impairments which have or are expected to last at least 12 months. As it applies to DCFS, SSI is used to reimburse the cost for paid out-of-home care for a child with a qualifying disability.

B. Federal regulations require that SSI benefits are used for food, clothing, shelter, or other personal or medical needs.

C. In order to be eligible for Title XVI/SSI, a child must meet criteria identified in the Code of Federal Regulations (CFR), 20 CFR 400-499.

11231 REFERRAL PROCEDURES FOR SOCIAL WORKERS

A. The social worker shall refer all potentially eligible service only and placement cases to the SSIF in the Federal Funding Unit by e-mail or brief memo for assessment and application. Eligibility may include, but is not limited to, the following criteria:

1. Positive tox screen/drug affected;
2. Fetal Alcohol Syndrome/Fetal Alcohol Effect;
3. Mental Retardation;
4. Post-Traumatic Stress Disorder;
5. Behaviorally disturbed/Emotionally disturbed;
6. Cerebral Palsy;
7. Exceptional cost foster care/Group care;
8. Medically fragile child'
9. Blind or Deaf;
10. Failure to Thrive;
11. Low birth weight;
12. Attention Deficit Hyperactivity Disorder;
13. Special Education student;
14. Use of crutches or wheelchair;
15. Downs Syndrome.

B. This is only a general overview of Title II/Title XVI Programs. Please refer to the SSI Facilitator for more detailed information.

11232 PROCEDURES FOR SSI FACILITATORS

SSIFs shall meet the following requirements:

A. See that children served/placed have a Social Security identification number, or an application is filed to obtain one, and that it is entered in CAMIS (personcard).

B. Periodically, review all placement cases in CAMIS for potential application for SSI or other SSA benefits.

C. Apply for Title XVI/SSI for all referred or "screened-in" clients.

D. Facilitate the claim throughout the application process:

1. Provide required Medical Evidence Records (MER) that DCFS may possess;

2. Seek to have scheduled Consultative Examination (CE) appointments kept; and

3. Respond in a timely manner to all SSA and DDDS requests for information, placement data, and re-determination on clients for whom DSHS is payee or custodian.

E. Make requests to change the representative payee to "DSHS - Trust Fund Unit" for all clients already entitled or receiving Title XVI/SSI and/or Title II/RSDI benefits.

F. Initiate the conveyance of information regarding placement, resource, or income changes to the payer: SSA, VA, etc.

G. Coordinate all relevant financial and social information with DSHS Trust Funds accountant.

11233 ELECTRONIC DATA ENTRY AND RECORD KEEPING

A. **Electronic Data Base**

1. SSI Headquarters staff are responsible for data entry and integrity in payment fields and SSI application decision fields as well as tracking notes in CAMIS (SSIUP and/or PRSNACTN/CASEACTN) for all SSA notices and SSI status codes and dates after SSI pending status.

2. SSIFs and Regional Coordinators are responsible for data entry and integrity in all other CAMIS fields except those indicated in #1 above, including current case assignment (SSIUP/CASEUP3) and brief case action notes (PRSNACTN and/or CASEACTN).

B. **Hard Copy Paper Files**

1. SSIFs may use a "working file" during the initiation of an SSI application. However, the establishment of a Financial Revenue file should be requested of Masterfile as soon as possible, unless already created for Title IV-E. Existence of an SSI working file must be documented in both the child's service and revenue files. Clear documentation of a pending SSI action shall be indicated in SSIUP.

2. **DCFS Financial Revenue File**

   a. During a pending SSI application, the Revenue File must contain, at a minimum:

      i. Notification regarding intent to file. Copy of Interim Assistance Reimbursement Agreement (IAR).

      ii. Correspondence between SSIF and FFS regarding:

         - Request to change source of funds
         - Income/eligibility from Title II benefits
         - IV-E termination and/or reinstatement actions

   b. Once SSI eligibility is established, the following contents of the SSI working file are placed in the DCFS Financial Revenue file:

      i. SSA Correspondence

      ii. Copy of final decision (award or denial letter)

      iii. Payee change requests (SSA 11-BK)

      iv. Interim Assistance Reimbursement Agreement (IAR)

      v. SSI application (SSA 8001)

   c. If SSI eligibility is denied, written notification to reclaim IV-E as soon as possible.

3. **DCFS Service File-**For federal funding purposes, the child's Social Service File must contain, at a minimum:

   a. Documentation regarding pending Title XVI/SSI (pink sheet);

   b. Copy of award letter;

   c. Accumulated medical, social, and educational documentation, including copy of disability and function reports;

d. Exhibit file – a set of documents provided by the Social Security Administration when an appeal hearing has been held;

e. Birth certificate; and

f. Social Security Card

4. All of the above records/files shall not be archived or sent to Records Retention while SSI applications are pending.

C. Please refer to SSI Desk Manual for detailed information on procedures and record keeping.

11234 APPEALS CASES

A. If the initial disability determination is denied, the Headquarters SSI Program Manager or designated SSIF will review the SSA decision and provide consultation to regional field staff for further appeals.

B. Personal representation for all hearings and appeals will be the responsibility of the Headquarters SSI Program Manager.

C. When an Interim Assistance Reimbursement Agreement (IAR) is in place, personal representation may be extended to clients who are no longer in DSHS custody, where the SSI lump sum proceeds will benefit DSHS cost-of-care recoveries in excess of $1000.

11240 CLIENT AGED 18 THROUGH 20

The following conditions apply for Title II/RSDI and Title XVI/SSI.

A. Clients who are over age 18 must sign their own SSI applications (*form SSA-8001*) and authorizations to release information (*SSA 827*).

B. When young adults age 18 through 20 voluntarily place themselves into foster care, a copy of their voluntary placement agreement must be submitted with the Application for SSI (SSA 8001).

C. 18 - 20 Year Olds for Whom DSHS is Payee for SSA/SSI Benefits

1. **Title XVI/SSI**

a. The SSIF will provide capability development (form letter) to the local/Olympia SSA District Office.

b. If the client is determined to be incapable of managing his/her own resources, DSHS will continue to be the Representative Payee.

c. If the client is determined to be capable and receives his/her own SSI, it must be made available toward the cost of care.

2. **Title II/RSDI-**The SSA will automatically make the client his/her own payee unless incapacity has been determined. If the client is incapable, DSHS can be made the Representative Payee. If capable, the client must make the funds available for cost of care.

D. Title II beneficiaries may continue to receive benefits if they are still in high school. SSIFs will be asked to provide documentation of school attendance to the SSA.

E. For Title II beneficiaries who are 17½ years old and are disabled, but for whom no SSI application has been made, a *Childhood Disability Benefits* (CDB) claim needs to be filed. If the client is found to be disabled, the Title II benefits will continue into adulthood. The disability must be established prior to the attainment of age 22.

11250 TITLE XIX/MEDICAID

A. Title XIX is an entitlement program that provides medical and remedial services for certain individuals and families with low income and resources. There are some mandatory Medicaid eligibility groups. As it applies to CA, recipients of adoption assistance and foster care are included in the mandatory Medicaid eligible group.

B. Title XIX/Medicaid may be used to fund other services to children beyond the traditional medical services. This has been due, in part, to changes in the state Medicaid plan. Among the DCFS programs that have benefited are Behavior Rehabilitation Services/Group Care (BRS/GC), Therapeutic Child Development (TCD), and Medicaid Personal Care Services.

C. Infants of Teen Parents in Licensed Placements

1. Infants born to teen parents in foster care, where there are no protection issues and where the infant is placed with the mother in the foster home, are eligible for Medicaid. However, because there is no DSHS custody, the infant will not appear in CAMIS. Assigned CA staff must notify the FCMU by telephone or e-mail as soon as possible following the birth of the infant or placement of the teen parent with the infant. The CA staff will provide the FCMU with the child's name, birth date, address, identity of the child's mother, the mother's case number, and any other available, pertinent information.

2. Because the child's eligibility requires enrollment in a Healthy Options plan, CA staff will advise the minor mother and the foster parent of the need to make the selection of a plan as soon as the packet is received in the mail. The teen parent needs to , base the selection on the availability of the teen parent's preferred providers and on the interface of that plan with the teen parent's fee for service providers.

11251 REGIONAL RESPONSIBILITIES FOR BEHAVIOR REHABILITATION SERVICES/GROUP CARE

As part of the tasks necessary for managing Title XIX Medicaid services, the

Regional Administrator will implement procedures to determine which children are placed in BRS/GC each month.

11252 ELIGIBILITY FACTORS FOR BEHAVIOR REHABILITATION SERVICES/GROUP CARE AND THERAPEUTIC CHILD DEVELOPMENT

A. The child must be categorically needy Medicaid eligible; AND

B. For BRS/GC and TCD, a licensed medical practitioner must determine that the services are "medically necessary" for the child to function at his/her best possible level.

1. All children with a Social Security number or, for whom application for a number has been made, in out-of-home placement are considered categorically needy and, as such, are Title XIX Medicaid eligible.

   a. A child receiving BRS/GC in his/her own home may be Title XIX Medicaid eligible as determined by the DSHS Community Service Office (CSO). For a child receiving BRS/GC in his/her own home, the DCFS social worker is responsible for referring the child and his/her family to the CSO for the Medicaid eligibility determination.

   b. For a child residing in his/her own home and receiving TCD, the FSS verifies Medicaid eligibility using ACES. If a TCD child's Medicaid eligibility cannot be found in ACES, the DCFS social worker refers the family to the CSO for Medicaid eligibility determination.

2. For BRS/GC, social workers provide documentation to support the need for this level of care following regional procedure.

   a. Documentation is submitted to CA Headquarters at the time of the initial use of BRS/GC, when a break in service occurs, and annually thereafter. See the Title XIX Desk Manual for specific details.

   b. The Individual Service Plan (ISP) or other documentation (e.g., psychological evaluation, medical records, etc.) is forwarded by Headquarters staff to the Nursing Care Consultant for review.

   c. If the documentation supports the need for this level of care, a Statement of Medical Necessity is written and returned to the region.

3. The ISSP ordinarily contains sufficient information to support the need for this level of care. The regional staff needs to avoid sending large amounts of information to Headquarters. If the ISSP does not contain sufficient information to support the need for this level of care, the social worker will be contacted for further documentation; e.g., psychiatric evaluation, drug/alcohol evaluation, Individual Education Plan (IEP), etc.

4. In the event there is no ISP for the child, the worker will follow regional procedures as to which documents will be submitted. When Medicaid eligibility is received, the child is eligible for Title XIX reimbursement.

5. For TCD, the provider is responsible for submitting the statement of Medical Necessity to the FFS.

11253 REFERRAL PROCEDURES FOR SOCIAL WORKERS

Refer to the CA *Practices and Procedures Guide* for instruction in the use of Title XIX services:

A. For Medical and Dental Services for children in out-of-home care, see chapter 4000, section 4517;

B. For TCD, see chapter 4000, section 4504;

C. For Personal Care Services, see chapter 4000, section 4526;

D. For BRS/GC, see chapter 4000, section 4533.

11254 PROCEDURES FOR FEDERAL FUNDING SPECIALISTS

A. The FFS determines eligibility for DCFS Title XIX programs.

1. The FFS must verify Title XIX Medicaid eligibility for in-home services, using ACES, print the screen, enter the information onto the XIXELIG screen in CAMIS, and file the printout, including the date, in the child's revenue file. If a child is in a DCFS-paid placement, the child is automatically Medicaid eligible.

2. The FFS must receive a Statement of Medical Necessity form, signed by a licensed medical practitioner, for TCD and BRS Title XIX services.

   a. Statement of Medical Necessity forms indicate that the information is valid on the service begin date (SBD) for TCD and BRS/GC.

   b. The FFS enters the information onto the XIXELIG screen in CAMIS and files the signed Statement of Medical Necessity (SMN) in the child's revenue record.

   c. SMN forms must be received annually for as long as the child receives uninterrupted TCD or BRS/GC services.

B. The FFS reviews and/or re-determines eligibility every 90 days. If TCD or BRS/GC services continue without interruption, then a new Statement of Medical Necessity (SMN) is required annually. See the Title XIX Desk Manual for exceptions.

C. The FFS maintains the CAMIS record and the child's Revenue File. See chapter 13000, section 13410. CAMIS Title XIX information is entered onto the XIXELIG screen.

D. For TCD, the FFS updates authorizations to correct source of funds as needed. If the child is not categorically needy Medicaid eligible, then source of funds (SOF) code 5, state funds, is used. **NOTE:** For TCD, if the family is required to make a co-payment but does not pay it, the SOF code must be 5.

E. For TCD and BRS/GC, the FFS reviews/redetermines Medicaid eligibility every 90 days.

1. The FFS completes an ACES search for evidence of Medicaid eligibility, makes screen print, and files it in the child's revenue record.

2. The FFS files the Statement of Medical Necessity forms received from service providers for TCD and the Nurse Care Consultant for BRS/GC in the child's Revenue File.

3. The FFS must update TCD authorizations to correct SOF codes if eligibility ends. A signed and dated copy of the screen print must be filed in the child's Financial Revenue file and another copy forwarded to clerical staff if the SOF code changed.

11300 GUARDIANSHIPS

11310 TITLE IV-E

A. On Title IV-E eligible and/or reimbursable children for whom dependency guardianship orders have been entered, pursuant to RCW 13.34.231, the Placement Episode shall be closed effective the date of the court order. The Placement Event, however, remains open if foster care maintenance payments continue.

B. <u>In every instance</u>, the child loses Title IV-E eligibility upon establishment of a guardianship. The guardianship code and the date of the legal action that established the guardianship are entered into CAMIS. (NOTE: The child may still qualify for SSI or Title XIX funding; consult the Regional FFU for the correct funding source).

C. A child removed from a guardianship and placed again into other department-paid substitute care always begins a new Original Placement Date (OPD).

1. Upon removal from the guardian's home, the initial removal order must contain a "contrary to the welfare" judicial determination. In addition, prior to reestablishing IV-E eligibility, the court must make a judicial determination that DCFS made reasonable efforts to prevent the placement.

2. Refer the case to the FFS for a new determination of Title IV-E eligibility, per section 11210.

11320 TITLE II/RSDI AND TITLE XVI/SSI

A. Title II/RSDI and Title XVI/SSI applications are made for DSHS-paid foster

parent/guardianship placements.

B. Guardians must sign the *Authorization to Release Information*, SSA-827.

C. DSHS is to be the representative payee for all children in DSHS-paid foster care/guardianships.

11330 TITLE XIX

Eligibility for Title XIX is not affected by guardianship status.

11400 ADOPTION SUPPORT

A. All children for whom application for adoption support payments has been made shall have an adoption support specific funding source determination completed. (Note: The foster care funding source may or may not be applicable for adoption support payments.)

B. Upon request of the social worker who applies for an adoption subsidy for a legally free child, the FFS will determine eligibility for possible funding sources.

11410 TITLE IV-E ADOPTION SUPPORT ELIGIBILITY CRITERIA

A. On all children for whom an adoption support application is being completed, the child's social worker shall refer the case to the appropriate eligibility specialist for determination of the child's eligibility for title IV-E adoption support benefits.

B. The eligibility specialist will return an *Adoption Support Monitoring Schedule*, DSHS 14-319, to the child's social worker noting the child's eligibility for IV-E funding. The adoption support program manager must not process the application unless this form is included with the application. The FSS will review positive determinations of Title IV-E Adoption Support eligibility every six months until the child is adopted or until the FSS has verified the month that the adoption petition was filed. At each review, the specialist will forward a copy of the form to the Adoption Support program manager. The Adoption Support program manager or the social worker may request a review of any child's previously denied Adoption Support eligibility determination.

C. **SSI Eligible Children**

1. Any child for whom SSI has been applied prior to adoption and who is later found to be eligible for SSI benefits prior to the final decree of adoption is deemed eligible for Title IV-E Adoption Support services. (NOTE: The child need not have received SSI benefits, but must be eligible for receipt of SSI funds.)

2. Written verification of SSI eligibility must be contained in the child's file.

D. **Relative Adoptions**

1. Children who are going to be adopted by a relative of specified degree meet the AFDC and judicial determination tests by federal policy. Actual documentation of the child meeting the AFDC relatedness and judicial

determination protection requirements at the beginning of the placement episode is not required.

2. At the time of the filing of the petition to adopt, the child must meet the financial need and deprivation of parental support tests.

E. **All Other Children**

1. Children who are not SSI eligible, or who are not being adopted by a relative of specified degree, must meet the AFDC and judicial determination tests in the last Placement Episode that led directly to the termination of parental rights.

2. The Eligibility Specialist shall make a determination of the child's eligibility for IV-E Adoption Support benefits. Since it is possible for a child to be ineligible for IV-E foster care benefits but eligible for Adoption Support IV-E benefits, an eligibility determination specific to Adoption Support must always be performed.

F. Previously Eligible Children

1. Any child with special needs who had been previously eligible for Title IV-E Adoption Support will automatically be eligible for Title IV-E Adoption Support again if the child is adopted a second time because the first adoption was terminated or the adoptive parents died.

11420 TITLE XVI

A. Adoption support standards require SSIF screening and potential application for SSI benefits prior to adoption support decision-making. SSIFs must coordinate application information with the adoption social worker and the adoption support staff.

B. SSI with an application date prior to the date of Petition for Adoption will ensure IV-E eligibility for adoption support payments.

C. Adoption finalization shall not be delayed because an SSI application is pending. However, if an application is pending adjudication or appeal, the social service and financial files are not archived pending outcome by SSA.

11430 TITLE XIX

Children receiving Adoption Support subsidies are categorically needy Medicaid eligible and thus may be eligible for DCFS Title XIX services, such as TCD.

11440 COBRA MEDICAL

A. The Consolidated Omnibus Budget Reconciliation Act (COBRA) of 1985 permits Title IV-E eligible children receiving adoption support benefits to receive Medicaid in their state of residence. COBRA guarantees a uniform level of medical services for Title IV-E eligible children nationwide.

B. Adoptive parents of Title IV-E eligible children from other states who move into

Washington need to apply for COBRA medical from:

Adoption Support Program
DSHS - Mail Stop 45710
P. O. Box 45710
Olympia, WA 98504-5710
Phone: Toll free 1-800-562-5682 (3)

C. Children placed by Interstate Compact on the Placement of Children (ICPC) in another state may be reciprocally eligible for COBRA in that state. The social worker consults with the FFS to determine and document IV-E eligibility/reimbursability to be sent with the ICPC documents to the receiving state. See also the CA *Practices and Procedures Guide*, chapter 5000, section 5600.

D. Adoptive parents of Title IV-E eligible children who move from this state to another state of residence must apply for COBRA medical in their new state of residence. The adoption support program manager in the region the child resides will send a letter to the new state verifying Title IV-E eligibility and reimbursability.

E. Adoption support children not Title IV-E eligible from Washington are deemed Title XIX Categorically Needy medically eligible. Their medical coupons may be issued by the state of Washington or, by their resident state, IF their resident state is a state that is a member of Interstate Compact for Adoption and Medical Assistance (ICAMA) and has agreed to reciprocate medical coverage for non-Title IV-E children.

F. Children moving into Washington state who are not certified by their state of origin as Title IV-E eligible shall receive medical coverage from their state of origin, except that**,** if the state of origin is an ICAMA member state, Washington will also provide medical coverage for that non-IV-E eligible child.

11500 PLACEMENT WITH RELATIVES OF SPECIFIED DEGREE

11510 PAYMENT OF FOSTER CARE FUNDS TO PARENTS

Natural, adoptive, and stepparents shall not be authorized to receive foster care payments. While a termination-of-parental rights order severs the relationship between parent and child, federal regulations specifically prohibit the payment of Title IV-E funds to that parent should the child be subsequently replaced with the parent.

11520 TEMPORARY ASSISTANCE FOR NEEDY FAMILIES MAINTENANCE PAYMENTS

A. The social worker shall inform the relative of his/her option to apply for Temporary Assistance for Needy Families (TANF) or foster care maintenance payments. The TANF benefits may be greater or less than the foster care payments, depending on the child's age, any special needs, and the number in the assistance unit.

B. A relative may be eligible to receive TANF maintenance payments for a child placed with him/her. The relative must apply for TANF benefits at the local CSO for a determination of eligibility.

C. The relative home need not be certified or approved as meeting the minimum foster home licensing standards as a condition of receipt of TANF benefits.

11530 FOSTER CARE MAINTENANCE PAYMENTS

A. Relatives of specified degree have the option of choosing TANF or foster care maintenance payments for children placed with them by DCFS.

B. To receive foster care payments, the relative's home must be licensed as meeting minimum foster home licensing standards to receive foster care payments.

C. For the infant residing with the minor parent, the substitute care maintenance payment for the infant plus the maintenance payment for the minor parent, is totaled into one sum payment to the out-of-home care provider. This increased amount is authorized as part of the minor parent's maintenance payment. See chapter 13000, section 13230, for requirements relating to case records for infant children residing with their minor parents.

11600 CORRECTION OF FUNDING SOURCE

Every department-paid substitute care payment charged to an incorrect funding source must be changed to reflect the correct source, both in the authorization and accounting systems.

A. Changes are made at the point of discovery of the incorrect charge.

B. Corrections of payment are made by using the CAMIS COPCR procedure.

11700 INCOME/RESOURCES OF CHILD IN DSHS PAID SUBSTITUTE CARE

A. A child in department-paid substitute care may have:

1. Earned income (wages);

2. Unearned income (Social Security, SSI, VA benefits); and/or

3. Resources (bank accounts, bonds, stocks, automobiles, personal property).

B. Each of the above three categories is additionally classified as either:

1. **Exempt income** - not included when considering if a child is eligible for a particular federal funding source nor when determining a child's possible participation in the cost of care.

2. **Non-exempt income** -

a. Unearned income - If the non-exempt income is unearned income,

it shall be used to cover the child's cost of care, except for resources held in trust for an American Indian child.

b. Earned income - If the non-exempt income is earned income or resources, it may be used to cover the cost of care. The exempt earned income/resources standards which applied to AFDC also apply to children in department-paid substitute care.

3. **Title IV-E**

a. The exempt plus non-exempt income must be totaled to determine the child's total gross income per month. The total must be below 185 percent of the child's cost of care for Title IV-E reimbursability to continue. AND

b. The child's non-exempt resources (including trust fund balances) cannot exceed $1,000 for any given month. AND

c. The non-exempt earned income plus the non-exempt unearned income (total non-exempt income) must total less than the child's cost of care, defined as the payment standard: Room and board, clothing, personal and incidental allowance, and specialized rates. Additional rates through the Exceptional Cost Plan (ECP) or Exception to Policy (ETP) processes are not included.

d. The FFS determines if the child receives Title XVI/SSI funds. A child is not eligible to receive both SSI and Title IV-E simultaneously. The FFS terminates one or the other based on the best interest of the child and/or the greater benefit to the state.

e. If the child is employed full time and not in school, the source of funds is state only. See also paragraph "g" below.

f. Excluded student earned income. The following types of earned income are not counted for Title IV-E purposes:

i. The earnings of a child 19 years old or younger who is a full time student in grade 12 or below, or the equivalent level of vocational training; or

ii. The earnings of a child under the age of 18 who is attending school part time in grade 12 or below and is not employed full time.

g. Child's participation in the cost of care. The state must take into account the earnings of every foster child not considered a student (see above). The earned income disregards are applied to the earnings before determining what portion of the child's cost of care will be recovered from the child's earnings.

4. **Title II/RSDI-**There are no income or resource considerations in determining eligibility for RSDI.

5. **Title XVI/SSI**

   a. Income and resource limitations are strictly enforced by the SSA.

   b. All earned and unearned income must be reported to the SSA. Social workers report all income and known resources to their SSIF for forwarding to the SSA. Reports of income and resources are entered by SSIF into SSI tracking module in CAMIS.

   c. Earned and unearned income are calculated according to various SSA formulas. All or some of the income may be considered to reduce the SSI benefit.

   d. The cash resource limitation for SSI is $2000. The client is ineligible for SSI in any month where total savings (including what is held in Trust Funds Accounting and whatever may be held in the child's name by a parent or foster parent) exceed $2000.00.

6. **Title XIX**

   a. Children with a Social Security number and in paid out-of-home placement are Medicaid eligible categorically needy. Social workers authorize SSPS code 4810 for medical coupons, unless the child is enrolled in a Healthy Options plan.

   b. In non-placement cases (e.g. TCD), Medicaid eligibility is determined in the CSO. The FFS documents Medicaid eligibility in the Revenue File.

11800 TRUST FUNDS ACCOUNTING

A. Trust funds accounting is the exclusive mechanism in the DSHS Office of Accounting Services (OAS) to receive, disburse, and reimburse costs of care from any income, benefits, or resources of a child in out-of-home placement or resident in a Juvenile Rehabilitation Administration (JRA) facility. The Children's Trust Fund was established by RCW 74.13.060 designating the Secretary of DSHS as custodian of funds for persons placed with the department. The delegation of this responsibility is assigned as follows:

   1. Trust Fund Unit - accounting and disbursement of all funds;

   2. Headquarters Division Staff - interpreting program policies;

   3. Social Service Staff and Regional Trust Funds Coordinators - case management.

11810 REGIONAL COORDINATION OF TRUST FUNDS ACCOUNT

A. In each region, Regional Administrators have delegated the authority for Trust

Funds Coordination to a Federal Funding Coordinator. Coordinators work, according to local procedures, with social work staff, SSI Facilitators, and, in some instances, with the Regional Business Managers to authorize expenditures or plans for conserving a child's trust fund resources.

B. Whenever a client is also receiving or is eligible for any federal entitlement program benefits (Medicaid, SSI, IV-E, etc.), the presence of additional resources must be analyzed to determine how that resource will affect eligibility for continued benefit payments.

C. Examples of potential assets include: SSI lump sum settlements due to the Zebley Supreme Court decision, gifts from relatives, inheritances, casualty or life insurance settlements, tort claim settlements, Social Security Survivor's benefits, and victims of crimes compensation, VA benefits, Railroad Retirement, and L & I benefits.

D. Generally these assets are used to reimburse for the cost of care, especially if the reason the child is in care is due to the same reason the benefits are being paid. However, there may be times when a decision is made to conserve resources for future needs of the child. These decisions can be made at the regional level following local procedures as to whether the available money is used for reimbursing the cost of care or is placed in a protective status. Often these resources will be in a protected account in the child's name and are not readily available to the child or current care-giver. Their protected status, however, may not be specific enough to prevent disqualification from federal entitlement and may need to be placed in a "special needs or Medicaid qualifying trust."

11820 SPECIAL NEEDS TRUSTS

A. A CA Headquarters SSI program manager has responsibility for assisting Regional Coordinators and social workers in obtaining Special Needs Trusts for some clients with large monetary assets, where appropriate and cost efficient. Regional coordinators may contact the Program Manager for further assistance as soon as a need for a special needs trust is identified.

B. Cooperative work with the Office of the Attorney General and private attorneys may result in trusts being established to protect the client's resources, ensure continued eligibility for federal entitlement programs, and provide a mechanism for disbursements for special needs.

C. The completed trust document must be court approved, preferably submitted by the assigned DCFS social worker.

11830 ESTABLISHING A TRUST FUND ACCOUNT

A. When a child enters DCFS care, the client's social worker, in cooperation with the FFS or SSIF, determines if the client is entitled to any benefits or has available resources. Any available benefits or resources must be sent to the Trust Fund Unit.

B. Most trust fund clients receive either Title II/RSDI or Title XVI/SSI benefits. A

small number of clients receive moneys from other miscellaneous sources.

11840 DEDICATED ACCOUNTS

A. The Social Security Administration (SSA) will pay directly by electronic bank transfer to a "dedicated account" any SSI benefits which exceed 6 times the monthly benefit amount, (except when payment is under an IAR).

B. Dedicated accounts are managed by the DSHS Trust Fund Unit and questions about the dedicated accounts may be referred there. See section 118130.

C. Funds in the dedicated account may not be used for maintenance purposes, but may be used for the special medical, educational and adaptive use of the client. Requests for permission to use these moneys must be submitted to the Trust Fund Unit, which will then submit to SSA for approval.

D. When a client leaves care, any remaining balance will be returned to SSA for transfer to another dedicated account set up by the new Representative Payee.

11850 BENEFITS

A. The SSIF must apply with the appropriate agency (SSA, VA, etc.) for DSHS to be made payee for client benefits. For Title II and Title XVI the SSIF must submit a *Request to be Selected Payee*, SSA-11-BK, "change of payee" application and forward a copy of the application to the Trust Fund Unit.

1. SSIF is responsible for applying for benefits or applying for a change of payee, unless otherwise designated by a local office.

2. SSIF is responsible for entering client data regarding payee change or benefits request into SSI tracking in CAMIS. After a request for payee change has been done, it takes approximately two months for the payee change to be made to DSHS. The social worker or other staff, in accordance with regional procedures, must notify the client's current payee to return any additional payments received to the appropriate agency (SSA, VA, etc.) or forward to the Trust Fund Unit until DSHS is named payee.

3. If the client is age 18 or over and becomes or remains his/her own payee, the social worker arranges for monthly benefits to be endorsed and forwarded to the DSHS Trust Funds Unit. (see section 118130)

11860 RESOURCES

A. Any available resources (settlements, insurance benefits, inheritances, etc.) must be forwarded to the Trust Fund Unit, along with any relevant documentation or court orders pertaining to these funds.

B. When funds are received, they will be used to reimburse DSHS for the client's cost-of-care unless there are legal restrictions on their use or an approved case plan.

C. Case plans for savings or expenditures must be approved by the child's social

worker and the Regional Trust Funds Coordinator.

11870 CORRESPONDENCE WITH TRUST FUND UNIT

A. **Agency Notices**

1. Any correspondence received from the various agencies will be forwarded to CA for distribution. Social workers, FFS, or SSIFs must review these notices and take any necessary action. For Title II/RSDI and Title XVI/SSI cases, the SSIF are available to assist the worker in resolving any problems. Title II/RSDI and Title XVI/SSI notices are noted in the SSI Tracking module of CAMIS by the Headquarters SSI eligibility specialist. Changes in benefits, notices of over and underpayment, etc., are analyzed for correctness.

2. Field staff or Headquarters SSI staff need to give particular attention to notices regarding rates, termination of benefits, and overpayments. Workers must notify the Trust Fund Unit and the appropriate agency immediately if information on notices is incorrect. The Trust Fund Unit has limited knowledge of the client's case and, therefore, must assume information is correct and proceed accordingly.

B. **Notification of Excess Client Funds**

1. Client accounts are audited on a bi-annual basis. If the Trust Fund Unit Financial Coordinator determines that a client has excess funds, the SSIF will receive an e-mail notification of the amount.

2. Spending of these funds is optional, unless the notification indicates that the client balance is nearing or over the SSI resource limit. Trust Fund Unit staff will update the client's CAMIS SSI record to list the current available balance in the Trust Fund as of that date.

3. If funds are not used right away, workers will need to confirm the balance with Trust Fund staff prior to making future spending plans.

11880 DISBURSEMENTS FROM TRUST FUNDS ACCOUNTS

A. The responsible social worker or SSIF may request a withdrawal from an account if the client has available funds. Funds can be used for any goods or services that directly benefit the client. Larger items or adaptive equipment must go with the child should he/she change foster homes, return home, or emancipate. The request contains the following:

1. List of items or services to be purchased.

2. Payee name and address. The payee is usually the foster parent. The payee cannot be the client unless at least 18 years of age.

3. Worker signature. Electronic E-mail request is acceptable with the social worker's own log-on identification.

4. Exceptional requests for expenditure or conservation of funds must be approved according to regional guidelines with the Regional Trust Funds Coordinator.

5. The OAS Trust Funds Unit will disburse from a child's account to reimburse for costs of care, reimbursing first for basic maintenance and then any other allowable costs. All authorizations and payments must be in SSPS, through CAMIS, and child specific**.**

11890 CLIENT PLACEMENT CHANGES

A. The social worker or SSIF, in accordance with regional procedures:

1. Notifies, in writing, the appropriate agency (SSA, etc.);

2. For SSI clients, notifies SSA immediately by FAX as such changes may affect client SSI eligibility; and

3. Updates CAMIS placement screens in PLACEUP and SSIUP.

118100 YOUTH REMAINING IN CARE AFTER 18TH BIRTHDAY

A. Under approved circumstances, the youth may remain in licensed care after his or her 18th birthday, but placement must end before the youth's 21st birthday. The effect on the client's Trust Fund account is as follows:

1. **Title XVI/SSI**

a. There is no change to the client's Trust Fund account. The Trust Fund Unit will continue to receive payments and reimburse for cost-of-care. Any remaining balance will be disbursed to the client upon leaving care.

b. The client over age 18 authorizes the department to remain the payee by signing the *Voluntary Placement Agreement*, DSHS 09-004B). A copy of the VPA is forwarded to the Trust Fund Unit with a written explanation of the proposed time-limited plan.

2. **Title II/RSDI and VA**

a. Payments will normally stop when the client turns 18 years of age. If the client remains in high school, the client will need to apply to the SSA or VA for an extension of benefits. SSIF will receive SSA notices of upcoming termination and will assist in applying for continued benefits if the child remains in high school. If an extension is granted, payments will be sent directly to the client. The client will need to endorse these payments and send them to the Trust Fund Unit to be used to reimburse for cost-of-care. Any balance accumulating in the account will be held until the client leaves care.

b. If a Title II/RSDI client has evidence of any physical or mental

impairment, an application for *Childhood Disability Benefits* (CDB) is made to continue the benefits into adulthood. Disability must be established prior to the attainment of age 22.

3. **Other Benefits**

a. Legal settlements, insurance benefits, inheritances, for example, do not alter the Trust Fund account.

b. Any non-exempt available funds will continue to be used for ongoing cost-of-care reimbursement and approved special needs.

c. Any account balance will be held until the client leaves care.

118110 CHILD LEAVING CARE

A. When a client leaves care, his/her Trust Fund account will be closed. Any remaining balance will be returned to SSA, to the client if age 18 or above, or to the client's new custodian, who needs to apply to be payee for the client's benefits.

B. Parents, guardians, relatives, or adoptive parents must go to the nearest SSA office to apply to be the child's payee. This should be done as soon as a new placement or return home occurs.

C. To close an account, the social worker or SSIF:

1. Notifies the Trust Fund Unit in writing or E-mail, providing the following information:

a. Type of change in status (returned home, adopted, adult placement, maturation, death, etc.);

b. Name and address of new custodian; and

c. CAMIS person ID of the child.

2. Notifies the appropriate agency (SSA, VA); and

3. Notifies client's new custodian to apply to be payee.

D. It takes approximately two months for the payee to change. If requested **and approved by the agency providing benefits**, the Trust Fund Unit will forward payments until the payee changes.

E. For Title XVI/SSI clients, the Trust Fund Unit will not forward payments when clients return home or are adopted, unless authorized by SSA. Clients' continuing SSI eligibility will be based on parents' income determined by the SSA.

118120 RELEASING CLIENT ACCOUNT INFORMATION

A. The client's foster parents or family will sometimes have questions regarding the child's Trust Fund account. The social worker or SSIF contacts the Trust Fund Unit to clarify these questions or concerns and then releases account information at their own discretion. Under no circumstances shall DCFS staff give the names or telephone numbers of Trust Fund Unit staff to anyone outside of DSHS.

B. Upon request, an accounting of a client's Trust Fund account can be sent to the worker to review and release as appropriate. Trust Fund Accountability Statements can be released directly to other DSHS divisions. For example, workers may refer the Division of Child Support to the Trust Fund Unit, whose staff will work directly with them to provide the information that division needs.

118130 TRUST FUND INFORMATION

A. Forward payments on transmittal to:

DSHS Trust Fund Unit
P. O. Box 9501
Olympia, WA 98507-9501

B. Forward correspondence to:

Trust Fund Unit
Mail Stop: 45842
O. Box 45842
Olympia, WA 98504-5842
Telephone: (360) 902-8284
CAMIS ID: KEGK300
FAX Number: (360) 902-8213
Employer ID: 91-6001088

C. NOTE: Requests for disbursement can be made through CAMIS E-Mail to CAMIS ID: KEGK300

D. When forwarding payments or correspondence to the Trust Fund Unit, the following information must be included:

1. Client name;

2. CAMIS person ID;

3. Client date of birth; and

4. Client Social Security Number.

11900 FINANCIAL REVENUE RECORD ARCHIVING OR STORAGE

See chapter 13000, section 13920, for information regarding archiving and storage of Financial Revenue Files.

111000 FINANCIAL REVENUE FILE TRANSFER

See chapter 13000, section 13831, for information regarding transfer of Financial Revenue Files.

111100 RANDOM MOMENT TIME STUDY

111110 PURPOSE

A. The Random Moment Time Study (RMTS) is used to generate statistically valid statewide estimates of various activities performed by CA staff.

B. The sampling procedure is designed to satisfy federal financial participation requirements for claiming matching funds for social service staff salaries and benefits and to provide audit documentation for state and federal review.

111120 PARTICIPANTS

A. All CA service and FFS workers participate in the time study.

1. The RMTS contacts all service workers and eligibility specialists.

2. Excluded from the sample, although their salaries and benefits are included in federal reimbursement, are students, interns, Home Support Specialists, support staff, intermittent staff, after-hours staff, Community Resource Program Managers, Social Workers 4, Social and Health Program Managers, and other management staff.

111130 HEADQUARTERS RESPONSIBILITIES

A. The RMTS Headquarters staff is responsible for the following actions:

1. Generate each quarter an RMTS contact list for each work day of the quarter. The contact list has three variables: Random Starting Time; Random Interval Time; and Random Employee List.

2. Complete the telephone samples at the random moments.

3. Gather through telephone contact or FAX mail the following information from the social service or financial revenue worker or the local RMTS coordinator.

a. Status of the worker: on the job; on work break; position vacant; on job rotation or temporary assignment elsewhere.

b. If on the job, the Headquarters staff informs the worker that an RMTS sample is being made.

c. The Headquarters staff asks the worker for the code that best describes the worker activity at that moment. If a case specific activity is reported, the staff asks the worker for the following information: Case number; case name; SSPS primary placement payment code; legally free status of the child; and specific activity.

4. The Headquarters staff completes the contact log with the information reported by the worker, enters it into the data base, and mails a copy to the RMTS coordinator.

5. If a worker is unavailable for telephone contact, the Headquarters staff FAXes a contact log to the RMTS coordinator for completion by the worker. The worker completes the contact log in a timely manner so that the RMTS coordinator is able to FAX it back to Headquarters with 72 hours of the sample time.

6. The Headquarters staff logs uncompleted contacts and follows up with the RMTS coordinator to ensure that contact logs are returned in a timely manner.

7. On a monthly and quarterly basis, the Headquarters staff generates a survey data summary.

8. The Headquarters staff updates the service worker list as worker employment status changes are reported by the worker's supervisor or RMTS coordinator.

111140 LOCAL OFFICE RESPONSIBILITIES

A. The clerical supervisor is responsible for designating an RMTS coordinator and trained back-up coordinator.

B. Social work supervisors are responsible for training social workers on the RMTS system and the code definitions, with Headquarters RMTS staff available to provide consultation and training to workers upon the supervisor's request.

C. The social service or FFS worker is responsible for the following actions:

1. Upon contact:

a. Report the appropriate code from the social worker activity code descriptions. See Random Moment Time Study Codes.

b. Report the case number, case name, specific activity, primary SSPS placement payment code if the activity is case specific, and if the child is legally free for adoption.

2. If unavailable when a RMTS call was attempted, the social service or FFS worker, upon return to the work station, completes the contact log and promptly returns it to the local RMTS coordinator for return to the Headquarters staff within 72 hours of the sample time.

D. The local RMTS coordinator:

1. Updates the participating employee list quarterly, as requested by Headquarters RMTS staff.

2. Uses the following procedures:

   a. Receives the Headquarters staff phone contacts for workers and distributes for completion.

   b. Follows through to ensure that the workers' complete the contact and FAX it back to Headquarters within 72 hours of the sample time.

   c. Maintains a file for all completed RMTS contact logs. Files the RMTS contact logs in chronological order by date and time of contact. Retains the present and two previous quarters' completed contact logs.

111150 REGIONAL ADMINISTRATOR RESPONSIBILITIES

A. The Regional Administrator ensures that the clerical supervisor appoints a RMTS coordinator for each of the region's field offices. Social workers or any other DCFS staff person who may be sampled as part of the time study cannot be a coordinator.

B. The Regional Administrator ensures that any change in RMTS coordinator is reported to the RMTS Headquarters staff by the responsible field staff person.

111160 RMTS CODES AND DEFINITIONS

A. When an RMTS observation contact is requested, social workers and FSS report to the Headquarters staff the activity code which best describes their activities at the moment of contact. If the activity is not specific to a child, the workers choose from Codes A, D, H, K, or L. If the activity is specific to a child, the workers choose from Codes B, C, E, F, G, I, or J, based on the definitions for the codes and the child's status.

B. Social workers and FFS use the RMTS codes and definitions contained in the *RMTS Codes and Definitions* publication when identifying activity.

CHAPTER 12000 AGENCY LICENSING

CHAPTER 12000 AGENCY LICENSING 12-1
12100 INTRODUCTION 12-1
12110 Basic Practice Considerations 12-1
12120 Legislative Intent 12-1
12130 Licensing of Department Employees 12-1
12200 PRE-APPLICATION INFORMATION 12-1
12300 LICENSING AND RE-LICENSING 12-2
12310 Application 12-2
12320 Licensing Study 12-2
12330 Decision on Licensure/Certification 12-4
12340 Re-licensing/Re-certification 12-5
12350 Re-Evaluation 12-6
12400 COMPLAINT INVESTIGATION 12-7
12500 ACTION ON LICENSES/CERTIFICATION 12-7
12600 SUPPORT SERVICES FOR AGENCIES 12-8
12610 Training 12-8
12710 Licenser Role 12-9
12800 FILE MAINTENANCE 12-10
12900 PUBLIC DISCLOSURE 12-10

12100 INTRODUCTION

12110 BASIC PRACTICE CONSIDERATIONS

A. Chapter 74.15 Revised Code of Washington (RCW), extracted in booklet form DSHS 22-101, and the Minimum Licensing Requirements (MLR) contained in Washington Administrative **CODE (WAC) 388-73, EXTRACTED IN BOOKLETS DSHS 22-07, DSHS 22-**08, DSHS 22-10, DSHS 22-11, DSHS 22-12 and DSHS 22-047, constitute the basic practice guide for licensers of child placing agencies (CPA), rehabilitative treatment/group care facilities, crisis residential centers (CRC), maternity services, day treatment programs, overnight youth shelters, and secure crisis residential centers. This chapter contains complementary information and is primarily focused on out-of-home care licensing activity for regional licensers.

B. The publication *Office of Child Care Policy (OCCP) Methods and Practices* constitutes the basic practice guide for licensers of child day care facilities, including family homes and centers. Licensers of these facilities need to refer to that publication for expectations and requirements.

12120 LEGISLATIVE INTENT

A. The legislature believes that children placed in foster care are particularly vulnerable and have a special need for placement in an environment that is stable, safe, and nurturing.

B. The legislature believes that foster homes should be held to a high standard of care, and department decisions regarding denial, suspension, or revocation of foster care licenses should be upheld on review if there are reasonable grounds for such action.

Chapter 302, Laws of 1995, Section 1

12130 LICENSING OF DEPARTMENT EMPLOYEES

A. CA *Practices and Procedures Guide*, chapter 5000, section 5138, outlines conditions under which Children's Administration (CA) employees may be licensed as foster family home parents or certified as adoptive parents.

B. See section 5138 for limitations on licensing of CA employees as foster parents or on their certification as adoptive parents and steps to follow in the licensing and certification process. The section also outlines the role of private child placing agencies

12200 PRE-APPLICATION INFORMATION

A. Staff designated by the Regional Manager for the Division of Licensed Resources (DLR), Office of Foster Care Licensing (OFCL), provide information about children's agency licensing requirements, on-site feasibility studies, and assist agencies in the development of policies and procedures, upon request.

B. The Regional Manager establishes procedures to give out forms and other pertinent information, either at an interview or by mail. The application packet provided to the potential applicant includes those documents and materials

prescribed by regional procedures.

12300 LICENSING AND RE-LICENSING

12310 APPLICATION

A. The regional OFCL office receives and date-stamps applications for licensing or certification, with accompanying documents, from prospective licensees, according to regional procedure.

B. Once the licenser has determined that the applicant has submitted a completed and signed application, the licenser records the application in CAMIS and conducts an on-site review and assessment and then makes a decision within 90 days of receipt of the application to approve or deny the license/certification.

12320 LICENSING STUDY

The usual steps for processing an application are:

A. The licenser or clerical person designated by regional procedure enters the application information into the Case and Management Information System (CAMIS) licensing module, makes up a file folder, and checks Division of Children and Family Services (DCFS), DLR, and local office records, including CAMIS, for prior involvement with the agency.

B. The clerk or licenser mails out reference letters to the people designated by the applicant, with return envelopes stamped with the licenser's name.

C. The licenser, or support staff, submits completed forms to perform a criminal background check, as outlined in chapter 5000, section 5500. Background checks are to be completed for all persons age 16 and above, not placed by DCFS, residing in the facility. For applicants and/or their current or prospective employees or foster parents who have resided in the state less than three years, fingerprint checks must be completed. See section 5500 for steps to follow. The assigned staff completes a CA records check in CAMIS as part of the background check.

D. Following receipt of the application packet, the licenser makes contact with the applicant to inform the applicant that the process has started and to coordinate a time-frame for a discussion of the proposed program. If the licenser makes initial contact by telephone, the licenser follows up with a letter to ensure that the applicant has the information in writing along with the licenser's name and telephone number for future use.

E. Residential Care Facilities/Agencies

1. The licenser completes an evaluation of the agency application and proposed program, using a checklist appropriate to the licensing request: The DSHS 10-51B, *Checklist for Licensing or Certification of Group Care Facilities*; DSHS 10-51C, *Checklist for Licensing or Certification of Day Treatment Programs*; DSHS 10-51D, *Checklist for Licensing or Certification of Maternity Services*; DSHS 10-51E, *Checklist for Licensing*

or Certification of Child Placing Agency.

2. The emergency respite center is a type of respite care for children potentially at risk of abuse and/or neglect. The nurseries serve children between birth through the age of 17 years, and are operated up to 24 hours a day. No child can remain in the facility for more than 72 hours at any one time.

3. The licenser includes: a review of staff's education and training transcripts, reference letters, résumé's and other required qualification documentation; a review of personnel policies and proposed staff training programs; a review of educational and vocational instruction; and a review of the proposed system for the development of social study and treatment plans.

F. For residential facilities, the Department of Health (DOH) surveyor and the State Fire Marshal, or designee, must inspect and certify for occupancy prior to licensure.

G. The licenser may require the applicant to furnish additional pertinent information.

H. When a Child Placing Agency (CPA) has proposed to practice in more than one region, that agency will seek a license in the region in which the main office is located. If a CPA wishes to have more than one license (adoptive and maternity), the agency must apply for all licenses through their main office licenser. A separate license is issued for each program category.

I. An applicant agency planning to provide services in a region other than the one in which it is applying shall provide supplemental information regarding its intended practices in the other regions to the licenser, and to the regional office in each of the other regions in which it intends to operate, along with the application.

J. Each agency is subject to visitation, evaluation, and monitoring of MLR by the licenser having jurisdiction in the area in which the agency is providing services.

K. Agencies not required to be licensed must conform to MLR standards in order to be certified by DLR.

1. Agencies not required to be licensed are listed in RCW 74.15.020 (4).

2. This list also includes an agency that provides housing and care to foreign children entering the U.S. for medical care and services.

3. If an agency chooses to serve this population only, they must provide DLR with a written program description and a statement they plan to limit their services to only host family resources for foreign children.

L. Private CPAs, when evaluating family homes for licensing, are required to follow the licensing requirements in the CA *Practices and Procedures Guide*, chapter

5000, section 5100. CPA foster homes will be licensed by the regional licenser in the region in which the foster family resides. The CPA is required to monitor its own homes, with coordinated oversight of the monitoring and performance by the licensee provided by the licensers in the respective regions. Background clearances on all persons providing care or service in a region will be handled by the licenser in that region.

12330 DECISION ON LICENSURE/CERTIFICATION

A. All requirements of WAC 388-73 must be met before the DLR Regional Manager signs and issues the license/certification.

B. Upon issuance of the license, the licenser or other designated staff records the license information in CAMIS.

C. If the licenser determines that a person is disqualified from association with a childcare agency for not meeting minimum licensing requirements of chapter 74.15 RCW and WAC 388-73, the DLR Regional Manager shall give written notice of disqualification to the person. The notice shall state the activities from which the person is disqualified, the reasons for the disqualification, and the applicable law under which the person is disqualified.

1. The licenser applies the procedures contained in RCW 43.20A.205, regarding Denial, Suspension, Revocation, or Modification of License, when issuing a notice of disqualification to a person.

2. A licensee under chapter 74.15 RCW may not allow a person disqualified under this section to associate with the licensee's agency. Disqualification of a person may not be contested by an applicant/licensee. However, the disqualified person may contest the disqualification.

3. If a notice of disqualification of an individual is based on a Child Protective Services (CPS) finding of abuse and neglect, and after a fair hearing it is determined that the allegations are not supported by a preponderance of the evidence, the assigned social worker and licenser shall amend the records to so state.

4. The Regional Manager, in accordance with WAC 388-330-030, may remove a disqualification based on conviction of a crime or another reason if the disqualified person demonstrates by clear, cogent, and convincing evidence that he or she is sufficiently rehabilitated to warrant public trust and to comply with the requirements of chapter 74.15 RCW and WAC 388-73.

D. **Waivers**

1. Under the provisions of WAC 388-73-016, EXCEPTIONS TO RULES, the Regional Manager may issue a time-limited waiver to specific requirements for a specific child, if the waiver does not jeopardize the child's health and safety and is not contrary to statutory provisions. With

a documented, approved waiver, the license issuing authority may issue the license.

2. DLR shall maintain a log of waivers by region and by type of waiver.

E. **Initial License**

1. **Private Agencies and Group Care Facilities**

a. Only the DLR Regional Manager, through the regional licenser, may, at his or her discretion, issue an initial license instead of a full license to an agency or facility (group care setting or child placing agency).

b. The initial license may be issued for a period not to exceed six months, renewable for a period not to exceed two years, to allow the agency or facility reasonable time to become eligible for full license.

c. Neither the Regional Administrator nor the Regional Manager may delegate responsibility for issuing an initial license to a CPS, CWS, or FRS child placement worker.

2. **Foster Family Homes**

a. Initial licenses for foster family homes are issued for a period not to exceed 90 days.

b. See the CA *Practices and Procedures Guide*, chapter 5000, section 5133, for requirements regarding initial licenses for foster family homes.

12340 RE-LICENSING/RE-CERTIFICATION

A. Re-licensing/re-certification occurs when the facility moves to a new location and at three year intervals following issuance of the initial license. The license/certification issued under chapter 74.15 RCW and section 12330 is not transferable and applies only to the licensee and the location stated in the application.

B. Prior to expiration of an existing license or certification, the licenser or support staff, as determined by regional procedure, sends a re-application form to the licensee sufficiently in advance of the expiration date of the license/certification to ensure return of the signed re-application and department action before the license expires. If the licensee submits a signed application before the expiration date, the old license/certification remains in effect until the department acts on the re-application. The licenser sends the forms and documents defined by regional procedures to the licensee as part of the re-application packet. The re-licensing/ re-certification needs to occur in a timely manner to ensure the health and safety of children in care.

C. For renewal of a license or certification, the licenser rechecks the criminal history of licensee, staff, and volunteers and reviews the experiences, including services and incidents, of the past licensing/certification period with the licensee.

D. The licenser conducts a site inspection to ensure continuing compliance with health and safety aspects.

E. The licenser completes the *Checklist for Licensing or Certification*, DSHS 10-51 (B,C,D, or E).

F. The licenser reviews applicant agency policies and procedures, evaluates the content of the staff training policy and plan, and reviews a representative sample of the agency's case files for the current licensing/certification period to evaluate documentation of case planning. In a residential program residents may be interviewed.

G. At any time during licensure, the licenser may modify or change the numbers, ages, and types of children on the license/certification, depending on the circumstances and/or wishes of the licensee and the evaluation of the licenser.

H. The DOH surveyor and the State Fire Marshal, or designee, inspect a facility to provide certification prior to re-licensure/re-certification.

I. For agencies practicing in other regions, the licenser requests an assessment of the agency's compliance with MLR from the out-of-region licensers. This assessment includes a review of the licensed/certified agency's foster homes. Licensers from other regions are encouraged to participate and assist in the re-licensing/re-certification process. The licenser will take into consideration the findings and recommendations of the out-of-region licensers in reaching a decision for re-licensure/re-certification.

12350 RE-EVALUATION

A. The licenser re-evaluates the agency for suitability for continuing licensure or adjustment to the license, as well as effect on child(ren) in placement, under the following conditions:

1. If there is a change in management or social service staff.

2. The facility changes location. See section 12340(A), above.

3. There is a change in the classification of clients served.

B. The licenser completes a criminal history and background check as described in chapter 5000, section 5500, on each new person having access to clients, interviews the licensee and other appropriate parties, and requests other information and documentation, as necessary, to complete the re-evaluation of the agency. The licenser documents the re-evaluation in the licensing file.

C. The licenser or other designee records the new license information in CAMIS.

12400 COMPLAINT INVESTIGATION

A. The local or other designated DLR office conducts investigations of alleged child abuse or neglect (CA/N) and alleged non-compliance with licensing standards in accordance with chapter 5000, section 5300, and the DLR Facility Investigators Guide, *Investigating Abuse and Neglect in State Regulated Care*. Each reportable incident is entered into the CAMIS Licensing Complaints Module in accordance with section 5300.

B. The Regional Manager will develop standards/procedures for licensers to conduct assessments of allegations of failures to meet MLR that do not include child abuse or neglect. The standards will be consistent with chapter 5000, sections 5300 and 5400, of this manual.

12500 ACTION ON LICENSES/CERTIFICATION

A. In those instances where an investigation has been completed and substantiation of CA/N has occurred and/or serious non-compliance with MLR has been verified (sometimes following unsuccessful corrective action measures), the licenser may take action against the license/certification.

B. **Probationary License**

1. The licenser may issue a probationary license to a licensee who has had a license but is temporarily unable to comply with an MLR requirement or has been the subject of multiple complaints or concerns about noncompliance if the following conditions apply:

   a. The noncompliance does not present an immediate threat to the health and well-being of the children but would be likely to do so if allowed to continue.

   b. The licensee has a plan approved by the licenser to correct the area of noncompliance within the probationary period.

2. A probationary license may be issued for up to six months and, at the discretion of the Licenser and supervisor, may be extended for an additional six months.

3. The licenser and/or regional health and safety staff shall conduct site visits to facilities operating with a probationary license at a minimum quarterly to assure the continuing safety and well-being of children in care.

4. The department shall immediately terminate the probationary license if, at any time, the noncompliance for which the probationary license was issued presents an immediate threat to the health or well-being of the children.

5. An existing license is invalidated when a probationary license is issued.

6. At the expiration of the probationary license, the department shall

reinstate the original license for the remainder of its term, issue a new license, or revoke the original license.

C. The licenser staffs the case with founded CA/N and/or verified serious non-compliance with MLR (including those with unsuccessful corrective action measures) with involved DCFS and DLR staff, including the DLR CPS investigator, and appropriate supervisory and administrative personnel. The licenser formally informs all affected staff of corrective or stop placement actions.

D. **Denial, Suspension, and Revocation-**When considering denial, suspension, or revocation of a license, the licenser confers with the Regional Manager and the assigned Assistant Attorney General (AAG) to determine appropriate action and prepares a draft denial, suspension, or revocation (as applicable) letter for review by the AAG. The draft letter includes:

1. A concise summary of the CPS allegations (if applicable), RCW and/or MLR violations, findings, and conclusions.

2. Documentation of corrective action attempted, if appropriate.

3. Detailed citation of all applicable RCW/MLRs violated.

4. Complete information advising the licensee of their administrative hearing rights, including the filing process and time-frames.

E. Upon approval as to form and content by the AAG and the Regional Manager, the Regional Manager, as the regional licensing authority, signs and sends the final letter by certified mail to the licensee.

F. In any adjudicative proceeding regarding the denial, modification, suspension, or revocation of any license, other than a foster family home license, the department's decision shall be upheld if it is supported by a preponderance of the evidence.

RCW 74.15.130

12600 SUPPORT SERVICES FOR AGENCIES

The children's agency licenser is available to licensee agency staff to provide assistance and consultation on appropriate interpretation of RCW, WAC, and CA manual compliance.

12610 TRAINING

A. The children's agency licenser offers training and technical assistance on a regular basis to the agency executive director, board of directors, and/or the social service staff regarding the development and practice of the agency's policies and procedures consistent with RCW, WAC, and CA practice.

B. The licenser advises a CPA director of Foster Parent Scope training resources available through CA and that private agency licensed foster homes are encouraged to attend.

12700 PLACEMENT ACTIVITIES

All activities relating to placement of children in out-of-home care are the responsibility of DCFS social workers.

12710 LICENSER ROLE

A. The licensing regulatory functions are designed to safeguard the well-being of children in out-of-home placements. Therefore, the primary duty of a licenser is to periodically review whether the applicant/licensee is in compliance with MLR.

B. A secondary role of the licenser is that of a consultant and trainer.

C. The regional office manages the roles of regulator and consultant/trainer within the same job description without conflict of interest under the following conditions:

1. Each Regional Manager develops procedures which specifically outline how staff will carry out licensing and monitoring functions. Such procedures address at least:

   a. Waiver processing and approval;

   b. Processing of Incident Reports;

   c. Complaints/corrective actions;

   d. Shared decision-making;

   e. Separation of functions for licensers.

2. The local or other designated office conducts all investigations of incidents in licensed facilities in conformance with chapter 5000, section 5300.

3. The Regional Manager, within available resources, arranges for training for licensers and other affected staff specifically designed to provide increased expertise and ongoing clarification of job functions and expectations.

4. The Regional Administrator and the Regional Manager are expected to maintain a complete separation of child welfare case services from licensing duties in all offices.

5. The Regional Manager provides ongoing case consultation with each licenser to identify or eliminate any possible situations that could result in conflict of interest arising from the regulatory as opposed to placement issues.

6. The licenser staffs all problematic licensed/certified agencies with applicable staff, which may include the following: the group care coordinator, the contracts coordinator, the DLR CPS investigator

assigned to do incident reports, and the Regional Manager. The staffing considers, with other issues identified by the group, conclusions of the CPS or licensing investigation(s) and recommendations for corrective action. The staffing also considers the cumulative seriousness of multiple complaints.

7. The licenser may request consultation with the AAG regarding proposed corrective actions resulting from serious MLR violations.

8. The Regional Manager and the licenser thoroughly discuss and review all requests for waivers and compliance agreements for children's health and safety needs. Neither the licenser nor the Regional Manager shall endorse such a request if it compromises health and safety. They may seek administrative consultation on a case by case basis.

9. If a serious issue is identified with a licensed/certified agency with or without a finding of abuse/neglect and a conflict occurs between the licenser of the agency and the social worker(s) for the child(ren) placed, the assigned supervisors for those staff shall resolve the conflict, consistent with chapter 5000, section 5100, of this manual. The protection of the children involved is paramount to any other consideration.

12800 FILE MAINTENANCE

Each Regional Manager shall ensure the maintenance of Children's Residential Agency Licensing files in accordance with record management requirements of chapter 13000, section 13500.

12900 PUBLIC DISCLOSURE

For public disclosure requirements relative to licensing records, see chapter 13000, section 137112.

CHAPTER 13000 RECORD/PAPERWORK MANAGEMENT

CHAPTER 13000 RECORD/PAPERWORK MANAGEMENT 13-1
13100 CASE AND MANAGEMENT INFORMATION SYSTEM AND CASE DOCUMENTATION 13-1
13200 INITIATING RECORDS 13-5
13210 Intake and Assessment Requirements for CPS 13-5
13220 Intake and Assessment Requirements for CWS AND FRS 13-6
13230 Records Management 13-6
13231 Record Establishment 13-7
13232 Definitions 13-7
13233 Master File/Case Record Clerical Responsibilities 13-7
13234 ACES 13-7
13235 Birth Certificate 13-8
13236 CAMIS Input 13-8
13300 ADMINISTRATIVE RECORDS 13-10
13400 COMPOSITION OF CLIENT RECORDS 13-10
13410 Social Service Record Make-up 13-10
13411 Federal Revenue File 13-15
13412 Assembly of Folders 13-16
13500 LICENSING RECORDS 13-17
13510 File Structure 13-17
13511 Section A - Licenses, Applications, and Related Documents 13-18
13512 Section B - Service Episode Record (SER) 13-18
13513 Section C - Personnel Documentation 13-18
13514 Section D - Complaints and Corrective Actions 13-18
13515 Section E - Application Attachments and Inspection Reports 13-18
13516 Section F - Miscellaneous Correspondence, Financial, and Training 13-19
13600 GENERAL RECORD MAINTENANCE 13-19
13610 Filing Records 13-19
13620 Creating Additional Volumes 13-19
13700 RECORD ACCURACY, PRIVACY, AND DISCLOSURE 13-19
13710 Expectations for Accuracy 13-19
13720 Public Disclosure 13-20
13722 Public Disclosure Responsibilities 13-20
13722 Public Disclosure Guidelines 13-21
13723 Requests for Disclosure 13-22
13724 Preserving Requested Records 13-22
13725 Approval or Denial of Request 13-22
13726 Disclosure to Client's Representative 13-22
13730 Cost of Disclosure 13-23
13731 Inspection 13-23
13732 Collection of Fees 13-23
13733 Fee Waivers 13-23
13740 Protection of Public Records 13-24
13750 Disclosure Procedure 13-24
13760 Review of Denial of Disclosure 13-24
13770 Non-disclosable Public Records 13-24
13780 Qualifications on Disclosure 13-26
13790 Disclosure for Program and Other Purposes 13-26

137100 Disclosure and Privacy 13-27
137110 Practice Considerations 13-27
137111 Client Records 13-29
137112 Licensing Files 13-29
137113 Disclosure of Police Reports 13-31
137114 Information Subject to Challenge 13-32
137115 Expungement of Information 13-32
13800 CASE ASSIGNMENT, TRANSFER, CLOSURE OF RECORDS 13-32
13810 Active Cases 13-32
13820 Case Numbers 13-33
13821 Case Files for Legally Free Children 13-33
13822 Family and Placement Cases 13-33
13830 Case Transfer 13-33
13831 Case Record Management 13-33
13840 Placement Out of Area - Record Maintenance 13-36
13850 Case Closure 13-36
13900 RECORD RETENTION AND ARCHIVING 13-36
13905 Destruction of Electronic and Hard Copies 13-36
139051 Purpose and Scope 13-36
139052 Policy 13-36
139053 Request for Destruction 13-37
139054 Procedures 13-37
13910 Case Record Purging or Storage 13-38
13920 Federal Revenue Record Archiving or Storage 13-41
13930 Archiving of Records of Legally Free Children 13-41

13100 CASE AND MANAGEMENT INFORMATION SYSTEM AND CASE DOCUMENTATION

A. The Case and Management Information System (CAMIS) is the Children's Administration's (CA) automated case management system. CAMIS is designed to automate file information and provide reports regarding CA clients, providers, and licensees.

B. The following table identifies tasks and procedures to be completed in CAMIS and staff responsible for their completion. The table will be updated as needed to reflect changes in CAMIS.

TASK / PROCEDURE	JOB CLASS TO BE ASSIGNED CAMIS DATA ENTRY
1. Searching statewide for information on clients/providers	All
2. Entering all referrals made to the department	Regional / Local design
3. Assigning referrals	Regional / Local design
4. Creating case numbers	Clerical, plus other job classes for back-up if necessary
5. Updating case status	Primarily clerical/supervisors
6. Entering worker assignment history	Primarily clerical/supervisors
7. Entering record location status	Regional / Local design
8. Maintaining current data regarding ethnicity, language, name, social security number (for children in placement), and legal residential address	Regional / Local design
9. Completing SSI eligibility records	SSI Facilitators, program managers, support staff
10. Completing Title IV-E records	Eligibility Specialists
11. Completing Title XIX records	Eligibility Specialist
12. Completing risk and summary assessments/with findings in investigation module	Social Worker
13. Creating and updating SSPS provider numbers and businesses	Clerical, plus other job classes for back-up if necessary

TASK / PROCEDURE	JOB CLASS TO BE ASSIGNED CAMIS DATA ENTRY
14. Tracking placement and legal history, legal status, and custody	Regional / Local design
15. Creating and updating licensing records	Regional / Local design
16. Creating and updating facility complaint records	Regional / Local design
17. Creating and updating contracts	Regional design
18. Entering and updating SSPS Authorizations	Regional / Local design (Authorized personnel only)
19. Completing Service Episode Recording (SER) in CAMIS referral and case modules.	Social Worker, supervisor, financial service specialist, headquarters SSI staff

A. The CA expectation is that all SER (narrative recording) will be completed in CAMIS for all case events/activities within a reasonable time following the occurrence of the event/activity, except for SER relating to the Blood Borne Pathogens Protection Plan. See the CA *Operations Manual*, chapter 5000, section 5700. The social worker will record SER to document activities related to a client's HIV status either by hand or typed and will maintain the SER in a sealed envelope in section VIII of the hard file.

1. **All Programs-**The social worker must do SER in CAMIS within a reasonable time after an event, activity, or contact occurs to ensure accuracy of recording, in no case more than 30 days from the date of the event or activity, on each and every case event or case activity. The social worker must document all case activity in the single case file for the client family.

   a. Each SER recording includes the following:

      i. **When** - Full dates (month/day/year) of when the event occurred.

      ii. **Who** - Full names of persons present along with a recording of their roles in the case (e. g., "child's mother, Mary Smith"; "child's therapist, Jane Dow"; "Mary Smith's boyfriend, John Doe"; etc.) at least once on each page of recording, with the exception of foster parents, who will be identified by first name or as "foster parent." The social worker must not identify the foster parent with the foster parent's full name.

      iii. **Where** - A description of location of event/contact; e. g., "Mary Smith's home"; "DCFS Office meeting."

iv. **Why** - A description of the purpose of the event/contact.

v. **What** - Include a behaviorally specific description of what occurred during the event/contact; e. g., "Mary Smith's breath smelled of alcohol."

vi. **Assessment** of event/contact may be included, together with the supporting facts or evidence that led to the assessment.

b. CA staff may enter SER into CAMIS either individually as each event occurs or may enter as a summary of events. If the staff enters a summary of events, the staff must include the same elements, listed in C.1.a above, that would be included in an individual entry. For example: "DCFS social worker Sally Jones called the child's mother, Mary Smith, four times this week on 4/1/97, 4/2/97, 4/3/97, and 4/4/97. No one answered the phone for any of the prior listed phone calls."

c. CA staff must not make audio or video recordings of interviews, except as authorized by the CA Assistant Secretary for special project sites. The social worker needs to refuse a request from another party to make an audio or video record of interviews, unless approved by the assigned Assistant Attorney General.

d. To protect privileged communications between the social worker and the assigned Assistant Attorney General, CA staff must document in the SER only that a contact occurred with no indication of the substance of the contact.

e. CA staff must convey respect for the subject(s) of interviews and events in the content of all SER. Language in SER describes events, sequence of events, and observations in a clear, objective, and behaviorally specific manner.

f. CA staff uses CAMIS SERS procedure to record SER.

g. CA staff does not have to print out forms and SER created in CAMIS and insert them into the service binder unless required to do so for purposes of public disclosure, legal discovery, archiving records, or when directed to do so by supervisory or administrative request, or regional procedure.

h. Social workers must not maintain "personal" files containing case information. The workers must maintain all case related information in the department's official client case file.

i. For near verbatim interviewing requirements, see the CA *Practices and Procedures Guide*, chapter 2000, section 2331

j. When CPS staff are present during an investigative interview in which law enforcement or another agency takes the lead during the interview, the CPS worker must also do near verbatim documentation for the CA file. **Exception**: When there is an agreement with the other agency that the CPS worker will receive a copy of the other agency's near verbatim interview notes for the CA file within the 90-day investigation period, the CPS worker does not need to do near verbatim documentation.

k. For investigative interviews that include child statements regarding allegations of sexual abuse, CA CPS staff must document the interviews in the CAMIS SER in a format that is as close to verbatim as possible. "Near Verbatim" or "as close to verbatim as possible" means:

i. SER documentation must include the date, time, setting, length of interview, and names of persons present during the interview.

ii. Staff may summarize the rapport building phase of the interview as long as the staff includes information given to the child regarding the nature and process of the interview.

iii. Staff must document clearly all statements made by the child relating to the alleged sexual abuse. Documentation will reflect as closely as possible the chronological order and content of the interview. The disclosure statements must be recorded as close to verbatim as possible, accurately and fully representing what the CA interviewer and the child or adult said during the interview process.

l. Non-CPS staff, including CWS, FRS, and HSS staff, must use near verbatim recording any time a child makes statements to the non-CPS staff that may disclose sexual abuse. The non-CPS staff are required to record only the statements in the interview relating to alleged child sexual abuse in a near verbatim format. These statements include disclosures and denials of sexual abuse and provision of information directly related to the specific allegation. The staff may summarize the remainder of the interview.

m. Staff will use such notes as an aid when entering the information into the CAMIS SER module. The SER documentation represents the investigator's best recollection of what occurred during the investigation and is the official record of all interviews.

i. Staff must enter documentation into the CAMIS SER as soon as possible after each contact and, in the case of alleged child sex abuse cases, within seven working days from the date of the interview. Supervisors may waive the

requirement for requests made prior to the seventh working day for up to 15 calendar days. The Regional Administrator or the Regional Administrator's designee must approve waivers for input beyond 15 calendar days.

ii. Staff will retain their handwritten notes on each investigative contact until the investigator has entered documentation of the contact into the CAMIS SER. Following a check of the CAMIS SER for accuracy of the contact documentation the investigator has entered, the investigator must discard the handwritten notes.

2. **Child Protective Services (CPS)-**If a supervisor has made an exception to the requirement that the face-to-face visit occur within 10 days from the date of referral, the supervisor must note the exception using the CAMIS "CASEACTN" procedure until CA implements the "DOCUMENT" procedure.

B. The Regional Administrator or Regional Manager, as applicable, is responsible for integrity of CAMIS data input.

C. See chapter 15000 for CAMIS/Information System standards and the *CAMIS User's Manual* for procedures related to use of the information system.

13200 INITIATING RECORDS

13210 INTAKE AND ASSESSMENT REQUIREMENTS FOR CPS

A. The CA Intake social worker completes the CAMIS referral on any Child Protective Services (CPS) or other referral. Referrals that do not pass the sufficiency screen remain in CAMIS. Social workers record in CAMIS all other calls to Intake requesting information or consultation as "information only."

B. The local office opens a single family case record for each family following a referral. When referrals involve only information and referral contacts, other activities of 30 minutes duration, or referrals that result in a screening decision that the family is not eligible for services, a case record binder is not created. However, intake and screening decisions are recorded in CAMIS.

C. When a child in a sibling group is placed out of the home or legal proceedings are initiated, the local office establishes a CAMIS dash record for each child placed or for whom a dependency has been filed. Separate individual service record binders for children are only established for:

1. Children who are legally free;

2. Children who have more than one DCFS social worker assigned to the family; and/or

3. Children whose case plan is distinctly different from the case plan for their siblings.

13220 INTAKE AND ASSESSMENT REQUIREMENTS FOR CWS AND FRS

A. The CA Intake social worker completes the CAMIS referral on any Child Welfare Services (CWS), Family Reconciliation Services (FRS), or licensing referral. The Intake worker retains CWS/FRS/ licensing information and referral data in CAMIS. See chapter 15000, sections 15202 and 15214, and the *Practices and Procedures Guide*, chapter 4000, section 4100.

B. The CWS, FRS, or licensing social worker may initiate a service record inquiry by forwarding the completed intake summary to local office master files. If no existing record is located, support staff initiate a new record according to local office procedures for cases requiring services other than information and referral.

13230 RECORDS MANAGEMENT

State law requires that CA maintain records for services to children and their families as well as for licensed or approved providers and for persons who apply and are subsequently denied licensure or approval for service.

RCW 13.34.130; RCW 13.50.010; RCW 26.33.330; RCW 26.44.030

A. The CA office, in accordance with local procedures, assigns a case number for each family, child, or licensing file as appropriate. The case number will begin with the two-digit office/county code, followed by a letter designating the type of case, and the case-unique number assigned by the local office. The letter prefixes are:

1. "L" or "D" – Family/Parent File at regional discretion.
2. "D" -- Child with any dependency, voluntary, or CHINS legal actions.
3. "H" – Licensed Home or Facility

B. The Regional Administrator, the Area Manager, and the DLR Regional Manager establish procedures for their respective areas of responsibility for support staff to build, assign a unique number, file, store, add volumes, secure, transfer, and retrieve social service records, with all inactive service records maintained in a central file location until transfer to the central Records Retention Center (RRC).

1. All closed social service records (other than those files for children whose parental rights were terminated) with closed services will be transferred to the RCC periodically. See chapter 14000, section 14345, for the retention schedule.

2. Licensing files that were closed due to a revocation or denial of a license will be retained permanently in the local office.

3. Closed records of children whose parental rights were terminated will be sent from the local office to state office adoptions staff for forwarding to State Archives. This includes records for children who were not subsequently adopted.

C. The local or regional DCFS or DLR office, as appropriate, maintains case records on all persons or providers licensed or certified by the department.

13231 RECORD ESTABLISHMENT

A. When a case is opened/assigned pursuant to a written or CAMIS-generated referral, case numbers and record make-up are required for the following:

1. Child Protective Services (CPS);
2. Family Reconciliation Services (FRS);
3. Child Welfare Services (CWS);
4. Child Day Care Services;
5. Adoptions;
6. Foster Home Licensing;
7. Intra- and Interstate Home Studies;
8. Federal Funding;
9. Foster Home/Private Agency;
10. Rehabilitative Treatment/Behavioral Rehabilitation Services/ Group Care.

13232 DEFINITIONS

For definitions relating to case file make-up, see Appendix A, DEFINITIONS.

13233 MASTER FILE/CASE RECORD CLERICAL RESPONSIBILITIES

Clerical support staff determines whether a DCFS client or DLR licensing applicant has an existing case number or file in the office and/or elsewhere in the state.

13234 ACES

A. Clerical support staff check the eligibility status of clients who are the subject of referrals or requests, using the Automated Client Eligibility System (ACES).

B. A "Name Inquiry" in ACES must be performed. ACES will show **the most current** TANF eligibility status for a family. Assigned staff takes the following steps:

1. Select the desired name, and if the person is "HOH" (Head of Household) the first screen that comes up will be the "ADDR" (address) screen.
2. To see which CSO is handling the case, place cursor on first digit of CSO # in upper left corner of screen and press [F1] for a list of all CSOs and their corresponding numbers.
3. Access the DEM1 (Demographic 1) screen to verify client's social security number, birth date, and ethnicity.

4. Use the [F1] key to access additional screens explaining Race Code and Living Arrangement Code indicated on this screen.

5. To get this information for the other members of the Case Unit, first press the [F11] key to display the Client Pointer associated with each client in the Case Unit.

13235 BIRTH CERTIFICATE

A. The birth certificate is used by clerical support staff. After logging into the BIRTH CERTIFICATE screen, the employee accesses Birth system, then Simple Search.

B. The employee then inputs data that are available on referral (must have birth date) and prints a copy of the Birth Certificate of the child.

13236 CAMIS INPUT

A. **CASSTART**

1. Clerical staff uses CASSTART and inputs the referral number for cases. CAMIS generates the next sequential number. Clerical staff opens the case. The date of opening is the date the referral was accepted or date of placement, whichever is earlier. Clerical staff inputs the file folder status and creates a file folder.

2. Cases can be created from referrals for only the following types of programs: CPS, CWS, FRS, and Home Studies.

3. **Case Program Codes**

   a. A - Adoptive Home Services
   b. C - CPS
   c. F - FRS
   d. H - Home Study
   e. I - Interstate Compact
   f. L - Licensing
   g. T - Adoption Support

4. The following two codes are not used to create cases, only for additional worker assignments on an existing, open case:

   a. U - Courtesy Supervision
   b. S - Service Inactive

5. **Record Requests Without a Referral**

   a. Using CASSTART to generate a case number without a CAMIS referral (e.g., Licensing, Adoptive Home Services, Interstate Compact, Adoption Support, etc.), clerical staff follow procedures regarding CPS/FRS status/opening and worker assignments. Either create or search for all family members and input data for

clients, persons, etc., and input relationship codes. Follow procedures for updating/adding data in PRSNUP screen.

b. **Legally Free Children** - see chapter 15000, section 15206.

c. **Courtesy Supervision** - see chapter 15000, section 15213.

d. **Interstate Compact** - see chapter 15000, section 15214.

e. **Federal Revenue File-**For every child residing in department-paid substitute care more than 72 hours (Saturday, Sunday & holidays excluded), the Master File clerk creates the hard copy Federal Revenue file at time of creation of the social service file, for placement cases, and at the request of the FSS for non-placement. The Master File clerk indexes the file to the child receiving services and enters the appropriate data in CAMIS.

B. CASWRKDAT checks social worker assignment and date. If the information is incorrect, assigned clerical staff or the unit supervisor updates or deletes data as necessary.

C. CASERELS screen adds, deletes, updates status of clients and relationships of clients. If birth date and Social Security number are not already input, clerical staff adds the data taken ACES. If all pertinent information is input, check for accuracy. Each person needs to be updated for language, ethnicity, LEP, and any corrections that need to be made to assure accuracy.

D. **Dash Records**

1. A dash number case is opened for <u>each</u> child in placement regardless of length of placement or for whom any legal action has been initiated, for hard copy and paperless files. If placement is less than 72 hours, excluding the weekend, a paperless file is generated in CAMIS. The status of the file will be pending. A hard copy federal revenue file will be made for each child in placements of over 72 hours excluding weekends and holidays.

2. For teen parents and their infants residing in the same out-of-home care facility, a separate dash file IS NOT created for the infant. The infant is considered to be living with his/her teen parent, and a Placement Episode for the infant is not created in CAMIS. A legal authorization-to-place for the infant is not required when the teen parent and infant are residing together. An amount sufficient for the infant's maintenance is included in the teen parent's maintenance payment, and medical coupons are issued for the infant. Should the teen parent and infant be placed apart, or the teen parent leaves the home, it is at that point that Placement Episode is created, and a legal authorization to place the infant is required.

E. **Existing Records-**To connect a new referral to an existing case, on the command line staff uses CAMIS procedure CASREFCD. Staff answers "yes" to

the two questions on the following screen to bring over caseworker and address. On the CASEUP3 screen, the worker follows procedures as in new case openings.

F. **Case Closures**

1. Refer to chapter 15000, section 15202. Completion of a Summary Assessment is required on all cases at closure that initiated as CPS. The social worker completes a Summary Assessment form on each case receiving the high standard of investigation at the conclusion of the investigation. The narrative recording, when required, will document all activities and responses to the referral as well as the basis for the assignment of risk.

2. For procedures for administrative support staff regarding case closure, see section 13850, below.

13300 ADMINISTRATIVE RECORDS

A. When personnel covered by the Public Assistance Bargaining Agreement or their family members are party to a CPS, FRS, CWS, childcare license applicant or licensee, adoption applicant, or Participation Child Care referral or case other than as referrers, collateral contacts, or witnesses, an Administrative File may be created upon notice to the Regional Administrator. For personnel employed by CA, confidential administrative records are created.

B. See chapter 15000, section 15204, for additional standards and procedures for establishment of administrative files.

13400 COMPOSITION OF CLIENT RECORDS

13410 SOCIAL SERVICE RECORD MAKE-UP

The service record contains separate sections placed in a binder and/or in CAMIS in the following order:

A. Section I - **Case Activity Section**

1. Section I contains:

a. The face sheet (optional);

b. Family assessment form;

c. Health and safety 90-day contact forms or SER recording;

d. Referrals for CPS, FRS, and CWS;

e. Referrals to law enforcement;

f. SER recording;

g. Summary Assessments;

h. Transfer summaries; and

i. Voluntary service agreements or plans.

2. If the face sheet form is used, it is stored directly under the Case Activity Section tab. All other case activity information or forms are placed in Section I in chronological order with the exception of voluntary service agreements or plans, which are placed behind a sub-tab in Section I titled *Voluntary Service Agreements/Plans*.

B. Section II - **Placement and Legal Section**

1. Section II contains:

a. The placement and legal history form;

b. DSHS law enforcement child transfer of custody documents;

c. All legal documents, including, but not limited to, pick-up orders, court petitions, voluntary placement agreements, and court orders;

d. Individual Service Plan (ISP);

e. *Guardian Ad Litem* (GAL) reports;

f. "Due diligence" documentation forms; and

g. Privileged communications with the Office of the Attorney General.

2. The placement and legal history form (if printed from CAMIS) is stored directly behind the Placement and Legal History Section tab. All other documents placed in this Section are filed chronologically, except for privileged communications.

3. Privileged communications are placed behind a sub-tab titled *Privileged Communications with AAG.*

4. Social workers may, at supervisory direction, divide all legal documents (except privileged communications) behind sub-tabs in this section titled *Child 1, Child 2, Child 3*,etc.

C. Section III - **Child Health and Safety Section**

1. Section III includes all documents related to the child's health and education, including the Passport. This section contains:

a. Copies of the children's birth certificates;

b. Child drug/alcohol evaluations;

c. Documentation of the child's eligibility for Division of Developmental Disabilities (DDD) services;

d. The *Family Background and Medical Report*, DSHS 13-041; other health and education documents;

e. Rehabilitative services/group care documents;

f. School reports; and

g. Copies of the child's Social Security card.

2. The Passport for each child is filed directly under each child's sub-tab. Other documents in this Section are chronologically filed by child under sub-tabs titled *Child 1, Child 2, Child 3*, etc.

3. Sub-tabs are arranged in order of the establishment of the child's CAMIS dash number; e. g., Child 1 information is related to the child with a dash 1 number, etc.

D. Section IV - **Family Background Section**

1. Section IV contains:

a. All information and documents related to the child's ethnicity and cultural identity (except for Native American children); and

b. Limited English Proficiency (LEP) forms and information; and

c. Information relating to the search for relatives of the child (except for Native American children).

2. The sub-tab titled *Ethnic and Cultural Information* includes the child's *Ethnic Identification Form* and all other ethnic and cultural information about the child and the child's family.

3. The sub-tab *Relative Search* contains all information and forms documenting efforts of CA to locate relatives and determine the suitability or availability of relatives who are available to the child both for placement and/or ongoing family relationships (except for Native American children whose relative search information is filed under Section V - **Indian Child Welfare**.

E. Section V - Indian Child Welfare (ICW) Section

1. Section V contains all ICW documentation except legal documentation, which is filed in Section II. Documentation includes, but is not limited to:

a. A completed *Ancestry Chart Family Tree* for the child;

b. Correspondence with Tribes;

c. Local Indian Child Welfare Advisory Committee (LICWAC) staffing reports;

d. Notification to families, Indian organizations, and Tribes of potential Indian status; and

e. Relative search information for Indian children.

2. The information is this Section is filed chronologically.

3. When the ICW Checklist is utilized, it is filed directly behind the section tab.

F. Section VI - **Service Reports and Correspondence Section**

1. Section VI includes, but is not limited to, the following documents:

a. Releases of information;

b. Reports regarding visits conducted by contractors;

c. Transportation reports made by contractors;

d. All correspondence; and all reports except those relating to Indian Child Welfare;

e. case aide reports; criminal history reports;

f. counseling reports on parents;

g. Crisis Residential Center (CRC) reports;

h. FRS/IFPS documentation reports;

i. Home support reports;

j. Law enforcement investigation reports;

k. Reports on contracted Phase II counseling;

l. Parenting class reports;

m. Parenting medical reports;

n. Parenting evaluation reports (e. g., drug/alcohol, psychiatric, etc.); and

o. Staffing reports.

2. Reports are filed in VI Section as follows:

a. Releases of information are filed chronologically directly behind the Section VI tab;

b. Contracted Visit reports and information are filed chronologically behind the sub-tab titled *Contracted Visits*;

c. Correspondence is filed chronologically behind the sub-tab titled *Correspondence;*

d. All other reports listed above are filed chronologically behind the sub-tab titled *Reports*; and

e. Staffing reports are filed chronologically under the sub-tab labeled *Staffings*.

G. Section VII - **Payment Section-**This section contains all payment information, filed chronologically. This information includes, but is not limited to:

1. Exceptional Cost Plans/approvals;

2. Exception to Policy requests/approvals;

3. Federal funding information;

4. Home Based Services referrals/approvals;

5. Special rate documentation/ approvals;

6. Supplemental Security Income (SSI) eligibility documents; and

7. SSPS forms.

H. Section VIII - **Other**

1. Section VIII contains a three-hole punched envelope in which are filed the following documents or information:

a. The child's certified birth certificate;

b. The child's life book information and photographs;

c. Photographs from investigations;

d. The original copy of the child's Social Security card.

2. Photographs placed in this section are labeled and dated on the envelope as well as on the photographs.

3. HIV information, including hand-written or typed SER on HIV case activities, is placed in a second sealed envelope and maintained in the case record.

13411 FEDERAL REVENUE FILE

The Federal Revenue File contains separate sections placed in a single folder/jacket for each federal funding source; i.e., IV-E, Title XIX, and Title XVI/SSI.

A. At a minimum, the child's Federal Revenue File contains:

1. Copy of *Coordinated Benefits Referral*, DSHS 14-226, when necessary;

2. Signed Statement of Medical Necessity form(s);

3. Copy of ACES inquiry;

4. Document eligibility decision in either CASEACTN or PRSNACTN; and

5. Copy of COPCR for Source of Funds (SOF) Correction of Payment Action(s).

B. The IV-E Section-The contents of the IV-E section are placed as follows:

1. The left side of the jacket contains copies of all placement vendor licenses, CASEACTN/PRSNACTN narrative or notes (SER), copies of PLCHIST or DSHS 15-192, and the *Adoption Support Monitoring Schedule*, DSHS 14-319, all placed in chronological order with the oldest on the bottom.

2. The right side of the jacket contains all other documents n ascending order. See chapter 11000, section 11200, for minimum documentation/verification requirements.

C. The Title XIX Section-The Title XIX/Medicaid section is identified with a separate cover sheet.

1. The contents are assembled in chronological, ascending order with a prong paper fastener.

2. See chapter 11000, section 11200, for minimum documentation requirements.

D. **The Title XVI/SSI Section-**The Title XVI/SSI section is identified with a separate cover sheet.

1. See chapter 11000, section 11200, for minimum documentation requirements.

2. The contents are assembled, as they are processed in the initial application, reapplication, and appeal processes, with a paper fastener.

3. Once favorably adjudicated, award letters and recertification documentation are added chronologically on top. Following local protocol, the Child Placement and Legal History form is placed on top of the SSI section.

13412 ASSEMBLY OF FOLDERS

A. Color-Coded Terminal Digit System

1. Basic number contains six digits, plus a suffix.

2. The first digit in the secondary group determines the color of the case record folder/binders(s). The Regional Administrator has the option to determine the color scheme in the region, although the following chart is the standard to determine the folder/binder color needed.

Number	Folder Number	Color
a.	0	White
b.	1	Red
c.	2	Yellow
d.	3	Pink
e.	4	Green
f.	5	Brown
g.	6	Blue
h.	7	Orange
i.	8	Violet
j.	9	Tan

3. The suffix, beginning with "dash 1," is assigned to the child or sibling group following age chronology, except that, when a younger child is placed prior to older siblings, the child placed first receives the "dash 1," suffix.

4. For in-home dependencies, see chapter 15000, section 15202.

B. Folder/Binder Labels-Support staff do the following when preparing folder labels:

1. Use red-bordered labels and numbered digits to identify Financial Resource folders. The region may display other identifiers consistent with local protocol.

2. Use purple-bordered labels for adoptive home and licensing records.

3. Use blue-bordered labels for facility child abuse and neglect investigation records.

4. Use green-bordered labels for all other CA files.

5. Type under the color border the custodial parent(s):

   a. Last name in capital letters, first name, middle initial;

   b. Basic number and suffix.

C. Folders/Binders

1. Support staff preparing folders or binders, on the front of the folder or binder, print the basic number, including the program letter code prefix, in two-digit columns down the right side, including the suffix on foster child folders.

2. For LEP or Indian Child Welfare (ICW) cases, "LEP" or "ICW" must be clearly printed on the front of the case folder/binder.

D. Routing Folders/Binders and Documents

1. Clerical staff forwards the case record folders or binders and clearance documents to the assigned social worker or financial staff.

13500 LICENSING RECORDS

A. Each Regional Manager will require the maintenance of Family Foster Home, Rehabilitative Treatment Services/Group Care, Child Placing, and child day care home and center licensing files, as applicable, in standard sections to facilitate consistency and orderliness of files.

B. The licenser maintains a separate file for each program license for every agency. See section 13712 for information relating to disclosure of information in licensing files.

13510 FILE STRUCTURE

A. The Office of Child Care Policy (OCCP) shall establish its own standards for licensing file make-up. The following standards apply to residential and child placing licensing files.

B. The Office of Foster Care Licensing (OFCL) shall use the standards contained in this section.

1. The OFCL licenser will file all documents in six-section folders as described below.

2. The documents in each section are to be attached to the folder.

3. If additional volumes are required, the order will continue by section order; e.g., Volume I contains sections A, B, and C, while Volume II has sections D, E, and F.

4. The licenser places current documentation on top of each section.

13511 SECTION A - LICENSES, APPLICATIONS, AND RELATED DOCUMENTS

A. This section contains the following materials in the order outlined:

1. A signed copy of the current license and cover letters;

2. The most recent application form, followed by prior applications. Attachments to the application are filed in Section E;

3. Exception Requests;

4. Waivers;

5. Audits, Reviews, Monitoring Reports.

13512 SECTION B - SERVICE EPISODE RECORD (SER)

A. Ongoing narrative regarding contacts, problems, changes made in the home or facility, and other information, including renewal assessments, is added to this section chronologically, with the most recent on top.

B. The home study and autobiography, placed chronologically within the SER.

13513 SECTION C - PERSONNEL DOCUMENTATION

Documentation related to licensee personnel, including references for the applicant/licensee and staff, resumes', and criminal history clearance documents.

13514 SECTION D - COMPLAINTS AND CORRECTIVE ACTIONS

A. This section contains documentation related to reports of incidents:

1. Incident Reports;

2. Complaints, Findings, Deficiencies, including copies of CPS and licensing allegations and results of investigations;

3. Conclusions and/or Corrective Actions;

4. License Letters of Modification, Suspension, Denial, Revocation.

13515 SECTION E - APPLICATION ATTACHMENTS AND INSPECTION REPORTS

A. This section includes items that accompany the application and other forms completed during the licensing process. The following are examples of documents appropriate for inclusion in this section:

1. Discipline Policy, Evacuation Plan, Medical Plan, Statement on Religion, Training Plan, Articles of Incorporation if applicable, Personnel Policies.

2. For foster family homes: Confidentiality Statement, Child Care Agreement, Public Disclosure information, verification of TB tests, First Aid/CPR, documentation of attendance at HIV/AIDS classes.

3. Fire Inspection, Health and Safety Inspection Reports, and Licensing Checklists, with the most current checklist placed at the beginning.

13516 SECTION F - MISCELLANEOUS CORRESPONDENCE, FINANCIAL, AND TRAINING

A. Correspondence that does not properly fit into the other sections.

B. Payment forms (Provider File requests, SSPS forms, respite payment forms, etc.).

C. Documents that a licensee or the department provides to verify training.

D. License Letters of Modification, Suspension, Denial, Revocation.

13600 GENERAL RECORD MAINTENANCE

13610 FILING RECORDS

A. Clerical staff in each CA office have a choice of using a numerical or alphabetical filing system.

B. The filing of loose documents in a closed file is a clerical function, only after the file folder has been placed in closed files.

13620 CREATING ADDITIONAL VOLUMES

A. Staff requests that clerical staff split a financial or social service record into additional folders (volumes) when the contents exceed the space allowance of the folder (approximately one inch). Clerical staff labels the original folder "Volume 1" and assigns the next chronological number to each additional folder; e.g., "Volume 2," "Volume 3," etc.

B. Clerical staff enters status, type, name, and each additional volume in CAMIS and notes on the file folder the volume number.

13700 RECORD ACCURACY, PRIVACY, AND DISCLOSURE

A. This section addresses maintenance of accurate records, personal privacy, and disclosure and nondisclosure of CA records, including licensing records.

B. These topics are inter-related, with accuracy of information being a significant element.

13710 EXPECTATIONS FOR ACCURACY

A. Information in social service records must be complete and accurate, to the best ability of assigned social work or other staff, and can be shared only with

authorized representatives of public or private agencies having a legitimate need to be informed concerning clients whom they are actively serving.

B. The Regional Administrator and the Regional Manager are responsible, in their respective areas, for the integrity of data in electronic and paper files.

13720 PUBLIC DISCLOSURE

A. The Public Records Act, chapter 42.17 RCW, governs access to and disclosure of public records. CA is required to make identifiable public records promptly available for inspection and copying upon request by any person, unless nondisclosure is required or authorized by law.

RCW 42.17.280

B. CA and its employees are immune from liability for any loss or damage based upon the disclosure of a public record if the agency or employee acted in good faith in attempting to comply with the provisions of the law.

RCW 42.17.258

C. See Appendix A, DEFINITIONS, for the definition of "Public Record" and "Writing."

13722 PUBLIC DISCLOSURE RESPONSIBILITIES

A. The Director, Division of Management Services, is the designated Public Disclosure Officer for Children's Administration.

B. Each Regional Administrator and Regional Manager, as applicable, designates a public disclosure coordinator for the regional office and for each local office. The coordinator, upon request, assists the public or department staff in disclosure matters for that administrative unit.

C. The regions will respond to all day-to-day or ordinary public disclosure requests. However, regional public disclosure coordinators shall not respond to the following requests and shall immediately route such requests to the headquarters public disclosure coordinator for response.

1. Requests for reports collected at the state office; for example, statewide Health and Safety Report, CAMIS reports generated at the state office level.

2. Requests for information from more than one region where consistency of information is necessary.

3. Especially sensitive issues are best handled at Headquarters:

a. Requests from the media, including, newspapers, television, and radio;

b. Requests from attorneys, which may involve potential lawsuits;

c. Requests from legislators;

d. Requests which reference SSB 5770, Confidentiality of Child Welfare Records.

e. Requests involving "hot" cases or those generating controversy in the community; and

f. Other cases which may be of a hostile nature or where there is need for headquarters staff and Media Relations to be aware of the request.

D. When there is a question about whether the preparation should be done at the regional or headquarters level, the regional public disclosure coordinator will consult with the headquarters public disclosure coordinator at (360) 902-7901.

E. Public disclosure coordinators are to consult with assigned AAG whenever an issue regarding the release of information is not clear.

13722 PUBLIC DISCLOSURE GUIDELINES

CA staff shall comply with the provisions of WAC 388-320-100 and DSHS Administrative Policy 6.14 to make available all disclosable public records. Staff are not required to create information or material. Among the requirements of the WAC are the following:

A. When information is requested under chapter 42.17 RCW, the public disclosure coordinator must respond within five working days. Therefore, for the those requests described in section 13721, paragraph C, above, the regional public disclosure coordinator or other designated staff must be **immediately** faxed to the attention of the CA Headquarters Public Disclosure Coordinator at (360) 902-7903.

B. The designated public disclosure coordinator's response may be to:

1. Provide the requested material; or

2. Provide the requester with an anticipated date when the division will provide the material.

3. Deny the public record request.

C. The public disclosure coordinator may require additional time to respond to a request, based upon the need to:

1. Clarify the intent of the request;

2. Locate and assemble the information requested;

3. Notify third persons or agencies affected by the request; or

4. Determine whether any of the information requested is exempt and that a denial should be made as to all or part of the request.

D. In acknowledging receipt of a public record request that is unclear, the public disclosure coordinator may ask the requester to clarify what information the requester is seeking. If the requester fails to clarify the request, the public disclosure coordinator need not respond to it.

WAC 388-320-100

13723 REQUESTS FOR DISCLOSURE

A request for disclosure of a public record may be oral or written and must be made during customary business hours.

WAC 388-320-130

13724 PRESERVING REQUESTED RECORDS

If a public record request is made at a time when such record exists but is scheduled for destruction, the department shall retain possession of the record and may not destroy or erase the record until the request is resolved.

WAC 388-320-132

13725 APPROVAL OR DENIAL OF REQUEST

A. The public disclosure coordinator shall grant a request for a record which does not contain exempt information and shall disclose the record.

B. The public disclosure coordinator shall grant, in part, a request for a record which contains information that is exempt when the exempt information can be deleted so release of the remainder of the information does not violate privacy or "vital government interest," as determined by the CA Public Disclosure Officer. When a record is released with exempt information deleted, the public disclosure coordinator will make notations so the nature of the deleted information is made known.

C. The public disclosure coordinator will deny a request for a record which contains information that is exempt when the exempt information cannot be deleted and the remainder released without violating privacy or vital government interest.

D. The public disclosure coordinator shall deny a request for a list of individuals requested for commercial purposes unless it is in an index available to the public, as authorized by RCW 42.17.260(6).

E. The public disclosure coordinator shall accompany a denial of a request for disclosure with a written statement of the specific exemption authorizing the withholding of the record, or part of the record, and a brief explanation of how the exemption applies to the record withheld.

WAC 388-320-133

13726 DISCLOSURE TO CLIENT'S REPRESENTATIVE

A. When a representative designated by a client requests the client's record, the request must be accompanied by a written release signed by the client, except when that representative is a legislator or an attorney for the client. The written release must include the following:

1. The identity of the person(s) or organization(s) to whom disclosure is to be made;

2. An identification of the record, or portion thereof, to be disclosed; and

3. A statement of when the authorization for disclosure expires.

B. The legal guardian of a client has any and all rights accorded to a client by this section.

WAC 388-320-135

13730 COST OF DISCLOSURE

13731 INSPECTION

Children's Administration shall charge no fee for the inspection of public records.

WAC 388-320-140

13732 COLLECTION OF FEES

A. The disclosing office shall collect the following fees to reimburse itself for costs incidental to providing copies of public records.

B. The actual cost of printing manuals and manual revisions:

1. The actual cost of copying blueprints and like materials involving an extraordinary expense;

2. Twenty-five cents per page for black and white photocopies; and

3. The cost of postage, if any.

C. The requesting party must submit the required fees to the public disclosure coordinator within one work day of the request for disclosure and before the records are disclosed.

WAC 388-320-140; RCW 42.17.260

13733 FEE WAIVERS

A. When the department is a party in an administrative hearing, the public disclosure coordinator shall authorize free copying of records from a department file when the records are demonstrated to be relevant and the client is indigent.

B. The public disclosure coordinators are authorized to waive fees. Factors considered in deciding whether to waive fees include:

1. Providing the copy will facilitate administering the program; and/or

2. The expense of processing the payment exceeds the copying and postage cost.

C. The disclosing office coordinator shall not charge for locating public documents and making them available for review or copying.

RCW 42.17.300

13740 PROTECTION OF PUBLIC RECORDS

Public records shall be disclosed only in the presence of a public disclosure coordinator or his/her designee, who shall withdraw the records if the person requesting disclosure acts in a manner which will damage or substantially disorganize the records or interfere excessively with other essential functions of the department.

WAC 388-320-170

13750 DISCLOSURE PROCEDURE

A. The public disclosure coordinator reviews file materials prior to disclosure.

B. If the file does not contain materials exempt from disclosure, the public disclosure coordinator ensures full disclosure.

C. If the file does contain materials exempt from disclosure, the public disclosure coordinator denies disclosure of those exempt portions of the file and, at the time of the denial, clearly specifies in writing the reasons for the denial of disclosure, including a statement of the specific exemptions or the reasons authorizing the withholding of the record and a brief explanation of how the exemption or reason applies. The public disclosure coordinator full discloses the remaining non-exempt materials.

WAC 388-320-205

13760 REVIEW OF DENIAL OF DISCLOSURE

A. If the person requesting disclosure disagrees with the decision of a public disclosure coordinator, the person may petition the department's public records officer for review of the decision denying disclosure.

B. The form or letter used by the public disclosure coordinator to deny disclosure shall clearly indicate this right of review.

RCW 42.17.320; WAC 388-320-210

13770 NON-DISCLOSABLE PUBLIC RECORDS

A. The following records are exempt from disclosure to the extent provided by the applicable statute:

1. Personal information in any file maintained for clients of public institutions or welfare recipients.

RCW 42.17.310

2. Information regarding applicants and recipients of public assistance.

RCW 74.04.060; 42.17.310

3. Juvenile justice or juvenile care records.

Chapter 13.50 RCW

4. Alcohol and drug abuse patient records.

42 CFR 302.18

5. Records concerning applicants or recipients of support enforcement activities.

45 CFR 302.18; RCW 74.13.121

6. Adoption and voluntary termination of parent-child relationship records and financial information received from adoptive parents.

Chapter 26.33 RCW; RCW 74.13.121

7. Division of Child Support information regarding location of parents.

RCW 74.20.280

8. Mental illness and inebriacy records.

RCW 71.05.390

9. Records of patients and inmates of state institutions.

RCW 72.01.290

10. Records maintained by rape crisis centers.

RCW 70.125.065

11. Personal information in files maintained for an employee or volunteer of the department.

RCW 42.17.310

12. Information revealing the identity of persons who are witnesses to or victims of crime or who file complaints with investigative, law enforcement, or penology agencies, other than the Public Disclosure Commission, if disclosure would endanger any person's life, physical safety, or property. If at the time a complaint is filed the complainant, victim, or witness indicates a desire for disclosure or nondisclosure, such desire will govern.

RCW 42.17.310

13. Preliminary drafts, notes, recommendations, and intra-agency memoranda in which opinions are expressed or policies formulated or recommended, except that a specific record is not exempt when publicly cited by the department in connection with any action.

RCW 42.17.310

14. Records relevant to a controversy to which the department is a party but which would not be available to another party under the rules of pretrial discovery for causes pending in superior courts.

RCW 42.17.310

15. Information that identifies a person who, while an agency employee:

    a. Seeks advice, under an informal process established by the employing agency, in order to ascertain his or her rights in connection with a possible unfair or discriminatory practice under chapter 49.60 RCW against the person; and
    b. Requests such person's identity or any identifying information not be disclosed.

13780 QUALIFICATIONS ON DISCLOSURE

A. The following limitations are placed on disclosure of public records:

1. To the extent that non-disclosable information can be deleted from the specific record sought, the remainder of the records is disclosable.

2. Statistical information not descriptive of identifiable persons is disclosable.

RCW 42.17.310

3. Inspection and copying of specific records otherwise non-disclosable is permissible pursuant to an order of the superior court or an order of the Office of Hearings enforcing a subpoena.

RCW 42.17.310

4. Upon written request of a person properly identified as a law enforcement officer with a felony arrest warrant or a properly identified Unites States immigration official with a warrant for an illegal alien, the department shall disclose to such officer or official the current address and location of the person described in the warrant.

RCW 74.04.062

5. Any person may inquire of the department whether a named individual is a recipient of public assistance.

RCW 74.04.060

6. Any records of the department may be made available for research purposes provided that the research complies with the guidelines published by the department as Administrative Policy 12.01 in response to 45 CFR 46.103 and chapter 42.48 RCW. Any CA staff receiving a request for data or information for research purposes shall refer that person to the Director of Management Services.

WAC 388-320-225

13790 DISCLOSURE FOR PROGRAM AND OTHER PURPOSES

A. For purposes directly related to the administration of department programs, information shall be disclosed between offices of the department, unless prohibited by 45 CFR 205.50 or other law.

B. For purposes directly connected with the administration of department programs, information may be disclosed by the department to outside agencies, unless disclosure is prohibited by law. Agencies or individuals receiving such information are subject to the same standards of disclosure as are required of the department.

C. To the extent not otherwise prohibited or authorized by law, inquiries from agencies outside the department will be honored only if written and only if the client's authorization is included in the request.

WAC 388-320-240

137100 DISCLOSURE AND PRIVACY

A. If the public disclosure coordinator determines that a record falls within one or more of the exempt categories in RCW 42.17.310(1), information must nevertheless be disclosed unless disclosure would violate a person's right to privacy or impair vital government interests.

B. A person's "right to privacy," "right of privacy," "privacy," or "personal privacy," as these terms are used in the statute, is invaded or violated only if disclosure of information about the person:

1. Would be highly offensive to a reasonable person; and

2. Is not of legitimate concern to the public.

RCW 42.17.255

C. Both prongs of the above test must be met in order to deny disclosure of information or records on privacy grounds. Because individuals who are the subject of public records may not realize that the privacy rights protected under the law are so limited, the public disclosure coordinator may notify third parties who are the subject of a record prior to disclosure.

D. Prior to releasing any record, the public disclosure coordinator has the option of notifying persons named in the record that release of a record has been requested. The coordinator must notify persons whose names appear in requested records if specifically required to do so by an applicable law.

RCW 42.17.330

137110 PRACTICE CONSIDERATIONS

A. The social worker provides, subject to the constraints outlined above, a copy of all case file information, relevant to a court proceeding, to a child's parent(s), guardian, legal custodian, or legal counsel. Information which the department reasonably expects to introduce to support the petition is considered relevant. The social worker will provide a copy, free of charge, within 20 days of a written request or prior to the Shelter Care Hearing, whichever is sooner.

B. Clients with proper identification have the right to look at their records if they request to do so. They also may challenge the accuracy, completeness, or relevance of statements. Sources of CPS complaints remain anonymous, and their names must be purged from the record prior to the client's review.

C. The social worker offers language interpreter services to clients who are unable to read the case record information.

D. All material presented at a dispute hearing is open to examination of the client and his/her representatives, even though such material would ordinarily be considered confidential.

E. Staff subpoenaed to appear in court shall not take the social service record unless it is also subpoenaed, at which point the social worker consults with the assigned Assistant Attorney General.

F. No individual shall make available outside the department a partial or complete list of service recipient names or address. Social Service Payment System (SSPS) reports containing client identifiers are confidential.

G. For adoption records, after the petition for adoption is filed, information, except medical reports, in the child's record may be released only by written order of a Superior Court.

H. With respect to the service records of children and youth who are under the jurisdiction of the court, the requirements outlined in the *Case Services Policy Manual*, chapter 2000, section 2150, are to be followed.

RCW 13.50.100

I. If a juvenile, his/her parents, or their attorney makes a written request asking the department about the existence and content of custody, or care records, the Area Manager completes the following steps.

1. Makes written response to the inquiry within 10 working days after its receipt. The department provides to the juvenile, the parents, or attorney making the inquiry information regarding the location, nature, and content of any records in the department's possession. A juvenile, the parents, or the attorney, wishing to challenge the information contained in the department records, must notify the department in writing, providing:

   a. The name of the juvenile.

   b. A statement of those portions of the record alleged to be inaccurate.

   c. If retention of the record is being challenged, a statement as to why the record should be destroyed.

2. Reviews the notification of challenge and responds in writing within 30 calendar days. The response will indicate the corrections which have been or will be made or shall state the basis for denial of any requested corrections. If appropriate, the response will also include a statement indicating whether the records have been destroyed or transferred to another juvenile justice or childcare agency.

3. Notifies the juvenile, the parents, or their attorney that, if they dispute the department's response, they may seek an administrative review of the decision as provided in the Administrative Procedure Act.

J. CA staff removing records to an alternative work site must maintain security and confidentiality of information contained in records. To maintain security and confidentiality, information contained in CAMIS will be printed only at department work sites.

137111 CLIENT RECORDS

A. The following records are disclosable only to the client (the child's parent or legal designee, child or custodian-parent of a child under 18, legal representative of a child).

1. The CPS record, except that the name and other identifiers of the referrer of alleged CA/N may be removed prior to disclosure.

2. CWS or FRS records.

3. Juvenile court records or juvenile court documents contained in DCFS files.

RCW 13.50.100

B. When a non-custodial parent requests information from a child or family record, the public disclosure coordinator consults with the Assistant Attorney General (AAG) prior to releasing the information to determine criteria for release.

C. The information in paragraph A above may be shared with other public agencies subject to the same rules of confidentiality as CA. For example, information from a CPS or CWS record may be provided to a contractor who is providing counseling or evaluation of a child/ family or shared with Child Protection Teams (CPT) or Local Indian Child Welfare Advisory Committees (LICWAC).

137112 LICENSING FILES

A. Unless non-disclosure of particular information is required or authorized by law, licensing record information must be disclosed upon request. Most information contained in licensing records is disclosable. However, licensing records frequently contain information that is confidential or exempt from disclosure requirements.

B. The public disclosure coordinator or other designated staff will review requested licensing records and identify non-disclosable information in accordance with these guidelines. Staff will redact (remove) non-disclosable information from the record. The public disclosure coordinator will make remaining disclosable information available to the requester for inspection and copying or provide a copy to the requester.

C. Whenever disclosure of information is denied, the public disclosure coordinator will provide a written explanation to the requester, identifying the information for which disclosure is denied and the specific statutory basis for the denial.

D. The following table identifies disclosable and non-disclosable information in agency licensing files:

Disclosable Information	Non-Disclosable Information
Relevant information regarding licensing action resulting from a CPS investigation	Medical reports, including counselor evaluations or reports and autopsy reports (RCW 70.02 RCW)
Self-reported information regarding criminal charges or convictions.	Criminal history and background checks (RCW 74.15.030; 43.43.832; 43.43.834; 43.43.838)
Fact that there was a CPS complaint and that is was determined to be unfounded	Content of unfounded CPS complaints (RCW 26.44.010)
Complaints/concerns other than CPS complaints and licensing actions taken in response	Attorney-client communications (RCW 5.60.060 and case law)
For founded CPS complaint, information regarding incident that led to licensing issue, along with documentation of licensing involvement/action	Actual CPS complaint/report. Information on false complaints if compiled in the course of investigation by DSHS or law enforcement and essential to protect any person's right of privacy (RCW 42.17.310(1)(d)
Incident reports, with identifying information regarding the youth removed	Addresses, Social Security numbers, telephone numbers, and income of licensees (RCW 42.17.310; 74.04.060)
Names, addresses, and telephone numbers of individuals providing references	Content of reference letters
Letters of revocation, following removal of identifying information regarding youth in the home and five-days written notice to the subject provider	Personal/private information that would be "highly offensive to a reasonable person," not of legitimate concern to the public, and is part of an investigative record, including information gathered in the course of the initial application process
Police reports, with names of youth deleted	Case history information regarding the youth or family of the youth placed in a home (RCW 13.50.100)

E. **Personal Information in Licensing Files-**The release of personal and private information is a sensitive issue, and decisions about releasing too much or too little information are difficult. When a question regarding the release of personal and private information arises, the coordinator needs to consult with the assigned AAG.

F. **Personal and Private Information-**The following table provides examples of personal and private information that CA has released and examples of such information that the agency has declined to release.

Information Released	Information Not Released
Generalized answers about the applicant's background	Fact that a foster mother had been raped and received extensive counseling
Experiences with raising children	Sexual orientation of applicant when of no concern to public
Description of foster parent relationships, marital relationships, individual strengths, etc.	Historical family background, such as applicant's parents' marital relationship, family conflict issues, etc.
Statements regarding desire to become licensed providers	Reports of abuse applicants suffered in the past
Description of physical home of applicant, medical and other services they utilize for children in their care	Criminal conviction of applicant's parents or children unless it directly relates to the application
Autobiographical information that does not seem private or offensive	Medical conditions of applicants or their family, such as a child with Down's Syndrome
Statements regarding licensees' willingness to work with parents and agency staff	
Statements about qualifications (experience with children) or attitudes and practices regarding discipline or religious practices	

G. **Notice of Disclosure**

1. The public disclosure coordinator provides notice of disclosure to individuals whose licensing files are being released prior to release of the file.

2. The coordinator also provides notice to those named in the file who will be significantly impacted by release of the information.

3. If a question arises regarding the need to notify an individual, the coordinator consults with the assigned AAG.

137113 DISCLOSURE OF POLICE REPORTS

A. When a request is received for a copy of a police report, the public disclosure coordinator needs to notify the police agency that CA has received a request for a copy of one of their reports in the agency file.

1. The police agency must provide specific legal citations, within time-frames that will enable CA to meet legal deadlines for disclosure of information, if it wants CA to withhold the information.

2. If disclosure of the information would interfere with an ongoing investigation or legal action (on the part of a prosecutor), CA can withhold

the information when it receives such notice from the police or prosecutor in writing.

3. Information may be releasable once the investigation is completed.

137114 INFORMATION SUBJECT TO CHALLENGE

A. The social worker is to make reasonable efforts to review information about CA/N which is reported to DCFS and investigative findings which are challenged by parents or other parties to a case. The social worker:

1. Pursues new information or leads which might resolve the conflict.

2. Interviews additional persons identified as having relevant and direct knowledge about an incident.

B. A parent or other party to a case may provide a written statement about contested information. The social worker files the written statement in the record in a proximate location to the contested information.

137115 EXPUNGEMENT OF INFORMATION

A. The supervisor may expunge information from a case record when the following apply:

1. The information has been found to be untrue in a juvenile court proceeding on the matter; OR

2. The Area Manager and the supervisor agree that sufficient information exists to show the case record to be inaccurate; AND

3. There is a written request for expungement from the party who is the subject of the erroneous statement.

B. The supervisor documents the reasons for expungement in the record.

C. The supervisor destroys, discards, or deletes expunged information from an existing report or document.

13800 CASE ASSIGNMENT, TRANSFER, CLOSURE OF RECORDS

See chapter 15000, section 15202, for CAMIS policy and procedure related to this topic.

13810 ACTIVE CASES

A. An active case, in CAMIS, is one in which the division is providing services to the family and/or child. Active cases have the social worker assignment coded to match the definitions for Service Codes contained in this chapter.

B. If paperwork only is pending, the social worker assignment will be coded as "services inactive."

13820 CASE NUMBERS

13821 CASE FILES FOR LEGALLY FREE CHILDREN

For requirements for legally free children, see chapter 15000, section 15206.

13822 FAMILY AND PLACEMENT CASES

For requirements for family cases, cases involving a child in placement or in-home dependency, and cases involving teen parents, see chapter 15000, section 15202.

13830 CASE TRANSFER

The Regional Administrator, for DCFS, the Regional Manager, for DLR licensing functions, and the DLR Manager for the Child Abuse & Neglect Section shall establish procedures for the transfer of case files consistent with chapter 15000, section 15202.

13831 CASE RECORD MANAGEMENT

A. **Social Service Files-**For transfer of active social service cases between regions, the Regional Administrator will establish procedures consistent with the following minimum requirements:

1. Before the transfer is made, the transferring social worker reviews the service record for completeness. All documentation and recording must be current.

2. The transfer must be made within seven working days after receipt of the request with a notation in the record as to any additional material to be forwarded and the specific date it will be forwarded.

    a. The receiving supervisor must agree to the transfer before the case is transferred; or

    b. The responsible Area Managers(s) must agree to the transfer in advance of the transfer.

3. If the department purchases a service for the client being transferred and the provider or payee does not change, the transferring worker does not terminate payment on the *Change of Service Authorization*, DSHS 14-159. Within 15 days, the receiving worker submits a DSHS 14-159 form to change the worker ID and case number and update location and other information that has changed.

4. If the provider or payee changes, the transferring social worker terminates payment on *the Change of Service Authorization* prior to the transfer to the new office. The receiving worker submits a new authorization to update services upon receipt of the record.

5. If the client receives no purchased services, the sending social worker terminates any open service authorizations using the *Change of Service Authorization*.

B. **Adoption Files-**Because the agency file on a child is needed to facilitate an adoption and the adoption worker needs to complete paperwork, CA staff will adhere to the following procedures for transfer of adoptive case files for legally free children who are placed from one CA area to another:

1. The child's case file is transferred to the DCFS office/unit where the adoptive family is served. See paragraph h below if the adoptive family is supervised by a private agency. The case number will remain the same as the sending office's case number. Minimum documentation requirements to be included in the file before transfer are:

   a. A certified copy of the order terminating parental rights (or documentation that it has been requested and will be forwarded upon receipt);

   b. Complete documentation as to reasonable efforts to obtain information about the child and family medical and social background;

   c. The DSHS 13-041, signed by the child's social worker and the adoptive parent(s); and

   d. Completed narrative recording.

2. A working file is maintained in the sending office for incidental documents; e.g., copies of the Individual Service Plan (ISP). Local procedures determine whether the child's worker or the local adoption unit maintains the working file.

3. The adoption worker prepares the ISP and the health and education form and sends them to the sending office worker for distribution to the parties and presentation at pre-adoption dependency review hearings.

4. The pre-adoption dependency reviews continue to be held in the juvenile court of original jurisdiction. Local procedures determine whether the child's CWS worker or an adoption worker files and presents reports to the court pending finalization.

5. When the adoptive family finalizes in Superior Court in the county of residence, a copy of the decree is sent to the sending office for presentation to the juvenile court along with a motion to dismiss and close the dependency case.

6. The dismissal is sent to the adoption worker.

7. Should the placement disrupt prior to finalization, the child and the case file are returned to the sending office for continued placement planning.

8. If the child is placed in a private agency adoptive home, the child's worker sends a case summary and copies of legal and pertinent medical documents to the private agency. The DCFS file will be maintained in the local office until finalization.

C. **Federal Revenue File-**Upon request for an inter-regional or inter-office transfer of a child's social service record through Master File or by a social service unit supervisor or worker, designated staff checks CAMIS for the existence of a Federal Revenue file.

1. Master File transfer clerk or other designated staff checks CASEUP3 for the presence and status of the Financial Revenue record.

2. Master File notifies the assigned Federal Funding Specialist (FFS) and Supplemental Security Income Facilitator (SSIF) that a case transfer has been requested, and the FFS or SSIF makes the Federal Revenue file available within three working days for transfer.

3. The FFS prepares the active/open Federal Revenue file for transfer and affixes the *Transfer Notice*, DSHS 01-194, to the Federal Revenue file designating the local or regional office to which the file is to be sent.

4. Once Master Files receives both the social service and the Federal Revenue files, the two case jackets are forwarded to the requesting DCFS office/region.

5. The Master File clerk or other designee notes in CASEUP3 the transfer status of both the social and federal revenue files.

D. **Family Home Licensing Files-**For transfer of active family home license files between offices or regions, the DLR Regional Manager will establish procedures consistent with the following minimum requirements:

1. When a family with a valid, active childcare license moves from one address to another and wishes to remain licensed, the licensee must submit a new application for childcare license for the category of care being provided reflecting the changed circumstances and new address to the appropriate DLR licenser.

2. The licenser or other designated staff must create a new CAMIS license record for the application at the new address.

3. For licensed foster family homes having an acceptable history of child care, the old license may remain in effect for two weeks after a move, except that this applies only if the family remains intact.

4. If the family applies for a new license in the new locale, the licenser or support staff in that office will contact the licenser in the former locale and request transfer of the licensing file.

5. Before the transfer is made, the transferring licenser reviews the license record for completeness. All documentation and recording must be current before transfer.

6. The transfer must be made within seven working days after receipt of the request with a notation in the record as to any additional material to be forwarded and the specifie~~d~~ date it will be forwarded. The receiving Regional Manager or supervisor must agree to the transfer before the case is transferred.

13840 PLACEMENT OUT OF AREA - RECORD MAINTENANCE

For requirements for courtesy supervision when a child is placed from one CA service area to another, see the CA *Practices and Procedures Guide*, chapter 4000, section 4430.

13850 CASE CLOSURE

A. Staff Support Procedures

1. When a record is returned to Master Files following closure, support staff remove the contents of the binder and secure the contents with either a rubber band or a clip, then put the contents into a color coded file folder, labeled with the client's name, case number, and notation on the outside of the folder if the client is LEP, ICW, or American Sign Language (ASL).

2. The file folder is then stored in Master Files in accordance with local procedures.

B. See chapter 15000, section 15202, for additional procedures regarding closure of cases.

13900 RECORD RETENTION AND ARCHIVING

13905 DESTRUCTION OF ELECTRONIC AND HARD COPIES

139051 PURPOSE AND SCOPE

A. All requests received from subjects of Children's Administration (CA) files by CA for destruction of electronic and hard copy records will be destroyed in accordance with CA's approved record retention schedule.

B. This does not apply to records that have already been placed in archives for local office and record retention center archiving and destruction periods.

139052 POLICY

A. RCW 26.44.031 requires that CA destroy information related to unfounded referrals in files or reports of child abuse or neglect after six years.

B. At the end of six years from receipt of the unfounded report, CA must purge the information unless an additional report has been received in the intervening period.

139053 REQUEST FOR DESTRUCTION

A. CA will only consider requests for destruction of individual records from the person who is named in the record.

B. Staff may receive requests for destruction of other records, including records involving founded, unfounded, and inconclusive allegations of child abuse or neglect. CA staff must explain the purpose and need for retaining records for six years.

1. The person making the request must clearly identify what records, both electronic and hard copy, the person wishes to have destroyed.

2. The person must demonstrate why retention of the particular record for six years is both unnecessary and uneconomical for the department, as provided in RCW 40.14.060.

C. Before information may be removed from CA files, the applicable first line supervisor, Area Administrator, Regional Administrator, Regional Manager if applicable, Office Chief, and Director must approve the record destruction.

D. CA will not accept requests for purging any information regarding adoption and licensing records.

139054 PROCEDURES

A. Staff receiving the request to expunge the records must have the person identified by name in the record and who is requesting destruction of the records complete the form, *Request for Destruction of Records*, attached. The completed form must include a justification for the purging of the identified information. The justification must support a determination that retention of the record for six years is both unnecessary and uneconomical.

B. The CA staff person receiving the request must submit the completed form to the staff person's supervisor for forwarding through the management structure for approval at each level. The completed form must demonstrate that retention of the record is both unnecessary and uneconomical.

1. In the event the subject of the file for which destruction is being requested is a member of an Indian Tribe or Band, and the file is less than six years old, the Tribal Chair and the Social Services Director, or equivalents, must approve the file destruction.

2. If CA has not received a written response from the subject person's Tribe or Band within 60 days of submitting the request to the Tribe or Band, CA will proceed to purge the file.

C. In order to approve the destruction of records, each level must endorse the request in writing. The Director of the Division of Program and Policy Development must give final approval.

D. Once approved, the Director of Program and Policy Development will send a copy of the approval to the CA Chief, Office of Information Services, for destruction of the electronic CAMIS record. The Director will return a second copy of the form to the region to allow destruction of the paper file.

E. The Office of Information Services and the originating DCFS office must destroy the files within 30 days of receiving the written approval of record destruction from the Director of Program and Policy Development.

F. The Information Services staff person who expunges the electronic file must replace the expunged file with the message "record expunged" for all destroyed records that are found in CAMIS. This staff person must also identify himself or herself in CAMIS.

G. The Division of Program and Policy Development will maintain the original request for destruction.

13910 CASE RECORD PURGING OR STORAGE

A. To allow maximum available filing space, offices periodically purge case records and send them to the Records Reference Center (RRC). RRC stores the case records until they are recalled or ready for destruction. Records that are in an agency name and have no barcode number will be stored with the Secretary of State Record Center. This section instructs support staff how to correctly purge, ship, and recall case records through RRC.

1. **Office Request Coordinator-**Office Request Coordinators are persons designated by the office as authorized to request records or obtain information from records stored at RRC.

2. **Records Coordinator-**The Records Coordinator is the person designated in each office to have responsibility and authority for the retention/destruction of all files.

3. **Purge Process-**Once a year, the Olympia CA CAMIS programmer sends to each region a listing of all cases with no activity for a two-year period. In addition, there is a procedure on-line in CAMIS that allows local office staff to call up a list of records that have had no activity in the past two years. CA clerical staff will use one of these sources to assist them in the purge process.

B. **Retention Periods**

1. The local CA office retains all files, including unfounded CPS referrals, in the local office for two years following any case activity, including, but not limited to, new referrals and children in placement. When a new referral comes in on a closed case, whether still in the local office or at the RRC,

the case is reactivated and a new six year period begins. The RRC retains the inactive files an additional four years, after which they are destroyed, with the following exceptions.

2. The following are exceptions to the requirements of paragraph 1:

a. **OFCL and DLR-CPS Files**

i. The local DLR office retains DLR case files in the office for two years following termination of the license. The RRC then retains the files for an additional four years, for a total of six years, at which time they are destroyed.

ii. The local DLR office retains on the premises in an office retention file for a period of 35 years any case file for a license that CA has revoked or denied.

b. **Adoption Files-**For all finalized adoptions for whom state or federal funds have been expended, the local office adoption worker ascertains that CA has a complete copy of the CPA's file for each child.

i. The adoption worker or designated staff obtains the revenue file from the IV-E specialist and adds it to the social work file. Designated local office staff sends the complete file to the CA headquarters adoption file archive specialist in accordance with the Archiving Policy in section 13930. of the *Operations Manual*.

ii. The archive specialist in Headquarters forwards the file to the Records Reference Center (RRC).

iii. Local offices must **not** retain archived adoption files.

iv. The RRC retains the adoption file for 99 years.

C. **Preparing RRC Cartons-**Support staff box and ship unneeded case records in specially designed cartons. When preparing an RRC carton for shipment, support staff:

1. Contacts the Financial Resource Unit to see if there is a financial record. If a financial record is found, it is included with the case record to be shipped.

2. Arranges the case records within an RRC carton in alphabetical or terminal-digit order;

3. Signs on to the terminal for Bar Code program and to the printer with their user ID;

4. Selects BOX ADD from the Selection Menu. When the BOX ADD menu appears, select "Closed Records";

5. Enters the appropriate data for each case record into the computer. Bar Code will accept up to 100 case records per box. When entries are complete, two copies of the transmittal will automatically print;

6. Completes and affixes an RRC carton label, DSHS 2-227, under one the carton's hand grips so the case records are facing the labeled end; and

7. Secures the lid to the carton with monofilament tape.

D. **Shipping Cartons to RRC-**Offices ship cartons of case records to RRC by various methods, including regional office courier, state office courier, or parcel services. Staff determines the best method of shipping cartons from their office.

E. **CAMIS Procedure for Record Retention-**Assigned staff inputs information by using CASEUP3. Staff changes file status to "R" and enters date sending, box number, and destroy date.

F. **Recalling Case Records from RRC-**When an office finds it necessary to recall records located at RRC, master files staff access CAMIS to locate the box number for the case record. Staff contacts RRC by use of Mapper and/or telephone. Upon receipt of requested records, clerical staff updates CAMIS to reflect current status of file.

G. **Transfer Out Responsibilities for RRC**

1. Clerical staff receives a request from a CA office to transfer a case record.

2. Clerical staff will access CAMIS to determine status and location of the record.

3. Clerical staff will contact RRC using Mapper and/or telephone and request the record be sent directly to the receiving office. Transfer out clerical staff will change the case status and file folder status to reflect transfer of the record to the receiving office.

H. **Annual Destruction of Case Records at RRC**

1. Once a year, RRC destroys those case records stored at their facility that have met the required retention period.

2. Offices receive an *RRC Destruction Notice*, DSHS 1-100, from RRC each October notifying them of the cartons of case records scheduled for destruction the following January. Offices have until the end of December to:

   a. Review the DSHS 1-100;

b. Identify and recall those case records they do not want destroyed; and

c. Authorize RRC to destroy the remaining case records.

3. On CASEUP3 screen, clerical staff inputs in the location or case notes that the record was destroyed and the date.

13920 FEDERAL REVENUE RECORD ARCHIVING OR STORAGE

A. Prior to any case being sent to adoption archives or the Record Retention Center, the child's social file shall be consolidated with the Federal Revenue File.

B. Any Title IV-E, Title XIX, or SSI documentation shall be reviewed by the FFS and/or SSIF and shall be sent to Master File to be consolidated with the child's social service file.

13930 ARCHIVING OF RECORDS OF LEGALLY FREE CHILDREN

A. RCW 26.33.330 and 26.33.340 provide for the sealing of all adoption files and for the limited release of information from those files. Archiving ensures a permanent record of the child's past involvement with the agency. RCW 26.33.343 provides procedures for accessing of adoption records.

B. Records of all legally free children are to be archived upon the child's adoption or upon closure of a case after the child turns 18 years of age. Prior to any case being sent to adoption archives, the child's social file is consolidated with the Federal Revenue File (Siblings are not to be archived together.) The social worker will complete the archiving of the child's file within 90 days of the dismissal of the dependency.

C. When the adoption is final and all court orders, including the Order Dismissing Dependency, have been received by the child's social worker, the social worker prepares the social file for archiving and sends the file to the regional or local Federal Funding IV-E Unit.

D. The FFS and/or SSIF will review any Title IV-E, Title XIX, or SSI documentation and will consolidate it with the child's social service file. The combined files will be returned to the child's social worker within 30 days of receipt. The financial and service files are not archived while a SSI application is pending. The social worker or other assigned staff updates and closes CAMIS legal, placement, adoption and case modules.

E. The social worker or support staff, as applicable, prepares the file in the following sequential order:

1. Cover memo listing the child's birth name, date of birth, adoptive name, adoptive parents name/s, date of adoption decree, Superior Court where the adoption was finalized, the social worker's name, and the local office sending the file.

2. Copy of final decree of adoption (need not be certified).

3. Copy of the Dismissal of dependency

4. Child's *Medical and Family Background Report* is signed by the adoption facilitator and by the adoptive parent(s) including initials where appropriate. Assigned staff must attach all other documents given to the adoptive parents with the DSHS 13-041. (Copies of these documents need not be included elsewhere in the archived file.) See the CA *Practices and Procedures Guide*, chapter 4000, section 45403, for requirements for disclosure of health and social information on the child and the child's birth parents to the adoptive parents.

5. Each volume of the social file shall be removed from the binder, have a rubber band placed around it and labeled with the volume number. Dividers should be removed from the sections (There is no need to separate the sections). Each volume should contain all sections of the child's file including:

   a. Narrative recording section.

   b. Indian Child Welfare forms, including LICWAC staffing reports, verification of Native American status, Family Ancestry Chart, notices to Tribes or Canadian Bands, and other related documents.

   c. Legal/placement document section, including court orders, reports to the court, Individual Service Plans (ISP), Pre-placement and Post-Placement Reports, Voluntary Placement Agreements, custody orders, Adoption Planning Review Reports, Administrative Review Reports, Permanency Planning staffing forms, relative home studies, and related documents.

   d. Medical, psychological, psychiatric, developmental, and school reports on the child as well as psychiatric, psychological, and medical information on the birth parent(s) if in the child's file; documents pertaining to the parents' and/or child's functioning.

   e. Copies or documentation of any disability benefits applied for or received on behalf of the child.

   f. Adoption documents, including a copy of the child's life book, WARE and NWAE registration forms, if applicable.

   g. Copies of the financial section of the file are maintained in the file until the Federal Revenue file is reviewed and archived. Closure copies of payment (SSPS and A-19s, if any) forms, defined as those with a termination code, to provide a record of payments made on behalf of the child, remain in the archived file.

h. Statement from Trust Funds Accounting regarding final dispersal of any conserved funds.

i. A copy of the child's Social Security card and birth certificate.

j. A copy of the Adoption Support program application, if applicable.

F. If it comes to the attention of the IV-E Unit that a child in out-of-home care has been adopted, the assigned Federal Funding Specialist communicates to the worker's supervisor requesting that the file be prepared for archiving and forwarded to the IV-E Unit.

G. When the IV-E Unit receives the prepared file from the social worker or assigned staff person the FFS includes as one section those parts of the IV-E file that are to be archived.

H. The FFS checks the CAMIS files to ensure the legal, placement, adoption, and case modules have been closed and that SSPS authorizations, other than for the Adoption Support Program, have been terminated. If these modules have not been closed, the case will be returned to the adoption worker to complete the CAMIS documentation. The FFS checks to ensure federal funding information is correct. The child's record with the birth name is closed and secured by the Federal Funding Specialist.

I. The FFS maintains the closure copies of payment (SSPS and A-19s, if any) forms, defined as those with a termination code, to provide a record of payments made on behalf of the child, making sure that all documents from the Federal Revenue file have been incorporated with other payment forms.

J. For legally free children who have not been adopted, case records are archived as outlined above after the child's 18th birthday and following case closure.

K. The social worker or support staff, as applicable sees that the archived file is sent to the Headquarters Adoption Program Manager at MS 45713, P. O. Box 45713, Olympia, WA 98504-5713 for archiving and notifies the Master File clerk of the date the record has been sent to the state office for archiving along with the file covers.

CHAPTER 14000 ADMINISTRATIVE SUPPORT

CHAPTER 14000 ADMINISTRATIVE SUPPORT 14-1
14100 RECEPTION....14-1
14110 Introduction....14-1
14111 Definitions....14-1
14112 Posters and Brochures....14-1
14120 Receiving Clients....14-2
14121 Expectations....14-2
14122 Procedure....14-2
14130 Requests for General Information....14-2
14131 Expectations....14-2
14132 Procedure....14-3
14140 Receipt of Negotiable Items....14-3
14150 Limited English Proficiency/Deaf, Deaf/Blind and Hard of Hearing Clients....14-4
14151 Expectations....14-4
14200 MAIL SYSTEM....14-4
14210 Introduction....14-4
14211 Definitions....14-4
14220 Incoming Mail....14-4
14230 Outgoing Mail....14-5
14231 Types of Mail Service....14-5
14232 Special Instructions....14-6
14240 Special Procedures....14-8
14241 Business Reply (BR) and Postage Due Accounts....14-8
14242 Certified Mail....14-10
14243 Express Mail....14-11
14244 Ordering Postage....14-11
14245 Security Procedures....14-11
14246 Unused Postage Reimbursement....14-11
14300 RECORDS MANAGEMENT....14-11
14310 Case Record Transfers....14-12
14320 Case Record Management....14-12
14330 CAMIS Trainer....14-12
14400 RANDOM MOMENT TIME STUDY....14-12
14500 REQUESTING A NOTARY....14-12

14100 RECEPTION

14110 INTRODUCTION

A. Each Children's Administration (CA) office is to set aside a designated area for people who come into the office.

B. Support staff provide services to people coming into the reception area

C. This section outlines the procedures receptionists or other CA staff follow when receiving, screening, and referring people who come into an office.

14111 DEFINITIONS

See Appendix A, Definitions.

14112 POSTERS AND BROCHURES

A. The following posters must be displayed in each CA client reception area:

1. *Multilingual Interpreter Services*, DSHS 24-019(X).

2. Non-Discrimination posters in English, Cambodian, Chinese, Laotian, Spanish, and Vietnamese, DSHS 24-007.

B. Non-Discrimination Policy brochures in English, Cambodian, Chinese, Laotian, Spanish, and Vietnamese, DSHS 22-171(X) must be available for clients in each reception area.

C. Supplementary client information and brochures are available from the DSHS Forms and Publications Warehouse in a variety of languages.

1. Each CA office is to maintain a supply of bilingual information for clients that is reflective of the languages spoken in the local service area.

2. Following is the Translation Color-Coded System used by the department:

SPANISH	Goldenrod
VIETNAMESE	Yellow
CAMBODIAN	Light Bluerod
VIETNAMESE	Yellow
LAOTIAN	Lime Green
HMONG	Tan
CHINESE	Orange

D. The *Equal Employment Opportunity is the Law* poster is to be displayed in the employee work area of each office.

14120 RECEIVING CLIENTS

14121 EXPECTATIONS

A. All people entering an office are entitled to fair and timely treatment. Receptionists and other CA staff shall:

1. Treat people with dignity and courtesy;

2. Give people sufficient opportunity to make their needs known;

3. Not discriminate against anyone on the basis of their political beliefs, race, color, national origin, creed, language, sexual orientation, religion, marital status, age, Vietnam era or veteran status, presence of any sensory, mental, or physical handicap, or illness.

4. Assist people and process their requests as quickly as possible.

14122 PROCEDURE

A. Everyone coming into a CA office will complete a Reception Slip, DSHS 2-13(X), or for those offices that do not use Reception Slips, contact the receptionist to be logged in.

B. Those offices using Reception Slips must maintain supplies of the DSHS 2-13(X) printed in Cambodian, Chinese, Laotian, Spanish, and Vietnamese.

C. The receptionist:

1. Determines why the person is in the office.

2. Seeks clarification from the person if additional information is necessary.

3. Takes appropriate action depending on the person's needs.

14130 REQUESTS FOR GENERAL INFORMATION

14131 EXPECTATIONS

A. Normally, receptionists only answer questions of a very general nature. They do not answer any questions about clients or program eligibility. If there is doubt about what information can be released, the receptionist checks with his or her supervisor.

B. Types of questions answered by receptionists include, but are not necessarily limited to:

1. Directions to the office and other agencies;

2. Office hours;

3. Verification of appointment times;

4. CAMIS verification for assigned social worker as needed.

14132 PROCEDURE

A. If someone contacts the office and requests information, the receptionist:

1. Provides the information, if disclosable;

2. Refers the person to someone who can provide the requested information.

B. If someone delivers documents to reception, the receptionist:

1. Accepts and date stamps all documents received on an ongoing basis.

a. The receptionist will not date stamp original or notarized documents, such as birth certificates, but will date stamp a copy of the original and return the original to client.

b. The receptionist will not date stamp checks received over the counter, but will forward/give the document to the appropriate worker. See section 14140, below.

2. Releases forms, pamphlets, or documents held at reception for pick-up as requested by staff.

3. If requested, photo copies documents and returns originals to clients.

14140 RECEIPT OF NEGOTIABLE ITEMS

A. For those offices that do not receive cash, all payments must be received by check or money order or sent directly by the client to the Office of Financial Recovery, P. O. Box 45862, Olympia, WA 98504-5862.

B. If the office accepts checks or money orders, the receptionist prepares a pre-numbered receipt and gives the original receipt to the person who brought in the check or money order.

C. All cash receipts, checks, money orders, or other negotiable items must be transferred to the central office by direct deposit to a bank account or to the Office of Financial Recovery, as applicable, within 24 hours of receipt.

D. The receptionist makes a copy of the check or money order for the worker and then the check is added to the *Daily Cash Items Mail Log*, DSHS 19-048(X). Support staff sends notice to the assigned social worker of receipt of negotiable items.

E. Assigned support staff prepares a *Funds Transmittal* to OFR and receives a *Notice of Transmittal Received* from OFR in return.

F. Each Regional Administrator/designee will determine the region's own policy on receipt of cash in compliance with accounting rules.

14150 LIMITED ENGLISH PROFICIENCY/DEAF, DEAF/BLIND AND HARD OF HEARING CLIENTS

14151 EXPECTATIONS

A. It is the intent of CA that no client is denied services because of a Limited English Proficiency (LEP)/Sensory Impaired (SI) communication barrier. The office will inform the LEP/SI client of the availability at no expense of interpreters or aids. The office will provide an interpreter in the appropriate language for LEP/SI services. Bilingual or auxiliary aids such as a qualified language interpreter or Telecommunication Device (TDD) for the Deaf will also be available.

B. All offices will have a listing of bilingual staff, their specific language skills, and their availability. A separate listing of contracted interpreters is to be available for interpretive and translating purposes.

14200 MAIL SYSTEM

14210 INTRODUCTION

A. The CA mail system provides internal control and efficient processing of all incoming and outgoing mail.

B. The mail clerk(s) is expected to have current directories of ZIP codes, DSHS address and mail stops, a roster of office employees, and pick-up/delivery schedules for the mail services available.

14211 DEFINITIONS

See definitions relating to mail in Appendix A, Definitions.

14220 INCOMING MAIL

A. The mail clerk processes the incoming mail as follows:

1. Date stamps but does not open "Confidential" mail envelope; sets it aside.

2. Opens, date stamps each piece of mail with the current date, and staples the envelope to its contents, but date stamps only the envelope for each of the following items:

   a. Original or notarized-copy documents; e.g., birth certificates, marriage licenses, etc.;

   b. Negotiable items; and

   c. Other items as specified by the Regional Manager or Area Manager or designee.

B. Separates into the following categories:

1. Cash items and the Cash Items Log

   a. Annotates each item to the Cash Items log, DSHS 19-48; both staff opening mail initial the log.

   b. Takes log (white and pink copies only) and cash item(s) to the Business Office or account.

   c. Retains the yellow copy of the DSHS 19-48.

   d. Accountant or Business Office staff return white copy to mail clerk to be stapled to yellow copy and retained in the Cash Items Mail Log file for a retention period of two years.

2. **Negotiable Documents-**Distributes negotiable documents directly to the designated responsible individual(s) and keeps them in a secured area (e.g., locked filing cabinet) when unattended.

3. All other mail per Regional Manager/Area Manager/designee instructions.

C. **Distribute Mail**

1. Confidential Mail - Deliver all mail marked "Confidential" to the addressees.

2. All Other Mail - Distribute all other mail as designated by the Regional Manager/Area Manager/designee.

3. Incorrectly Sent/Delivered Mail - Determine if address is correct. Make correction if necessary. Sort to outgoing mail.

14230 OUTGOING MAIL

A. Support staff will set a time that outgoing mail leaves the office.

B. Preparation of outgoing mail will occur to correlate with the scheduled outgoing mail pick-up time.

C. The schedule needs to accommodate processing of all accumulated mail and the time the mail leaves for the Post Office.

14231 TYPES OF MAIL SERVICE

A. Regional Courier service is available to offices in Regions 4 and 5, in conjunction with the State Office Courier, to distribute mail from and to all "N," "S," and Olympia-area mail stops.

B. State Office Courier service is available to all offices with "N," "S," and Olympia-area mail stops to distribute mail to these stops.

C. State courier service is to be used by all offices to which it is available.

14232 SPECIAL INSTRUCTIONS

A. Offices will establish local instructions to utilize courier mail as provided in their area.

B. **Unique Shipping Instructions**

1. **Usage-**Offices may establish other shipping arrangements as necessary and approved by the business office. A separate account will be established for this purpose.

2. **Additional Instructions**

a. CA offices need to contact United Parcel Service (UPS) or Federal Express (FedEx) for specific details regarding establishing a UPS or FedEx account, rates, pick-up/delivery times, etc.

b. Some offices have a UPS account specifically for shipping case records to the Records Reference Center. This account is not to be used for any other reason. A separate account must be established for unusual situations.

c. Shipping invoices are obtained from UPS.

3. **United States Postal Service (USPS)**

a. **Usage** - USPS can be used for all mail not sent by courier or other means.

b. **Special Instructions**

i. The following forms can be obtained from the local post office:

- PS Form 3533 - *Application and Voucher for Refund of Postage and Fees*;
- PS Form 3602-A - *USPS Daily Record of Meter Register Readings*;
- PS Form 3800 - *Receipt for Certified Mail*; and
- PS Form 3811 - *Return Receipt*.

ii. Offices contact the local Postmaster for additional information; e.g., rates, delivery/pick-up schedules, etc.

C. **General Instructions**

1. **General Mail** - Outgoing mail to be sent via USPS is to be prepared as described in the USPS publications *Addressing for Success* and *Postal*

Addressing Standards.

2. **Client Case Records** - Regardless of mail services, support staff use the following procedures for mailing client case records to ensure protection of confidentiality and record content.

   a. Use a Tyvek envelope or a suitable box.

   b. Wrap the envelope/box as appropriate to keep contents from shifting and/or splitting open.

   c. Mark the package "Confidential."

   d. If the shipping method is to be USPS, utilize the certified mail service without return receipt to assure a method of tracking the shipment in case of loss.

3. **Addressing**

   a. All first class mail is to be addressed following the guidelines in the USPS publications *Addressing for Success* and *Postal Addressing Standards*.

   b. **Mailing Address**

      i. **Courier Mail** - Use the complete/correct mail stop. For courier mail, this is the only address needed.

      ii. **UPS** - Use the street address rather than the Post Office. Box on UPS mail.

      iii. **USPS** - Address as advised in *Addressing for Success* brochure.

   c. **Return Address-** Inter-Office Mail Envelopes (Courier Mail)

      i. Ensure the enclose material clearly identifies the sender and the sender's return address or attach a completed *Routing Slip*, DSHS 1-32, to provide sender information.

4. **Specially Shipped Packages**

   a. Prepare packages as necessary utilizing proper packaging and addressing methods.

   b. Maintain an invoice shipping copy for account charge reconciliation and payment.

5. **USPS Mail**

a. **Certified Mail**

i. Complete and attach *Receipt for Certified Mail*, PS Form 3800.

ii. Complete and attach *Return Receipt*, PS Form 3811, when needed. Ensure the return address is stamped/written on the back of PS Form 3811.

iii. Enter each certified item in a certified mail log.

b. **Postage Stamping**

i. Daily, prior to running the mail, change postage meter date and check moistener and ink supplies for adequacy to produce clear legible marking.

ii. Affix correct postage to items to be mailed.

iii. Separate mail as required by the local Post Office and band groups together.

14240 SPECIAL PROCEDURES

14241 BUSINESS REPLY (BR) AND POSTAGE DUE ACCOUNTS

A. **Business Reply Accounts-**When someone uses a BR envelope to mail information to an office, the USPS charges the mailing costs to that office's BR account.

1. **Establishment of a BR Account-**To establish a BR Account with the post office:

a. Contact the DSHS Mail Room Supervisor to obtain a copy of the current BR permit fee receipt and information about the accounting fee amount (refer to c. below).

b. Complete an *Invoice Voucher*, A-19, to request a warrant for payment of the annual accounting fee and sufficient funds to cover BR charges for three to six months;

c. Process the A-19 in accordance with local office procedures.

d. Upon receipt of the warrant, take it, a copy of the A-19, the Remittance Advice (RA), and the permit fee receipt (when received) to the local Post Office. Give these items to the postal employee, who:

i. Issues a receipt for each payment, with the total equaling the warrant amount;

ii. Signs the A-19;

iii. Date stamps the A-19 and the RA;

iv. Returns the A-19, RA, permit receipt, and warrant receipt(s).

e. Deliver these documents to the person responsible for maintaining the BR and Postage Due ledgers.

2. **Replenishment of BR Account-**Request additional funds for the BR Account about one month prior to the fund's depletion. To order funds:

a. Complete an A-19 requesting enough money to last three to six months;

b. Process the A-19 in accordance with local office procedures.

c. Upon receipt of the warrant, take it, the A-19 copy, and RA to the local Post Office. Give the items to the postal employee who:

i. Issues a receipt for the payment;

ii. Signs the A-19 copy;

iii. Date stamps the A-19 and RA; and

iv. Returns the A-19, RA, and payment receipt.

d. Deliver these documents to the person responsible for maintaining the BR and Postage Due ledgers.

3. **Payment of the Annual Accounting Fee**

a. Prior to the end of the calendar year, the DSHS Mail Room buys a BR permit from the USPS. Each office using BR services must then pay the USPS an accounting fee.

b. The Mail Room sends a notice of the annual accounting fee due and a copy of the permit fee receipt to the affected offices. When the receipt and accounting fee notice are received:

i. Complete an A-19 for the accounting fee; and

ii. Follow the procedures in section 14240, paragraph A.1.b.

B. **Postage Due Accounts**

1. Each office receiving USPS mail can establish/maintain a Postage Due Account with the local Post Office or make specific arrangements with the

local Post Office to handle postage due mail.

2. To order/replenish Postage Due Account funds, follow the instructions in section 14241, paragraph A.2.

C. **Maintenance of BR and Postage Due Account Ledgers**

1. Each office will designate an individual to maintain accurate records (ledgers) of all debits/credits made to the BR and Postage Due Accounts.

D. A-19 Post Office Receipt

1. When a Post Office receipt and/or an A-19 and related documents are received, record the account debit in the corresponding ledger(s) as follows:

   a. Enter the date from the Post Office receipt and the debit amount;

   b. Add the debit amount to the previous balance and verify the new balance with the Post Office account balance; annotate ledger for verification. The BR accounting and permit fees do not change the BR Account Balance.

   c. Attach related documents behind the A-19 and maintain the file in chronological order.

2. The local Post Office gives the office a *Postage Due Bill*, PS Form 3582-A, each day as charges are made against the account(s). The form shows each account's credit amount, the total credit amount, and the postage meter tape with the date and total credit amount.

3. When a PS Form 3582-A is received, credit the corresponding ledger as follows:

   a. Enter the credit date and applicable credit amount;

   b. Subtract the amount from the previous balance and enter the new account balance;

   c. File PS Form 3582-A in chronological order.

14242 CERTIFIED MAIL

A. Due to the reasons for using certified mail, assigned support staff in each office must maintain a record of each item sent certified. A certified mail log is used for this purpose.

1. Each piece of certified mail is promptly recorded in the log on the day it is mailed. After receipt from the Post Office, PS Form 3800s are filed in numerical order.

2. Each Return Receipt is recorded in the log when it is received from the Post Office. After logging in the Certified mail log, the PS Form 3811 is routed to the requester.

14243 EXPRESS MAIL

A. Occasionally, items may need to be mailed so they are received by the addressee the next day. This USPS service is called Express Mail.

B. Each office coordinates Express Mail service usage with the building mail room or the Post Office as is appropriate to that facility.

14244 ORDERING POSTAGE

A. When requesting postage, request an amount sufficient to last for at least a one month period.

B. For the Remote Meter Resetting System (RMRS) Meter, utilize the instructions as provided with the meter by Pitney Bowes.

14245 SECURITY PROCEDURES

A. Keep the postage meter key in a secured area (e.g., locked cabinet) when not in use. Only authorized personnel are to access the key.

B. Use postage for state business mail only.

14246 UNUSED POSTAGE REIMBURSEMENT

A. Envelopes and wrappings to which metered postage has been applied and subsequently not used are to be retained for reimbursement.

B. A maximum of once per month, the mail person:

1. Completes an *Application and Voucher for Refund of Postage and Fees,* PS Form 3533 and takes the completed form and envelopes/wrappings to the Post Office;

2. Receives from the Post Office a 90 percent reimbursement of the total postage amount;

3. Requests the Post Office to apply the reimbursement moneys amount to the office's BR or Postage Due account.

4. Upon application of funds to BR or Postage Due accounts, the receipt received from post office is given to individual who maintains the BR & Postage Due ledgers. If the BR or Postage Due account is **not** credited, the Post Office issues a reimbursement check. Upon receipt of this check, the office transmits it to OFR.

14300 RECORDS MANAGEMENT

See chapter 13000, section 13200, for procedures related to initiating case records.

14310 CASE RECORD TRANSFERS

A. See chapter 13000, section 13800, and chapter 15000, section 15202, for procedures.

B. Clerical staff are to read CAMIS mail at least once a day for statewide record requests.

14320 CASE RECORD MANAGEMENT

See chapter 13000, section 13600, for general record maintenance and section 13900 for procedures regarding record retention and archiving.

14330 CAMIS TRAINER

The CAMIS trainer is responsible for alerting clerical staff to all CAMIS policy/procedures changes to maintain this chapter.

14400 RANDOM MOMENT TIME STUDY

For expectations regarding Random Moment Time Study (RMTS), see chapter 11000, section 111200.

14500 REQUESTING A NOTARY

A. Following are the steps to be taken by CA staff to become a notary through the Office of Risk Management's (ORM) Risk Management Services Section.

1. The applicant completes an *Application for Appointment or Reappointment as a Notary Public*, #NP659-007 Notary Public App (R5/94), obtained from the Department of Licensing.

2. Once the application is completed, the contact person sends a memorandum to ORM, P. O. Box 45844, MS 45844, Olympia, WA 98504-5844. The following elements are included in the memorandum:

   a. Whether it is an original or renewal application.

   b. Name of the employee.

   c. Notary stamp delivery address.

   d. Contact person: name, address, and telephone number.

   e. Funding code.

   f. Whether or not applicant wants a notary stamp.

3. Once the applicant receives the certificate in the mail, and, if the applicant has requested the procurement of a notary stamp, the applicant gives a copy of the certificate to the contact person.

4. The contact person faxes or mails a copy of the certificate to Kimura Insurance Agency, P. O. Box 3142, Seattle, WA 98114. Telephone number: (206) 323-4773; Fax number: (206) 324-7668.

5. Kimura Insurance Agency will then send the stamp by United Parcel Service to the local or regional CA office's street address.

6. If the applicant is renewing their notary, ORM needs to receive the renewal memorandum 45 days before the applicant's notary expires.

7. Staff with questions may contact ORM at (360) 664-3249.

CHAPTER 15000 INFORMATION SYSTEMS STANDARDS

CHAPTER 15000 INFORMATION SYSTEMS STANDARDS 15-1
15100 INTRODUCTION 15-1
15200 STANDARDS 15-1
15201 Referrals (3/1/99) 15-1
152011 Purpose 15-1
152012 Procedure 15-1
15202 Case Assignment, Transfer, and Closure (3/1/99) 15-2
152021 Purpose 15-2
152022 Standard/Procedure 15-2
15203 Development and/or Installation of PC and LAN Based Systems for Children's Administration (10/30/98) 15-6
152031 Purpose 15-6
152032 Standard 15-7
152033 Procedure 15-7
15204 CAMIS Administrative Files (11/15/00) 15-9
152041 Purpose 15-9
152042 Standard 15-9
152043 Procedure 15-10
15205 Rescinded (11/30/96) 15-11
15206 Files for Legally Free Children (11/1/98) 15-11
152061 Purpose 15-11
152062 Standard/Procedure 15-11
15207 Access to CAMIS (5/1/93) 15-12
152071 Purpose 15-12
152072 Standard 15-12
152073 Procedure 15-12
15208 Social Service Payment System (11/8/94) 15-13
152081 Purpose 15-13
152082 Procedure 15-13
15209 Network Equipment Relocation and Connections (3/1/95) 15-13
152091 Purpose 15-13
152092 Applicability-To all CA employees. 15-13
152093 Standard 15-13
152094 Procedure 15-14
15210 Storage of Confidential or Mission Critical Data (3/1/95) 15-14
152101 Purpose 15-14
152102 Applicability-This policy applies to all CA employees. 15-14
152103 Standard 15-14
152104 Procedure 15-14
15211 Program Code Definitions (11/1/98) 15-15
152111 Purpose 15-15
152112 Standard 15-15
152113 Procedure 15-17
15212 Residential Address for Children Served by Children's Administration (8/17/95) 15-17
152121 Purpose 15-17
152122 Standard/Procedure 15-17
15213 Courtesy Supervision (11/1/98) 15-18
152131 Purpose 15-18
152132 Standard 15-18

152133 Procedure 15-18
15214 Interstate Compact Cases/Referrals (11/1/98) 15-19
152141 Purpose 15-19
152142 Standard 15-19
152143 Procedure-Interstate Compact Cases Must Be Entered Into The CAMIS Data Base In The Following Manner: 15-20
15215 Usage of State-Owned Equipment at Home (3/10/95) 15-21
152151 Purpose 15-21
152152 Applicability-This policy applies to all CA employees. 15-21
152153 Standard 15-21
152154 Procedure 15-21
15216 Standards for Input of Names (4/14/94) 15-22
152161 Purpose 15-22
152162 Standard 15-22
15217 State Licensed Facilities/Persons (7/19/94) 15-25
152171 Purpose 15-25
152172 Procedure 15-25
15218 Creating/Changing Log-in Id's For Users (3/1/00) 15-25
152181 Purpose 15-25
152182 Standard 15-25
152183 Procedure 15-25
15219 Securing Unattended Computer Terminals (7/1/99) 15-27
152191 Purpose 15-27
152192 Applicability 15-27
152193 Standard 15-28
15220 Updates to CAMIS Files (11/30/95) 15-28
152201 Purpose 15-28
152202 Applicability 15-28
152203 Standards 15-28
152204 Procedure 15-28
15221 Documentation of Legal Actions (11/30/95) 15-29
152211 Purpose 15-29
152212 Standard 15-29
15222 Documenting the Placement of Children in the Legal Custody of Children's Administration (2/17/99) 15-30
152221 Purpose 15-30
152222 Standard/Procedure 15-30
15223 Facility Complaints (2/1/98) 15-32
152231 Purpose 15-32
152232 Definition 15-33
152233 Standard 15-33
152234 Procedure 15-33
15224 Internet Access (11/1/96) 15-34
152241 Purpose 15-34
152242 Applicability 15-34
152243 Standard 15-35
15225 Service Episode Records (1/1/99) 15-35
152251 Purpose 15-35
152252 Standard 15-35
152253 Procedure 15-36

15100 INTRODUCTION

A. This chapter contains policies and procedures for the Case and Management Information System (CAMIS) and other electronic information systems used by Children's Administration (CA).

B. These policies and procedures have been reviewed and endorsed by the CA management team.

C. Each staff person in every office shall maintain a CAMIS manual, managers and supervisors are to ensure that all staff are aware of current policy and procedures.

15200 STANDARDS

15201 REFERRALS (3/1/99)

152011 PURPOSE

To establish a consistent statewide policy for handling intake referrals taken in one office which need to be referred for disposition to another office.

152012 PROCEDURE

A. The office first contacted will take referrals from the person with the Child Protective Services (CPS) or Family Reconciliation Services (FRS) complaint or concern. If technically feasible, the intake worker may transfer the referrer to an intake worker in the office where the referral would be assigned while keeping the caller on the phone.

B. The intake worker must complete a CAMIS Intake Referral, including completion of a statewide person search.

C. The intake worker must make an immediate decision to refer directly to another office or to the worker's supervisor.

D. If the original office decides to refer to another office, the sending office must:

1. Call an intake worker in the office to which the referral is being referred. Upon confirming the names of the intake worker and supervisor and their worker ID numbers, the original intake worker or supervisor will advise the receiving office of the referral number and any other pertinent information regarding the referral.

2. Record the receiving supervisor's ID in the "Ref Supvsr" blank on the referral in CAMIS.

3. Use WRKRAS (Worker Assignment) or REFUP (Referral Update) to change the assigned worker to the receiving office's intake worker and close the original worker's assignment.

4. Not FAX the referral to a non-secure fax machine in the receiving office nor print the referral to a printer in the receiving office.

E. The receiving office intake worker will print out the Initial Referral Summary using REFSUMDR and initiate the appropriate response.

F. The receiving office supervisor will review all Child Protective Services (CPS), Family Reconciliation Services (FRS), and Child Welfare Services (CWS) referrals and assign by using the REFREADY procedure.

15202 CASE ASSIGNMENT, TRANSFER, AND CLOSURE (3/1/99)

152021 PURPOSE

To ensure consistency in CAMIS and to enable on-line tracking of case assignment and file location.

152022 STANDARD/PROCEDURE

A. **Referrals and Case Assignment**

1. After a worker assignment is made for a referral, the supervisor or worker must record that assignment in CAMIS within five working days.

2. A referral is accepted and becomes a case when the referral meets one of the following criteria:

   a. The Child Protective Services (CPS) referral passes the sufficiency screen.
   b. A Family Reconciliation Services (FRS) intake request is accepted for services or the intake/assessment lasts more than 30 minutes.
   c. A Child Welfare Services (CWS) referral for assessment or services is accepted.
   d. A home study request is accepted.
   e. A request for services for any of the other programs listed in section 15211, below, is accepted for assignment or assessment.

3. The referral will be related to an existing case number for the family, if one exists, or a new case number will be created.

B. **Case Numbers**

1. **Family Cases**

   a. Family case files will be issued case numbers in CAMIS with the last digit being a "0." Regions or offices may determine which case letter ("H," "L", or "D") they will use on the family service files. Documentation will be stored in the family case binder. Service Episode Record (SER) for the case must be recorded using the family case file number.

b. It is not necessary to create a binder for an open case if there are no paper documents to file in the binder.

2. **Cases Involving a Child in Placement or In-Home Dependency**

a. If any out-of-home placement occurs or a Dependency/Child in Need of Services (CHINS) petition is filed, a dash case number will be established in CAMIS for the child. Each child will have only one open case. Dash numbers for siblings will be issued in the order the children are placed. If an older sibling comes into care or has legal actions instituted at a later date, issue the next dash number in order. The letter used in the dash case number will be "D." There will be no dash "0" case numbers for child placement or Dependency/CHINS cases. The client/child and the "X" (reference person) shall be one and the same for the dash file. Placement and legal history as well as foster care, group care, and medical payment must be recorded in CAMIS using the dash case number.

b. The local office opens a separate individual service record binder using the dash number only for children that are legally free, children placed in adoptive placement, or for a child whose case plan is distinctly different from the case plan for the child's siblings.

3. **Cases Involving Teen Parent(s)**

a. For cases in which the parent is under the age of 18 and the department is providing services to the teen parent and the teen parent's infant, a family case number will be issued in the teen parent's name. (NOTE: If the teen parent is in care or is involved in current Dependency/CHINS proceedings, the teen parent will have two case numbers in the teen parent's name; i.e., a dash number case open for the teen being a child in placement and a family case file with the teenager as the parent.)

b. A dash file off the teen parent's family case number will be created for the infant if the department has the legal authority to place the infant through a court order, voluntary placement agreement, etc. Lacking authority to place, the infant would have no case number. With the authority to place, the infant would have a dash number whether in the same home as their teen parent or in a separate placement.

C. **Case Names**

1. In order to provide consistency of the coding in CAMIS on referrals received and cases served by CA, staff will use the following definitions for case names.

TYPE OF CASE	CIRCUMSTANCES	CASE NAME
Family Case	Involves child who lives with both parents	Both parents. List the parent who is the primary caretaker first – if unknown, designate the mother
	Involves child whose parents are divorced/separated	Legal residential parent. If not established or if joint custody, then the parent who the child resides with the majority of the time.
	Involves child who was placed by parents (no DCFS involvement) with no legal transfer of custody	Parent who has legal custody
	Involves child whose legal custody has been given to someone other than a parent	The legal guardian
Child Case		Child's legal name
Facilities	Foster Family and Day Care home cases and Adoptive Home Applicants and Certified Adoption Homes	1. The provider 2. If two parent foster or adoptive home, list the foster or adoptive parent who is the primary caretaker first
	Child Placing Agency, Group Home, Day Care Center, Crisis Residential Center or other non-family type facility	Facility name

2. For facility records, on the Maintain Persons Related to a Case screen (CASERELS) in CAMIS, do not list any child in placement unless the foster parent is the child's legal guardian. Similarly, on DCFS client records, on the CASERELS screen, do not list any provider.

D. **Case Transfers**

1. Within a unit, the current social worker's assignment will be ended and the case reassigned in CAMIS to the new social worker. The reassignment on CAMIS will be recorded within five working days of the assignment.

2. Between units within an office, the current social worker's assignment will be ended and the case reassigned to the social worker's supervisor for review. Upon completion of supervisory review, the case will be reassigned to the new unit's supervisor. The receiving supervisor will then reassign the case to the new social worker.

3. With supervisory approval, a social worker in one unit may close their assignment and reassign directly to the receiving social worker. The

reassignment on CAMIS will be recorded within five working days of the assignment.

4. For transfers between offices, not including Courtesy Supervision case assignments described in section 15213, the following steps will be followed:

   a. The current social worker will complete the necessary documentation for transfer of the case. The current social worker will end their assignment and reassign the case to their supervisor for review.

   b. The sending office will contact the receiving office by telephone or e-mail to notify responsible staff of the transfer and to obtain the Social Service Payment System (SSPS) ID of the receiving supervisor/social worker.

   c. The sending supervisor's assignment will be ended and the case assigned to the receiving supervisor/social worker. The transfer of the case will be recorded in CAMIS and the record forwarded to the receiving office.

   d. The receiving office will issue a new case number if a case number does not already exist in CAMIS and close the receiving supervisor's/social worker's assignment on the old case number. Only one dash case number shall be open for a child at any time.

5. Following receipt of a request from another office for transfer out of closed files, Master Files will record the transfer of the record and assign the case to the receiving supervisor in CAMIS. The receiving office will issue a new case number if a case number does not already exist in CAMIS and close the receiving supervisor's assignment on the old case number.

E. Retrieval of Records from Record Retention Center

1. If a record is retrieved from Records Retention Center (RRC), responsible staff in the requesting office must:

   a. Update the case status on the old case number to indicate the appropriate status (Open, Closed, or Transferred to another office);

   b. Update the file folder status to indicate folder/binder location; and

   c. Add a supervisor/worker assignment to show to whom the record was sent.

2. If an office other than the one that sent a record sent to RRC requests a record, the receiving office must:

a. Issue a new case number if a case number for the receiving office does not already exist in CAMIS; and

b. Close the receiving office's supervisor/worker assignment out on the old case number.

F. **Case Closure**

1. The case status will remain open during the entire period in which the case is open for services to the family/child and while any additional documentation is being done on the case.

2. The dash case assignment will be closed when one of the following conditions is met:

   a. When the child is returned home, and there is no CHINS order;

   b. When the dependency or CHINS is dismissed, and there is no further legal authorization to place;

   c. (NOTE: If the child has a Dependency Guardianship established, do not close the dash case. The placement event will remain open and the placement episode will be closed. The family file for these guardianships will be closed.).

3. An active case is one in which the division is providing services to the family and/or child. Active cases will have the social worker assignment coded to match the definitions in section 15211, below.

4. A Services Inactive/Paperwork Pending (**S**) program assignment for a social worker or supervisor will be made if services to the family/child are ended but the social worker or supervisor has paperwork or documentation to complete on the case. The purpose of this worker assignment is to be able to track the workload involved in follow-up paperwork.

5. Case closing must be noted in CAMIS within two weeks of completion of all services, paperwork, and supervisory review.

15203 DEVELOPMENT AND/OR INSTALLATION OF PC AND LAN BASED SYSTEMS FOR CHILDREN'S ADMINISTRATION (10/30/98)

152031 PURPOSE

A. The purpose of this standard is to coordinate the development and/or installation of PC and LAN-based systems.

B. It assures efforts are not duplicated, documentation standards are met for ease of replication of applications, and application installation is compatible with the entire system.

152032 STANDARD

A. Development and installation of PC-based and LAN-based systems will be accomplished through coordination between individuals, sections, or regional developers and the Children's Administration Information Services Office.

B. This standard applies to all development and installation efforts on CA hardware.

152033 PROCEDURE

A. Procedure for New Application Development

1. When an individual determines the need for the development of a new application in the CA Information System, that person will submit a request to the person's Regional Administrator, DLR Regional Manager, HQ Division Director, as applicable, or designee, for approval. Local areas may wish to develop an approval process for routing before the request reaches the Regional Administrator. The request must contain:

   a. The reason for the application;

   b. Who will use the application;

   c. If the individual wishes to develop the application; and

   d. The contact person and that person's telephone number.

2. The applicable Regional Administrator, DLR Regional Manager, HQ Division Director, or designee, will approve or deny the request and notify the requester. If approved, the approving authority will send the request to the CA Office of Information Services for assignment of an Information Technology (IT) coordinator.

3. Working with the requestor, the IT coordinator will:

   a. Determine if such an application has been developed before and, if so, if it meets the requestor's needs;

   b. Determine if the application is compatible with the overall system;

   c. Determine the best support for the application;

   d. Develop the application, working with the requestor and the program manager, provide assistance and assure that program standards are met; and

   e. Oversee the installation of the application.

B. Procedure for Installation of an Existing Application

1. When an individual wants an application installed on CA Hardware, the person must make a request to the applicable Regional Administrator, DLR Regional Manager, or HQ Division Director, or designee. If the

individual is already working with the CA Office of Information Services, this step is not required. The request must contain the items noted in A.1. above.

2. The applicable Regional Administrator, HQ Division Director, or DLR Regional Manager, or designee, will approve or deny the request. If approved, the approving authority will forward it to the CA Office of Information Services for analysis.

3. The CA Office of Information Services will review the application for compatibility with the CA system, duplication of other applications on the system, and any debugging that may be necessary. If the application passes these tests, Information Services staff will install the application. If it does not pass the tests, Information Services staff will notify the requestor and the applicable Regional Administrator, HQ Division Director, or DLR Regional Manager for next steps.

4. In coordination with the requestor, the CA Office of Information Services will:

   a. Develop full technical documentation for installation of the application;

   b. Install or provide assistance to the requestor for installation of the application;

   c. Assist in the development of training or other services necessary for use of the application;

   d. In coordination with the applicable Regional Administrator, HQ Division Director, or DLR Regional Manager and requestor, determine who will maintain the application.

C. Procedure for Revision/Updating of a System Currently in Place

1. When revising a current application, staff must submit a request, through the applicable Regional Administrator, DLR Regional Manager, or HQ Director, or designee, to the Chief, CA Office of Information Services, describing:

   a. The nature of the needed revision;

   b. The date by which the revision is required;

   c. Whether the requestor would like to do the revision; and

   d. The contact person for the revision and the person's telephone number.

2. The CA Office of Information will coordinate next steps with the requestor.

15204 CAMIS ADMINISTRATIVE FILES (11/15/00)

152041 PURPOSE

To establish a statewide policy for securing CAMIS files that require restricted access.

152042 STANDARD

A. An Administrative File must be created when personnel of Children's Administration or their family members:

1. Are listed as a subject, victim, or client in a CPS, FRS, CWS, or Home Study referral; or
2. As a client in a case.

B. An Administrative File will be created upon verbal or written notice to the Children's Administration when personnel covered by the Public Assistance Bargaining Agreement or their family members are:

1. Listed as a subject, victim, or client in a CPS, FRS, CWS, or Home Study referral; or
2. Listed as a client in a case.-Notice of the request must be documented in the "Justification" portion of the Administrative File.

C. Within the context of Administrative Files, DSHS must define "family" for Children's Administration personnel and personnel covered by the Public Assistance Bargaining Agreement as follows:

1. Members of the household of any employee.
2. Other relatives designated upon the written request of the employee, assigned social worker, or client, with the approval of the DCFS Area Administrator, CA HQ Appointing Authority, or DLR Regional Manager. The written permission must be included in the case binder or license folder.

D. For all other DSHS employees, Administrative Files must be created for facility referrals/cases directly involving the employee as a subject of Child Abuse/Neglect.

E. Legally Free Child's Case Record: Upon the Final Adoption Decree and archiving of a legally free child's case record, the child's pre-adoption record must be made administrative.

F. High Profile Cases: The DCFS Regional Administrator or DLR Regional Manager may designate that a case is an Administrative File.

G. If an Intake Worker creates a referral which contains a person associated with an administrative file, the intake worker may have access to the referral for up to 72

hours or until the worker assignment is closed, whichever comes first. This will allow completion of the referral.

1. The Intake Supervisor will have access to the family history on the referral for 72 hours or until the supervisor's assignment is closed, whichever comes first.

2. If access is needed beyond the 72 hours, the intake worker or their supervisor will follow the established procedures for gaining access to the administrative file.

H. Any person, who has on-line access to CAMIS and also has been or is a licensed provider, must not have access to automated records pertaining their facility or any client placed that facility, past or present.

1. A CAMIS user will not be allowed access to records if he or she is associated with the business ID for the license if the facility is a family facility (I.e. Foster Home, Private Agency Foster Home, Private Agency Foster Home – No Children's Administration Funds, Specialized Receiving Home, Receiving Home, Mini-Center or Family Day Care Home).

2. If a CAMIS user for all other types of facilities has the role of Director or Owner, access will not be allowed.

3. An individual CAMIS user may be denied access to a specific license record on a case by case basis, based on Appointing Authority or DLR director approval. The user may or may not have been associated with the license itself but the appointing authority, or director of DLR or DCCEL has determined there is a real, apparent, or potential conflict of interest per Administrative Policy 6.04.

I. Files that are public record must remain public record. RCW 42.17.250, RCW 34.05.220, or WAC 388-01-040

J. Any Administrative File for a person qualifying in section II. A, B, D, F or G, must retain this status through the established retention period for hard copy files. If the qualifying circumstances no longer exist, administrative file status may be discontinued. There will be a periodic review and purge not less than once annually.

K. An HQ appointing authority, a DCFS Regional Administrator, or a DLR Regional Manager has final authority to resolve any disputes regarding administrative files.

152043 PROCEDURE

A. Referral and other information related to persons covered under this policy must be secured when discovered. Regional policy or the appointing authority for headquarters must define persons responsible for securing data.

B. If a person is hired by CA, a person search through CAMIS must be made. If the employee or a family member is currently in the CAMIS system and falls under the criteria in section 152042, the hiring supervisor must inform the employee that a file exists and has been secured.

C. All CA employees must be designated as employees in the person file of the CAMIS database for purposes of possible creation of Administrative Files. Other DSHS employees may contact the DCFS Regional Administrator to request that their names be entered into the person file of the CAMIS database and designated as employees. Appointing authorities must identify the person responsible for data entry.

D. **Justification Text**

1. The justification text must include an explanation as to why the file qualifies for Administrative Status.

2. For Administrative Files created under section II A, B, C, or D, the justification text must include the name of the employee and where the employee works.

15205 RESCINDED (11/30/96)

15206 FILES FOR LEGALLY FREE CHILDREN (11/1/98)

152061 PURPOSE

To establish a consistent statewide policy for establishing CAMIS case files for Legally Free Children

152062 STANDARD/PROCEDURE

A. When any child becomes Legally Free, the child continues to use the same CAMIS Person ID and case number until the child is adopted. The assigned worker uses the child's dash case number to document all Service Episode Records (SER). The worker will store all paper documents received or created after the child becomes legally free in a binder using the dash case number. The worker will change the address of the child to the local DCFS office with responsibility for the child's case. See section 15212.

B. The worker must not establish a case-to-case relationship between the child's pre-adoptive records and new adoptive records.

C. The worker must not delete the child's pre-adoptive closed case relationship from the child's original family case file. This information may be useful involving future referrals concerning the child's family of origin.

D. Upon the final Adoption Decree, the worker must close the child's dash case record. The worker establishes a new CAMIS person ID using the child's new legal name with **no** indication of the child's prior name. The worker establishes a new person-to-person relationship in the case relationship section of the adoptive family's case file.

E. If the adoptive family continues to receive services or later returns for services, the worker will document services for the family (including the adoptive child) through the adoptive family's case file.

15207 ACCESS TO CAMIS (5/1/93)

152071 PURPOSE

To establish who has access to CAMIS.

152072 STANDARD

A. The only persons having authorized access to CAMIS are CA staff and volunteers and work/study students given access by their Regional Administrator, Director, or Office Chief; internal or external auditors for limited audit purposes; and those persons, on an individual basis, whose access has been approved by the Office of Information Services Manager. Access to CAMIS shall be given on a need-to-know basis.

B. Other persons requesting CAMIS access may receive authorization only after their request is reviewed by the applicable Regional Administrator, Director, or Office Chief and approved by the Office of Information Services Manager.

152073 PROCEDURE

A. All persons who have access, pre-approved or granted by exception, shall receive basic CAMIS training and training in the specific applications they will use prior to their use of the system. Additionally they shall acknowledge in writing that they:

1. Understand the department's requirement for protecting certain information.

2. Understand the penalties and sanctions associated with unauthorized information disclosure.

3. Have read and understand applicable department policies and procedures governing information security.

B. Requests to give persons access shall be submitted to the Office of Information Services Manager and shall include:

1. Person or persons desiring access.

2. Agency for whom they work.

3. Which modules are being requested and reason for needing access.

4. Time-frame for which access is requested.

5. Systems to which access is requested (LAN, WAN, CAMIS, etc.).

6. Cost associated with their access and agreement on who pays those costs.

C. Requests may be submitted using the ISSD *Information Technology Service Request*, DSHS 17-015, or in memorandum format.

D. The Office of Information Services Manager, or designee, shall review the request with the CAMIS office and have authority to approve the request.

E. Computer Information Consultants (CIC) and/or LAN Administrators shall review who previously has been given access to CAMIS. If there are persons not in the approved category of users, requests for approval are to be submitted immediately.

15208 SOCIAL SERVICE PAYMENT SYSTEM (11/8/94)

152081 PURPOSE

To establish consistent statewide practice regarding use of the Social Service Payment System (SSPS), which is the automated system used to authorize delivery and purchase of social services, collect program and federal statistical and management data, and initiate the payment process for purchased services.

152082 PROCEDURE

The procedures to be followed are contained in chapter 9000, section 9400, of this manual and the *CAMIS Users' Manual*.

15209 NETWORK EQUIPMENT RELOCATION AND CONNECTIONS (3/1/95)

152091 PURPOSE AND

A. To provide guidelines for all CA employees regarding the handling of network related computer equipment within all offices of CA to:

1. Assure networks continue to function properly;

2. Minimize the number of system problems caused by users moving equipment and disturbing networks;

3. Keep site documentation accurate.

152092 APPLICABILITY

Network equipment and relocation and connections applies to all CA employees.

152093 STANDARD

A. All computer equipment attached to a Local Area Network (LAN) or Wide Area Network (WAN) is part of that network. Only CA Information Services personnel may authorize a change to the configuration of those networks. To connect or disconnect any equipment from that network, including a PC or moving patch cables, is to alter the configuration of that network.

B. All LAN and WAN related equipment will be maintained and handled by the regional CIC. The equipment will be purchased, installed, and serviced only under the direction and coordination of the regional CIC. Non-technical field staff are not authorized to disconnect, reconfigure, or move LAN and WAN equipment except under the coordination and direction of the regional CIC or the CIC's Information Services supervisor.

152094 PROCEDURE

In the event that an office within a region would like to relocate a piece of equipment (i.e., computer, printer, etc.) or change the configuration of the office LAN in some way, responsible staff are to contact their regional CIC for approval and follow the procedures as outlined by their region.

15210 STORAGE OF CONFIDENTIAL OR MISSION CRITICAL DATA (3/1/95)

152101 PURPOSE

A. To provide a policy for CA regarding the storage of confidential and mission critical data so that proper back-up may be made.

B. Confidential information includes all personal information (e.g., name, birth date, SSN, etc.) and case data (e.g., case number, type, allegations, etc.) relating to CA clients.

C. This policy is necessary to ensure that the administration is in compliance with the DSHS *Information Technology Security Manual*, section 5.3.3.

152102 APPLICABILITY-APPLIES TO ALL CA EMPLOYEES.

152103 STANDARD

A. Due to the critical and confidential nature of the data used by CA, it is necessary that all data files that contain confidential information or are mission critical in nature be stored on the network file server and not on local hard drives. This would include all information that might need to be accessed by a co-worker or supervisor in a staff person's absence.

B. Each file server within an office will be set up with a directory structure that users may access for the storage of these files.

C. A back-up shall be made regularly, using suitable back-up media, of the information on the network file server, and these files will be part of this back-up. The regional CIC will be responsible to ensure that a back-up of the file server is done at least on a weekly basis.

152104 PROCEDURE

The file server directory structure for users to store their files will be set up by the regional CIC. The regional CIC will publish the necessary information needed for staff to be able to access and use the directory structure for this data.

15211 PROGRAM CODE DEFINITIONS (11/1/98)

152111 PURPOSE

To establish consistent Program Code definitions in CAMIS.

152112 STANDARD

A. Program or Service/Activity Codes are entered in three different and unique places in CAMIS. There are Referral codes, Case codes, and File Folder codes. This standard specifically addresses referral codes and case codes.

B. **Codes Used in Referrals**

1. C Child Protective Services
2. W Child Welfare Services
3. F Family Reconciliation Services
4. N Licensing Complaint (Non-CPS)
5. H Home Studies

C. **Codes Used in Cases**

1. **Program Codes**

   a. C Child Protective Services

   b. W Child Welfare Services

   c. F Family Reconciliation Services

   d. D Teen Parent Day Care

   e. L Licensing

   f. A Adoptive Home Services

2. **Service or Activity Codes**

   a. H Home Study

   b. I Interstate Compact

   c. U Courtesy Supervision

   d. T Adoption Support

   e. S Service Inactive

D. The following definitions are to be used in determining which program codes are used in CAMIS for cases:

1. **C - Child Protective Services-**A case assignment would be coded **C** - CHILD PROTECTIVE SERVICES in the following circumstances:

   a. A referral is accepted for investigation. The case would be coded as CPS as long as the case is open for investigation, it has a service contract, or until dependency is established.

   b. Cases already open for **W** - Child Welfare Services would also be coded **C** - CPS while the new referral is being investigated.

2. **F - Family Reconciliation Services**

   a. A case assignment will be coded as F - FAMILY RECONCILIATION SERVICES for cases in which a referral or request for services has been accepted for assignment which meets the definition of FRS services in RCW.

   b. The maximum length of time a child/family would qualify for FRS is 90 days. For a case to continue as an FRS case beyond the 90 days, supervisory approval is necessary.

   c. If a Child in Need of Services (CHINS) petition is filed, the case will remain an FRS case until the CHINS is approved or denied.

3. **W - Child Welfare Services-**A case assignment will be coded **W** - CHILD WELFARE SERVICES when a case meets the following criteria:

   a. A case which initiates as CPS and has had a Dependency established. The case remains as a CWS case until the Dependency is dismissed, including legally free children placed in pre-adoptive homes.

   b. A case which initiates as FRS receiving continued services beyond the initial 90 days of FRS services or has had a CHINS approved by the court.

   c. Any request for services, accepted for assignment, from a family for a child that does not fit into any of the other categories.

4. **D – Teen Parent Day Care-**A case open for the provision of Teen Parent Child Care only.

5. **I - Interstate Compact-**A case open for supervision of children from other states under the Interstate Compact on Placement of Children (ICPC).

6. **H - Home Study-**A case open for the purposes of assessing whether a placement resource is appropriate for a child. This code does not apply to Foster Care Home Studies or to Adoptive Home Studies.

7. **U - Courtesy Supervision-**A case in which the worker assigned is supervising the placement of a child from another office within the state. This case shall also be open in the sending office as a CPS, CWS, or FRS case.

8. **A - Adoptive Home Services-**A case which is open under the Adoption Services Program. This code is to be used for the prospective adoptive parent/s only. The child's case remains open as a CWS case. This includes the adoptive home study.

9. **T - Adoption Support-**This is only to be used by the state or regional Adoption Support program managers for cases involving children with approved adoption support subsidy agreements.

10. **L – Licensing-**This code is used for licensing and respite care provider cases only. This includes foster care home studies.

11. **S - Service Inactive**

    a. This code is used to designate a case in which the worker has finished providing direct services, and the case is waiting for completion of paper work. Additionally, this code is used for supervisory review when the supervisor is reviewing the case pending closure. If the case is being transferred or reassigned, the appropriate program code for the type of program/services the case is receiving is used.

    b. Upon completion of direct services, the program code is closed and **S** - Service Inactive code is opened to the assigned worker or supervisor. This code is not opened unless the related direct service code is closed.

152113 PROCEDURE

Upon initial case assignment or assignment of additional workers to a case, one of the above program codes is used.

15212 RESIDENTIAL ADDRESS FOR CHILDREN SERVED BY CHILDREN'S ADMINISTRATION (8/17/95)

152121 PURPOSE

To establish a standard protocol for recording the address of children served by CA.

152122 STANDARD/PROCEDURE

A. For children served by CA, the following criteria will be used for establishing the residential address in their person record.

1. Children who reside with parent or legal guardian: Use the parent or guardian's address.

2. Children who are in the department's custody: Use the parent or guardian's address.

3. Legally free child: Use the office address of the DCFS office responsible for supervising the child. Code this address as a mailing address. Do not use the pre-adoptive or foster parent's address as a residential address.

4. If the child's parent or guardian is homeless, the street address may be listed as HOMELESS with the city and county showing where the family is normally found.

5. Children who are in care will have their current whereabouts recorded in their placement record.

15213 COURTESY SUPERVISION (11/1/98)

152131 PURPOSE

To establish uniform procedures for handling CA courtesy supervision cases.

152132 STANDARD

A. Courtesy supervision is used when the child or family is already present in the area of the second office. If a potential placement is being investigated, a Home Study assignment is used.

B. For courtesy supervision cases, the office with legal jurisdiction has responsibility for documentation and maintenance in CAMIS of all case information such as case status, addresses, and persons related to a case, and for all placement and legal history. The office providing courtesy supervision must indicate the existence and location of a courtesy supervision file and document the assigned social worker in CAMIS. Both offices will have responsibility for documentation of required Service Episode Records (SER) in CAMIS.

152133 PROCEDURE

A. CA staff must manage courtesy supervision cases in CAMIS in the following manner:

1. The office with legal jurisdiction must:-

a. Create and maintain CAMIS case file(s), indicate case and file folder status, the program code of their assigned worker, default address, and the worker assignment (CASWRDAT) for their office.

b. Be responsible for the maintenance of all persons and person information of those individuals related to the case(s).

c. Enter all placement and legal history for all children.

d. Document required SER for all cases to which they apply.

2. The office providing courtesy supervision must:

a. When the Home Study is requested for a non-custodial parent or non-guardian relative:

i. Create a referral for the family to be assessed using an "**H**" (Home Study) program code.

ii. Create a new case number and case file for the relative family using a case number from the office area where the relative resides. All CAMIS documentation and documents received regarding the relative will be filed under the relative's case number. The worker must not enter this information in the child file. The worker files a copy of the Home Study report in the child's binder.

b. Using the same case number as the office with legal jurisdiction, indicate the existence of a courtesy supervision file folder, indicate the file name, and, in "location notes," the office providing courtesy supervision.

c. Input the assigned courtesy supervision worker with the program code **U** for courtesy supervision, if or when the child is placed. Do not create a referral if Courtesy Supervision only is requested.

i. Create a physical file binder using the case number from the office with legal jurisdiction.

ii. Using the same case number(s) as the office with legal jurisdiction, document required Service Episode Records.

iii. Send the physical file to the originating office upon closing of the courtesy supervision case assignment.

3. If the originating office transfers jurisdiction to the office providing courtesy supervision, procedures for transfer of cases shall apply.

15214 INTERSTATE COMPACT CASES/REFERRALS (11/1/98)

152141 PURPOSE

The purpose of this policy is to establish uniform procedures for documentation of Children's Administration Interstate Compact in CAMIS.

152142 STANDARD

A. Interstate Compact on the Placement of Children (ICPC) cases involving children sent to another state must be considered CWS cases.

B. Interstate Compact cases involving children who are placed in Washington from another state must be considered Interstate Compact.

C. Interstate Compact requests for home studies must be considered Home Study cases until the child is placed in a Washington home.

152143 PROCEDURE

A. Interstate Compact cases must be entered into the CAMIS data base in the following manner:

1. The assigned social worker must document, update, and periodically review the status of children involved in Interstate Compact Cases using the CAMIS Interstate Compact Module.

2. CA designates cases for which home studies have been requested in Washington homes as "Home Study" program code **H**.

a. If the request specifies a home study of a parent or guardian prior to placement of children, the worker need not include children.

b. The CA office will give relatives for whom home studies are requested their own case number.

i. The social worker enters CAMIS documentation regarding the home study under the relative's case number and files hard copy information in the case binder.

ii. The social worker files a copy of the home study report in the child's case binder if the child is placed.

iii. The worker does not include the children to be placed in the relative's case file.

B. Children placed in a Washington home from another state:

1. Must be designated as "Interstate Compact" cases. The child(ren) will be added to the case file.

a. At the time of placement of a child with their parent or guardian, the child shall be included in the family's case file.

b. When the department places child(ren) in non-parent homes and non-guardianship relative homes, staff gives them their own independent dash case number (not a dash file number based on the relative's case number).

i. If a dash case number does not already exist for the child, staff creates a dash case number (CASSTART) with the next basic case number available for the office. Staff does not create a parent file (-0).

ii. CA staff creates a case to case relationship (CASCASCR) between the relative's case number and the child's case number in CAMIS.

iii. On the first screen of CASEUP3 of the child's case number, in the Notes, staff cross-references the child's case to the relative's case number. (Example: "See also 52D1111110 RelativeLastName, RelativeFirstName")

iv. The social worker must store documentation in the child's file.

2. Person information for the child(ren) in the legal module must include legal status of "dependent" and legal custody as "Other State."

3. The social worker need not document placement and legal action history in CAMIS on these cases.

C. For Interstate Compact cases involving children placed from Washington in another state, assigned CA staff must:

1. Designate as "Child Welfare Service" cases for the child(ren) placed under their case file number(s).

2. Maintain all placement and legal history in CAMIS for these children.

15215 USAGE OF STATE-OWNED EQUIPMENT AT HOME (3/10/95)

152151 PURPOSE

To provide a standard for CA regarding the use of state-owned computer hardware and software at home.

152152 APPLICABILITY-APPLIES TO ALL CA EMPLOYEES.

152153 STANDARD

A. CA employees may use state owned equipment at home with the approval of the DCFS Regional Administrator, DLR Regional Manager, Director, or Office Chief, as applicable.

B. This authority may be delegated.

C. State owned equipment must only be used for CA business.

152154 PROCEDURE

A. CA offices must establish procedures that include:

1. If the equipment is to be used consistently at the employee's home more than two weeks, documentation to justify why the employee needs to have this equipment at home.

2. A sign in/sign out sheet that includes a description of the item, state tag number, and a product serial number.

3. A check in procedure, when the equipment is returned, which includes checking the hardware and software for computer viruses that may have been introduced while the equipment was outside the office.

4. Employees must follow standard security procedures while the equipment is in their possession; e.g., locking doors, locating equipment away from windows, and securing the terminal while unattended. Confidential data may not be retained at an employee's home or shared with family members or other visitors to the home.

15216 STANDARDS FOR INPUT OF NAMES (4/14/94)

152161 PURPOSE

To provide a consistent standard for the entry of names in CAMIS for persons, businesses, contracts, licenses, and providers; to improve search procedures; and to improve data integrity.

152162 STANDARD

The following standards shall be used when entering names in the CAMIS system:

A. No spaces are to be used in names; e.g., McDonald and MacDonald, not Mc Donald and Mac Donald.

B. The only punctuation to be used will be the hyphen, "-"; as in Jones-Borland. Periods, commas, apostrophes, etc., will not be used.

C. Use full names when known and nicknames or alternate spellings as aliases; e.g., Elizabeth G Johnson, AKA: Beth Johnson, Liz Johnson.

D. The middle initial or name will be entered in the correct data field only. It will not be entered in the data field provided for the person's first name.

E. Titles such as Jr, Sr, II, III, Dr, etc., will be entered in "Title" data field. The only exception is if a first name is not known at the time of intake.

F. No "unknown" names will be entered for any reason, either first, last, or first and last. If there are allegations regarding an unidentified person or persons, any and all identifying information shall be entered in the allegation text; e.g., "presumed mother locked two female children, 5 to 8 years old, in the car and went into the bar. License # ABC123." If persons are later identified, complete information will be entered at that time.

G. Contract Names: When contracts are created, the business ID and provider number will be created in the same format (last name space first name space initial or title with no punctuation). Facilities may be abbreviated identically for

business and provider IDs. Once the business or provider number is pulled into the contract, it can be typed over to reflect the desired name format for the person/contract.

H. Day Care and Foster Homes: The licensee will be created in the licensing module following the same format as the provider file (last name space first name/spouse or other name). Each facility will have a business ID created at the time the license application is entered into CAMIS if one does not already exist. The female's name, if any, will be listed first; spouse or other name will be listed second. At the time the facility is licensed, the licenser will request an SSPS provider number using the above naming format. The provider number will be related to the existing business. See examples below.

I. Day Care Centers with Multiple Sites: A license will be created for each site, each with a separate business ID. The business ID for each site will be related to the appropriate SSPS provider number.

J. Private Agency Foster Homes: Private agency foster homes will be entered using the same naming format as for all other persons, business, licenses, contracts, and SSPS numbers (last name space female first name/male first name). Private agency foster homes will have business ID, license, and SSPS number, all listed the same. **The private agency foster home's address will be coded as the mailing address**. Under alternate name/address, type in the name and address of the agency that licensed them.

K. Examples of Name **Formats**

1. Contracts

a. Provider File: Jones James A

Contract: James A Jones
DBA: Jones James A

b. Provider File: NWYS/ASSESS/WHATCOM

Contract: Northwest Youth Services
DBA: NWYS/ASSESS/WHATCOM

c. Provider File: NWYS/CRC/REGIONAL

Contract: Northwest Youth Services
DBA: NWYS/CRC/REGIONAL

d. Provider File: Catholic Community Services

Contract: Catholic Community Services
DBA: CCS/SNO CNTY/CRISIS DC

2. **Day Care and Foster Homes**

a. Provider File Smith Mary A
License: Smith Mary A

b. Provider File: Smith Mary/John

License: Smith Mary/John

c. Provider File: Smith Mary/Jones Barbara

License: Smith Mary/Jones Barbara

3. **Day Care Centers with Multiple Sites**:

a. Provider File (UNYSIS): YMCA South County
Provider File (CAMIS/SBUS): YMCA S CNTY Main Site
YMCA S CNTY Lynndale

License: YMCA S CNTY Main Site
YMCA S CNTY Lynndale

b. Provider File (UNYSIS): YMCA Clark County Daycare

Provider File (CAMIS/SBUS): YMCA Clark CNTY
Hazel Dell
YMCA Clark CNTY
Cascade Park

License: YMCA Clark CNTY Hazel Dell
YMCA Clark CNTY Cascade Park

c. Provider File (UNYSIS): YMCA Yakima Daycare

Provider File (CAMIS/SBUS): YMCA Yakima Naches Ave
YMCA Yakima Summitview

License: YMCA Yakima Naches Ave
YMCA Yakima Summitview

d. Provider File (UNYSIS): YMCA Spokane Daycare
Provider File (CAMIS/SBUS): YMCA Spokane (School Name 1)
YMCA Spokane (School Name 2)
YMCA Spokane (School Name 3)

License: YMCA Spokane (School Name 1)
YMCA Spokane (School Name 2)
YMCA Spokane (School Name 3)

15217 STATE LICENSED FACILITIES/PERSONS (7/19/94)

152171 PURPOSE

A. To establish consistent statewide policy regarding individuals or facilities licensed or certified by the Division of Licensed Resources (DLR) to provide care for children as required by chapter 74.15 RCW.

B. These individuals or facilities shall have their current status documented, updated, and periodically reviewed within the CAMIS Licensing Module.

152172 PROCEDURE

The procedures to be followed are contained within *A USER'S GUIDE TO THE CAMIS LICENSING MODULE,* and its subsequent revisions.

15218 CREATING/CHANGING LOG-IN ID'S FOR USERS (3/1/00)

152181 PURPOSE

This standard provides procedure for Children's Administration (CA) staff regarding the creation of system user ID's in the CAMIS system, on the NT Domain, and for electronic mail for better security for systems and a more timely approach for assigning security.

152182 STANDARD

A. CA will identify individuals who are authorized to create and delete user ID's for the various computer systems used within the administration. These systems are currently the Case and Management Information System (CAMIS), the Windows NT domain, MAPPER, and the Outlook electronic mail system. A user ID needs to be created in each of these systems in order for each user to access the information needed to perform his or her job functions.

B. Security rights that allow a user to create system ID's shall be limited to a small number of staff.

152183 PROCEDURE

A. CA staff shall use the form *Information Systems Request Form for Children's Administration* to identify and authorize needed security. The individual(s) creating system user ID's need to have this information two weeks before a new employee begins work in order to have security in place before the employee's first day on the job.

B. This form must be included in entrance and exit interviews, filled out by the Human Resource Consultant Assistant (HRCA) or the supervisor of the new employee, and faxed or mailed to CA headquarters and the local/regional Information Technology Systems Specialist (ITSS) **one week prior** to the employee's first day and **no more than one week after** their last day of employment.

1. Creating a user new to the Administration

a. At least two weeks before the employee's first day, a user ID needs to be created within the CAMIS system. This ID will be generated from CA headquarters. This will generate the seven character alphanumeric log-in ID that will be used with the other systems. The job classification/title and office information for the user is to be entered at the time this ID is created. If necessary, the user may need to have an SSPS worker number created at this time.

b. If the user is hired into a new position, using the ID generated in CAMIS, a new user profile will need to be created in the NT Domain by a CA headquarters ITSS staff person and a user directory created. Within this profile, the user will be added to the groups needed for them to access necessary information and printing capabilities. This will give the user access to the Local Area Networks (LAN) and the mainframe where CAMIS resides.

c. If the person is an intern or work study student, only three months' access will be given.

d. If the user is in an existing position that has been vacated, any files not relating to this position should be removed from the fileserver by the region's or headquarters' ITSS or exiting employee's supervisor. Any files that are related to the position should be transferred to the new employee by the region's or headquarters or exiting employee's supervisor. Also using the ID generated in CAMIS, a new user ID will need to be created in the Outlook-MS Exchange e-mail system by the office's Outlook-MS Exchange domain administrator.

e. If the user has another ID created by another agency, that ID must be used only if that ID is available in the CAMIS system.

f. If the user needs security for specific CAMIS applications, the supervisor submits via memo the request for security and training to the regional CAMIS automation trainer.

2. Moving a User Within the Administration From One Position to Another

a. Since the user should already have a CAMIS user ID and NT domain ID, CA Headquarters Help Desk staff needs to update the CAMIS and NT ID's by changing the office information. The NT ID information will be updated by the local/regional ITSS.

b. An e-mail ID may need to be created if the user is moving to an office with a different e-mail domain.

3. Deleting a User From the Respective Systems

a. **CAMIS** -- When a user leaves CA, the HRCA notifies the CA Help Desk and the local/regional ITSS within one week of the employee's departure.

   i. The local/regional ITSS CA Technical Help Desk will update the CAMIS account information by putting a date in the *Inactv Dt* field. This will trigger the events to remove access security and ensure the security integrity of the CAMIS system.

   ii. The local/regional ITSS will transfer any mission critical files from the existing employee to the employee's supervisor (if necessary) and then delete the user's profile from the e-mail system and file server.

   iii. If the person is remaining with the administration, the employee's CAMIS ID remains active.

b. **NT Domain** -- When a user is leaving CA permanently, the NT domain ID is to be deleted. If the user is leaving the administration temporarily, the NT domain ID is to be deactivated until the user returns.

c. **Outlook E-mail** -- The Outlook administrator also deletes the e-mail ID at this time.

d. **Other Systems** – When a user no longer needs access to other Information Services, the HRCA or supervisor notifies the Technical Help Desk ITSS, who will remove the user's access to those systems.

15219 SECURING UNATTENDED COMPUTER TERMINALS (7/1/99)

152191 PURPOSE

A. To provide a policy for CA regarding the securing of computer terminals that provide access to confidential and mission critical data.

B. Confidential information includes all personal information (e.g., name, birth date, SSN, etc.) and case data (e.g., case number, type, allegations, etc.) relating to CA clients.

C. This policy is necessary to ensure that the administration is in compliance with the DSHS *Information Technology Security Manual*, section 6.3.2.

152192 APPLICABILITY

This policy applies to all CA employees working in CA offices or in homes.

152193 STANDARD

A. Due to the critical and confidential nature of the data used by the Administration, it is necessary that all data files and information that are confidential or mission critical in nature are secure when staff leave their terminals unattended.

B. Employees must log off from CAMIS if they do not intend to use CAMIS for documentation or review of data for any period in excess of 90 minutes. CAMIS will automatically log off any user who has remained "idle" in the system for longer than 90 minutes. The automatic log off is necessary to assure data security, to allow active workers freedom to access the system, and to keep the system cost efficient. System users creating or updating CAMIS records, reviewing existing records, and/or performing searches in the system will not be involuntarily logged off if they perform any of these activities at least once every 90 minutes.

C. Employees who use computers that access the Local Area Network (LAN) must either log off of their terminals or lock their terminals with a password when they leave their terminals unattended.

D. For instructions on how to log off of the system or lock the computer with a password, staff should contact their SHPM 2 – CAMIS trainer.

E. Computer terminals within CA will not be set up to automatically enter the user ID and password into either the LAN or CAMIS system via a macro or program.

15220 UPDATES TO CAMIS FILES (11/30/95)

152201 PURPOSE

To ensure that CAMIS files represent the work of the person who originally entered it or the designated supervisor

152202 APPLICABILITY

All CA employees.

152203 STANDARDS

All initial documentation in CAMIS shall remain a discrete representation of the information available at the time it was entered.

152204 PROCEDURE

A. No textual information shall be completed or edited after five working days of initial input. CAMIS text shall be updated by the person who created it or by the designated supervisor. A designee shall indicate for whom he or she is inputting the text.

B. For licensing, case, referral, and facility complaint SERs, any new or corrected text information shall be documented in a **separate, subsequent SER**.

C. For Risk Tags any changes to the risk tag shall be added below the original risk tag text. It shall be dated and the person making the addition shall sign by typing their name at the end.

D. Summary assessment text corrections must be made within 5 days of the initial input. Any changes needing to be made subsequently will need to be recorded in a **new summary assessment**.

15221 DOCUMENTATION OF LEGAL ACTIONS (11/30/95)

152211 PURPOSE

A. The purpose of this policy is to require the documentation in CAMIS of legal actions on behalf of children for whom CA has legal custody or is making payment.

B. This policy also clarifies which legal actions must be documented.

152212 STANDARD

A. **Information Which Must Be Recorded-**Legal actions must be recorded for all children for whom DCFS has legal custody or has filed a petition. There are five types of legal data that need to be recorded in CAMIS. These are:

1. **Legal actions** are date specific and include all legal actions taken in regards to the child, which establish custody, authority to place, legal status, or which meet review requirements.

2. **Legal status** refers to the type of custody the department has for the child. Legal status will be derived from the legal actions entered. Dates will be defaulted according to the legal action dates entered (may be overridden).

3. **Custody** refers to the agency(s) that has custody of the child. [If DCFS has no custody of the child (either alone or jointly), on-going legal actions need not be entered. Events may still be documented as DCFS may have payment responsibility.] Dates will be defaulted according to the legal action dates entered (may be overridden).

4. **Court of Jurisdiction** refers to the type of court in which the legal proceeding occurs (county/superior court, court of another state, or tribal court). If a tribal court has jurisdiction, the specific court is required to be documented.

5. **Permanency Plan** must be documented within the first 60 days of placement. A primary permanency plan is required and an alternate plan is optional.

B. **Timeliness for Data Entry-**Authority to place must be input prior to recording a placement in CAMIS. Ongoing legal actions must be documented in CAMIS within 14 days of receipt of the order.

C. **Children for Whom DCFS Does Not Have Custody-**In legal actions, the worker must document custody. In placement the worker documents events in order for

payment to be authorized. As CA does not have responsibility for these children but does make payment, there is no ongoing requirement to enter legal actions.

15222 DOCUMENTING THE PLACEMENT OF CHILDREN IN THE LEGAL CUSTODY OF CHILDREN'S ADMINISTRATION (2/17/99)

152221 PURPOSE

To ensure consistency in the CAMIS system for documenting the whereabouts of children who are in the custody of Children's Administration (CA).

152222 STANDARD/PROCEDURE

All children for whom CA has responsibility through a court order, protective custody, or Voluntary Placement Agreement (VPA) must have their whereabouts documented. This shall be done in the "Placement" module of CAMIS.

A. **Requirements for Timeliness of Data Entry-**Children, upon initial removal from their parent's or guardian's physical custody, must have their placement documented within five days of placement. All other placement changes must be documented within 10 days of the change or the SSPS deadline, whichever comes first.

B. **Documentation of Placement Episodes and Events**

1. Each episode of out-of-home placement will be documented by the entry of the Original Placement Date (OPD). Closure of the placement episode will be generated automatically when a placement event with a birth/adoptive parent is documented or a dependency guardianship order (as to both parents) or adoption finalization is documented in legal actions. The social worker or designee must do any other episode closure.

2. Each placement event will be documented in CAMIS. The moving of a child from one out-of-home placement to another out-of-home placement does not interrupt the placement episode.

C. **Temporary Placements**

1. A temporary placement is one that is not intended to interrupt the current placement event.

   a. Examples include respite care; a child's hospitalization with intention to return to the prior placement; a child's running away with the intention of returning to the prior placement; a receiving care placement which may occur during a run if the intention is to return the child to the prior placement; or a detention placement with the intention to return to the prior placement.

   b. It is also possible to place a child at home in a trial home visit without the intention of interrupting the placement episode. For example, the child has been in placement and is returned home

for a short period waiting for a group care bed to become available or a child visits in the home of the parents for a period of time to prepare for a return to the parents home.

2. All of these temporary" (**TMP**) placements are designated in CAMIS by marking a **Y** under the **TMP** column for that placement. Continued payment is allowed to both the placement from which the child was placed and to the temporary placement. Double payment is allowed for a period of up to 15 days without an exception to policy (DSHS 5-210).

D. In-Home Dependencies

1. In-home dependencies will be documented in both the placement and legal modules.

   a. First, in the legal module, a permanency planning code of "**N**" (no plan: child placed with birth/adoptive parent) must be entered any time a child is placed with a birth/adoptive parent. This code must be used whether or not that parent has custody through a family court order.

   b. In placement, the worker must update the address and list the primary caretaker. This will not open an episode; it will document the whereabouts of the child. Events not indicating a placement **may** be recorded here (they are not required), including respite, detention, hospital, Juvenile Rehabilitation Administration (JRA) placement, or runaway.

2. When a dependent child is returned home from a placement, the worker will document placement with a birth/adoptive parent (either custodial or non-custodial). The worker will need to then update the primary caretaker and address.

3. Any time the child is placed with a birth/adoptive parent ("**BA**" or "**BN**" codes) from an out-of-home placement, the child's episode will be closed with the reason defaulted as "returned to birth/adoptive parent."

E. **Documentation of Family Structure-**When placing a child with a relative or court-ordered unlicensed placement, the worker must document the family structure. This will be done through creation of a business ID for the family in which family structure, primary caretaker, and address will be identified.

F. **Respite Care**

1. Respite care from a birth/adoptive parent's home will not be opened as a placement episode **as long as** the department does not have custody of the child. If a voluntary placement consent has been taken, then placement episode must be opened as the department has assumed custody of the child.

2. When a child is placed in respite from an out-of-home placement, there is no state-wide requirement to document these temporary placements in the placement module.

G. **Situations When Payment Continues but the Episode Is Closed-**There are two situations in which the permanent plan is completed but payment remains open. These are:

1. Guardianship

a. Entry of a legal action of dependency guardianship as to both parents derives closure of the placement episode as the permanent plan is established. The placement event remains open allowing for continued payment to dependency guardians and for services to the child. Those in guardianship status over 18 years of age with open events will have those events automatically terminated annually unless a voluntary consent is documented in legal actions.

b. When a superior court guardianship (chapter 11.88 RCW) is established, the episode and event must be closed upon the date of the guardianship order. Dependency dismissal is also required and must be documented in the legal actions.

2. Adoption

a. When an adoption finalization is documented in legal actions, this will derive the closure of the episode and event with the reason code of adoption.

b. A dismissal of dependency must also be documented when entered in Juvenile Court. Payment may continue to the end of the month in which the adoption is finalized.

3. Child(ren) in Tribal or Private Agency Custody Only

a. The placement episode record of a non-CA custody child(ren) must be opened and closed on the date of placement with a reason code of "**TR**," Washington State Transfer to Other Authority.

b. The placement **event** remains open, and the appropriate entries are made in the legal module. See section 15221.

15223 FACILITY COMPLAINTS (2/1/98)

152231 PURPOSE

A. To establish consistent statewide CAMIS standard regarding all referrals/complaints made about:

1. Facilities licensed or certified, or facilities required to be licensed or certified, by the Division of Licensed Resources (DLR), or

2. State regulated care facilities.

152232 DEFINITION

A. Facility Referral -- A referral received by Children's Administration (CA) regarding:

1. A DSHS state regulated facility providing care to children that involves allegations of abuse/neglect; or

2. A facility required to be licensed under chapter 74.12, 74.13, 74.15, or 34.04 RCW that involves possible licensing violations, or allegations of abuse/neglect at the facility or by the provider or a staff member.

B. Facility Complaint Record – A CAMIS record that is created from a CAMIS Facility referral which is used to generate critical incident reports and track licensing issues, actions and resolutions.

152233 STANDARD

A. Facility Referrals/Complaints shall be documented, investigated, updated with actions taken, and reviewed.

B. Referral notification will be given to appropriate workers and managers. Critical incident reports and workload management reports will be produced.

C. Investigations of referrals/complaints against CA licensed or state regulated care facilities for children shall coordinate with specific procedures detailed in the CA *Operations Manual*, chapter 5000, section 5100, CRITICAL INCIDENT MANAGEMENT, and section 5300, FACILITY INVESTIGATIONS.

152234 PROCEDURE

The CAMIS procedures to be followed are contained within *Section XII Facility Complaint* of the *CAMIS Users Manual*, and its subsequent revisions.

A. **Documentation**

1. CA Intake social workers and licensers are responsible for ensuring that all documentation regarding facility referrals/complaints, including allegations, investigation and resolution of complaints, is completed in CAMIS, following procedures found in *Section XII Facility Complaint* of the *CAMIS Users Manual* and its subsequent revisions.

2. DLR/CPS Facility Investigators are responsible for ensuring that CPS Summary Assessments on facility complaints are completed in CAMIS, using the referral number, for accepted CPS referrals.

B. **Primary Caretaker-**If the facility complaint referral is in regard to a child's former placement resource, the referral/complaint record will be created on the former placement provider.

1. The provider **must** be designated as the primary caretaker when recording a facility complaint regarding a family childcare home or a family foster home.

2. A primary caretaker **must not** be designated when recording a facility complaint regarding any other type of facility; e. g., Child Placing Agency, Crisis Residential Center, Day Care Center, Day Treatment, Group Home, Juvenile Detention Center, Maternity Home, Mini-Center, Regional CRC, Special Programs, etc.

C. **Deleting Complaint Records**

1. In cases where a complaint record is incorrectly created for a facility, the complaint record may be deleted after supervisory review and management concurrence. This does not delete the referral. Examples of situations where a complaint record may need to be deleted include:

   a. A facility that is not required to be licensed and is not a state regulated care facility;

   b. A former staff member is involved in a referral not related to the facility;

   c. A licensee or staff member was involved in a referral where there are no licensing or child abuse/neglect issues concerning the facility or a facility's staff member.

   d. A referral shows licensing issues only because the people associated on the business record for a license inaccurately contains the name of a person who is identified as a victim or subject in the referral; e. g., a foster child is listed in the BUSRELS of a foster home and a report is received in which the child is listed as a victim or subject, but the alleged CA/N did not occur in any facility.

D. **Public Disclosure-**Licensing staff may release information regarding complaints on a licensed facility consistent with the CA *Operations Manual,* chapter 13000, section 13700, RECORD ACCURACY, PRIVACY, AND DISCLOSURE.

15224 INTERNET ACCESS (11/1/96)

152241 PURPOSE

To provide a policy for CA regarding the use of the Internet, also known as the World Wide Web (WWW), for state business purposes.

152242 APPLICABILITY

This standard applies to all employees of CA working in CA offices or in homes using state resources for Internet access.

152243 STANDARD

A. CA will provide access to some Internet sites through the administration's intra-net server. This should be sufficient access for the majority of the administration's staff. For those that need a greater ability to search for new resources, the Internet can be used by CA staff under the following governing factors:

1. Staff are to limit their access to Internet sites that can provide resource information for CA business. CA staff may not access the Internet using state resources for buying or selling of personal items or for personal entertainment and/or business.

   a. WAC 292-110-010, Use of State Resources, states in part:

      i. "*A state officer or employee may not make private use of state computers or other equipment to access computer networks or other databases including, but not limited to, electronic mail and electronic bulletin boards for personal use unrelated to an official business purpose*."

   b. Inappropriate use of the Internet by CA staff may result in disciplinary action.

2. Access to the Internet using CA equipment will be randomly monitored. This will provide information as to what site was accessed by which computer.

3. Before downloading information from the Internet to the local network, staff will consult with their regional CIC to ensure there will not be a negative impact on the Local Area Network (LAN) or the file server.

4. Internet electronic mail is also available to all staff through the Outlook e-mail system. Internet mail is also to be used only for state business purposes. Internet e-mail provided to staff at work is not to be used for personal business.

15225 SERVICE EPISODE RECORDS (1/1/99)

152251 PURPOSE

To ensure consistency in the CAMIS system for documenting of Service Episode Records (SER) and to provide standards so that statistical reports can be generated for case contacts.

152252 STANDARD

A. The assigned social worker will complete SER in CAMIS for all case events/activities within a reasonable time following the occurrence of the event/activity, except for SER relating to blood-borne pathogens protection plan. (See *Operations Manual*, chapter 5000, section 5700).

B. The social worker will create typed or handwritten SER to document activities related to a client's HIV and will maintain the SER in a sealed envelope in section VIII of the Division of Children and Family Services (DCFS) binder or section F of the Division of Licensed Resources (DLR) license folder.

152253 PROCEDURE

A. The social worker must complete SER (narrative case recording) in CAMIS within a reasonable time after an event, activity, or contact occurs to ensure accuracy of recording, in no case more than 30 calendar days from the date of the event or case activity. See chapter 13000, section 13100.

B. DCFS staff must use the CAMIS procedure SERS to record SER for all referrals, cases, and persons.

C. DLR staff must use the CAMIS procedure SERS to record SER associated with facility complaints (use referral number) and licenses (use license number). For additional details on timelines and format for DLR/CPS investigation SER, see the DLR protocol: *Investigating Abuse and Neglect in State Regulated Care*.

D. The DCFS social worker must document all case activity in CAMIS using the family case file number. If the child is legally free, placed in an adoptive home, or has a distinctly different case plan from that of their siblings, the worker uses the child's dash case file number.

E. See chapter 13000, section 13100 for case recording and documentation requirements and limitations.

F. **Supervisory Reviews-**The supervisor must record the monthly case reviews and the case review for a CPS - 90 day extension with the following codes:

1. Monthly case reviews - use code **SR** - Supervisory Review. The supervisor can record multiple Supervisory Review SER from within the WRKRCAS procedure. If an individual SER with specific case notes is needed, the supervisor may also use the SERS procedure.
2. CPS 90 day extension decision - use code **9D** - CPS 90-day extension review.

G. **Child Protective Services-**For Child Protective Services cases, the social worker must:

1. Relate investigation SER to the referral(s) being investigated. CAMIS will automatically associate the referral SER with the related case number.
2. Record the initial face-to-face contact with each child victim on referrals receiving the high standard of investigation with the **IF** - Initial Face-to-Face code. The worker must select person ID(s) for the child(ren) contacted and code the location of the interview on the SER in CAMIS.
3. Record attempts to contact the child victim with the **AI** -Initial Face-to-Face Attempt to Contact code. The worker must select person ID(s) for the child(ren) the worker attempted to contact.

4. Record interviews with an alleged subject of Child Abuse/Neglect (an individual alleged to have abused or neglected a child) for the purposes of obtaining the individual's statement regarding the allegations with the **SU** - Subject Interview code.

5. Record initial contacts with the child's parents/guardians as required by RCW 26.44.030 with the **IP** - Initial Contact with Parent/Guardian code.

H. **Waivers for Initial Face-to- Contact-**If a supervisor issues a waiver for the initial face-to-face contact with a child victim on a CPS referral receiving the high standard of investigation, the supervisor must record the waiver with the **WI** - Waive Initial Face-to-Face code and select and relate the person ID(s) for the child(ren) to the SER.

I. **Out-of-Home Placement or In-Home Dependency Cases-**The following requirements apply to cases involving children in out-of-home placement episodes in licensed and unlicensed facilities or In-Home Dependency:

1. The social worker must record face to face health and safety contact with the **90** - 90 Day Health and Safety Contact code. The worker must select person IDs for the child (ren) contacted and code the location of the interview on the SER in CAMIS.

2. If a supervisor waives the face to face health and safety contact, the supervisor must record the waiver with the **W9** -Waive 90-Day Health and Safety Contact Supervisory Waiver code. The supervisor must select and relate the person ID(s) for the child (ren) to the SER.

3. When documenting visits that occurred between parent and child, the worker must select and relate the child's person ID to the SER, using one of the following codes to record these visits:

   a. **SP** - Supervised Parent/Child Visit;

   b. **UP** - Unsupervised Parent/Child Visit.

4. If the social worker receives a written report regarding a visitation, the social worker must at a minimum document the date of the visit and refer to the written report in the text of the SER.

5. The social worker must record the fact that a scheduled visit did not occur between parent and child with the **NV** -Parent/Child Visit Did Not Occur code. The social worker must select and related the person ID(s) for the child(ren) to the SER.

J. **Cases Involving Staffings-**When documenting the following types of staffings, the social worker must select and relate the child (ren) person ID(s) for whom the staffing is held to the SER in CAMIS. If the social worker receives a written report regarding a staffing, the worker must, at a minimum, document the date of the staffing and refer to the written report in the text of the SER.

1. Child Protective Team Staffing -- use **CH** - Child Protect Team staffing code.

2. LICWAC or Tribal Staffing -- use **LS** – LICWAC/Tribal staffing code.

3. Prognostic Staffing -- use **PS** - Prognostic Staffing code

4. Permanency Planning Staffing -- use **PP** - Permanency Planning Staffing code.

K. **Communication with Legal Representatives-**The social worker must record all SER regarding communication with the Office of the Attorney General and with county prosecuting attorneys with the **AG** - Consult with AAG code. Until CAMIS can automatically print the Consult with AAG SER separate from all other SER, the worker must document the communication as follows:

1. Record only the date and time of the contact in CAMIS.

2. Store all details regarding the communication with the AAG in the "Privileged Communication with AAG" section of the binder and not in CAMIS.

L. Deleting Service Episode Records

1. In instances where the worker has incorrectly created an SER, the social worker may request deletion of the SER record after supervisory review and concurrence. Upon supervisory approval to delete an SER, the CAMIS trainer or other assigned staff will delete the incorrect entry. Examples of situations where staff may need to delete an SER record include:

   a. Duplicate SER (if they are exactly the same). Do not delete an SER record that the social worker or supervisor created to add additional information or clarify a previously entered SER.

   b. The worker chose the wrong SER code when the worker created the SER.

2. If the worker related incorrect ID(s) to the SER, the worker can update the SER and select the correct ID(s).

CHAPTER 16000 : DEFINITIONS

The following definitions apply to the Children's Administration (CA) *Operations Manual*.

"**ACQUIRED IMMUNE DEFICIENCY SYNDROME**" (AIDS) - a diagnosis given if an individual is infected with Human Immunodeficiency Virus (HIV) and has an AIDS defining condition or laboratory evidence of severely impaired immunity. These conditions in adults include pneumocystis carinii pneumonia (PCP), invasive cervical cancer, and tuberculosis. In children, symptomatic infection (Class P-2) might include PCP, bacterial infections, neurologic disease, or cytomegalovirus.

"**AUTHORIZING A PLACEMENT**" is any situation where CA staff are called upon to make a recommendation about the suitability of a placement resource for a child.

"**BLOOD BORNE PATHOGENS**" means pathogenic microorganisms that are present in human blood and can cause disease in humans. These pathogens include, but are not limited to, Hepatitis B Virus (HBV) and HIV.

"**CASE FILE MAKE-UP**" - For Case File Make-up, the following definitions apply:

A. **Case Number**: A case number consists of a two-digit office number, a one-letter program code, a six-digit basic number, and a one-digit suffix number.

B. **Case Record**: The folder(s) containing forms and documents related to a person or family group of CA clients.

C. **Client**: Any person requesting or receiving services in a CA office.

D. **Master File Clearances**: The research of initial information received by intake is verified and updated/input. This consists of a statewide CAMIS search, ACES check, and birth certificate search.

E. **Basic Number**: The basic number is a six-digit number unique within a CA office. The basic number is assigned upon opening a case. The basic number immediately follows the program code.

F. **Suffix**: A suffix is a one-digit number used to distinguish between a family record and a child's placement record (dash record).

"**CHILD CARE INSTITUTION**" means a private childcare institution, or a public child care institution that accommodates no more than 25 children, and is licensed by the state in which it is located or has been approved by the agency of the state or tribal licensing authority (with respect to childcare institutions on or near Indian Reservations) responsible for licensing or approval of institutions of this type as meeting the standards established for such licensing. The definition does not include detention facilities, forestry camps, training schools, or any other facility operated primarily for the detention of children who are determined to be delinquent.

45 CFR 1335.20

"**CHILD DAY CARE PAYMENTS**" - The following definitions apply to the Child Day Care Payments Program.

A. "**Approving Worker/Authorizing Worker**" means the approving worker is the representative of DSHS who establishes that the client is eligible to receive childcare benefits. The authorizing worker is the representative of DSHS who authorizes childcare payment through the Social Service Payment System (SSPS). The approving worker is often the authorizing worker also.

B. "**Child**" is a person 12 years of age or younger. Special needs childcare may be authorized for a child 19 years of age or younger.

C. "**Family**" means two or more persons related by blood, marriage, or adoption residing in the same household.

1. Related adults residing together, other than spouses, are each considered a separate family. Unmarried parents living together are considered a family for purposes of determining income eligibility.

2. A child living with legally non-responsible relatives, a minor living independently, and a child living under the care of unrelated persons are also considered one-person families.

3. A school-age parent residing in her/his parent's home with her/his child is considered a separate family unit for purposes of determining family income for eligibility for the Teen Parent Child Care Program.

4. Only members of the immediate family residing in the same household are included in family size.

5. Only members of the immediate family currently residing in the same household are included in family size for the military family whose mother or father is on active duty overseas or out of state.

D. "**Gross Income**" is both earned and unearned income. Earned income includes wages, overtime, tips, etc. Unearned income includes TANF grants (children's only), Social Security, Supplemental Security Income (SSI), child support, pensions, etc.

E. "**In-Home Care**" means childcare given by:

1. A relative in the child's own home. "**Relative**" means a grandmother, grandfather, aunt, uncle, cousin, or an adult sibling who lives outside the family home. See definition of "Relative Care-Giver," below. Or

2. An unrelated person in the child's own home.

In-home care is exempt from licensing.

F. "**Out-Of-Home Care**" means childcare provided outside the child's home, including licensed family childcare homes and licensed childcare centers. Agencies or programs exempt from licensing, which may include but are not limited to the military, public schools, and Tribal Nations, request that DSHS, through OCCP, certify them as meeting licensing standards. Exempt agencies or programs must be certified to be eligible to participate in a state childcare subsidy program.

G. "**Overpayment**," for childcare payments, means:

1. **Client Overpayment**

   a. Payment is greater than the client is eligible to receive; or

   b. Payment is made for in-home or relative childcare (child care exempt from licensing) services not provided.

2. **Vendor Overpayment**

   a. Payment made to the vendor for services not provided; or

   b. Payment made to the vendor exceeds the amount due. For example: The vendor's customary rate is less than the amount paid or the vendor billed in excess of the time the child attended, including the allowable absence days.

3. **Disputes**

   An overpayment dispute arises when an individual disagrees with the overpayment determination. Clients, contracted vendors, and non-contracted vendors each have a different process for appealing the overpayment.

H. "**Relative Care Giver**" means a childcare provider who is 18 years of age or older who provides childcare services to children who are, by marriage, blood relationship, or court decree, the grandchild, niece, nephew, or first cousin of the provider. Authorizations for other degrees of relationship, including but not limited to great and great-great, are approved through an Exception to Policy (ETP).

1. The department shall allow no payment for childcare given by the following relatives: father, mother, brother, sister, stepfather, stepmother, stepbrother, or stepsister.

2. The department does pay adult siblings living outside the family home. Authorizing workers may use their discretion to determine

eligible degrees of relationship where the family's culture would define relative in a broader way.

I. "**Relative - Relative's Home Care**" means childcare given by the child's relative in the relative's home. Relative-relative's home care is exempt from licensing. See the definition of "Relative Care Giver," above.

"**COMPLAINANT**" means a CA client, foster parent, or other individual filing a complaint.

"**COMPLAINT**" means a formally expressed dissatisfaction about the application of a CA standard or procedure or about an action or failure to act by CA; it does not apply to an inquiry for information.

"**CONSULATE**" is a foreign governmental office with a designated official appointed to live in the host country, looking after that foreign country's citizen and business interests.

"**CONTAMINATED**" means the presence or the reasonably anticipated presence of blood or other potentially infectious materials on an item or surface.

"**CRIMES RELATING TO DRUGS**" means a conviction of a crime to manufacture, deliver, or possession with intent to manufacture or deliver a controlled substance.
RCW 43.43.830(6)

"**CRITICAL INCIDENT**" includes serious and emergent incidents as defined by DSHS Administrative Policy 9.01 and other incidents requiring reporting or review, including but not limited to:

A. Serious injury or death of a child in a CA active case or a case that has been closed within the last 12 months.

B. Serious injury or death of a child in a Division of Licensed Resource (DLR) licensed facility.

C. A case alleging client abuse or client neglect by a CA employee, volunteer, licensee, contractor, or another client.

D. Conditions which present a substantial threat to CA operations or client safety, such as: a) work-related physical assault, serious injury, or death of a CA employee in the line of regular work activity; b) threat of physical violence to an employee or co-worker; c) bomb threat, hostage situation, break-in or burglary; or property damage.

E. Vehicle accidents involving CA staff, foster parents, or child day care providers with clients when there is an injury or death.

F. Runaway of child in CA care when there is serious threat to the child or community.

G. Any other unusual event or situation of special concern to CA or that may elicit a request for information from the news media, families, or community.

"**EXPOSURE**" means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral contact with blood or other potentially infectious materials that results from the performance of an employee's duties.

"**FOREIGN NATIONAL**" is anyone in the boundaries of the United States who is not a citizen of the United States.

"**FOSTER PARENT LIABILITY PLAN**" - for the plan, the following definitions apply:

A. **Bodily Injury** - Tangible physical injury to the body of any third party person for which the foster parent is or may be held legally liable, sustained as the result of an action(s) of their foster/respite care child(ren). Does not include sickness, disease, death, shock, mental anguish, mental injury, humiliation, or other such conditions.

B. **Claim** - A written demand for payment pursuant to the terms of the Liability Plan. To be considered a claim the demand must be:

1. On the appropriate form;

2. Received by their social worker within 30 days of notice of property damage or personal/bodily injury; and

3. Received by ORM within 90 days of notice of property damage or personal/bodily injury.

C. **Depreciated Value** - That value established from the lost or damaged asset cost using an accepted function of depreciation method such as straight-line, units of production, double declining balance, or summary of the year digits.

D. **Foster Child** - A child who is within the care, custody, and supervision of DSHS and who has been placed in foster care by DSHS or DSHS-approved child placing agency.

E. **Foster Parent** - A person licensed by DSHS to provide care on a 24-hour-a-day basis to one or more assigned foster children in the foster parent residence.

F. **Foster Parent Household Members** - Any spouse, minor child(ren), or dependent member of the foster parent who is a permanent resident of the foster parent home. For purposes of the Plan, household members do **not** include other foster children.

G. **Gross Negligence** - The intentional failure to perform a manifest duty in reckless disregard of the consequences as affecting the life or property of another.

H. ***Guardian Ad Litem*** - A special guardian appointed by the court to represent the best interests of the minor child.

I. **Legal Guardian** - Person(s) lawfully invested with the power, and charged with the duty, of taking care of the person and managing the property and rights of a minor child (or one who is considered incapable of administering their own affairs).

J. **Occurrence** - A tangible identifiable incident, or series of incidents occurring in a manner so as to be deemed a single occurrence, that results in personal/bodily injury, or property damage, to any third party, that was intentionally, negligently, or otherwise caused by the foster parent or their foster/respite care child(ren).

K. **Owned Aircraft** - Serviceable/operable aircraft, including permanently attached devices/equipment and mechanical controls, owned/rented/leased by a third party or foster parent for their private or business use.

L. **Owned Motor Vehicle** - Serviceable/operable automobiles, trailers when attached to power units, and motor vehicles of any kind, including permanently attached devices/equipment and mechanical controls, owned/rented/leased by a third party or foster parent for their private or business use.

M. **Owned Watercraft** - Serviceable/operable powered or non-powered water craft, including permanently attached devices/ equipment and mechanical controls, owned/rented/leased by a third party or foster parent for their private or business use.

N. **Personal Injury** - Any injury which is an invasion of personal rights which may include such injuries to the person as libel or slander, criminal conversation, malicious prosecution, false imprisonment, and mental suffering.

O. **Premises** - The owned/rented/leased/occupied residential dwelling of the foster parent, including the structures attached to the residence, the surrounding land on which the residence is located, and structures located on the surrounding land, such as garages, sheds, or appurtenant structures.

P. **Property Damage** - Physical damage or loss to tangible property of a third party caused by the action(s) of a foster/respite care child(ren) for which the foster parent is or may be held legally liable.

Q. **Respite Care** - The temporary provision of care by foster parents for the maintenance, health, and safety of any eligible foster child.

R. **Third Party** - Any person other than the foster parent or foster parent household members as defined in this Liability Plan.

"**FOSTER PARENT REIMBURSEMENT PLAN**" - As used in the Reimbursement Plan, the following definitions apply:

A. **Claim** - A written demand made by a foster parent for reimbursement available pursuant to the Plan for property damages, losses, and emergency medical treatment costs incurred because of an act of their foster/respite care child(ren). Payments made under the Plan are made directly to the foster parent, including claims filed by the foster parent on behalf of their household members. The *Foster Parent Reimbursement Plan Claim* form, DSHS 18-400(X), must be used by foster parents to file claims under the Plan. Written correspondence or telephone conversations between the foster parent and DSHS employees does not constitute a valid claim.

B. **DDD Child** - A developmentally disabled child, not a foster child, who requires extraordinary care.

C. **DDD Respite Care** - For DDD participation in the Plan: The temporary provision of care by licensed foster parents for a developmentally disabled child who is not a foster child and who requires extraordinary care. This short-term care in the foster parent's home is approved/authorized by DDD Case Management Services to provide out-of-home relief to the parents of the child.

D. **Depreciated Value** - The dollar amount determined to be the worth or value of an item at the time of a property damage or loss occurrence because of wear and tear, its age, or other causes applied, based on accepted depreciation methodology.

E. **Emergency Medical Treatment Expenses** - Costs which the foster parent or household member incurred from receiving emergency medical treatment because of a personal bodily injury sustained as a result of an action of their foster/respite care child(ren). Emergency medical treatment is defined as treatment necessary to sustain life or prevent further injury which is provided immediately following an injury occurrence. It does not include follow-up medical treatment expenses.

F. **Foster Child** - A child who is under the care, custody, and supervision of DSHS and who has been placed in foster care by DSHS or a DSHS-approved child placing agency.

G. **Foster Parent** - A person licensed to provide for the care and supervision of foster/respite care children in their foster family home.

H. **Foster Parent Household Member** - Any spouse, minor child, or dependent relative of the foster parent who is a permanent resident of the foster parent home. For purposes of the Plan, a property damage, loss,

or personal injury sustained by a household member is considered a foster parent damage, loss, or injury. Foster parents file claims on behalf of their household members. Household members do not include foster/respite care children in the foster parent home.

I. **Occurrence** - A tangible, identifiable incident which results in a personal bodily injury, property loss, or property damage; or a series of incidentsoccurring in such a manner as to be deemed a single damage occurrence to a property item, sustained by a foster parent or household member caused by their foster/respite care child(ren).

J. **Owned Aircraft/Watercraft** - Serviceable/operable aircraft, or powered or non-powered water craft, including permanently attached devices/equipment and mechanical controls, which are owned, rented, or leased by the foster parent for their private or business use.

K. **Owned Motor Vehicle** - Serviceable/operable automobiles, and trailers when attached to power units, and motor vehicles of any kind, including permanently attached devices/equipment and mechanical controls, which are owned, rented, or leased by the foster parent for their private or business use.

L. **Personal Bodily Injury** - Tangible physical injury to the body of a foster parent or their household member sustained as the result of an action of their foster/respite care child(ren).

M. **Property Damage/Loss** - Physical damage or loss of tangible property belonging to the foster parent or their household member caused by their foster/respite care child(ren).

N. **Residence** - The occupied dwelling of the foster parent (owned, rented, or leased) including attached structures, and the surrounding land and structures located on the premises such as garages, green houses, and sheds.

O. **Third Party** - Any person other than the foster parent or their household member.

"**HEPATITIS B VIRUS**" (HBV) - a virus spread by exposure to blood, semen, vaginal secretions, and, rarely, breast milk of an HBV infected individual. It can cause inflammation and damage to the liver, occasionally leading to chronic illness and death.

"**HUMAN IMMUNODEFICIENCY VIRUS**" (HIV) - the virus that causes AIDS. HIV is spread by exposure to blood, semen, vaginal secretions, and, rarely, breast milk of an HIV infected individual.

"**IMMIGRATION AND NATURALIZATION SERVICE"** (INS) is the federal agency responsible for all policies and procedures related to the presence of foreign nationals in the United States. The INS is the only organization capable of establishing an individual's legal immigration status.

"**INTERPRETER**" is a person who speaks English and another language fluently. An interpreter enables clients and staff to communicate with each other.

"**LAWFULLY ADMITTED ALIEN**" is anyone admitted for permanent or temporary visitation or residence who has not been granted citizenship.

"**LEP CASE**" is a family unit wherein any person requests services in a language other than English.

"**LEP FAMILY UNIT**" consists of parent(s), children, other significant household members, or extended family being provided services.

"**LICENSED HEALTHCARE PROFESSIONAL**" is a person whose legally permitted scope of practice allows him or her to independently perform the activities required for post-exposure evaluation and follow-up, such as physicians and dentists.

"**LIMITED ENGLISH PROFICIENCY**" (LEP) includes individuals who are unable to speak, read, and/or write English well enough to communicate effectively.

"**LIMITED ENGLISH SPEAKING**" (LES) are those individuals whose primary language is not English and who are not sufficiently fluent in English to convey and receive effectively the information needed to apply for and benefit fully from Children's Administration services. LEP and LES are frequently used interchangeably.

"**MAIL**" - Definitions relating to office mail include:

A. **Business Reply (BR) Mail**: A service by which Children's Administration offices provide clients and other individuals with specially printed envelopes which allow people to send mail postage free to DSHS organizations.

B. **Business Reply (BR) Account**: The account each Children's Administration office has with the local post office to pay postage on items mailed to Children's Administration in the Business Reply envelopes.

C. **Cash Items**: For purposes of this chapter, cash items include currency, endorsed warrants, personal or cashier's checks, and commercial, bank, or postal money orders.

D. **Classes of Mail**:

1. **First Class Mail** - Consists of material weighing 12 ounces or less. First Class mail may not be opened for postal inspection.

2. **Priority Mail** - Consists of First Class mail weighing more than 12 ounces. Maximum weight is 70 pounds and maximum size is 100 inches in length/girth combined.

a. **Certified Mail** - Consists of First Class or Priority mail of no intrinsic value and provides the sender with proof of posting. A record of delivery is maintained at the addressee's Post Office. The charge for Certified mail is in addition to the First Class or Priority mail charge. Certified mail does not insure the item against loss or damage.

b. The following services are available for additional fees and provide the sender with a return receipt:

i. Show To Whom and Date Delivered - Provides the sender with this information.

ii. Restricted Delivery - Mail will only be delivered to the addressee or the representative named in writing and on file at the Post Office.

iii. Show To Whom, Date, and Address of Delivery - Provides the sender with this information.

E. **Confidential Mail**: Marked as "confidential" and is opened only by the addressee or that person's supervisor/designee.

F. **Incoming Mail**: For purposes of this chapter, incoming mail consists of any envelope or package delivered to the office or staff member.

F. **Mail Clerk**: For purposes of this chapter, an individual responsible for opening incoming mail, listing cash items in the Cash Items mail log, and/or preparing outgoing mail.

G. **Negotiable Items**: All items defined as "Cash Items" and "State Office (SO) Negotiables."

H. **Outgoing Mail**: For purposes of this chapter, outgoing mail consists of any envelope or package going from the office to another location.

I. **Postage Due Account**: The account a DCFS office has with the local Post Office to pay postage due for items mailed to that office with insufficient postage.

J. **Remote Meter Resetting System (RMSR) Meter**: The type of meter for the postage machine which allows the office to purchase additional postage for their meter by telephone/electronic means, on the day the postage is needed and without taking the meter to the Post Office.

K. **State Office Negotiables**: For purposes of this chapter, SO negotiables consist of the following items:

1. **Warrants** - State of Washington checks issued to providers of services to clients (commonly called Vendor Warrants);

2. **Medical Coupons** - A document issued by State Office, DSHS 6-28, or local offices, DSHS 13-030PC, and presented by eligible clients to pay for medical services.

"**MANAGEMENT TEAM**" includes, for CA, the Assistant Secretary, Division Directors, Office Chiefs, and Regional Administrators.

"**MUCOUS MEMBRANE**" is the moist layer of tissue that lines the mouth, eyes, nostrils, vagina, anus, or urethra.

"ORIGINAL PLACEMENT DATE" or **"ORIGINAL FOSTER CARE PLACEMENT"**, for the purposes of the Social Security Act and federal regulations, means the date of the child's most recent removal from the child's home and placement into foster care under the care and responsibility of the state agency.

45 CFR 1356.21(f)

This definition applies both to children placed in foster care under a voluntary agreement and to those children under the state's responsibility through court order. Therefore, the original date of placement, for purposes of Title IV-E and section 427 of Title IV-B, would be when the child is in foster care and the state has been given responsibility for care either through a voluntary placement agreement or a court adjudication. There is no requirement under either Title IV-B or IV-E that the state have legal custody.

PIQ 83-06

"**OTHER POTENTIALLY INFECTIOUS MATERIALS**" means:

A. The following human body fluids: semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, pericardial fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, any body fluid that is visibly contaminated with blood, and all body fluids in situations where it is difficult or impossible to differentiate between body fluids.

B. Any unfixed tissue or organ (other than intact skin) from a human (living or dead).

C. HIV-containing cell or tissue cultures, organ cultures, and HIV- or HBV-containing culture medium or other solutions; and blood, organs, or other tissues from experimental animals infected with HIV or HBV.

"**PANEL REVIEW**" means a review by a panel consisting of members appointed by a DCFS Regional Administrator.

"**PARENTERAL**" means piercing mucous membranes or the skin barrier through such events as needlesticks, human bites, cuts, and abrasions.

"**PERSONAL PROTECTIVE EQUIPMENT**" is specialized clothing or equipment worn by an employee for protection against a hazard; e. g., latex gloves, protective eye wear, CPR 1-way valves, protective gowns/aprons.

"**PRIMARY LANGUAGE**" is that identified by the client as the language in which the client chooses to communicate.

"**PROPHYLAXIS**" is any substance or steps taken to prevent something from happening.

"**PUBLIC RECORD**," for the purpose of public disclosure, includes any writing containing information relating to the conduct of government or the performance of any governmental or proprietary function prepared, owned, used, or retained by any state or local agency regardless of physical form or characteristics.

RCW 42.17.020(29)

"**RECEPTION**" - For the purposes of Reception, the following definitions apply:

A. **Client** - Any person requesting or receiving services in CA offices.

B. **Financial Service** - Any inquiry for financial, medical, and/or food stamp benefits will be referred to the appropriate Community Services Office (CSO). Exception: A request for medical coverage for a child receiving adoption support or foster care payment from another state is referred to a social worker.

C. **Limited English Proficiency** (LEP) - A person who speaks or reads little or no English.

D. **Sensory Impaired** (SI) - A person who has little or no sight and/or little or no hearing.

E. **Social Service** - A service provided by the agency to meet a client's need; e.g., foster home licensing, Child Protective Services (CPS), Child Welfare Services (CWS), Child Day Care financial support, adoptions, Family Reconciliation Services (FRS), licensing for private agencies.

"**REGULATED WASTE**" means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials in a liquid or semi-liquid state if compressed; items that are caked with dried blood or other potentially infectious materials and are capable of releasing these materials during handling; contaminated sharps; and pathological and microbiological wastes containing blood or other potentially infectious materials.

"**SENSORY IMPAIRED**" means hard-of-hearing, deaf, partially sighted, or blind.

"**SEXUALLY TRANSMITTED DISEASE**" (STD) - a bacterial, viral, fungal, or parasitic disease or condition which is usually transmitted through sexual contact. A list of STDs appears in WAC 246.100.011(33).

"**SHARPS**" means any object that can penetrate the skin including, needles, broken glass, etc.

"**SUB-RECIPIENT**" means any person, governmental organization, or non-profit agency receiving qualified federal financial assistance from DSHS and to whom DSHS delegates the federal program policy and authorization responsibility.

"**TRANSLATOR**" is a person highly competent in reading and writing English and other languages.

"**UNDOCUMENTED INDIVIDUAL**" is anyone in the boundaries of the United States without a visa, work permit, alien status documentation (such as status granted by the Immigration Reform and Control Act) that grants temporary or extended visitation or residence.

"**UNIVERSAL PRECAUTIONS**" is an approach to infection control. According to the concept of Universal Precautions, all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, and other blood borne pathogens. Universal precautions do not apply to feces, nasal secretions, sputum, sweat, tears, urine, or vomit unless they contain visible blood.

"**WRITING**," for purposes of public disclosure, means handwriting, typewriting, printing, photostating, photographing, and every other means of recording any form of communication or representation, including, but not limited to, letters, words, pictures, sounds, or symbols, or combination thereof, and all papers, maps, magnetic or paper tapes, photographic films and prints, motion picture, film or video recordings, magnetic or punched cards, discs, drums, diskettes, sound recordings, and other documents including existing data compilations from which information may be obtained or translated.

RCW 42.17.020

CHAPTER 17000 ACRONYMS

The following acronyms are used in the Children's Administration (CA) *Case Services Policy Manual*, the CA *Practices and Procedures Guide*, and this CA *Operations Manual*.

ACES	-	Automated Client Eligibility System
ACF	-	Administration for Children and Families
ACYF	-	HHS Administration for Children, Youth, and Families
ADATSA	-	Alcohol and Drug Abuse Treatment Services Act
AFDC	-	Aid to Families with Dependent Children
AFDC-FC	-	Aid to Families with Dependent Children - Foster Care
AAG	-	Assistant Attorney General
AG	-	State Attorney General
AIDC	-	American Indian Data Commission
AIDS	-	Acquired Immune Deficiency Syndrome
AIS	-	Agency Inventory System
AM	-	Area Manager
ANA	-	Administration for Native Americans
APS	-	Adult Protective Services
ARC	-	Accounts Receivable Coordinator
ARS	-	Alternative Response System
ARY	-	At-Risk Youth
ASCII	-	American Standard Code for Information Exchange
ASL	-	American Sign Language
BBP	-	Blood Borne Pathogens
BIA	-	Bureau of Indian Affairs
BR	-	Business Reply
BRS/GC	-	Behavior Rehabilitation Services/Group Care

CA	-	Children's Administration
CAMIS	-	Case and Management Information System
CA/N	-	Child Abuse and Neglect
CE	-	Consultative Examination
CCDBG	-	Child Care and Development Block Grant
CCS		Central Contracts Services, formerly OCAM
CEAP	-	Consolidated Emergency Assistance Program
CFR	-	Code of Federal Regulations
CHINS	-	Child in Need of Services
CHRI	-	Criminal History Record Inquiry
CIC	-	Computer Information Consultant
COBRA	-	Consolidated Omnibus Budget Reconciliation Act
CPR	-	Cardiopulmonary Resuscitation
CPA	-	Child Placing Agency
CPS	-	Child Protective Services
CPT	-	Child Protection Team
CRC	-	Crisis Residential Center or Care
CSE	-	Community Service Employment
CSO	-	Community Services Office
CTED	-	Department of Community, Trade, & Economic Development
CWS	-	Child Welfare Services
DAC	-	Disabled Adult Child
DASA	-	Division of Alcohol and Substance Abuse
DCFS	-	Division of Children and Family Services
DCS	-	DSHS Division of Child Support

DD	-	Developmentally Disabled
DDD	-	Division of Developmental Disabilities
DDDS	-	Division of Disability Determination Services
DHHS	-	Department of Health and Human Services
DIS	-	Department of Information Services
DLR	-	Division of Licensed Resources
DOH	-	Department of Health
DOL	-	Department of Labor
DOL	-	Department of Licensing
DSHS	-	Department of Social and Health Services
DVR	-	DSHS Division of Vocational Rehabilitation
ECP	-	Exceptional Cost Plan
EFAP	-	Emergency Food Assistance Program
EMFS	-	Economic and Medical Field Services
ENCC	-	Exceptional Needs Care Coordination
EO	-	Executive Order
EPSDT	-	Early and Periodic Screening, Diagnosis, & Treatment
ESA	-	DSHS Economic Services Administration
ETP	-	Exception to Policy
FAX	-	Telefacsimile
FBI	-	Federal Bureau of Investigation
FEMA	-	Federal Emergency Management Agency
FCMU	-	Foster Care Medicaid Unit
FFPC	-	Free Federal Commodities Program
FFS	-	Federal Funding Specialist

FFU	-	Federal Funding Unit
FHSS	-	Family Home Support Services
FICA	-	Federal Insurance Contribution Act
FIRST	-	Foster Intervention/Retention Support Team
FPAWS	-	Foster Parents Association of Washington State
FPS	-	Family Preservation Services
FRS	-	Family Reconciliation Services
FTE	-	Full Time Equivalent
GA	-	General Assistance
GAAP	-	Generally Accepted Accounting Principles
GAL	-	*Guardian Ad Litem*
GA-U	-	General Assistance -Unemployable
GED	-	General Equivalency Development Certificate
HBS	-	Home Based Services
HBV	-	Hepatitis B Virus
HHS	-	Federal Department of Health and Human Services
HIV	-	Human Immunodeficiency Virus
HRDIS	-	Human Resource Development Information System
HSS	-	Home Support Specialist
IAR	-	Interim Assistance Reimbursement Agreement
ICAMA	-	Interstate Compact for Adoption and Medical Assistance
ICPC	-	Interstate Compact on the Placement of Children
ICW	-	Indian Child Welfare
ICWA	-	Indian Child Welfare Act of 1978
ICWAC	-	Indian Child Welfare Advisory Committee

ID	-	Identification
IEP	-	Individualized Education Plan
IEPA	-	Inter-Ethnic Placement Act
IFPS	-	Intensive Family Preservation Services
IHDT	-	Indian Health Design Team
IHS	-	Indian Health Service
ILP	-	Independent Living Program
ILS	-	Independent Living Skills
INS	-	Immigration and Naturalization Service
IPAC	-	Indian Policy Advisory Committee
IPSS	-	Indian Policy and Support Services
IRS	-	Internal Revenue Service
IS	-	Information Services
ISM	-	Interrupted Service Month
ISP	-	Individual Services Plan
ISSD	-	Information Systems Services Division
ITA	-	Involuntary Treatment Act
ITIS	-	Interactive Terminal Information System
ITO	-	Indian Tribal Organizations
I&R	-	Information and Referral
JOBS	-	Job Opportunities and Basic Skills
JRA	-	Juvenile Rehabilitation Administration
JTPA	-	Federal Job Training Partnership Act
LAN	-	Local Area Network
L&I	-	Department of Labor and Industries

LE	-	Law Enforcement
LEP	-	Limited English Proficiency
LES	-	Limited English Speaking
LICWAC	-	Local Indian Child Welfare Advisory Committee
LIHEAP	-	Low Income Home Energy Assistance Program
LIST	-	DSHS Office of Language Interpreter Services and Translations
MAA	-	Medical Assistance Administration
MAPPER	-	Maintaining, Preparing, and Producing Executive Reports
MCH	-	Maternal/Child Health
MEPA	-	Multi-Ethnic Placement Act (42 USC 5115a)
MER	-	Medical Evidence Records
MEVS	-	Medical Eligibility Verification System
MHD	-	Mental Health Division
MLR	-	Minimum Licensing Requirements
MPC	-	Medicaid Personal Care
MS	-	Mail Stop
MWBE	-	Minority and Women's Business Enterprise
N.A.D	-	National Association of the Deaf
NCAI	-	National Congress of American Indians
NEO	-	New Employee Orientation
NIHB	-	National Indian Health Board
NPAIHB	-	Northwest Portland Area Indian Health Board
NWAE	-	Northwest Adoption Exchange
OAS	-	DSHS Office of Accounting Services

OASI	-	Old Age and Survivors Insurance
OCAM -		Office of Contracts and Asset Management, now CCS
OCAR	-	CA Office of Children's Administration Research
OCCP	-	Office of Child Care Policy
OCR	-	CA Office of Community or Constituent Relations
OCR	-	HHS Office of Civil Rights
OFCL	-	Office of Foster Care Licensing
OFM	-	Office of Financial Management
OFR	-	DSHS Office of Financial Recovery
OMB	-	Office of Management and Budget
OPD	-	Original Placement Date
ORC	-	Objective Review Committee
ORCS	-	Operations Review and Consultation Services
ORM	-	DSHS Office of Risk Management
OSHA	-	Occupational Safety and Health Administration
OSI	-	DSHS Office of Special Investigations
PC	-	Personal Computer
PCS	-	Medicaid Personal Care Services
PIC	-	Private Industry Council
PS	-	Postal Service
QA	-	CA Office of Quality Assurance and Training
RA	-	Regional Administrator
RCW	-	Revised Code of Washington
RID	-	Registry of Interpreters for the Deaf
RM	-	Regional Manager

RMRS	-	Remote Meter Resetting System
RMSS	-	ORM Risk Management Services Section
RMTS	-	Random Moment Time Study
RRC	-	Records Reference Center
RSDI	-	Retirement, Survivors, and Disability Insurance
RSN	-	Regional Support Network
RTS/BRS	-	Rehabilitative Treatment Services/ Behavior Rehabilitation Services
R&R	-	Research and Referral
SAY	-	Sexually Aggressive Youth
SCAN	-	State Controlled Area Network
SER	-	Service Episode Record
SF	-	State Form
SI	-	Sensory Impaired
SIDS	-	Sudden Infant Death Syndrome
SMIAFS	-	State Median Income Adjusted for Family Size
SSA	-	Social Security Administration
SSA	-	Social Service Authorization
SSI	-	Supplemental Security Income
SSIF	-	Supplemental Security Income Facilitator
SSN	-	Social Security Number
SSPS	-	Social Service Payment System
SSODA	-	Special Sex Offender Disposition Alternative Program
STD	-	Sexually Transmitted Disease
SW	-	Social Worker

TANF	-	Temporary Assistance for Needy Families
TB	-	Tuberculosis
TCC	-	Therapeutic Child Care. See TCD
TCD	-	Therapeutic Child Development
TDD	-	Telecommunications Devices for the Deaf
TPA	-	Tribal Priority Allocation
TTY	-	Teletypewriter
TWEP	-	Tribal Work Experience Program
UPS	-	United Parcel Services
USC	-	United States Code
USPS	-	United States Postal Service
VA	-	Federal Veterans Administration
VPA	-	Voluntary Placement Agreement
WAC	-	Washington Administrative Code
WAN	-	Wide Area Network
WARE	-	Washington Adoption Resource Exchange
WIC	-	Women, Infants, and Children Program
WISHA	-	Washington Industrial Safety and Health Act
WMS	-	Washington Management Service
WSP	-	Washington State Patrol
WWIETP	-	Western Washington Indian Education Training Program
WWW	-	World Wide Web

CHAPTER 18000 APPENDIX C-INDEX

Appendix C

Subject	Section Number
ACCOUNTS	
Administrator	8722 B, 9800, 9820 A3, 9850
Postage Due	14420, 14241 B
Receivable	9600, 9820 B
Trust	11232 G, 11702 B3, 11820 C
ADOPTIVE HOME RECRUITMENT	4500
ADVISORY COMMITTEES	3300
AMERICAN SIGN LANGUAGE	4330 C3
ATTORNEY GENERAL	
Contracting	101100
Foster Parent Legal Defense	9106 C
Legal Representation	91022
Licensing Action	12500 B4, 12710 C6
Opposing Testimony	8900
Release Of Records	13721 C3, 137112 E
Subpoena Of Records	137112
Torts	91052 B
Trust Accounts	11820 A
BLOOD BORNE PATHOGENS	
Adoption	5723 F2 Dii
Cleaning	5713 E
Confidentiality/Disclosure	5723 F
Contaminated Items	5713 C1
Definitions	Appendix A
Disposal Of Contaminated Items	5713 C
Employee Self-Care	5713 I
First-Aid Practice	5713 B
HIV Testing	5723 E
HIV/BBP Advisory Team	5723 C
HIV/BBP Coordinator	5723 B
Incident Reporting	5723 G2
Laundry	5713 D
Medical Follow-Up	5713 G3
Non-Discrimination	5723 A
Payment	5713 D5, 5713 G5
Placement	5713 H1, 5723 G
Post-Exposure	5713 G,
Record Keeping	5713 G4
Safe First Aid Practices	5713 B
Training	5713 F

Subject	**Section Number**
Universal Precautions	5713 A, 5723 D
BUSINESS MANAGEMENT.	2225, 2342
CASE AND MANAGEMENT INFORMATION SYSTEM (CAMIS)	
Access	2211,7310, 8100, 9420 D, 13234, 13930 I,
Administrative Files	13300,15204
Case Assignment, Transfer, And Closure	13831 C3, 13850, 13910 I, 13930 E, 15202
Courtesy Supervision	15213
Documentation Of Legal Actions	15214,15219, 15222 C
Input Of Names	152162
Internet Access	15224
Interoffice Referrals	152011
Interstate Compact Cases	1140 C, 13236 A3, 13236 C5
Legally Free Children	132363 A3b, 152062,152122 C
Licensed Facility Complaints	15223
Network Equipment Relocation	15209
Program Code	15211, 152133 B1a
Residential Address For Children	132362,15212
Securing Unattended Computer Terminals	7310,7323 B, 152154 D, 152193
Social Service Payment System	8310, 9410 A, 152162 H, 15222 A, 152081- D
State Licensed Facilities/Persons	15217
Storage Of Confidential/Mission Critical Data	15210,
Training	8310 A2, 8324, 152033 B4c, 152073,
Updates To CAMIS	11895 C, 13236 C, 15220
Use Of State-Owned Equipment At Home	15215
CASE RECORD MANAGEMENT	
Accuracy	2341, 13100 C1,13700, 152234 C
Administrative Records	13300, 152042 A
Archiving	11233 B4, 11233 B4, 11900, 13930, 13900, 14310, 152042 E
Assignment	5113 A, 11233, 13100 A, 13236 A 1, 13831 D, 152012 D 1, 152022 A, 152112 C3, 152132 A
Client Records	3230, 8723, 10800, 137112 E,
Document Section	13410 B,
Indian Child Welfare Section	13410 E
Health And Education Record	13410 C
Narrative Recording Section	13100 C1, 13410, 13410 G,
Permanency Planning Section	13410 B
Service Authorization/Payment Section	13410 A2
Closure	6223 A4, 13831 C5, 13930 A, 152022 F,
Composition	13400
Cost Of Disclosure	13733

Subject	Section Number
Disclosure	2232, 5235, 5723 F2, 7310 C4, 12910, 13700, 13720, 13730, 13723, 13760, 13725, 13780, 137110, 137100, 137112 G, 137113, 152072
Federal Revenue File	13263 C, 13910 E, 13920
Initiating Records	13100 1d
Licensing Records	
Application Attachments/Inspection Reports	13511 B, 13515
Complaints And Corrective Actions	13514
Disclosable Information	137113,13831 B
Licenses, Applications, Related Documents	13500
Miscellaneous Correspondence/Financial Training	13516
Non-Disclosable Information	137114
Notice Of Disclosure	13831 B
Personal Information	13831 A
Personnel Documentation	13513
Service Episode Record	6223 A3b, 13510
Maintenance	
CAMIS Procedure	13236 Fl, 13930 G
Preparation For Storage	13930 D, 13930 F
Recalling From Storage	13910 H
Retention Periods	13910
Storage	13920, 15210
CASE RECORD MANAGEMENT	
Near Verbatim Recording	13100 C1 K
Non-Disclosable	13770, 13780, 137110 G
Privacy	7310 C3, 13725 B, 137110 I, 137111
Protection	8723 B4, 14232 C2
Retention	2227, 5122 D, 9410 E, 9432, 9434 B, 1011000 C, 13220 A, 13930 L, 152042 I
Transfer	111000, 13910 I, 152021, 152022 D
CASE REVIEW	
Adoption Planning	13410 C2
Area Manager	6222
Local Indian Child Welfare Committee	13410 E
Monthly Case Audit	6223 B
Supervisor	6223
CASE TRANSFER	
Adoption Files	13831 B
Between Offices	152022 D2
Between Units	152022 D4
Family Home Licensing Files	13831 D
Federal Revenue Files	13831 C

Subject	Section Number
Regional Responsibilities	13830
Social Service Files	13831 A
CENTRAL CONTRACTS FILE	10300
CHILD CARE COORDINATING COMMITTEE	3320
CHILD CARE LICENSING	
Application Process	5525, 5541 A2a, 12200, 12320, 12320 E, 12330, 12330 E
Child Care Center	3320 A
Child Placing Agency	5524 C, 5525 A2, 5545 C4 Cii, 12230 H,12320 D, 12350 A, 12600
Children's Residential Care	12110 A, 12800
Complaint Investigations	5111, 5713 A, 5114 C, 12400, 152112 A, 152232 B
Decision	12120, 12310 B, 12340 I, 12500 F
Denial, Suspension, Revocation	3220 B6, 5560, 12120, 12310 B, 12340 I, 12500 D, 13514 B
Files`	5242, 12340 B, 13412 B, 13512, 137115 A
Foster Family Homes	2242 A6, 5525 B2, 5541 A3, 5545 C4, 12130, 12330 E, 12610 B, 13515
Initial License	12330 E
Placement Activities	12340 B, 12700
Probationary License	12500 B
Public Disclosure	13831 B 1b
Residential Care Facilities/Agencies	12320 F
Support Services	9130
Waivers	5545 C4, 12330 D
CHILD CARE LICENSING/ADOPTION LIMITATIONS FOR EMPLOYEES	8120, 12132
CHILD CARE RESOURCE AND REFERRAL NETWORK	2241 E, 3320
CRIMINAL HISTORY AND BACKGROUND CHECKS	
Adoption	5524, 5532
Background Clearance Unit	5527 A1, 5531, 5533 A3, 5540, 5542, 5544, 5580,
Contractors	5500, 5512, 5526, 5532 C, 5561, 5570 F3
Department Employees	5527 A
Disposition	5560, 5563 C, 5565
Documentation	5512, 5514, 5541 B3, 5544 B1, 5550

Subject	Section Number
Emergency	5533 B
Expedited	5533
Federal Bureau Of Investigation (FBI)	5541, 5543, 5545 B, 5510, 6510 C
Fee Waivers	5545 A3, 5540 B1d, 5545 C4e,
Fingerprint Cards	5543 A1
Fingerprints	5542
Local Law Enforcement	5514, 5533 C, 5543 C, 5545 C4b
Licensure	5525, 5563 A2
Offenses	5527 B3, 5563 A, 5590
Parental Placements	5523
Relatives	5522
Unpaid Individuals	5545 C3
Volunteers	5512 B, 5521 A1, 5526, 5527, 5541, 5550 C, 5590 C3
Written Feedback	5532 D, 5510 F
CRITICAL INCIDENTS	5100, 5122
CULTURALLY RELEVANT SERVICES	1220 A, 1221 B, 4300, 4320
DEPARTMENT POLICY	1300, 8324 A, 101000
DISASTER RESPONSE	
Emergency Mission Statement	8723 B1
Essential Records Plan	8721 A
LAN/WAN Coordinator Responsibilities	8724, 8724 B
Operational Coordinator Responsibilities	8722 B3
DIVISION OF CHILDREN AND FAMILY SERVICES	1400 A, 3210, 4520, 6220, 8322 B
DIVISION OF MANAGEMENT SERVICES	2220, 2342, 5580, 5713 G5, 6520, 7131 A
DIVISION OF LICENSED RESOURCES	1400, 2240, 2310, 3210, 4320 B
DIVISION OF PROGRAM AND POLICY DEVELOPMENT	2230, 5114 F, 5720, 6240, 9141 B
DOCUMENTATION-NEAR VERBATIM	13100 C1 I
ELECTRONIC FILES	7310, 7320, 8723 A
E-Mail	2211 B, 7310 B, 11222 C, 11870 B, 118110 C1, 152243 D
EMPLOYEE ETHICS	8110 A

Subject	Section Number
EMPLOYEE SAFETY	8600
ESSENTIAL RECORDS	8721 A1
EXCEPTIONAL COST PLAN	9130, 11231 A7, 11700 B3c
EXCEPTIONS TO POLICY	2320, 8325 B3, 9140 B3, 11700 B3c
FACILITY INVESTIGATION	5100, 5121, 5113 D, 152234
FACILITY MANAGEMENT	2225 A
Planning	7200
FEDERAL FUNDING PROGRAMS	
Adoption Support	11400, 11410, 11430,
AFDC Relatedness	11211 A, 11410 E1
Behavior Rehabilitation/Group Care	11250 B
Child Placing Agency	11213 B
COBRA	11440
Correction Of Funding Source	11600
Client Aged 18-20	11240, 11850 C, 11880 B, 118100
Electronic Data	11233
Exempt Income-Child	11700 B1
Federal, Funding Specialist	11220, 11214, 11254
Federal Revenue File	13236 A3 e, 13410 G
Guardianships	11212 B, 11213 A4b, 11300
Income/Resources Of Child	11700
Judicial Determinations Protections	11211 C
Non-Exempt Income-Child	11700 B2
Original Placement Date	11213 A, 11310 C
Paper Files	11233 B, 13236 D
Random Moment Time Study	111100, 111160
Record Management	13910 G
Re-Determinations Of Eligibility	11214 B
Reimbursability	11211 A, 11211 D, 11214 B, 11440 D, 11700 B3
Relative Placements	11213 A4, 11410 E1, 11500
Repeat Removals	11212 A
Social Worker	11130 B, 11213, 11222, 11252 B1a, 11253, 11410, 11440 C, 11520, 11700 B5a. 11830 A, 11810 C, 111140 C
SSI Facilitator	11130 A, 11221 F, 11233 B2, 11420 A, 11240 C1, 11850, 118100 B1
Teen Parent	11212 C
Title IV-E/Foster Care	11214 A5, 11310, 11440 F, 11530
Child Placing Agency Custody	11213 B1

Subject	Section Number
Dependency Guardianships	11212 B2
Eligibility Criteria	11200, 11212
Inter-Ethnic Placement Act	4510
Judicial Determination	11211 C 6
Repeat Removals	11212 A
Voluntary Placements	11211 C2
Title II/Retirement, Survivors & Disability	
Age 18-20	11240 G
Application	11130 A
Correspondence	1123313 2bii
Eligibility	11221
Foster Care/Guardianship	11320 A
Notices-Documentation	11870 A
Payments	118100 B1
Referrals Procedure	11231
Representative Payee	11232 E, 11850
Trust Fund	11830
Title XVI/SSI	
Age 18 Through 20	11240
Application	11212 C4
Documentation	11233 B3a, 11860
Eligibility	11230, 11700 B3c
Representative Payee	11320 C
Trust Fund	11840 B, 11880 E
FEDERAL FUNDING PROGRAM	
Title XIX/Medicaid	11430
Adoption Support	11430
BRS/Group Care-TCD	11251
Documentation	11250 A
Eligibility	11215, 11250 A, 11700 B6a
FFS Procedure	11254 A
Guardianship	11310 A
Referral Procedure	11253
Regional Responsibilities	11251
Trust Fund Accounting	11800, 11820, 11251
FEDERAL FUNDING SPECIALIST	11130 A
FEDERAL FUNDING UNIT	11120, 11231 A
FEES FOR VITAL STATISTICS	9900
FISCAL AND BUDGET MANAGEMENT	2224

Subject	Section Number
FLEXIBLE WORK HOURS	8400
FOSTER CARE PAYMENTS	
And Day Care Payments	9142 A
Limitations	9140
Special Rates	9100, 9124
FOSTER HOME RECRUITMENT	4510 B, 4520
FOSTER PARENT LIABILITY	
Attorney General	91022, 91061, 91063 C
Claim Filing	91013 B
Liability	91000, 91021
Limitations	91024
Third Party Liability	91024 F
FOSTER PARENT REIMBURSEMENT	
Claim Filing	91170
Exclusions	91160
Limitations	91150
HEALTH AND SAFETY REVIEW	2242 A, 5400, 6232
HOME STUDY	13236 A2, 13512 B, 152022 A4, 152133 B1
IDENTIFICATION CARDS AND TAGS	8500
INFORMATION SERVICES	8724 B, 152033 B, 15207, 152091
INTERAGENCY AGREEMENTS	10230, 10410 B
INTERAGENCY PROTOCOL	2330
INTER-ETHNIC ADOPTION PROVISIONS	4510 D
INTERNET	152241
INTERSTATE COMPACT FOR ADOPTION AND MEDICAL ASSISTANCE	11440 C
INTERSTATE COMPACT FOR JUVENILES	91222 B2 a iii
INTERSTATE COMPACT ON THE PLACEMENT OF CHILDREN	13236 A3, 152112 B2
INTERPRETER SERVICES	

Subject	Section Number
Language	14112 C1, 14150
Sign	4330 C3
LEGISLATIVE RELATIONS	3120
LICENSED FACILITY COMPLAINTS	
Child Abuse/Neglect	5112 A, 5113, 5321 B2, 12400 A
Investigation Protocol	5310 A
Reports	5111, 5120, 5321 B
LIMITED ENGLISH PROFICIENCY	4320, 14151 A
LOCAL AREA NETWORK (LAN)	2211 B, 8724 A, 152093 A, 152183 B1c
MANAGEMENT TEAM	2100, 7222 E, 15100
MANUAL MAINTENANCE	1400
MEDIA RELATIONS	3130
NEAR VERBATIM RECORDINGS	13100 C1d
NEGOTIABLE ITEMS	9830, 14140
NON-DISCRIMINATION	4100, 4400, 8110 B, 14112 B
NOTARY PUBLIC	14500
NOTIFICATION	
Background Checks	5533 A
Child Death	5530, 5250
Critical Incidents	5121
Facility Complaints	152233
FEDERAL REVENUE	
Excess Client Funds	11870 B
Placement Episode	11214 A
SSI Application	11233 A1
Foster Parent Liability Claims	91032, 91051
Office Of Financial Recovery	9520 C3
Record Disclosure	137112 D
Vendor Investigations	101400
OFFICE OF CHILDREN'S ADMINISTRATION RESEARCH	2221, 6252

Subject	Section Number
OFFICE OF COMMUNITY/CONSTITUENTS RELATIONS	2212
OFFICE OF FINACIAL RECOVERY (OFC)	9140 D2, 9530, 9610, 14140 C
OFFICE OF FOSTER CARE LICENSING	2310, 6232, 12300, 13510 B
OFFICE OF QUALITY ASSURANCE AND TRAINING	2231, 6100, 6241
OPERATIONS SUPPORT	2223, 6410
OPPOSING TESTIMONY	8920 C
OVERPAYMENTS	9140 A, 9140 C, 9520, 9520 B, 9550
Interest	9550
PAYMENTS	
Adoption Support	11400
Child Day Care	91300
Contract	10320 B
Disputed	9141
Employed Foster Parent Child Care	91340
Foster Care	11530 B
Limitations	9140 B1, 9142
TANF	11520
Travel	91210
Social Service	9400
Vendor	8723 A, 9200
PERFORMANCE REPORTING	
Benchmark	6420
Client Based Outcome Measures	6430
Regional	6330, 6410
POLICY ISSUANCE	1400 C
POSTAGE DUE ACCOUNTS	14241, 14244
PROGRAM REVIEWS	
Quarterly	6330 D
PROPERTY MANAGEMENT	7100, 7122 A, 7133
PROTOCOLS	5122, 5400, 7220, 13412, 15121

Subject	Section Number
PUBLIC DISCLOSURE COORDINATOR	13722, 13723, 13750, 137112 G
PUBLIC DISCLOSURE OFFICER	13721
PURCHASING	7121, 7350, 10250
QUALITY ASSURANCE	
Accountability	1220 B, 6110, 6250
CPS Facility Investigation Section	6233
Regional Responsibilities	6221
RANDOM MOMENT TIME STUDY	
Codes And Definition	111160
Participants	111120
Responsibilities	111130, 111140, 111150
REASONABLE EFFORTS	
Judicial Determination	11211 D1a, 11310 C1
Record Review	13831 A4
Staff Training	8325 D1
RECORD DISCLOSURE	
Cost Of Disclosure	13732, 13733 B
Denial	13725g, 13760, 13700
Non-Disclosable Records	13770
Privacy	13700
Protection	13740
Procedure	13750
Public Disclosure	5240, 7310 C3a, 10800, 13721, 13726
Review Of Denial	13760
REGIONAL BUSINESS MANAGER	2224 B, 2320, 5545 C4ciii, 7210, 9840, 101100 F, 10320 A, 10340, 11810 A
REPAYMENT	9140 D2, 9530
RESOURCE MANAGEMENT	
Cellular Telephones	7350
Computer Equipment	7321, 7322, 7323 C, 8724 C3, 152092, 152153, 152193,
Electronic Files	7310
General Protection	7310 C2, 7323 A
Software	7320, 7323 C2, 8724 C2, 15251
Telefacsimile	7360
Telephones	4320 C, 4330 C1, 7221 A, 7340
Vehicles	5600, 7330,

Subject	Section Number
SERVICE EPIDSODE RECORD (SER)	
CAMIS	13100 C, 152133
Case Record	13410, 152201
CPS Child Care Income Waiver	91350 B
Federal Revenue File	13411
Interpreter/Translator	4320 A
Licensing File	13500, 13511, 152204
Supervisory Case Review	6223 A4
SOCIAL SECURITY	
Administration	11221 G, 11233 B3d, 11840
Benefits	11810 B
Card	11233 B3e
Number	5580 A, 5532 B2, 11232 A, 11252 B1, 118130 C4
SOCIAL SERVICE PAYMENT SYSTEM (SSPS)	
Area Manager Reports	9420 B
Input Staff	9433
Monitoring	9435 F
Operator Numbers	9420 D
Provider File Numbers	9440
Social Worker Reports	9432 C
SSPS Worker ID	9432 B2, 9435 A
Staff Training	8300
Supervisory Reports	9435 E, 9435 G
Support Staff	9434
SPECIAL RATES/EXCEPTIONAL COSTS	9120
Limitations	9140 B2
STAFF LIABILITY	8800
STAFF TRAINING	
Academy	8323, 8325, 8326
CAMIS	8310 A, 8324, 14330
Orientation	8324 A
SSPS	8310
STATE-OWNED VEHICLES	7331
SUPPLEMENTAL SECURITY INCOME FACILITATOR (SSIF)	11222, 11232, 11233, 11870 A1, 11830, 118120

Subject	Section Number
TELECOMMUNICATIONS DEVICES	4330 C2
TELECOMMUTING	8200
TELEPHONES	
Cellular	7350 A
Fax	7361, 11890 B, 111130 E, 14500 D, 152012 D4
Scan	7341 C
TEMPORARY ASSISTANCE TO NEEDY FAMILIES (TANF)	11214 A7, 11520 C, 13234 B
THIRD PARTY	
Foster Parent Liability	91011, 91030, 91040, 91070, 91171
Dissemination Of Information	5570
TITLE IV-E	
Child Placing Agency Custody	11213 B1
Dependency Guardianships	111212 B1
Eligibility Criteria	11200
Judicial Determination	11211 C1b
Voluntary Placements	11211 D1b, 11213 A3
TITLE XVI/SUPPLEMENTAL SECURITY INCOME	
Eligibility Criteria	11230
TRANSPORTATION	5600
TRAVEL	
Assistant Secretary Approval	91222 B2 e iii
Authorization	91222 A, 91222 D
Client	91200, 91222 C
Employee	91210 A
In-State	91221
Out-Of-Country	91224
Out-Of-State	91222
Volunteer	91200
TRUST ACCOUNTS	
Benefits	11800, 11800 C
Client Aged 18-20	11800 A,
Correspondence	11870, 11830 C
Dedicated	11840
Disbursements	11880

Subject	Section Number
Establishment	11800
Information Release	11820
Regional Coordination	11810
Resources	11860
Trust Fund Unit	11800 A, 11870 A2, 118110 E, 118130
TUITION REIMBURSEMENT	8321
VENDOR PAYMENTS	9200
VITAL STATISTICS	
Fees	9910
WARRANT REPLACEMENT	9300
WIDE AREA NETWORK (WAN)	8724 A 152073 B5, 152093 B
WAIVERS	
Case Folder Color Coding System	13412
Director, Division Of Licensed Resources	2330 B
Filing	13610
Fee Waivers For Record Disclosure	13733 A
Licensing	12330 D1
Licensing Process	12710 C1a
Prohibited For Statute And Federal Regulation	2320
Regional Administrator	2341
Safety Committee Meetings	8610
Separation Of Duties	9830
Waiver Of Payment For FBI Fingerprinting	5545 C2