



Initial Placement

Placement Management

Following the referral investigation in the example the child is detained. Now a placement for the child must be found and the child placed. Any time a child or children are removed from the care of their parents or guardians by formal action of the department or law enforcement, the whereabouts of the child must be documented as well as an explanation as to why the child was detained and who detained the child.

The starting point for a placement is to go to the “Placement Management” Section . The “Placement Management” Section is available in both “Referral” and “Case” folders. It is identical in either folder. The child’s placement will follow the child, so if a placement is made in a referral and then the referral is promoted to case, the placement will still be there.

The placement management section  consists of eight notebooks. (There are five large icons and 3 “+” icons. Two of the “+” icons are grayed out and not available to use.)



Open existing and create new (+) “Placement” notebooks.



Open existing and create new (+) “Placement Home” notebook.



Open existing “Adoptive Placement” notebook. Note (+) is grayed out.



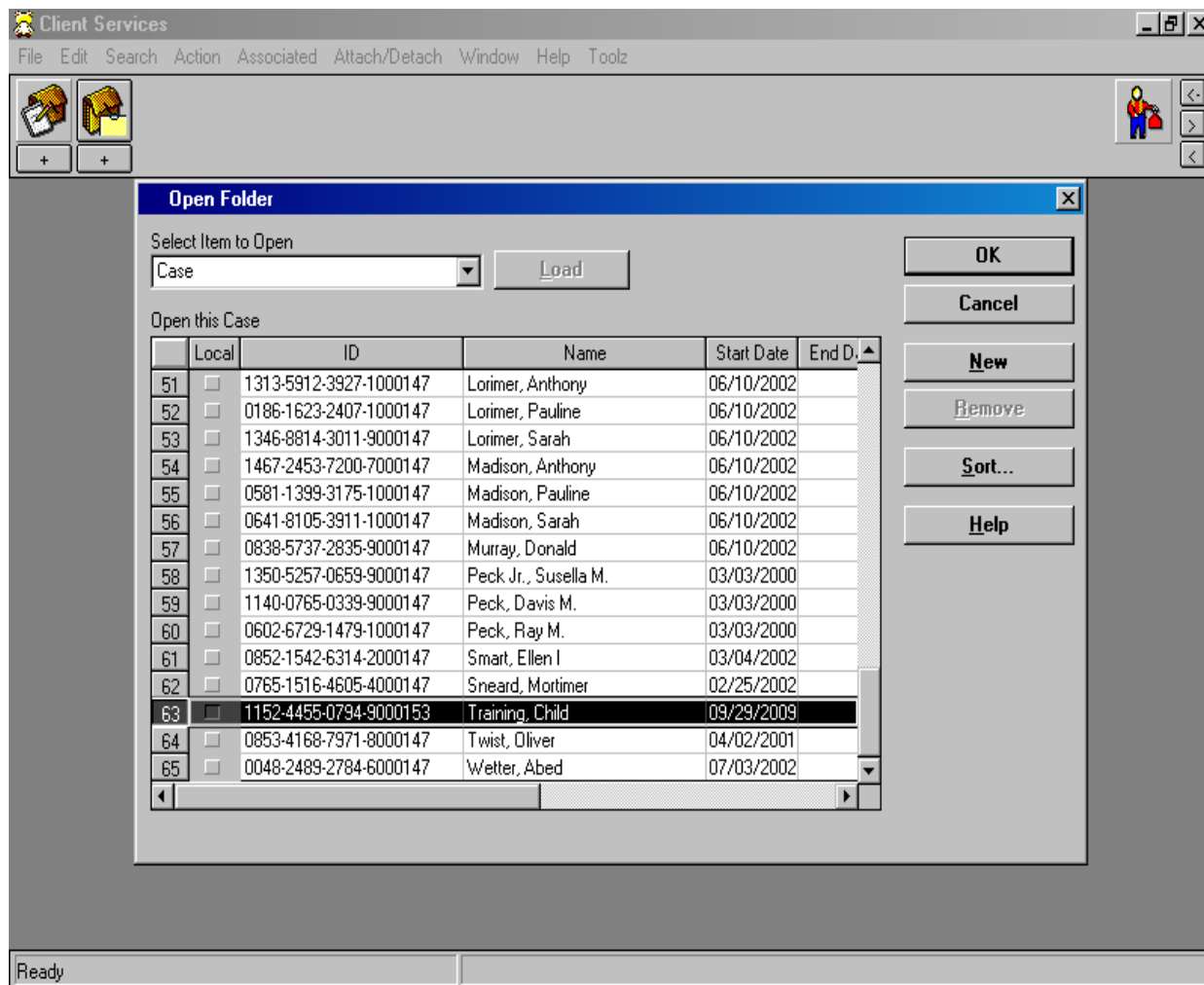
Open existing “Home Study” notebook. Again, the (+) is grayed out.



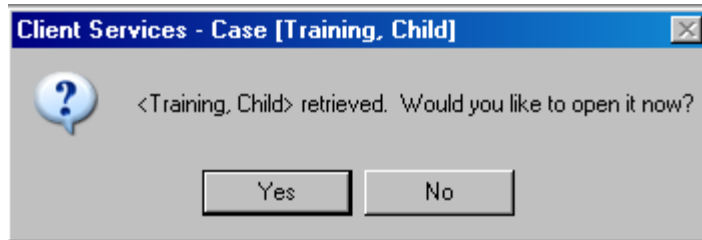
The last two notebooks are open existing or (+) new “Placement Documents.” Note that it is the right most option and that the icon has a representation of a paper form on it. In CWS/CMS, when an icon has such a representation behind it, it is generally referring to a document of some type.



To document a child’s placement, first open either the referral or case for the child. In prior chapters, an existing referral was opened; the process would be the same here. To open an existing case, click on the “Open Existing Case” icon. Then find the child’s case. An example of a worker’s case listing is shown on the next page. The case “Training, Child” was opened by clicking on it. The entire line will be highlighted. Then click the “OK” button to the right.



This would result in the following dialogue box.



If this is the correct case, click on the “Yes” button.

This opens the case in the “Case Management” section. Note that unlike referral, which requires a worker to name the referral, the application will automatically name the case for the child. The case name and the child’s name are the same by default. Case name is a required field, and although the application will default to the child’s name, if a county wanted to change the case name for some reason, the case name can be changed by deleting the existing case name and typing a new case name in the field.

On the next page is a “Case, ID” page for this child.

Client Services - [Case [Training, Child]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

ID Svc Comp Assignment Trans Req ICPC-100A ICPC-100B Doc Tracking Spec Proj Closure Summary

Identification
****Active Safety Alert Exists - See Client Notebooks****

Case Info

Case Name
Training, Child

Case Number
1272-7083-9793-3000147

Start Date End Date Projected End Date
09/30/2009 09/30/2010

County State
Glenn California

Country
United States

Case Status

	Status	Effective Date	End Date
1	Court Involvement	04/08/2010	
2	Court Involvement	09/30/2009	

Status Effective Date
☒ Court Involvement 04/08/2010
☐ Voluntary End Date

Intervention

	Reason
1	Physical Abuse

Primary Agency Responsible
County Welfare Department

Case Suspension

	Start Date	End Date	Reason for Suspension
1	12/31/2009	04/08/2010	Child Adjudged 601/602

Start Date End Date Reason for Suspension
12/31/2009 04/08/2010 Child Adjudged 601/602

Case Alerts

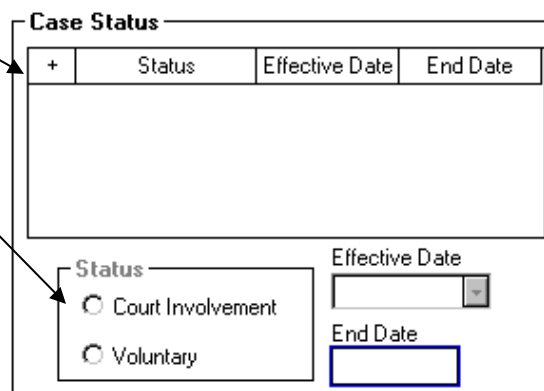
This information box documents which of three reasons a CWD case may be suspended:

- A. Child adjudicated 601/602
- B. Committed to State Hospital
- C. Guardianship Set Aside


The first time a case is opened, the case status is entered.

To enter a case status, click on the “+” in the grid immediately under the heading “Case Status” in the case status information box.

There are only two choices. The case is either Court Involvement or Voluntary. To select which one, click in the appropriate radial button next to the choice. The “Effective Date” will default to the date the entry was made but can be changed to reflect the correct date. A case may move between “Court Involvement” and “Voluntary” during its course. “End Date” is automatically entered when the status is changed.



The screenshot shows a form titled "Case Status". At the top is a table with four columns: "+", "Status", "Effective Date", and "End Date". Below the table is a large empty rectangular box. To the right of this box are two date input fields labeled "Effective Date" and "End Date". Below the "Effective Date" field is a "Status" section containing two radio buttons: "Court Involvement" and "Voluntary". Two arrows originate from the text above: one points to the "+" button in the table header, and the other points to the "Court Involvement" radio button.

There are other fields on this page that are to be completed. The first one is “Projected End Date.”  This is a “best guess” as to when services to the family or child will be ended. This is not the end date of the case plan. The “Projected End Date” may be one year from the current date, the child’s 21st birthday or some other date. It never locks and can be changed if necessary.

The “Intervention Reason” already had data entered. That data represents the substantiated allegation(s) in the referral. By clicking on the “+” in the grid, other intervention reasons can be added. This is also how a case would be changed into an “Adoptions” case at a later time.

Intervention	
+	Reason
1	Physical Abuse

When this page is completed, click on the “Placement Management” section. ■



In order to make a placement, click on the “+” under the “Open Existing Placement” icon. That will prompt the application to create the dialogue screen on the next page.

New Notebook

Select Item to Create

Placement

Load

For this Client

	Name	Age(Yrs)	Gender	Birth Date
1	Training, Child	8	Male	01/01/2001

Select this Placement Home

	County	Facility Type	Facility Name	License
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OK

Cancel

Temporary Custody Only

Non-Foster Care

Sort...

Help

By clicking on the child's name or selecting the child, the three buttons to the right, "Cancel", "Temporary Custody Only" and "Non-Foster Care" will be enabled, turning from grey to black. At this point, they can be clicked.

New Notebook

Select Item to Create
Placement Load

For this Client

	Name	Age(Yrs)	Gender	Birth Date
1	Training, Child	8	Male	01/01/2001

Select this Placement Home

	County	Facility Type	Facility Name	License
--	--------	---------------	---------------	---------

OK
Cancel
Temporary Custody Only
Non-Foster Care
Sort...
Help

Notice that only “Cancel,” “Temporary Custody Only,” “Non Foster Care” and “Help” are available.



That is because there are some business rules that must be complied with prior to making a foster placement. The business rules do not apply to temporary custody or non-foster care.

Temporary Custody



Refers to placements that are temporary, that is, the department is waiting for a responsible adult, usually a parent, to come to the office to pick up the child.

Below is a “Temporary Custody Only” page. There is only one page .

Client Services - Referral [Training, Mother] - [Non-Foster Care Placement]

File Edit Search Action Associated Attach/Detach Window Help Tools

Child Removal Info End Placement/Episode Non-Foster Care

Child Removal Information

Temporary Custody: ☒ Yes ☐ No

Removal Date: 10/18/2008

Removal Time: : am

Removed From

First Caretaker Relationship To Child: [Dropdown]

First Caretaker Removed From: [Dropdown]

Second Caretaker Relationship To Child: [Dropdown]

Second Caretaker Removed From: [Dropdown]

Reasons For Removal

Primary Reason For Removal: [Dropdown]

Secondary Reasons for Removal: [Text Area]

Drugs: [Table with 2 columns: Drugs, Reason]

Other Drug: [Text Field]

Notification Information

Mother Notified

Custody Notification Date: [Dropdown]

Time: : am

☐ Notified of Civil Rights

Father Notified

Custody Notification Date: [Dropdown]

Time: : am

☐ Notified of Civil Rights

Guardian Notified

Custody Notification Date: [Dropdown]

Time: : am

☐ Notified of Civil Rights

Attorney Notified

Custody Notification Date: [Dropdown]

Time: : am

Child Notified

☐ Yes ☒ No ☐ Not applicable

Notification Comments: [Text Area]

☐ Confidential Placement

Removed By

☒ Law Enforcement ☐ Staff Person ☐ Safely Surrendered Baby

Law Enforcement

Officer: First [Text Field] MI [Text Field] Last Name [Text Field]

Officer Phone [Text Field] Ext [Text Field] Badge/ID No. [Text Field]

Staff Person [Text Field] **Receiver of Safely Surrendered Baby** [Text Field]


Temporary Custody Termination

☐ Child Released ☒ Continue In Custody

Date: [Text Field] Time: : am

Ready Referral [Training, Mother] > Client [Child Training] > Non-Foster Care Placement []

The date field defaults to the current date but can be reset if necessary. "Time" needs to be completed. The "Removed By" information box defaults to "Law Enforcement." That is usually the correct answer. Type in the officer's name, phone number and badge number. In the event that a staff person removes the child, select "Staff Person" and then select the Staff Person from the drop down menu that will be enabled. "Safely Surrendered Baby" is only enabled if the child has been documented as a "Safely Surrendered Baby" in the referral special projects notebook.

Removed By		
<input checked="" type="radio"/> Law Enforcement <input type="radio"/> Staff Person <input type="radio"/> Safely Surrendered Baby		
Law Enforcement		
Officer: First	MI	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Officer Phone	Ext	Badge/ID No.
<input type="text"/>	<input type="text"/>	<input type="text"/>
 Staff Person		Receiver of Safely Surrendered Baby
<input type="text"/>		<input type="text"/>

Removed From

First Caretaker Relationship To Child

First Caretaker Removed From

Second Caretaker Relationship To Child

Second Caretaker Removed From

The “Removed From” information box contains all drop-down menus. Just click the arrow and select the correct option.

- <None>
- Care Taker Absence/Incapacity
- Child's Disability or Handicap
- Conversion
- Disrupted Adoptive Placement
- Emotional Abuse
- Exploitation
- General Neglect
- Law Violation
- Non-CWD Mental Health/Kin-GAP
- Physical Abuse
- Relinquishment
- Safely Surrendered Baby
- Severe Neglect
- Sexual Abuse
- Status Offense
- Voluntary Placement
- Voluntary Reentry

The “Primary Reason for Removal” is also a drop down menu. Select the primary reason for the child’s removal. In this example, the selection would be Physical Abuse. *Note, “Voluntary Reentry will only be available for youth over 18 years of age.*

Secondary Reasons for Removal	

“Secondary Reasons for Removal” is not enabled until a primary reason is selected. Once a primary reason has been selected, there will be a “+” in the green box. Clicking the “+” will create a drop down menu for secondary reasons. See the example on the next page.

	Drugs	Reason

The widow is a “Multi Select” window. That is, click on as many of the choices as are appropriate before clicking on the “OK” button. Below is a list of the options.

Alcohol Abuse by Child
Care Taker Absence/Incapacity
Child Born with Drugs in System
Child Born with Fetal Alcohol Syndrome
Child's Behavior Problem
Child's Disability or Handicap
Drug Abuse by Child
Emotional Abuse
Exploitation
General Neglect
Homeless
Law Violation
Parent Absent - Abandonment
Parent Absent - Death
Parent Absent - Incarceration
Parent Skill Hindered by Alcohol Abuse
Parent Skill Hindered by Drug Abuse
Physical Abuse
Relinquishment
Severe Neglect
Sexual Abuse
Status Offense
Unhealthy/Unsafe Home

←Physical abuse is “grayed-out” because it was the “Primary” reason.

If “Parent Skills Hindered by Drug Abuse” is selected, then the “Drugs” box becomes mandatory. Clicking the “+” in the “Drugs” grid will result in a list of drugs. If “Other” is selected, then the “Other Drug” line becomes a mandatory line and must be filled in by typing the name of the other drug.

	Drugs	Reason

Other Drug

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The “Notification” information box is for documenting when each of the parties was notified of the temporary custody. Notification of the parents or legal guardian is required when custody of a child is taken. The child is also to be advised of the action. In all boxes, the date is a drop down menu. The time should be typed in, and the box next to “Notified of Civil Rights” should also be checked. This is usually true, most experienced emergency response workers carry a supply of the civil rights brochures and can give one to the parents at the time custody is taken. Use the “Notification Comments” box to document issues with notification.

Notification Information			
Mother Notified	Father Notified	Child Notified	
Custody Notification Date <input type="text"/>	Custody Notification Date <input type="text"/>	<input type="radio"/> Yes	
Time : am	Time : am	<input checked="" type="radio"/> No	
<input type="checkbox"/> Notified of Civil Rights	<input type="checkbox"/> Notified of Civil Rights	<input type="radio"/> Not applicable	
Guardian Notified	Attorney Notified	Notification Comments	
Custody Notification Date <input type="text"/>	Custody Notification Date <input type="text"/>	<input type="text"/>	
Time : am	Time : am		
<input type="checkbox"/> Notified of Civil Rights			
		<input type="checkbox"/> Confidential Placement	

Below is an example of a completed “Child Removal Info” page.

Client Services - Referral [Training, Mother] - [Non-Foster Care Placement]

File Edit Search Action Associated Attach/Detach Window Help Tools

Child Removal Info End Placement/Episode Non-Foster Care

Child Removal Information

Temporary Custody: ☒ Yes ☐ No

Removal Date: 09/29/2009

Removal Time: 10:30am

Removed From

First Caretaker Relationship To Child: Father (Birth or Adoptive)

First Caretaker Removed From: Training, Father (39)

Second Caretaker Relationship To Child: Mother (Birth or Adoptive)

Second Caretaker Removed From: Training, Mother (39)

Reasons For Removal

Primary Reason For Removal: Physical Abuse

Secondary Reasons for Removal:

Drugs	Reason
1 Other Drug	Parent Skill

Other Drug - Parent Skill Hindered by Drug Abuse

List other drug not on list

Temporary Custody Termination

☐ Child Released ☒ Continue In Custody

Date: : am

Removed By

☒ Law Enforcement ☐ Staff Person ☐ Safely Surrendered Baby

Law Enforcement

Officer: First MI Last Name: Dudley

Officer Phone Ext Badge/ID No: (530) 865 6161

Staff Person: Receiver of Safely Surrendered Baby:

Notification Information

Mother Notified

Custody Notification Date: 09/29/2009

Time: 10:30am

☒ Notified of Civil Rights

Father Notified

Custody Notification Date: 09/29/2009

Time: 10:30am

☒ Notified of Civil Rights

Child Notified

☒ Yes ☐ No ☐ Not applicable

Notification Comments:

Guardian Notified

Custody Notification Date:

Time: : am

☐ Notified of Civil Rights

Attorney Notified

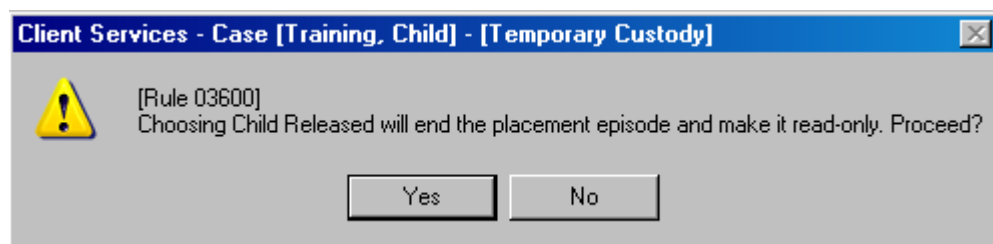
Custody Notification Date:

Time: : am

☐ Confidential Placement

Ready Referral [Training, Mother] >> Client [Child Training] >> Non-Foster Care Placement []

Because “Temporary Custody Only” was selected originally, this information box is enabled. That allows the user to document when and why the child was released. When the radial button for “Child Released” is selected, the following warning is received.



Unless the user wishes to change something on the page, select “Yes.” The “Date,” “Time” and “Reason for Release” fields become mandatory fields and must be completed. The “Date” field will default to the current date but can be corrected if necessary. “Time” must be typed in and “Reason for Release” is a drop down menu.

Temporary Custody Termination

☒ Child Released ☐ Continue In Custody

Date: 09/29/2009 Time: 01:00pm

Reason For Release: Child released home/VFM agreement

Below is the complete drop down menu from “Reason For Release.”

Child committed to State Hospital
Child dependent in other county
Child dependent in other state
Child legally emancipated
Child ran away/no petition filed
Child released home/parnt written agreemt
Child released home/Not in danger
Child released home/VFM agreement
Child released home/WIC 301 contract
Child released to probation/WIC 601, 602
Child released/Volun placement agreement
Child 18 yrs of age
Child relsd to divisn agncy/no petn filed

That completes a “Temporary Custody Only” placement. Next, “Non-Foster Care” placements will be examined.

Non-Foster Care Placements

Non-foster care is a child's residence outside the home or foster family home due to incarceration or care in a medical facility.



The "Temporary Custody" page is used in "Non-Foster Care" placements and regular placements to document when the custody of the child was taken that is leading to the placement. Once completed, it never needs to be done again unless the entire "placement episode" is ended. "Placement Episode" refers to the time the child is in *temporary custody* and remains valid until the child has a permanent placement. "Temporary Custody" as used in these placements starts at the date and time the child is removed from the parent and lasts until a permanent placement for the child is made

To make a "Non-Foster Care" placement, first be sure that the Placement Management Section has been selected by clicking on the "Placement Management Section" icon. 



Next, click the "+" under the "Open Existing Placement" icon.

The following screen will appear.

New Notebook

Select Item to Create
Placement

For this Client

	Name	Age(Yrs)	Gender	Birth Date
1	Training Child	8	Male	01/01/2001

Select this Placement Home

County	Facility Type	Facility Name	License
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OK
Cancel
Temporary Custody Only
Non-Foster Care
Sort...
Help

Click on the child's name, then select "Non-Foster Care." That will result in opening a notebook with three pages.

Child Removal Info End Placement/Episode Non-Foster Care

The “Child Removal Info” is identical to the “Temporary Custody Only” page shown earlier. Complete it in the same manner.

Client Services - Referral [Training, Mother] - [Non-Foster Care Placement]

File Edit Search Action Associated Attach/Detach Window Help Tools

Child Removal Info | End Placement/Episode | Non-Foster Care

Child Removal Information

Temporary Custody: ☒ Yes ☐ No

Removal Date: 09/29/2009
Removal Time: 10:30am

Removed From

First Caretaker Relationship To Child: Father [Birth or Adoptive]
First Caretaker Removed From: Training, Father [39]
Second Caretaker Relationship To Child: Mother [Birth or Adoptive]
Second Caretaker Removed From: Training, Mother [39]

Reasons For Removal

Primary Reason For Removal: Physical Abuse

Secondary Reasons for Removal:

	Drugs	Reason
1	Other Drug	Parent Skill

Other Drug - Parent Skill Hindered by Drug Abuse
[List other drug not on list]

Removed By

☒ Law Enforcement ☐ Staff Person ☐ Safely Surrendered Baby

Law Enforcement

Officer: First MI Last Name: Dudley Dought
Officer Phone Ext Badge/ID No.: (530) 865-6161

Staff Person: Receives of Safely Surrendered Baby

Notification Information

Mother Notified
Custody Notification Date: 09/29/2009
Time: 10:30am
☒ Notified of Civil Rights

Father Notified
Custody Notification Date: 09/29/2009
Time: 10:30am
☒ Notified of Civil Rights

Guardian Notified
Custody Notification Date:
Time: : am
☐ Notified of Civil Rights

Attorney Notified
Custody Notification Date:
Time: : am

Child Notified
☒ Yes ☐ No ☐ Not applicable
Notification Comments:

☐ Confidential Placement

Temporary Custody Termination:
☐ Child Released ☒ Continue in Custody
Date: Time:

Ready Referral [Training, Mother] > Client [Child Training] > Non-Foster Care Placement []

The next page to complete is non-foster care. **Non-Foster Care**

Client Services - Referral [Training, Mother] - [Non-Foster Care Placement [City Hospital]]

File Edit Search Action Associated Attach/Detach Window Help Tools

Child Removal Info End Placement/Episode **Non-Foster Care**

Name Start Date **08/29/2009**

Facility Type Facility Type Description

Contact

Name Phone Ext Fax

Street No. Street Name City

State ZIP ZIP Ext Geographic Region County **Glenn**

Foreign Country Foreign ZIP Foreign Address Description (Province Name, etc.)

Disaster Emergency Contact Information

Name Phone Ext Alternate Phone

E-mail Address



Street No. Street Name City

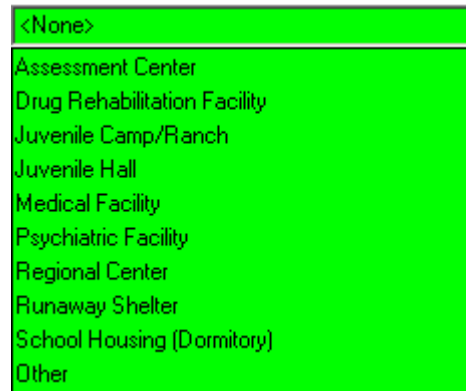
State **California** ZIP **99999** ZIP Ext

Foreign Country Foreign ZIP Foreign Address Description (Province Name, etc.)

Comments

Ready Referral [Training, Mother] > Client [Child Training] > Non-Foster Care Placement [City Hospital]

Type the information in all the fields. There are two fields that cannot be typed in. The first field  will default to the current date. The date can be changed if necessary for accuracy. The second field  is a drop down menu.



- <None>
- Assessment Center
- Drug Rehabilitation Facility
- Juvenile Camp/Ranch
- Juvenile Hall
- Medical Facility
- Psychiatric Facility
- Regional Center
- Runaway Shelter
- School Housing (Dormitory)
- Other

Select one of the options.

Facility Type	Facility Type Description
Other	Hospital

If “Other” is selected, the “Facility Type description” becomes mandatory.


At this time, the “Non-Foster Care” placement is complete.

To end a “Non-Foster Care” placement, go to the “End Placement/Episode page.”
Below is a sample of a blank “End Placement/Episode” Page.

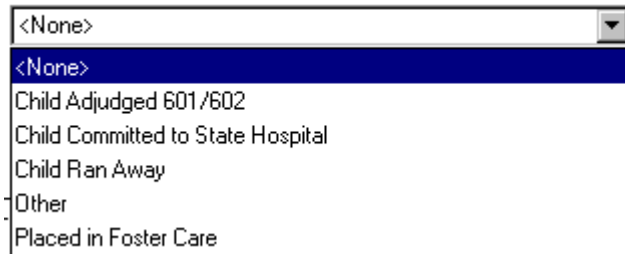
The screenshot shows a software window titled "Client Services - Referral [Training, Mother] - [Non-Foster Care Placement [City Hospital]]". The menu bar includes File, Edit, Search, Action, Associated, Attach/Detach, Window, Help, and Tools. The toolbar contains icons for various actions like adding, deleting, and navigating. The main area has three tabs: "Child Removal Info", "End Placement/Episode", and "Non-Foster Care". The "End Placement / Episode" tab is active, showing a form with the following sections:

- End Placement / Episode**
 - Notice to Remove Date: [Dropdown]
- Placement Change**
 - Placement Change Reason: [Dropdown]
 - Placement End Date: [Dropdown]
 - Placement Change Description: [Text Area]
- Placement Episode Termination**
 - Placement Episode Termination Reason: [Dropdown]
 - Placement Episode End Date: [Dropdown]
 - Placement Episode Termination Description: [Text Area]


The status bar at the bottom shows "Ready" and the navigation path: "Referral [Training, Mother] -> Client [Child Training] -> Non-Foster Care Placement [City Hospital]".

The "Notice to Remove Date" is grayed out.  The down arrow is not available. This is because in a "Non-Foster Care" placement, no notice to the care provider of an impending move is required. Use the down arrow next to "Placement Change Reason" to record why the placement being ended.

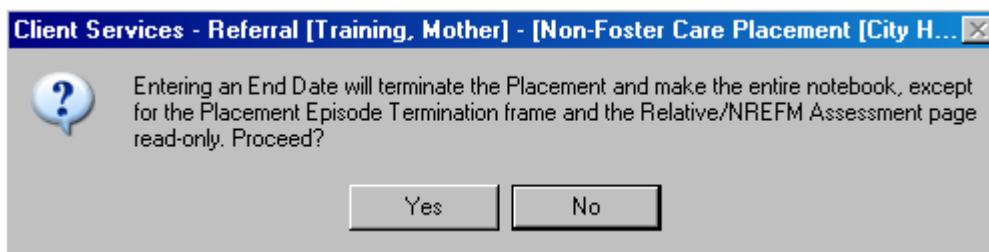
Placement Change Reason



<None>
<None>
Child Adjudged 601/602
Child Committed to State Hospital
Child Ran Away
Other
Placed in Foster Care

Select one of the reasons to the left. Next, select the date the placement is ended in the "Placement End Date." Click the  The "Placement End Date" is controlled by the "Non Foster Care Start Date" and cannot be prior to that date.

When a date is entered in the "Placement End Date," the dialogue box shown below appears.



Client Services - Referral [Training, Mother] - [Non-Foster Care Placement [City H...

Entering an End Date will terminate the Placement and make the entire notebook, except for the Placement Episode Termination frame and the Relative/NREFM Assessment page read-only. Proceed?

Yes No

Be sure that all information is completed for the “Non Foster Care” placement before saying yes. If “No” is clicked, the date will disappear and any additional information may be added.

The last field on the page, “Placement Episode Termination,” is to be used only when the child has achieved permanency. These are four ways to achieve permanency.

1. Reunited with family
2. Achieved age of majority (18)
3. Adopted
4. Died

There are other options, such as guardianship; however, before using other reasons check with your supervisor for directions.

Below is a completed “End Placement/Episode” page.

Client Services - Referral [Training, Mother] - [Non-Foster Care Placement [City Hospital]]

File Edit Search Action Associated Attach/Detach Window Help Tools

Child Removal Info End Placement/Episode Non-Foster Care

End Placement / Episode

Notice to Remove Date

Placement Change

Placement Change Reason: Placed in Foster Care Placement End Date: 09/30/2009



Placement Change Description

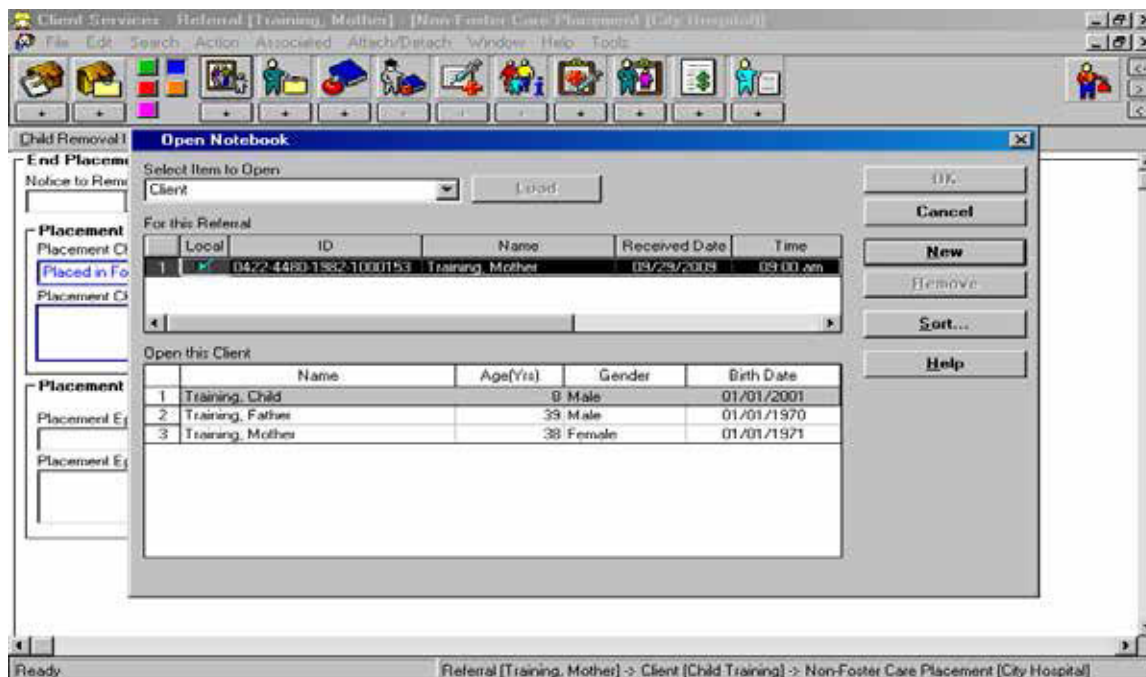
Placement Episode Termination

Placement Episode Termination Reason: Placement Episode End Date:

Placement Episode Termination Description

“Foster” Care Placement

As stated earlier, there are two business rules that must be followed to make a “Foster Placement.” The first is that the child to be placed must have a “State ID Number.” To confirm that the child has a “State ID Number,” or create a new “State ID Number” click on the “Client Management Section.”  Next, click on “Existing Client.”  That will result in the following screen.



Select the child or children that are to be placed. CWS/CMS will allow a user to select multiple clients at one time. Also note that one line is grayed. It is highlighted, but is not selected. To select that line, a user must click on it. The application is attempting to forecast which client is likely to be opened.

Open this Client				
	Name	Age(Yrs)	Gender	Birth Date
1	Training, Child	8	Male	01/01/2001
2	Training, Father	39	Male	01/01/1970
3	Training, Mother	38	Female	01/01/1971

After selecting the client or clients that are to be opened, click on the “OK” button to the right

Below is a sample of a child ID page.

Client Services - Referral [Training, Mother] - [Client [Child Training]]

File Edit Search Action Associated Attach/Detach Window Help Tools

Summary ID Demog. Address Names Related Clients ID Num Juv. Cr. # Search Log AFDC-FC Attorneys Service Providers I.C.W.A. Adoption Info AAP Eligibility

Name and Identification

Client Information

Prefix First Middle Last Suffix Name Type
 Gender Marital Status SSN Alien Registration #
 Male Date of Birth or Age and Age Unit
 01/01/2001 8 Years
☐ Self Reporter ☐ Client is a Minor Mother ☐ Outstanding Warrant Exists
 Client Number 1556-4864-6180-5000018

Other Client Information

ICWA Eligible Incapacitated Parent
☐ Yes ☐ Yes
☐ No ☐ No
☒ Not Asked ☒ Unknown
☐ Pending ☐ Not Applicable
☐ Child has Indian Ancestry

Indian Ancestry Notification

+	County	Date

County Date Informed

Language

Primary Language English
 Secondary Language
 Literate
☐ Yes
☐ No
☒ Unknown
☐ Not Applicable

Ethnicity

Primary Ethnicity White
 Other Ethnicity
 + Other Ethnicity
 Hispanic or Latino Origin
☐ Yes
☒ No
☐ Undetermined

Confidentiality

☐ Confidentiality In Effect
 Ineffective Date

Safely Surrendered Baby

☐ This Client has been involved in the Safely Surrendered Baby Program

Safety Alert Information

+	Activation Date	Reason	Deactivation Date

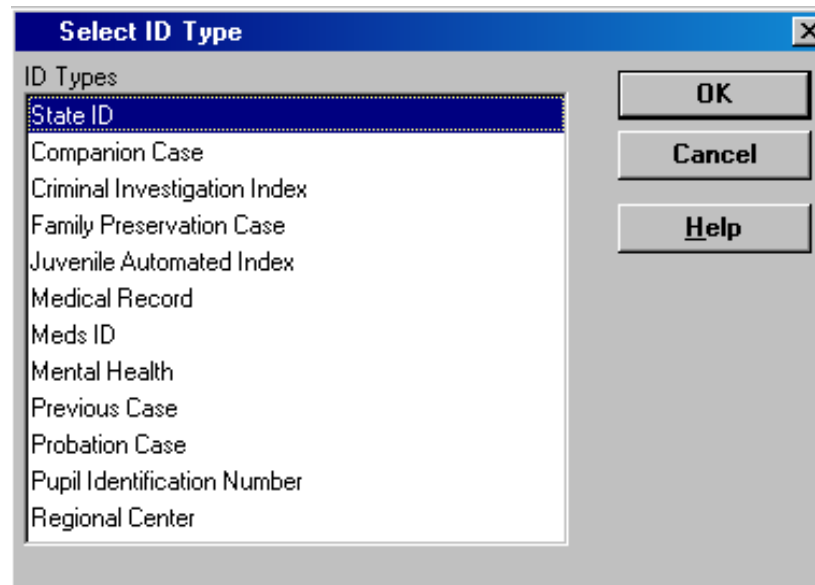
Ready Referral [Training, Mother] -> Client [Child Training]

To confirm that a child has a “State ID Number” or to create a “State ID Number,” click on the “ID” page. Next, click on the “+” in the grid shown below.

-Identification Numbers	
	Type
+	

That will result in the following screen.

In the “Select ID” Box, select “State ID” then click on the “OK” to the right.



The application will create the following page.

Client Services - Referral [Training, Mother] - [Client [Child Training]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

Summary ID Demog. Address Names Related Clients ID Num Juv. Cr. # Search Log AFDC-FC Attorneys Service Providers ICWA/JV-1

Identification Numbers

+	Type	ID Number
1	State ID	11- - -

ID NumberType
State ID

County Aid Code Number Asst. Person Unit Number
11

Start Date End Date
10/20/2009

Eligibility Case Name

First Middle Last

Aid Code History

+	Aid Code	Start Date	End Date
1			

Aid Code Start Date End Date

Ready Referral [Training, Mother] -> Client [Child Training]

Notice that the “County” is automatically completed and is read-only. The selection is determined by the county in which the user is logged on.

ID NumberType				
State ID				
County	Current Aid Code	Serial Number	Asst. Unit	Person Number
11				

The “Current Aid Code” is also read-only and will be determined by an entry to be made later. The worker creating the “State ID Number” provides the “Serial Number.” It is seven numbers, usually provided by eligibility. Although not a good idea, there are times when a pseudo number is used. Check with the county for specific county practice. The “Asst. Unit” refers to the unit within the county that is responsible for foster care aid. It is usually a letter, but the application would also allow a number. “Person Number” documents for this eligibility case which person this child is in numerical order. For example, if this were an existing eligibility case, the “Person Number” might be 04, or if this were a brand new case in which this client child was the only person, the number would be 01.

The start date is the actual start date for this aid case.

Start Date	End Date
09/28/2009	

 The “End Date” is controlled by the “End Date” of the “Aid Code History” that is shown on the following page.

“Aid Code” specifically documents which type or kind of aid the child client is receiving. In the example below, the child is receiving foster care. The “Start Date” in the “Aid Code History” information box is controlled by the “Start Date” in the “ID Number” code. The “End Date” in the “Aid Code History” controls the “End Date” in the “ID Number” code.

Aid Code History

+	Aid Code	Start Date	End Date
1	42	09/28/2009	

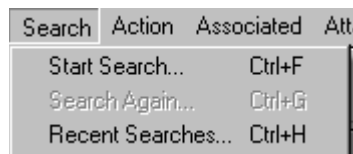
Aid Code: 42 Start Date: 09/28/2009 End Date:

When all yellow fields are completed, the “State ID Number” has been documented.

The second requirement is that the placement facility must be in the cache or temporary memory of the computer being worked on. There are two ways to accomplish this. The first, and most common, is to “Search” for the placement resource. To do this, go to the dropdown menu and click on the “Search” option.

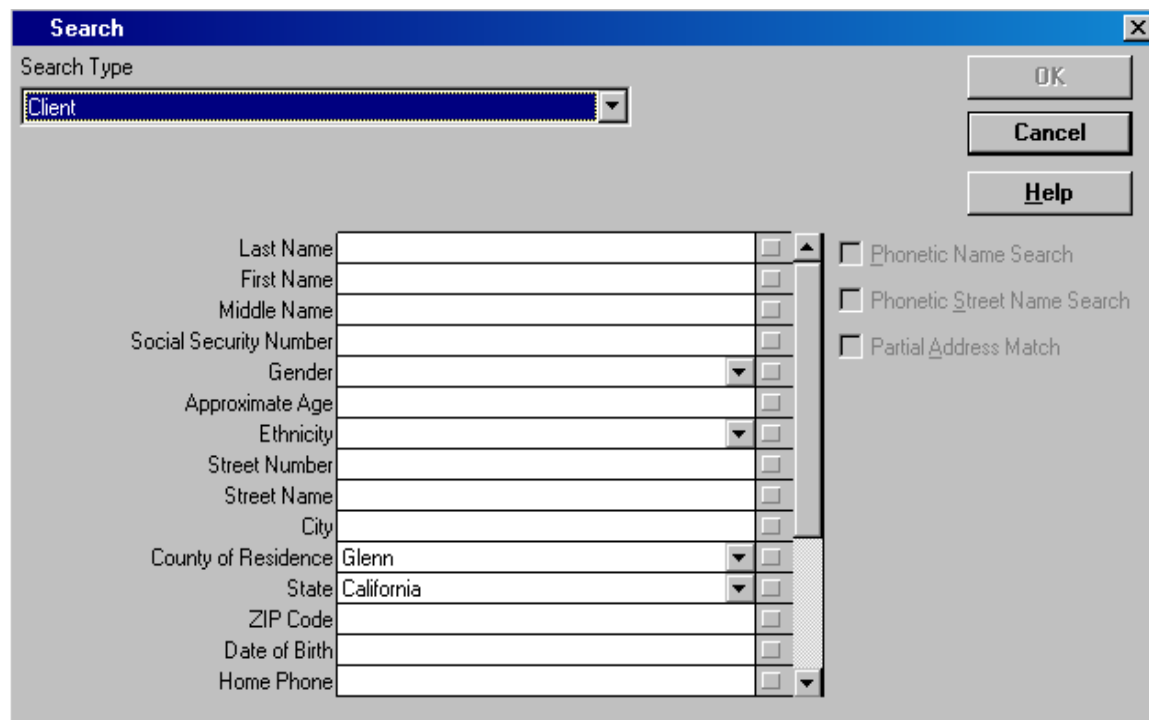


This will result in the following menu selections.



Select “Start Search”

The following dialogue box will appear.



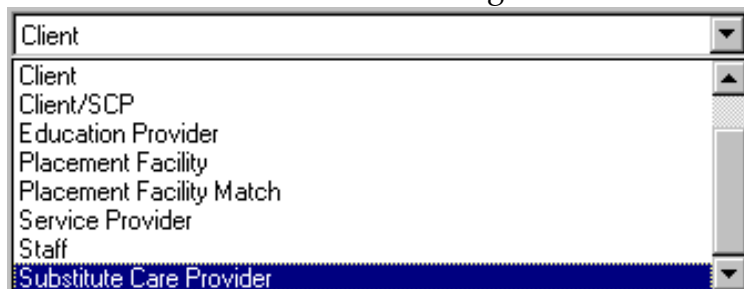
A screenshot of a 'Search' dialog box. At the top, the title bar says 'Search'. Below it, 'Search Type' is set to 'Client' in a dropdown menu. To the right are 'OK', 'Cancel', and 'Help' buttons. The main area contains a list of search criteria, each with a text input field and a checkbox. The criteria are: Last Name, First Name, Middle Name, Social Security Number, Gender, Approximate Age, Ethnicity, Street Number, Street Name, City, County of Residence (set to 'Glenn'), State (set to 'California'), ZIP Code, Date of Birth, and Home Phone. To the right of these fields are three checkboxes: 'Phonetic Name Search', 'Phonetic Street Name Search', and 'Partial Address Match', all of which are currently unchecked.

Search Criteria	Input Field	Checkbox
Last Name		<input type="checkbox"/>
First Name		<input type="checkbox"/>
Middle Name		<input type="checkbox"/>
Social Security Number		<input type="checkbox"/>
Gender		<input type="checkbox"/>
Approximate Age		<input type="checkbox"/>
Ethnicity		<input type="checkbox"/>
Street Number		<input type="checkbox"/>
Street Name		<input type="checkbox"/>
City		<input type="checkbox"/>
County of Residence	Glenn	<input type="checkbox"/>
State	California	<input type="checkbox"/>
ZIP Code		<input type="checkbox"/>
Date of Birth		<input type="checkbox"/>
Home Phone		<input type="checkbox"/>

☐ Phonetic Name Search
☐ Phonetic Street Name Search
☐ Partial Address Match

Change the “Search Type” from Client by clicking on the down arrow to the right of client.

This will result in a second dialogue box.



Click on “Placement Facility.”

Note: “Placement Facility match” is not a good choice in the Northern part of California.

Clicking on “Placement Facility” will result in a different dialogue box, as shown on the following page.

Search [X]

Search Type
Placement Facility

Placement Facility
County Shelter/Receiving Home(Non EA/AFDC)

County Glenn ☒

LA Vendor ID ☐

Facility Name ☐

Zip Code ☐

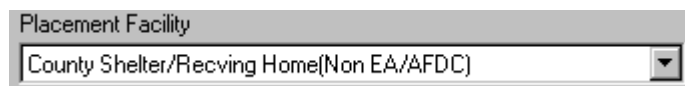
Region ☐

OK

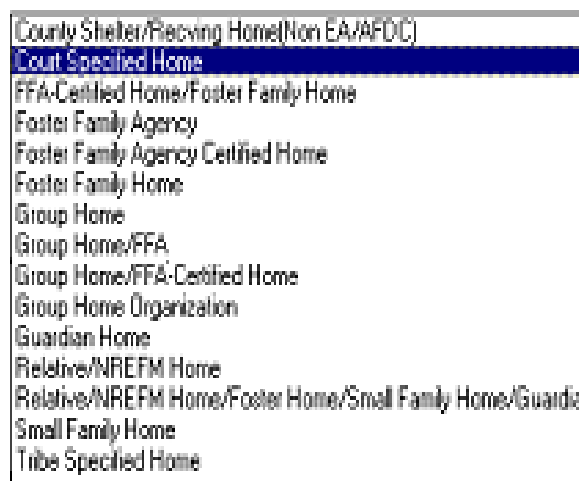
Cancel

Help

You can change the Placement Facility by clicking on the down arrow.

A screenshot of a software interface showing a dropdown menu titled "Placement Facility". The current selection is "County Shelter/Receiving Home(Non EA/AFDC)". A small downward-pointing arrow is visible on the right side of the dropdown box.

This will result in a dropdown menu from which to choose.

A screenshot of a dropdown menu with the following options: "County Shelter/Receiving Home(Non EA/AFDC)", "Court Specified Home", "FFA-Certified Home/Foster Family Home", "Foster Family Agency", "Foster Family Agency Certified Home", "Foster Family Home", "Group Home", "Group Home/FFA", "Group Home/FFA-Certified Home", "Group Home Organization", "Guardian Home", "Relative/NREFM Home", "Relative/NREFM Home/Foster Home/Small Family Home/Guardian", "Small Family Home", and "Tribal Specified Home". The "Court Specified Home" option is highlighted in blue.

The better choice is probably to choose the line that has the most possible types of homes in it. It is sometimes difficult to know how a home is licensed. Selecting the line that the arrow is pointing to will get the most possible results.

This will result in the dialogue box shown on the next page.

Search [X]

Search Type
Placement Facility

Placement Facility
Relative/NREFM Home/Foster Home/Small Family Home/Guardian

County Glenn [v] [x]
LA Vendor ID []
Substitute Care Provider First Name []
Substitute Care Provider Last Name []
Zip Code []
Facility Name []
Region []

☐ Phonetic Name Search

OK
Cancel
Help

Clicking on the “OK” button to the right will result in a screen that shows all the placement facilities (homes) that meet the criteria that was selected on the last screen. Searching to the criteria shown would have resulted in a search with approximately 50± homes. For purposes of this manual only, the search was limited intentionally to produce only one listing. **This would not be the norm for the search as shown.**

Below is the limited search result.

	City/County	Zip Code	Contact Name	Phone
1	Orland/ Glenn	95963	Provider, SC	(916) 935-5784

Now that the child to be placed has a “State ID” and a placement resource has been searched for and selected, a foster placment can be made.

What if there is nothing known about any of the homes shown? By double clicking on the home in the search results, the application will create and display an abstract. On the next several pages is a sample abstract for the home above.

The entire abstract is read-only. The viewer cannot change any data in the abstract, only read it.

The first page is the “ID” page

The screenshot displays a software window titled "Client Services - Referral [Training, Mother] - [Placement Home [Training Placement Home]]". The window features a menu bar (File, Edit, Search, Action, Associated, Attach/Detach, Window, Help, Tools) and a toolbar with various icons. Below the toolbar is a tabbed interface with the following tabs: ID, Substitute Care Provider, Other Children, Other Adults, Chap/Pref, License Info, Comments, Special Projects, Payee, LA Payee, Hold Status, and Background Check. The "ID" tab is currently selected, showing a form for identifying a placement home. The form includes sections for Identification, Age Range, Backup Contact, Address, and Disaster Emergency Contact Information. The "Identification" section contains fields for Name (Training Placement Home), Primary Substitute Care Provider, Type (Court Specified Home), Foster Family Home Type, and License Number. The "Age Range" section includes fields for #Placements, Beds Avail, Adj. Cap., From, To, Primary Phone, and Fax. The "Backup Contact" section includes fields for Name, Phone, and Ext. The "Address" section includes fields for Street No., Street Name, City, State, ZIP, ZIP Ext, Geographic Region, County of Location, Foreign Country, Foreign ZIP, and Foreign Address Description. The "Disaster Emergency Contact Information" section includes fields for Name, Phone, Ext, Alternate Phone, E-mail Address, Street No., Street Name, City, State, ZIP, ZIP Ext, Foreign Country, Foreign ZIP, and Foreign Address Description. The status bar at the bottom indicates "Ready" and "Referral [Training, Mother] -> Placement Home [Training Placement Home]".

Client Services - Referral [Training, Mother] - [Placement Home [Training Placement Home]]

File Edit Search Action Associated Attach/Detach Window Help Tools

ID Substitute Care Provider Other Children Other Adults Chap/Pref License Info Comments Special Projects Payee LA Payee Hold Status Background Check

Identification

Name: Training Placement Home Primary Substitute Care Provider

Type: Court Specified Home Operated By:

Foster Family Home Type: License Number:

Age Range

#Placements: Beds Avail: Adj. Cap:

From: To: Primary Phone: Est. Fax:

0 10 850 856-7045 1 1

☐ This home is on hold. Please see the Hold Status page.

☐ SCP Moved to New Address

☐ At Capacity

☐ Adoption Only

Backup Contact

Name: Phone: Ext:

Married Backup 850 865-7234

Address

Street No.: 294 Street Name: County Road Q City: Oakland

State: California ZIP: 95063 ZIP Ext: Geographic Region: County of Location: Glenn

Foreign Country: Foreign ZIP: Foreign Address Description (Province Name, etc.):

Comment:

Disaster Emergency Contact Information

Name: Phone: Ext: Alternate Phone: Ext:

DEC Person 816 264-5432

E-mail Address: persondec@madepersonal.com

Street No.: 1 Street Name: Tree City: Sacramento

State: California ZIP: ZIP Ext:

Foreign Country: Foreign ZIP: Foreign Address Description (Province Name, etc.):

Ready Referral [Training, Mother] -> Placement Home [Training Placement Home]

The second page is the “Substitute Care Providers.” This provides information regarding the adults in the home who are providing care for the child or children placed in the home.

Client Services - Case [Training, Child] - [Placement Home [Training Placement Home]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

Substitute Care Providers

ID	Name	Assoc Start Date	Assoc End Date
1	Provider, SC	11/10/2008	

Name

Title First MI Last Suffix

SC Provider

Gender Birth Date E-mail Address

Male Female 01/01/1972 SCProvider@xxxxx.net

Marital Status Tribe Location Tribal Affiliation Employer Name

Widowed

Phone Numbers

Phone Number Type

Hispanic or Latino Origin

Yes No Declines to State Unable to Determine

Unable to Determine - Reason

Race/Ethnicity

Specify Race if known

Ethnicity

Unable to Determine - Reason

SCP Associations to This Home

ID	Provider	Start Date	End Date	Licensee	D
1	Primary	11/10/2008		Unknown	Y

Primary Provider CDS Person # Start Date

11/10/2008

Secondary Provider End Date

01

Licensee Resident

Yes No Unknown Yes No Unknown

Attorneys Associated to This SCP

ID	Attorney	Start Date	End Date	D

Attorney Start Date End Date

Description

SCP Address

Ready Case [Training, Child] -> Placement Home [Training Placement Home]

The third page is “Other Children in Home.” This provides information on other children who reside in the home, such as birth children. It does not include other children placed in the home.

Client Services - Referral [Training, Mother] - [Placement Home [Training Placement Home]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

JD Substitute Care Provider **Other Children** Other Adults Chg/Pref License Info Comments Special Projects Payee LA Payee Hold Status Background Check

Other Children in Home

	Name	Date of Birth	Gender
1	Child Provider	10/24/2001	Male

Name
Child Provider

Date of Birth: 10/24/2001
 Gender: ☒ Male ☐ Female
 Annual Unearned Income: -

Special Characteristics - Applies to All

Child Provider's Relationship to Substitute Care Providers

	SCP Name	Relationship
1	Provider III, SC	Son/Father (Birth)

SCP Name: Provider III, SC
 Relationship: Son/Father (Birth)

Ready Referral [Training, Mother] -> Placement Home [Training Placement Home]

This is followed by “Other Adults in Home,” which informs the user about any other adults in the home who are not “caretakers” but are living in the home.

Client Services - Referral [Training, Mother] - [Placement Home [Training Placement Home]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

Substitute Care Provider Other Children Other Adults Char/Pref License Info Comments Special Projects Payee LA Payee Hold Status Background Check

Other Adults in Home

	Name	Date of Birth	Start Date	End Date	Gender
1	Grandma Provider	07/23/1942			Female

Name
Grandma Provider

Date of Birth
07/23/1942

Gender
☐ Male ☒ Female

Start Date
End Date

Description

Grandma Provider's Relationship to Substitute Care Providers

	SCP Name	Relationship
1	Provider III, SC	Mother/Son (Birth)

SCP Name
Provider III, SC

Relationship
Mother/Son (Birth)

Ready Referral [Training, Mother] -> Placement Home [Training Placement Home]

The Char(acteristics)/Pref(erences) page displays specific characteristics and preferences of the home in question. This is the page that CWS/CMS uses when it attempts to do a “Placement Match” search. In the North, this page is typically not completed, and this causes the “Placement Match” search to fail.

Client Services - Referral [Training, Mother] - [Placement Home [Training Placement Home]]

File Edit Search Action Associated Attach/Detach Window Help Tools

ID Substitute Case Provider Other Children Other Adults Char/Pref License Info Comments Special Projects Payee LA Payee Hold Status Background Check

Characteristics and Preferences

Characteristics

Gender Preference: ☐ Male ☐ Female ☒ Both

Emergency Shelter: ☐ Yes ☐ No ☒ Unknown

Child Care Plan: ☐ Yes ☐ No ☒ Unknown

Transportation Provided: ☐ Yes ☐ No ☒ Unknown

In Home Visits Allowed: ☐ Yes ☐ No ☒ Unknown

Public Transportation: ☐ Yes ☐ No ☒ Unknown

Ethnicity: + Ethnicity

Language: + Language

Education Providers: [Dropdown]

Religion: + Religion

Population Served: + Population Served

1 [Behavioral Difficulties (runaway, lying)]

Environmental Factors/Pets: [Dropdown]

Health Factors: [Dropdown]

Other: [Dropdown]

Religious Activities: [Dropdown]

Preferences

LIS-Specified Preferences: [Dropdown]

CWS-Specified Preferences: [Dropdown]

☐ Confidentiality in Effect

Ready Referral [Training, Mother] > Placement Home [Training Placement Home]

The “License Information” page provides information regarding the licensure process -- when the license was applied for, when it was granted, etc.

Client Services - Referral [Training, Mother] - [Placement Home [Training Placement Home]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

ID Substitute Care Provider Other Children Other Adults Char/Pref **License Info** Comments Special Projects Payee LA Payee Hold Status

License Information

Number: [] Lic. Capacity: 0 Business Type: [] Client Served Type: []

Application Received: [] Issue Date: [] Expiration Date: []

Licensing Worker Name: [] Phone Number: [] Ext: []

Licensed By

- ☒ Not Applicable
- ☐ CCL
- ☐ County

☐ Certification Form Completed

Certified Pending Licensure History

Start Date	End Date

Start Date: [] End Date: []

Application Status History

Application Status	Start Date	End Date

License Status History

License Status	Start Date	End Date

Ready Referral [Training, Mother] -> Placement Home [Training Placement Home]

The worker who created the placement facility being reviewed is allowed to enter comments about that home. This page documents those comments. Some comments may be issues that get referred to community licensing, others may not. Use the check box to determine if the comment was referred.

Client Services - Referral [Training, Mother] - [Placement Home [Training Placement Home]]

File Edit Search Action Associated Attach/Detach Window Help Tools

Comments

	Submitted By	Date	
1	Susan Weekly	09/29/2009	N

Submitted By: Date:

☐ Referred to Licensing

Description:

Very nice home, paternal grandparent's health is reported to have bad times, then recovers, not a placement issue unless the health turns into more than occasional special care.

Use the “Special Projects” page to learn if the facility is a part of any special project.

The screenshot shows the 'Special Projects' tab selected in a navigation bar. Below the navigation bar, the 'Special Projects' section is visible. It contains a table with the following columns: 'Special Project', 'Start Date', and 'End Date'. Below the table, there are three input fields: 'Special Projects' (a text box with a dropdown arrow), 'Start Date' (a date picker), and 'End Date' (a date picker).

The “Payee” page documents who should receive the foster care payment and where that payment should be sent.

The screenshot shows the 'Payee' tab selected in a navigation bar. Below the navigation bar, the 'Payee' section is visible. It contains a form with the following fields: 'First Name', 'MI', 'Last Name', 'Street No.', 'Street Name', 'City', 'State' (a dropdown menu showing 'California'), 'ZIP', 'ZIP Ext', 'Primary Phone', 'Ext', 'Foreign Country' (a dropdown menu), 'Foreign ZIP', and 'Foreign Address Description (Province Name, etc.)'.

“LA Payee” serves the same purpose as “Payee” but is exclusively for Los Angeles County.

ID	Substitute Care Provider	Other Children	Other Adults	Char/Pref	License Info.	Comments	Special Projects	Payee	LA Payee	Hold Status	◀	▶
----	--------------------------	----------------	--------------	-----------	---------------	----------	------------------	-------	-----------------	-------------	---	---

LA Payee Information											
First Name			MI	Last Name							
<input type="text"/>			<input type="text"/>	<input type="text"/>							
Street No.		Street Name									
<input type="text"/>		<input type="text"/>									
City			State		ZIP		ZIP Ext				
<input type="text"/>			<input type="text"/>		<input type="text"/>		<input type="text"/>				
Phone		Ext	Business								
<input type="text"/>		<input type="text"/>	<input type="text"/>								
LA Vendor ID											
<input type="text"/>											


ID	Substitute Care Provider	Other Children	Other Adults	Char/Pref	License Info.	Comments	Special Projects	Payee	LA Payee	Hold Status
----	--------------------------	----------------	--------------	-----------	---------------	----------	------------------	-------	----------	-------------

Hold Status



Start Date	End Date	County	Reason
<div> <div>Start Date</div> <div>End Date</div> <div>County</div> <div>Reason</div> </div>			

To make a placement of a child in a placement facility or home, click the “+” under the “Open Existing



Placement” icon.  This will result in the same dialogue box as the one seen to create a “Non-Foster Care” placement.

New Notebook

Select Item to Create
Placement  

For this Client

	Name	Age(Yrs)	Gender	Birth Date
1	Training, Child	8	Male	01/01/2001

Select this Placement Home

	County	Facility Type	Facility Name	License
1	Glenn	Court Specified Home	Training Placement Home	

This time, select the child to be placed by clicking on the child in the first grid , being sure that the correct home is selected in the bottom grid. CWS/CMS allows the user to select multiple siblings in the top box. Use that option when the siblings are all being placed in the same home. It will start each child's placement; however, remember to complete the placement for each child.

New Notebook

Select Item to Create

Placement

Load

For this Client

	Name	Age(Yrs)	Gender	Birth Date
1	Training Child	8	Male	01/01/2001

Select this Placement Home

	County	Facility Type	Facility Name	License
1	Glenn	Court Specified Home	Training Placement Home	

When both grids have selections made, the “OK” button in the top right of the page becomes enabled. To make the placement, click on the “OK” button.

New Notebook

Select Item to Create

Placement

Load

For this Client

	Name	Age(Yrs)	Gender	Birth Date
1	Training Child	8	Male	01/01/2001

Select this Placement Home

	County	Facility Type	Facility Name	License
1	Glenn	Court Specified Home	Training Placement Home	

Clicking the “OK” button will take the user to the “Temporary Custody” page. If this page was completed for a “Non-Foster Care” placement as in this example, the page will already be completed. See example below.

Client Services - Referral [Training, Mother] - [Non-Foster Care Placement]

File Edit Search Action Associated Attach/Detach Window Help Toolz

Child Removal Info End Placement/Episode Non-Foster Care

Child Removal Information

Temporary Custody: ☒ Yes ☐ No

Removal Date: 09/29/2009
Removal Time: 10:30am

Removed From

First Caretaker Relationship To Child: Father (Birth or Adoptive)
First Caretaker Removed From: Training, Father (39)
Second Caretaker Relationship To Child: Mother (Birth or Adoptive)
Second Caretaker Removed From: Training, Mother (39)

Reasons For Removal

Primary Reason For Removal: Physical Abuse
Secondary Reasons for Removal: 1 Parent Skill Hindered by Drug Abuse
Other Drug - Parent Skill Hindered by Drug Abuse: List other drug not on list.

Notification Information

Mother Notified
Custody Notification Date: 09/29/2009
Time: 10:30am
☒ Notified of Civil Rights

Father Notified
Custody Notification Date: 09/29/2009
Time: 10:30am
☒ Notified of Civil Rights

Child Notified
☒ Yes ☐ No ☐ Not applicable
Notification Comments:

Guardian Notified
Custody Notification Date:
Time: : am
☐ Notified of Civil Rights

Attorney Notified
Custody Notification Date:
Time: : am
☐ Confidential Placement

Removed By
☒ Law Enforcement ☐ Staff Person ☐ Safely Surrendered Baby

Law Enforcement
Officer: First MI Last Name: Dudley Doright
Officer Phone Ext Badge/ID No.: (530) 865-6161

Staff Person
Receiver of Safely Surrendered Baby:

Temporary Custody Termination
☐ Child Released ☒ Continue In Custody
Date: Time:

Ready Referral [Training, Mother] -> Client [Child Training] -> Non-Foster Care Placement []

Next, complete the “ID” page of the placement. See the example below:

Client Services - Case [Case, Training] - Placement [Training Placement Home]

File Edit Search Action Associated Attach/Detach Window Help Toolz

Child Removal Info ID Ongoing Requests Incidental Payments End Placement/Episode Temporary Leave

Identification and Approval

Placement Information

Start Date End Date Agreement Effective Date Agency Responsible Placement Count

County Welfare Department 1

Placement Home Facility Type Program Number Primary Substitute Care Provider

Training Placement Home Court Specified Home SCP, Training

☐ Emergency Placement ☐ Legal Auth. For Placement Effective Date Care Provider Relationship To Child

☐ De Facto Parent Legal Authority Not Yet Determined

☒ Active Confidential Placement

Placement Approval

Approval Status Date

Request Not Submitted

Shelter Care Extension Approval

Approval Status Date

Request Not Submitted

CHOP Program

☐ Date Substitute Care Provider Informed of CHOP Program and brochure given ☐ Substitute Care Provider Requested CHOP Services ☐ Date SCP Given HEP and Informed of Purpose

Rationale

☐ Certified License Pending Homes: Certification on file that home meets licensing standards and licensed facility not available or does not meet child

☐ Approved Homes: This home is suited to the child's needs

☐ Group Homes: Group Home placement is necessary to meet child treatment needs and this facility offers needed services

☐ Tribal Designee Consulted Date Agreed

Rationale Description

Attends same school as prior to placement

Unknown

☐ Considered proximity to the school in which the child was enrolled at the time of placement

Explanation if the child was not placed in proximity of school


Sibling Placement Rationale

Siblings placed together

Reason

Comments

Ready Case [Case, Training] -> Client [Case Focus Child] [Son Training] -> Placement []





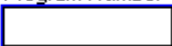

Compete the “Start Date” field. This is the date that the child was first placed in the home.  In the example, the date would be September 29, 2009. Next, complete the “Agreement Effective Date” field.

Agreement Effective Date



This is the date the placement agreement signed by CWS staff person and substitute care provider took effect. This should never be after the child was placed. It should be before placement. Although not a yellow or mandatory field, it is a required field. It will block ending a placement until it is completed.

There are several “Read Only” fields on the top of the page. These include the following:

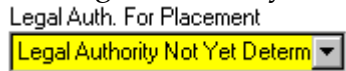
Agency Responsible 	Placement Count 	Placement Home 
Facility Type 	Program Number 	Primary Substitute Care Provider 

These fields all populate from other places and, if applicable, will already be completed.

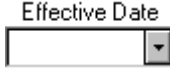
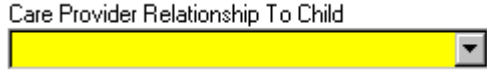
When “Emergency Placement” is checked, this indicates that the placement was made on an emergency basis.

☐ Emergency Placement

When “De Facto Parent” is selected, ☐ De Facto Parent this choice indicates that the Juvenile Court has determined that the substitute care provider in this placement has assumed the role of parent for the child client on a day-to-day basis for a substantial period.

“Legal Authority for Placement” documents when Court Orders or some other legal authority for placement exists. It will default to “Legal Authority Not Yet Determined” as shown.  It is best to leave this untouched until a legal authority has been determined. If the Intervention reason for the focus child is "Non-CWD Mental Health," this field defaults to "Child/Agency Agreement" and is read-only. If the Intervention reason for the focus child is "Non-CWD Kin-Gap," this field defaults to "Guardian Relative Kin-Gap" and is read-only. If the field is clicked on, the ability to select “Legal Authority Not Yet Determined” is lost and another option must be selected.

On April 28, 2012, four codes were added. Three were specific to Non Minor Dependents (NMD): WIC 300 (Dependency Jurisdiction [*new or resumed*]); WIC 450 (Transition Jurisdiction); and WIC 602 (Continued Delinquency Jurisdiction). These selections will not be available if the client is under 18 years of age. The last code added was Probate NRLG (Probate Non-Related Legal Guardian).

“Effective Date” is the date of the order.  The next field, “Caregiver Relationship To Child,” is a mandatory field.  Choose one of the four options. Remember that “Guardian” refers to a Court appointed legal guardian.

Both “Placement Approval” and “Shelter Care Extension Approval” are read-only.

Placement Approval

Approval Status
Request Not Submitted

Date

Shelter Care Extension Approval

Approval Status
Request Not Submitted

Date

Placement Program History

+	Start Date	End Date	Placement Program

Start Date
End Date
Placement Program Type

They populate based upon data entered in another way and cannot be completed by typing in them. The approval process in placement will be shown later.

The “Placement Program History” information box or frame allows a user to track specific programs which may be provided for a specific placement episode. To enter a program or programs a client received while in this placement, click on the “+” in the top left corner of the grid. Enter the start date in the yellow (Mandatory) “Start Date” field.

Placement Program History

+	Start Date	End Date	Placement Program
1			

Start Date
End Date
Placement Program Type

After entering the start date, the user next selects the program type by clicking on the down arrow and selecting the correct entry from the list of choices shown below.

Placement Program History

+	Start Date	End Date	Placement Program
1	09/06/2004		

Start Date: 09/06/2004 End Date: Placement Program Type: <None>

☐ Substitute Care Provider Requested CHDP Services

☐ Dual Agency Placement
☐ Intensive Treatment Foster Care
☐ Multidimensional Treatment Foster Care
☐ Whole Foster Family Home

It is required that the “CHDP” information box be completed. Enter the date the Substitute Care Provider (Foster Parent) was provided with the brochure explaining the program, and if the SCP is requesting CHDP services, click in the box to record that request.


CHDP Program

Date Substitute Care Provider informed of CHDP Program and brochure given

☐ Substitute Care Provider Requested CHDP Services

The next field is [periwinkle](#). [Periwinkle](#) fields are related to the outcome measures and should be completed. The application will not stop if the fields are not completed, but outcome measures will be affected if they are not completed. Best practice would be to complete the periwinkle field if the information is available.

The “Date SCP Given HEP and Informed of Purpose” translates to the date the substitute care provider was given the Health and Education Passport and informed of the document’s purpose.

 Date SCP Given HEP and Informed of Purpose

The county has 28 days from the date of the initial placement and 48 hours from any subsequent placement to provide the SCP with the HEP.

The “Rationale” description will be completed for all licensed facilities or homes.

Rationale

- ☐ Certified License Pending Homes: Certification on file that home meets licensing standards and licensed facility not available or does not meet child needs
- ☐ Approved Homes: This home is suited to the child's needs
- ☐ Group Homes: Group Home placement is necessary to meet child treatment needs and this facility offers needed services


If the home is not licensed, such as a relative home or a “Court Specified” home, mark that the home is an “Approved Home” by clicking on the box to the immediate left of “Approved Homes.”

The “Rationale Description” allows for a description of the reason for selecting specific placement home, especially an out-of-county placement home.



Two hundred fifty-four (254) characters are allowed in this field.


The next sections deal with educational considerations when placing. The first field

should never be left to the default answer “Unknown.”  Select from the drop down menu: “Yes,” “No” or “Not Applicable.” The next field should almost always have a check in it.

☐ Considered proximity to the school in which the child was enrolled at the time of placement.

While not a yellow field, the consideration of the proximity of the child’s school to the placement is a legally required consideration.

When unable to place where the child is able to maintain attendance in his or her school, use the field to explain why it was necessary to change the child’s school.

Explanation if the child was not placed in proximity of school.


This field has space for 254 characters.

The last information box is “Sibling Placement Rationale,” as seen on the next page.

Sibling Placement Rationale

Siblings placed together

Reason

Comments

Even when there is only one child being placed, the “Siblings placed together” field should always be completed. To complete the field, select one of the options from the dropdown menu by clicking on the down arrow.

<None>

<None>

Placed with all

Placed with at least 1

N/A, Only child placed

Placed with none

In this example, “N/A, Only child placed” would be selected, as there is only one child being placed. If all siblings are being placed together, select “Placed with all.” Neither of these two selections requires any explanation.

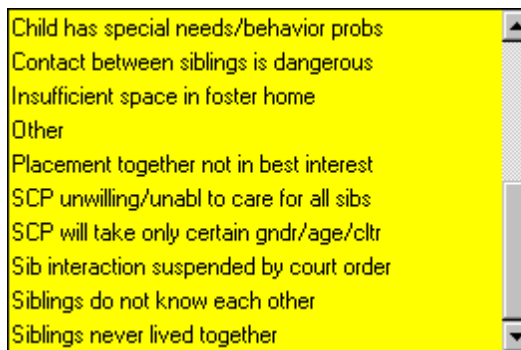
However, if “Placed with at least 1” or “Placed with none” are selected, then two more fields must be completed.



Placed with at least 1

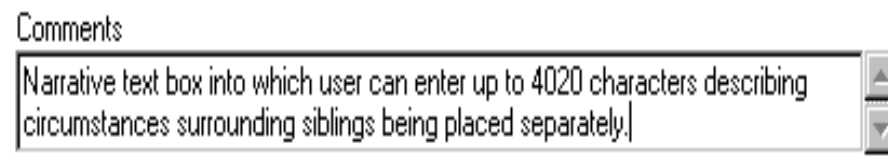
Reason

Select one of the options in the dropdown menu in “Reason.”



- Child has special needs/behavior probs
- Contact between siblings is dangerous
- Insufficient space in foster home
- Other
- Placement together not in best interest
- SCP unwilling/unabl to care for all sibs
- SCP will take only certain gndr/age/cltr
- Sib interaction suspended by court order
- Siblings do not know each other
- Siblings never lived together

“None” was omitted from this list, as it is not a valid option at this time. The last field to complete for separated siblings is the “Comments” field.



Comments

Narrative text box into which user can enter up to 4020 characters describing circumstances surrounding siblings being placed separately.

The next page to be completed is the “Ongoing Requests” page. This page documents the monthly payments being made on behalf of the child who has been placed. See the blank example below.

Client Services - Case [Training Case] - [Placement [Relative Training Home]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

Child Removal Info ID Ongoing Requests Incidental Payments End Placement/Episode Temporary Leave Relative/NREFM Assessment

Ongoing Requests

+	Start Date	Stop Date	Rate Type	Projected End Date

Rate Type
☐ Basic Rate
☐ Additional Rate

Total
 Active Rate Total:

LA APPS Rates
 AFPS Schedule/Level:

Request Details
 Start Date: Projected End Date: Payment Stop Date:
 Basic Rate: Additional Rate: Payment County:

Miller-Youakim Referral
☐ Informed
☐ Informed and Accepted
☐ Not Yet Informed

Additional Payment Reason
 Payment Type: Additional Payment End Reason:
 Rate/Service Level: Reason Description:
 Regional Center:

Approval
 Approval Status: Date:

Ready Case [Training Case] -> Client (Case Focus Child) [Son Training] -> Placement []

To complete this page, click on the “+” in the top left corner of the grid.

+	Start Date	Stop Date	Rate Type	Projected End Date

Rate Type

☒ Basic Rate

☐ Additional Rate

The application will default to a rate type of “Basic Rate.”

Next, complete the

“Start Date” field. Start Date This is the date from which payments should be calculated. The next field to be completed is the “Basic Rate” field. Basic Rate This is the amount of the payment. Type in the dollar figure.

Total

Active Rate Total

0.00

At this time, the application will enter that amount in the “Total” box.

Until an amount is entered, the “Active Rate Total” is 0.00.

The “Projected End Date” field may be completed. Projected End Date It is not mandatory.

To complete the Additional Rate, the steps are basically the same. Click the “+” on the grid again. This time select the Additional Rate option. If this option is not selected now, in order to create the “Additional Rate,” it will be necessary to delete this row and start over.

Rate Type

☐ Basic Rate

☒ Additional Rate

After an Additional Rate is typed in,

SCI Rate
150.

 and the application knows that typing is complete, the

Total

Active Rate Total

500.00

application will change the “Active Rate Total” to show the new rate. In addition, there is now a

new **mandatory** field to complete.

Payment Type

 See the complete list below of dropdown options below.

Payment Type

<None>
<None>
Bed Wetting
Behavioral Difficulties (runaway, lying)
County Authorized Allowance
Developmentally Disabled Children
Education Transportation
Foster Parent Participation in Therapy
Health Difficulties
Hearing Impairment
Infant Supplement - Family
Infant Supplement - Group Home
Intensive Supervision
Kidstep Supplement
Non-ambulatory Children
Ongoing School Problem
Physically Handicapped Children
Regional Center Services
Severely Emotionally Disturbed (SED)
Sexual Behavior Issues
Shelter Care Allowance
Soling of Parents
State Authorized Allowance
SOC158
Transportation
Vision impairment

If a user selects “Education Transportation” as a payment type, the “Rate/Service Level” field becomes a mandatory field, and one of the six options must be selected. See the example below.

Additional Payment Reason

Payment Type	Reason Description
Education Transportation	
Payment Rate Level	
<None>	
<None>	
Ed Trvl - Public Trans Flat Rate	
Ed Trvl - Private Trans 4 - 8 miles	
Ed Trvl - Private Trans 9 - 13 miles	
Ed Trvl - Private Trans 14 - 18 miles	
Ed Trvl - Private Trans 19 - 23 miles	
Ed Trvl - Private Trans 24 or more miles	

Similarly, if a user selects “Regional Center Services” The “Rate/Service Level” is mandatory and a selection must be made from the dropdown menu. There is a total of 17 possible choices. See left chart below for a listing. The user must also document which regional center is working with this client. Select the correct center from the selection under “Regional Center”. See the chart below to the right to see a list of choices.

1	4E
2 Owner	4F
2 Staff	4G
3 Owner	4H
3 Staff	4I
4A	Age 3 and Older
4B	
4C	Under Age 3
4D	
Age 3 and Older with Supplement	

Alta California Regional Center	Redwood Coast Regional Center
Central Valley Regional Center	Regional Center of the East Bay
Eastern Los Angeles Regional Center	Regional Center of Orange County
Far Northern Regional Center	San Andreas Regional Center
Frank D. Lanterman Regional Center	San Diego Regional Center
Harbor Regional Center	San Gabriel/Pomona Regional Center
Inland Regional Center	So. Central Los Angeles Regional Center
Kern Regional Center	Tri Counties Regional Center
North Bay Regional Center	Valley Mountain Regional Center
North Los Angeles County Regional Center	Westside Regional Center

Reason Description

Description of reason for special care increment. You can enter up to 140 characters in this field.

The last field on this page is the “Reason Description”.
When completed, go to the next and last page in the initial placement process.

The last page is “Incidental Requests.” Use this page to view or enter any one-time payment requests such as clothing allowances or adoption expenses. This page may also be used to enter payment requests that are “less than every month.” Below is a blank example of an “Incidental Payment” page.

Client Services - Referral [Training, Mother] - [Placement [Training Placement Home]]

File Edit Search Action Associated Attach/Detach Window Help Tools

Child Removal Info ID Ongoing Requests Incidental Payments End Placement/Episode Temporary Leave

Incidental Requests

Start Date	End Date

Request Details

Start Date End Date Amount

Incidental Payment Reason

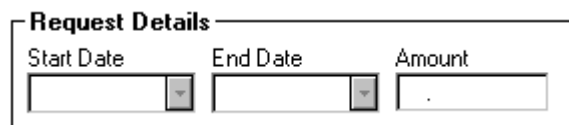
Payment Type Reason Description

Approval

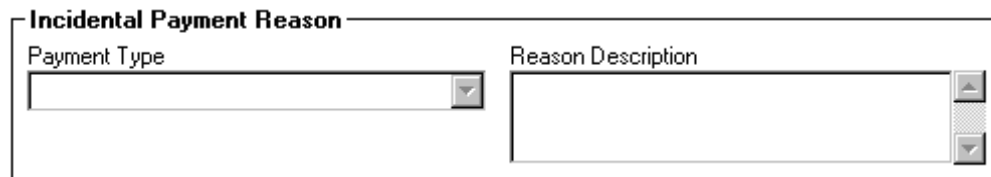
Approval Status Date

Ready Referral [Training, Mother] -> Client [Child Training] -> Placement [09/29/2009]

To complete the page, start with the “Ongoing Requests” page. Click the “+” in the top left of the grid. Then complete the “Request Details” information box.

A form titled "Request Details" with three input fields: "Start Date", "End Date", and "Amount". Each field has a small dropdown arrow on its right side. The "Amount" field contains a single period ".".

Once the “Request Details” box is done, complete the “Incidental Payment Reason” information box.

A form titled "Incidental Payment Reason" with two input fields: "Payment Type" and "Reason Description". The "Payment Type" field has a dropdown arrow on its right side. The "Reason Description" field has two dropdown arrows on its right side.

At this time, the initial placement is completed. The application does not require “Approval” for placements. The application does, however, make the option available for counties and workers who want approval.

If either the county or the worker wants approval, go to the “Action” tab in the dropdown menu.



Click on “Action.” At the bottom of the dropdown menu is “Approval.” Clicking on “Approval” will result in the following screen.

Approval Detail - <Placement [Training Placement Home]>

Approvals

Detail	Action	Start Date	End Date	Approval Type	Payment Amount	Approval Status
<input checked="" type="checkbox"/>	<input type="checkbox"/>	09/29/2009		Placement		Request Not Submit
<input type="checkbox"/>	<input type="checkbox"/>	09/29/2009		Ongoing Payment Request	350.	Request Not Submit
<input type="checkbox"/>	<input type="checkbox"/>	09/29/2009		Ongoing Payment Request	150.	Request Not Submit
<input type="checkbox"/>	<input type="checkbox"/>	09/29/2009	09/29/2009	Incidental Payment Request	120.	Request Not Submit

Approval Detail

Action Date: 10/21/2009 Action Time: 03:55pm History

Submitted By: Weekly, Susan

Rationale:

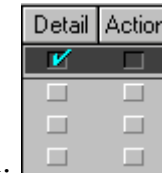
Approval Action


Approval Status: Action Date: Action Time: : am

☐ Further Approval Needed By:

Rationale:

Apply OK Cancel Help



Note that for each placement “action” taken, there is a corresponding line in the grid. There are also detail and action selections for each line. To send each action for approval, click the button in the action column.  Select any one action, any combination of actions or all of the actions. When an action or actions are selected, the “Action Approval” information box is enabled.

Approval Action

Approval Status


Action Date

Action Time

Request Not Submitte

10/21/2009

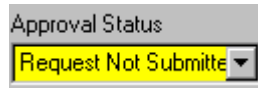
04:01 pm



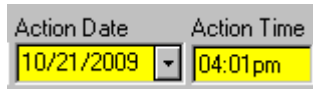
Further Approval Needed By

Rationale

Change the “Request Not Submitted” to “Pending Approval” in the “Approval Status” field by clicking on the down arrow and selecting the appropriate entry.

A screenshot of a software interface showing a dropdown menu labeled "Approval Status". The menu is open, and the selected option, "Request Not Submitted", is highlighted in yellow. A small downward-pointing arrow is visible on the right side of the menu.

The “Action Date” and “Action Time” fields will default to the date and time the action is taking place.

A screenshot of a software interface showing two fields: "Action Date" and "Action Time". The "Action Date" field displays "10/21/2009" and has a small downward-pointing arrow on its right. The "Action Time" field displays "04:01pm". Both fields have a yellow background.

If necessary, change the date or time.

Until the “Approval Status” has been changed to “Pending Approval,” the “Apply” and “OK” buttons at the bottom are disabled.

A screenshot of a software interface showing four buttons at the bottom: "Apply", "OK", "Cancel", and "Help". The "Apply" and "OK" buttons are disabled, indicated by their grayed-out appearance. The "Cancel" and "Help" buttons are active.

On the following page is an example of a nearly completed approval dialogue box waiting for final action.

Approval Detail - <Placement [Training Placement Home]>

Approvals

Detail	Action	Start Date	End Date	Approval Type	Payment Amount	Approval Status
<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	09/29/2009		Placement		Request Not Submit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	09/29/2009		Ongoing Payment Request	350.	Request Not Submit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	09/29/2009		Ongoing Payment Request	150.	Request Not Submit
<input type="checkbox"/>	<input checked="" type="checkbox"/>	09/29/2009	09/29/2009	Incidental Payment Request	120.	Request Not Submit

Approval Detail

Action Date
09/21/2009

Action Time
03:55pm

History

Submitted By
Weekly, Susan

Rationale

Approval Action

Approval Status
Pending Approval

Action Date
09/29/2009

Action Time
04:01pm

Further Approval Needed By

Rationale

Apply
OK
Cancel
Help

If all actions have been selected and are to receive the same treatment (as in this example when they are all being sent to a supervisor for approval) select “Apply.” The application would then apply the same action to all the lines in the grid that have the action button engaged or clicked.

If only one the actions is being selected, be sure that the correct action is the action selected, then click “OK.”

Once the “Apply” or “OK” button is clicked, the following dialogue box will appear. It will show the approval status of each placement action. In the example, all actions are pending approval.

Approval Detail - <Placement [Training Placement Home]>

Approvals

Detail	Action	Start Date	End Date	Approval Type	Payment Amount	Approval Status
<input checked="" type="checkbox"/>	<input type="checkbox"/>	09/29/2009		Placement		Pending Approval
<input type="checkbox"/>	<input type="checkbox"/>	09/29/2009		Ongoing Payment Request	350.	Pending Approval
<input type="checkbox"/>	<input type="checkbox"/>	09/29/2009		Ongoing Payment Request	150.	Pending Approval
<input type="checkbox"/>	<input type="checkbox"/>	09/29/2009	09/29/2009	Incidental Payment Request	120.	Pending Approval

Approval Detail

Action Date: 09/29/2009 Action Time: 04:01pm

Submitted By: Weekly, Susan

Rationale:

Approval Action

Approval Status: Action Date: Action Time: : pm

☐ Further Approval Needed By:

Rationale:

Once an action, or any item, has been sent for approval, all associated pages will become **read-only** until a supervisor takes action. In this example, all three placement pages that were completed have had the “Approval Status” box changed to “Pending Approval.”

This completes the chapter on “Initial Placement.”

The next logical step in the flow or process of the referral that is being demonstrated is the “Initial Court Hearing.” If this were a voluntary action, when the parent requested that the department temporarily place his/her child or children, “Initial Court Hearing” would not be necessary.




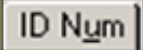






Activity








Go to the activity for chapter 4 in your activity book.

Mapped Documents/Process Maps/ Cheat Sheets

Initial Removal, Non-Foster Care Placement



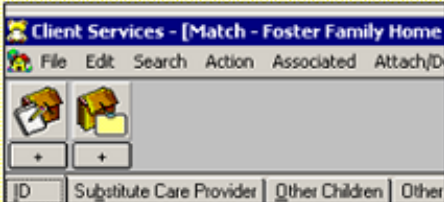


(Page 1 of 2)




OPEN CLIENT SERVICES		CREATE NON FOSTER CARE PLACEMENT
	8. Select the Client notebook(s) you want to open.	
1. Click the Client Services application.	9. Click OK.	18. Click the Placement Management Section (red button)
		
2. Click the Open Existing Case Folder button.	10. Click the ID Num page tab of the Client notebook.	19. Click the "+" Create a New Placement.
3. Use the Open Folder dialog box to select the Case you want to open.	11. Click the "+" in the Identification Numbers grid.	20. In the dialog box click the client in the For this client grid.
4. Click OK.	12. Click on State ID in the Select ID Type dialog box.	21. Click on Non-Foster Care.
5. Click Yes.	13. Click OK.	22. Click OK.
	14. Complete all mandatory (yellow) and known fields.	23. Complete all mandatory and known fields on the Child Removal Info and Non-Foster Care pages.
6. Click the Client Management Section (blue button).		
	15. Click the ID page tab.	
7. Click the Open Existing Client notebook.	16. If the check box is not checked, select the Confidentiality In Effect checkbox and enter the date confidentiality took effect.	24. Click the File drop-down menu.
	17. Double click the Close Window icon in the upper left corner or click the lower X in the upper right hand corner.	25. Select Save to Database.
		26. Click Continue Working.
		Continue Working will automatically load M04_S01 – Placement (Part 2).arc


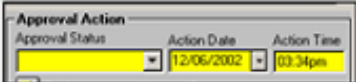
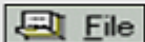





<p>OPEN CLIENT SERVICES</p>  <p>27. Click the Client Services application.</p>  <p>28. Click the Open Existing Case Folder button.</p> <p>29. Use the Open Folder dialog box to select the Case you want to open.</p> <p>30. Click OK.</p> <p>31. Click Yes.</p> <p>OPEN NON FOSTER CARE PLACEMENT</p>  <p>32. Click the Placement Management Section (red button).</p>	<p></p> <p>33. Click the Open Existing Placement.</p> <p>34. Select the non-foster care placement to be ended in the Open notebook dialog box.</p> <p>35. Click OK.</p> <p>END NON FOSTER CARE PLACEMENT</p>  <p>36. Click on the End Placement/Episode page tab.</p> <p>37. Click the Placement Change Reason drop-down list and select the reason the child's placement is being changed.</p> <p>38. Enter the date the placement ended in the Placement End Date drop-down list.</p>	 <p>39. Click the Yes button to the resulting message dialog box.</p> <p>- In Production Only -</p> <p>SAVE TO DATABASE</p>  <p>40. Click the File drop-down menu.</p> <p>41. Select Save to Database.</p> <p>42. Click Exit CWS/CMS.</p> <p>Created by the CWS/CMS Project Office</p>
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Initial Removal, Foster Care Placement

(Page 1 of 3)

<p>OPEN CLIENT SERVICES</p>  <ol style="list-style-type: none"> Click the Client Services application. Click the Open Existing Case Folder button. Use the Open Folder dialog box to select the Case you want to open. Click OK. Click Yes. <p>PERFORM SEARCH</p>  <ol style="list-style-type: none"> Click the Search drop-down menu. Select Start Search. Click the Search Type drop-down list in the Search dialog box. 	<ol style="list-style-type: none"> Select Placement Facility Match. Click the Placement Facility Match drop-down list. Select Match – Foster Family Home. Enter the child's information in the search grid. Make sure that the red ✓ check box is marked for each criterion you want to match on. Click OK. <p>Search Information</p>  <ol style="list-style-type: none"> To review a home found in a search, double-click the appropriate row in the grid. 	<ol style="list-style-type: none"> As a keyboard alternative to using the mouse, the Ctrl + W keys can be used to close the Placement Home abstract window and again to close the Search Results window. <p>ENTER STATE ID</p> <p>Consider search for foster homes rather than Facility Match</p>  <p>Client Management Section (blue button).</p>  <ol style="list-style-type: none"> Click the Open Existing Client notebook. Select the Client notebook(s) you want to open. Click OK. <p>ID Num</p> <ol style="list-style-type: none"> Click the ID Num page of the Client notebook.
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<p>23. Click the “+” in the Identification Numbers grid.</p> <p>24. Click on State ID.</p> <p>25. Click OK.</p> <p>26. Complete all mandatory (yellow) and known fields.</p> <p>CREATE PLACEMENT</p>  <p>27. Click the Placement Management Section (red button).</p>  <p>28. Click the “+” Create a New Placement.</p> <p>29. In the dialog box click the client in the For this Client grid.</p> <p>30. Click the home in the Select this Placement Home grid.</p> <p>31. Click OK.</p>	<p>Child Removal Info ID</p> <p>32. Complete all mandatory (yellow) and known fields.</p> <p>33. Click the ID page tab.</p> <p>34. Complete all mandatory (yellow) and known fields.</p> <p>Ongoing Requests</p> <p>35. Click the Ongoing Requests page tab.</p> <p>36. Click the “+” in the grid.</p> <p>37. Enter the Start Date, the Projected End Date and the Basic Rate of payment</p> <p>38. Click the “+” in the grid.</p> <p>39. Click the SCI option button.</p> <p>40. Enter the Start Date, the Projected End Date and the SCI Rate of payment.</p> <p>41. Click the Payment Type drop-down list to identify the reason for this payment.</p>	<p>Incidental Payments</p> <p>42. Click the Incidental Payment page tab.</p> <p>43. Click the “+” in the grid.</p> <p>44. Enter the Start Date, the Projected End Date and the Incidental payment amount.</p> <p>45. Click the Payment Type drop-down list to identify the reason for this payment.</p> <p>46. Narrative can be entered to further explain the payment in the Reason Description text box.</p> <p>REQUEST APPROVAL</p> <p>Action</p>  <p>47. Click the Action drop-down menu, and click Approval.</p>
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<p></p> <p>48. Select the checkbox(es) in the Action column.</p> <p></p> <p>49. Click on Pending Approval in the Approval Status list.</p> <p>50. Click OK.</p> <p style="text-align: center;">- In Production Only -</p> <p style="text-align: center;">SAVE TO DATABASE</p> <p style="text-align: center;"></p> <p>51. Click the File drop-down menu.</p> <p>52. Select Save to Database.</p> <p>53. Click Continue Working.</p> <p style="text-align: center;"></p> <p>54. Click the Open Existing Case Folder button.</p> <p>55. Use the Open Folder dialog box to select the Case you want to open.</p>	<p>56. Click OK.</p> <p>57. Click Yes.</p> <p style="text-align: center;">OPEN EXISTING PLACEMENT NOTEBOOK</p> <p style="text-align: center;"></p> <p>58. Click the Placement Management Section (red button).</p> <p style="text-align: center;">CREATE PLACEMENT DOCUMENTS</p> <p style="text-align: center;"></p> <p>59. Click the + Create New Document-Placement notebook.</p> <p>60. Select the document to be created in the Generate New Documents dialog box.</p> <p>61. Click OK.</p> <p>62. Select the placement for which the document is to be created in the Select Notebook dialog box.</p>	<p>63. Click OK.</p> <p style="text-align: center;"></p> <p>64. Select the Petition in the Petition Information dialog box.</p> <p>65. Click OK.</p> <p>66. Review the document for accuracy.</p> <p>67. Click the File drop-down menu.</p> <p>68. Select Print.</p> <p>69. Save, close and minimize Microsoft Word.</p> <p style="text-align: center;">- In Production Only -</p> <p style="text-align: center;">SAVE TO DATABASE</p> <p style="text-align: center;"></p> <p>70. Click the File drop-down menu.</p> <p>71. Select Save to Database.</p> <p>72. Click Exit CWS/CMS.</p> <p style="text-align: center; border: 1px solid black; padding: 5px;">Created by the CWS/CMS Project Office</p>
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Mapped Agency to Foster Parent Agreement (Page 1 of 2)

STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

AGENCY- FOSTER PARENTS AGREEMENT Child Placed by Agency in Foster Home

Complete in Duplicate:

One Copy to: Foster Parents
Child's Social
Service Record

*The agreement will be initiated when the child is placed
in the facility and whenever the rate changes.*

NAME OF CHILD Client NB, ID page		PARENT'S NAME Client NB, ID page
BIRTHDATE OF CHILD Client NB, ID page	DATE PLACED Placement NB, ID page	CASE NUMBER Case Info NB, ID page
FOSTER PARENT'S NAME Placement Home NB, ID page		ADDRESS Placement Home NB, Address page

Anticipated duration of placement is Placement NB, Ongoing Request page months.

The agency will pay \$ See footnote per Default set to month for room and board, clothing, personal needs, recreation, transportation, education, incidentals and supplies. First payment to be within 45 days after placement with subsequent payments no later than the 15th of the month following provision of care.

If additional amounts are to be paid, the reason, amount and conditions shall be set forth here: _____

Placement NB, Ongoing Request page

Special problems/needs: ☐ No ☐ Yes If yes, explain. Usersupplied

Special Permissions: Special permission for substitute supervision is subject to Community Care Licensing granting an exception to the licensing regulation, which requires that substitute supervision in the foster home be limited to an adult Usersupplied

☐ Child 15 years or older has permission to remain without adult supervision during temporary absences of the foster parent(s), not to exceed six (6) consecutive hours in any one 72-hour period.

☐ Substitute supervision may be provided to the foster child by someone 16 years of age or older (not a foster child) during temporary absences of the foster parent(s), not to exceed six (6) consecutive hours in any one 72-hour period.

☐ Other (Explain) _____

☐ No special permissions granted.

AGENCY AGREES TO	FOSTER PARENTS AGREE TO
<ol style="list-style-type: none"> Provide the foster parent with knowledge of the background and needs of the child necessary for effective care. This may include a social work assessment, medical reports, education assessment, and identification of special needs when necessary. This shall be made available to foster parents within 14 days from date of placement. Develop a plan for the child and share pertinent aspects with the foster parents. Inform foster parents they may give the same consents on behalf of the child as the parent, except for those prohibitions provided in Social Services Manual Regulations. Not remove the child with less than 7 calendar days written notice unless: the child is physically or psychologically endangered; court orders removal; parents or guardians order removal (voluntary placement); signed waiver obtained from foster parents; removal is from an interim placement directly into an adoptive home. Involve foster parents in future planning for the child. The placement shall be reviewed within 6 months. Assist the child in his use of foster care. 	<ol style="list-style-type: none"> Provide this child the nurture, care, clothing, and training suited to his needs. Develop an understanding of the responsibilities, objectives, and requirements of the Agency in regard to the care of this child. Recognize the Agency's responsibility for planning for this child, as given by the court or the parent(s). Recognize any limitations of consent imposed by the court or the parent. Increase their knowledge and ability to care for this child. Encourage the child's relationships with his parents and relatives. Cooperate in visiting arrangements between child and parents. Not use corporal punishment, punishment in the presence of others, deprivation of meals, monetary allowances, visit from parent, home visits, threat of any type or any type of degrading or humiliating punishment, and to use constructive alternative methods of discipline. Respect and keep confidential information given about the child and his family. Immediately notify agency of significant changes in this child's health, behavior, or location. Accept the child's special problems as given above in any provision of care.

(Page 2 of 2)

7. Assist in the maintenance of the child's constructive relationships with parents and other family members and to involve parents in future planning for this child.
8. Provide procedure for grievances of foster parents.
9. Contact the child and foster parents at least once a month. If case plan would indicate less frequent contacts, the foster parent will be informed.
10. Inform foster parents if child has any tendencies toward dangerous behavior.
11. Provide Medi-Cal card or other medical coverage at time of placement. Arrange for medical examination within 30 days unless child has had such within past 6 months and information is available.
12. Provide a clothing allowance as permitted to meet initial clothing needs.
13. In cooperation with foster parents arrange for visiting by parents or relatives on: _____.
14. Provide assistance with emergencies. Telephone number for after-hours or weekends is: _____.
12. Help with termination of placement including return to his own parents, relatives home, or adoptive placement.
13. Give the agency prior notice of at least 7 days if removal of child is requested unless it is agreed upon with the agency that less time is necessary.
14. Conform to the licensing/certification requirements.
15. Provide state and federal agencies access to documentation when documentation is maintained on children in their care.
16. Give advance written notice to the licensing agency and the person or agency responsible for the child of any (foster parent(s)) absence of 48 hours or longer. (Absence may be reported by telephone in case of emergencies.)
17. Notify the agency immediately if an application is made on behalf of this child for any kind of income. Examples of income include, but are not limited to, child support payments, Veterans Benefits, Railroad Retirement, Social Security, RSHDI, and Supplemental Security Income/State Supplemental Program (SSI/SSP).
18. Remit to Department of Public Social Services any income received on behalf of this child while in foster care up to the full cost of board and care plus medical cost. In addition, I will cooperate to have the Social Security Administration, or the appropriate agency, make the Department of Public Social Services the payee for any funds received on behalf of this child.

Footnote-

PlacementNB, Ongoing Request page

I have read the foregoing and agree to meet these requirements. The terms of this agreement shall remain in force until changed by mutual agreement of all parties or when this child is removed from home.

SIGNATURE OF CHILD PLACEMENT WORKER User supplied		SIGNATURE OF FOSTER MOTHER User supplied	
TITLE Staff Person NB, ID page	NAME OF AGENCY CWS Office NB, ID page	SIGNATURE OF FOSTER FATHER User supplied	
ADDRESS CWS Office NB, Address page		ADDRESS Placement Home NB, ID page	
PHONE NUMBER CWS Office NB, ID page	DATE User supplied	PHONE NUMBER Placement Home NB, ID page	DATE User supplied

State of California Health and Human Services Agency
California Department of Social Services
CWS Case Management System
SOC 156 (Rev 8/99)

AGENCY - FOSTER PARENTS PLACEMENT AGREEMENT

Confidential In accordance with
Penal Code Section 11167.5 and/or
WIC Sections 827 and 10850
Page 1 of 2

CHILD'S NAME

CASE NUMBER

Long-Term Placement Intent

I have read the foregoing and agree to meet these requirements. The terms of this agreement shall remain in force until changed by mutual agreement of all parties or when this child is removed from home. In signing this section the agency, foster parents and foster care child signify their desire that this child remain in this home as a permanent member of this family ☐

SIGNATURE OF CHILD PLACEMENT WORKER User supplied		SIGNATURE OF FOSTER MOTHER User supplied	
TITLE Staff Person NB, ID page		SIGNATURE OF FOSTER FATHER User supplied	

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