

Par.1. **Material Transmitted and Purpose** – Transmitted with this Manual Letter are changes to **Service Chapter 624-05, Foster Care Permanency Planning** manual. If a section has minimal changes, the old language has been struck through and the **revisions are in red**. If the section has a number of changes, the section was completely replaced and the policy issuance can be used as reference to note the changes.

PI's incorporated into the manual:

PI 18-18 Respite
PI 18-15 Child Care for Foster Children
PI 18-14 EMP Forms
PI 18-08 PATH Regular Foster Care
PI 17-32 Foster Care – Indian Child Welfare Act
PI 17-31 Foster Care – Babysitting
PI 17-30 Foster Care – Sentinel Events and Incidents
PI 17-29 Foster Care – Respite
PI 17-25 SNF 904 and EMP1
PI 17-24 Foster Child – Driver's License

PI: 18-15

Child Care for Foster Children 624-05-15-50-50 (New)

Foster children may require child care during the work hours of their foster parent. North Dakota does offer reimbursement for child care if the foster child is:

1. Placed in a licensed or approved (tribal affidavit) family foster home, and
2. In need of child care.

The foster care case manager is responsible to identify the needs for child care and assist the foster family in securing reimbursable child care options. In order for the foster parents to claim reimbursement for child care expenditure, the need for child care must be pre-approved by the case manager, discussed ongoing by the Child and Family Team and documented in the foster child's case plan. A new written approval is required from the case manager when a foster child's:

1. Placement changes to a new licensed provider home or

2. Child care provider changes.

To approve a child care setting for reimbursement, foster care case managers must verify if the child care provider meets the state Early Child Care licensing regulations. Foster care case managers can work with the county child care licenser to assist in verification if needed.

NOTE: After school programs and summer day camps often times are not licensed, meaning they do not meet the reimbursement guidelines for child care reimbursement.

Foster care case managers must provide specific information to the eligibility staff for eligibility file compliance. Items include, but are not limited to:

1. Signed approval prior to reimbursement;
2. Bill/Invoice from the child care required for reimbursement; and
3. Assistance in remedying error/questions related to child care expenses for the foster parent (different rates, need for bill/invoice, etc).

Irregular payment approval form can be found in FRAME under the forms tab.

PI: 18-14

When referenced in 624-05 manual, ensure the EMP forms (SFN 904 and SFN 1865) are linked to the forms site.

- Agreement to Furnish Specialized Family Foster Care Services, SFN 904 624-05-30-15
- Approval of Specialized (EMP) Payments 624-05-20-10-20
- Permanency Planning Forms 624-05-25
- Specialized Payment Procedure 624-05-20-10-25

PI: 18-08

Nothing to be updated in the 624-05 manual.

PI: 17-32

Indian Child Welfare Act (ICWA) 624-05-15-52

C. ICWA Exemptions

ICWA does not apply to:

1. Custody of Indian child to one of the parents.
2. Tribal court proceedings;

3. Proceedings including criminal act(s) when the youth is adjudicated delinquent; as status offenses are not considered criminal if committed by an adult (Ex: truancy, running away from home, violating curfew, underage use of alcohol, etc.)

~~Note: ICWA may apply in a juvenile delinquency proceeding when the out-of-home placement is based upon the fitness of the parents (deprivation) and not the act of the child (delinquency). permanency goal is something other than reunification with the parents/guardians with whom the child was removed.~~

Parents cannot ask for an exemption or request to "opt out" of ICWA or application for their children. A parent can request the case not be transferred to a Tribal Court, but cannot decline ICWA regulations if ICWA applies to the child.

PI 17-31

Definitions 624-05-05

- *Babysitting* is short-term care of foster children when the foster parents are temporarily away, however still available to respond if needed. A babysitter can be a responsible individual, between the ages of 14 and 21, secured to provide care and supervision for no more than eight consecutive hours in one day.
- *Substitute care* is temporary care of foster children when the foster parents are unavailable to provide supervision and care for more than a portion of one day.
- *Substitute caregiver* is a responsible adult, age 21 or older, temporarily providing care for a foster child in the absence of the foster parents for a portion of one day. If time exceeds one day, a licensed foster parent must provide substitute care if the primary foster parents are unavailable.
- *Respite care* is temporary relief care for a child with special medical, emotional or behavioral needs, which requires time-limited supervision and care by another licensed foster parent. Respite care cannot exceed

96 hours and is reimbursable through a formal agreement (SFN 929) pre-approved by a regional representative.

- *Child care (daycare)* is planned care for a child required ongoing while the foster parents are at work, school, or otherwise engaged on a regular basis. If ongoing child care is needed, foster parents can be approved for reimbursement following policy set forth in Maintenance Chapter 623-05.

Babysitting 624-05-15-49 (NEW SECTION)

Foster parents have various events and activities that may temporarily require the need for a babysitter to care for children in their absence. Foster parents are required to follow the reasonable and prudent parent standard while selecting an appropriate individual to babysit. Foster parents are responsible to prepare the babysitter with necessary information to best care for the children, while maintaining confidentiality to protect the foster children.

Babysitting is distinguishably different from child care, substitute care and respite. Babysitting is the short-term care of foster children when the foster parents are temporarily away, however still available to respond if needed. A babysitter can be a responsible individual, between the ages of 14 and 21, secured to provide care and supervision for no more than eight consecutive hours in one day.

Initially, foster parents should discuss the need to seek a babysitter with the primary foster care case manager. After consultation, a foster care case manager may approve or deny the appropriateness of such future arrangements.

North Dakota Babysitting Criteria

The individual selected to babysit foster children may not be left responsible for more than eight consecutive hours and must be:

- Between the ages of 14 and 21;
 - *Individual's age 21 or greater meet the definition of a substitute caregiver allowed to care for foster children for a portion of one day. If*

time exceeds one day, a licensed foster parent must provide substitute care if the primary foster parents are unavailable.

- Able to demonstrate responsibility;
- Able to demonstrate skills and maturity to supervise others;
- Capable to provide adequate care to others; and
- Pre-approved by the foster care case manager if asked to transport foster children. Approval would require evidence of a driver's license and insurance coverage.

The Foster Child: It is important to recognize how long the foster child has been placed in the foster home, the age of the foster child, how well the child knows the identified babysitter, and the complexity of the child's needs. In addition, the child's vulnerabilities, behaviors and how quickly the foster parents can respond will help determine when a foster child is ready to be left in the care of a babysitter.

The Individual Babysitting: It is important to be familiar with the individual selected to babysit. A foster family should know his/her maturity, emotional health, and physical and cognitive abilities to accommodate the length of time, time of day, number of children to supervise, etc. These standards must be taken into consideration when determining if an individual is appropriate to babysit foster children.

Babysitting Class: Foster parents should consider selecting an individual who has completed a babysitting certification class. Classes are offered by various organizations such as the American Red Cross, YMCA, Girls Scouts of America, NDSU Extension, Parent Resource Centers, local hospitals, and other agencies across the state. A babysitting certification course is not required by foster care policy, however highly encouraged as such classes do offer specialized training in first aid, CPR, emergencies, the planning of age appropriate activities, meal schedules, infant care, etc.

Can a Foster Child Age 14+ Babysit?

Foster children who meet the policy criteria may be allowed to babysit and care for other children. If the foster child is asked to babysit; this would be an independent living skill assisting both employment and financial

management. If appropriate, a responsible foster child should be given the opportunity to engage in the normalcy activity of babysitting. However, an adolescent foster child should not be relied upon to babysit children in their primary placement without agreement and compensation for their time.

Reimbursement

Babysitting costs are the responsibility of the party receiving the service. The cost for a babysitter varies depending on the babysitter's age, experience, number of children they are caring for, their ability to drive, length of time, time of day, etc.

PI 17-30

Sentinel Events and Incidents 624-05-15-50-33

The Risk Management incident report SFN 50508 must be completed by the Regional Supervisor and filed with State Risk Management within 24 hours. The on-line reporting system, www.nd.gov/risk, is used to report both a sentinel event or an incident.

Additional information may be attached to an incident report, **not to include a SFN 960 unless requested by authorized staff**. Any additional information must be filed with State Risk Management and also sent to the DHS Risk Manager and DHS Legal Advisory Unit Director.

If you are uncertain whether a situation is a sentinel event or an incident, consultation is available through the Regional Supervisor, CFS or the DHS Risk Manager. A sentinel event will always require an incident report, but every incident reported is NOT a sentinel event.

Sentinel Events:

A sentinel event is defined as any unexpected occurrence involving death or serious physical or psychological injury or risk thereof that is not related to the natural course of the individual's illness or underlying condition. Serious injury specifically includes inappropriate sexual contact. The phrase "or risk thereof" includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome. They signal the need for immediate investigation and response.

An example of a sentinel event would be if a foster youth is seriously injured, (including inappropriate sexual contact), dies unexpectedly, or attempts suicide.

Regional Supervisors must report all sentinel events to the Regional Director, Institution Superintendent, or Local Risk Manager immediately. The event also must be reported to the DHS Executive Director, DHS Risk Manager and DHS Legal Advisory Unit Director as soon as possible, but no later than 12 hours after the occurrence. Initial notification may be made by phone, voice mail, or e-mail.

Incidents:

An incident is an unplanned occurrence that resulted or could have resulted in injury to people or damage to property, specifically involving the general public and state employees. An incident can also involve issues such as harassment, violence, and discrimination. An incident may be referred to as an accident or near miss.

Utilize the Risk Management Fund Incident Report (SFN 50508) for general and employee incidents. The report should be completed by the employee that has the most information or first-hand knowledge about the incident. Incident reports should not be completed by non-state employees. An example of an incident that is not a sentinel event would be if a foster youth runs away.

PI 17-29 and PI 18-18

Respite Care 624-05-15-48 (NEW)

Children in foster care may require additional support to maintain stability in their primary placement. Respite care is defined by foster care policy as temporary relief care for a child with special medical, emotional or behavioral needs, which requires time-limited supervision and care by a licensed foster parent.

Respite care funds are maintained at Children and Family Services (central office) and paid by NDDHS Fiscal after approval from the Regional office. Regional office submits a reimbursement request monthly to the central office.

****NOTE**** Respite is not substitute care. There are times when a foster parent is unavailable to care for a foster child due to other commitments (vacation, funeral, special out of town event, etc.) Respite cannot be used when a foster parent is unavailable and in need of substitute care.

All children in North Dakota foster care are eligible for respite; even if the child is placed in unlicensed relative care. A foster child must be provided respite care by a licensed foster parent, with one exception being granted for a foster child placed in an unlicensed relative home. The exception would allow an unlicensed relative caregiver (grandma) to utilize a licensed child care provider during daytime hours only. A licensed child care providers can be utilized for respite for no more than 10 hr/week unless otherwise approved by the regional office. The licensed foster parent must sign a respite provider agreement (SFN 929) and register on OMB website as proof of a signed W-9 for reimbursement.

Examples of Foster Child Who Can Utilize Respite:

- ✓ Primary Placement:
 - Foster child in a paid foster home (County or Tribal affidavit)
 - Foster child in unlicensed relative placement
 - Foster child is on a trial home visit
 - Foster child in kinship relative care (TANF recipient)
- ✓ Appropriate scenarios for respite:
 - Child is destroying property at the foster home; foster parents ask for help in re-grouping to see if a small stay elsewhere will help the child better engage in the primary home.
 - Child is living with unlicensed relative (grandma). Child is very busy and Grandma is stating a weekend to recharge her battery would be helpful for her own mental health needs and to stabilize the placement ongoing.
 - Child is living with unlicensed relative (grandma). The toddler foster child is very busy and Grandma is stating two mornings a week (8 hr/wk) for the next two months would be helpful so she can recharge her battery and complete household tasks she is unable to do when the child is in the home. A licensed child care provider could provide respite to grandma for the 8 hr/wk.
 - Child is missing his siblings; because of this the foster parents indicate his behaviors are escalating in the primary

- placement. The case manager reaches out to see if the foster parents who have the other two siblings would be willing to offer respite for a weekend sibling visit and to monitor the placement stability, child behaviors, etc.
- Foster parents are going to a wedding where there will be loud music, lots of people, etc. They indicate the foster child with autism does not do well in large groups and would benefit from a short respite stay while they attend the wedding for two days. In this case, the case manager could approve respite if the child's behaviors would result in additional cares.
 - ✓ Inappropriate scenarios for respite:
 - Foster parents are going to a wedding and they would rather not have to bring all of the children... this is substitute care, not respite.
 - Foster parents are asking to discontinue their responsibility as the primary placement. A new placement option should be identified in lieu of respite stays.

Respite Reimbursement

Reimbursement is allowed for pre-planned respite. Reimbursement will only occur if the respite arrangement is pre-approved by the regional office. Respite care is limited to 96 hours at the "emergency rate" of \$35/day. If the child's level of care is beyond the daily rate and the foster child is currently receiving an EMP approved by the regional office, the higher daily rate may be reimbursed if pre-approved.

Example: Respite would be pre-approved for \$35/day. However, the 11 year old is reimbursed at \$29.22/day with an approved \$11.78/day excess maintenance payment ($\$29.22 + \$11.78 = \$41$). The request for the respite can be \$41/day instead of \$35 to cover the child's EMP needs).

Respite care can cover additional costs for licensed foster care providers specific to child care and transportation to and from school of origin. If a foster child is with a primary provider who does not utilize child care during the week because they do not work, however the respite provider does work fulltime and would need child care during the week; the child care costs to a licensed child care provider can be made to the respite provider to assist

with the care of the child during the respite stay. All additional costs must be pre-approved by the case manager and approved by the regional office. Example: A foster parent is providing respite Thurs – Sunday (96 hours), but has to work full time on Thursday and Friday. The provider could be approved for \$35/day respite (4 days x \$35= \$140) and for the additional cost of \$30/day for child care (2 days x \$30 = \$60). The respite provider would receive reimbursement of \$200.

Respite care provided by a licensed child care provider during daytime hours that exceeds \$35/day must have a receipt or bill provided to the regional office to support the cost of the care. Child care costs vary per community standards, respite can pay the community rate. Respite in a child care setting is capped at 10 hours per week, unless approved by the regional office.

- **Paid Placement:** The licensed foster parent providing respite care can claim the child care costs under the primary foster parent irregular payment category 40 (if applicable) or claim under “additional costs” on the form.
- **Unpaid Placement:** The unlicensed relative caregiver would need the child care provider to complete the form and claim the child care costs of \$35/day. If the cost of the respite offered by a licensed child care provider exceeds \$35/day, a receipt or bill would be required to justify the expense of the child care costs.

Respite payments are made outside of the payment system and are in addition to the primary placement maintenance rate and will be made by NDDHS directly to the licensed provider listed on the SFN 929.

Relative Caregivers

A foster child may be in a primary placement with an unlicensed relative caregiver. The relative caregiver can request respite care in efforts to support the child’s needs and maintain stability in placement. The foster care case manager must receive approval from the regional office in order to proceed with planning for a respite care arrangement. The case manager is responsible to assist with paperwork and seek to identify a licensed foster parent willing to offer temporary respite.

Therapeutic Providers

Agency providers offering therapeutic foster care services (Ex: PATH) have policy and procedure to administer respite within their agency structure. A

therapeutic provider may sign a respite agreement to offer services to a child who is not a current client in placement with the agency; for example PATH could sign a SFN 929 to offer respite to a County placement.

PI 17-25

Specialized Family Foster Care - Excess Maintenance Payments (EMP) 624-05-20-10

This specialized family foster care involving an excess maintenance payment is intended for the 24-hour care and supervision of a foster child with special needs, the severity of which places undue demands on the foster parent's physical, emotional, and/or material resources beyond the demands expected in typical foster parenting. Specialized care is offered in licensed family homes-are foster homes. An-in-which excess maintenance payment (EMP) are-can be made on-an-individual-basis-when-the-foster-child-requires An excess maintenance payment (EMP) can be approved and authorized to meet the needs of the individual child requiring special services or based-on the-child's-difficulty of care-level.

These special services would involve an unusual amount of one-or-more-of such-things-as-time, physical work, skill, stress, or cost to the foster parent. In the area of time, an unusual amount could be required for feeding, dressing, and/or supervising. In regard to the physical work in special situations, there could be a need for an unusual amount of washing, cleaning, lifting, and/or transporting. In the area of skill, the foster parent would need ability in teaching, and in the handling of behavior and/or medical problems. In the area of stress, consideration would be given to the strain on the foster parents when the child's needs require performing distasteful-ongoing medical tasks, constant supervision, the meeting of frequent acute situations, and/or the handling of abnormal-significant behavior problems. In the area of costs, consideration would be given to the destruction of household equipment and the unusual wear and tear. of-walls and-woodwork-and-respite-from-child-care-demands.

Approximately 25% of the children in family foster care in North Dakota fall within this category. Payments to foster parents providing this-type ofspecialized care include the age appropriate foster care maintenance and

an irregular payment as stated in North Dakota Department of Human Services Manual Chapter 623-05 ~~and excess maintenance payments (EMP) subject to the requirements noted in this manual chapter. Also, refer to NDDHS 623-05, "Difficulty of Care/Excess Maintenance Payments (EMP), Category 60."~~

Approval of Specialized (EMP) Payments 624-05-20-10-20

The "Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation Form" (SFN 1865) must be completed when an excess maintenance payment (EMP) is being considered **for a child in foster care**. The form is to be completed by the foster care case manager with the assistance of the Child & Family team. **The evaluation must be completed as soon as it is determined a family foster care provider may require additional financial resources.** Approval of specialized care shall be made by the Child & Family Team with regional supervisor approval. Regional Supervisors are responsible for determining the comparative difficulty of care foster children require.

~~Approval of specialized level EMPs shall be made by the permanency planning committee/Foster Care Child & Family team with regional supervisor approval. Cooperation between the permanency planning committee/team members is essential to the functioning of the specialized EMP system. Professionals need to recognize the committee's effort to try to achieve fairness and uniformity in the application of the EMP for children. Each regional supervisor is responsible for determining the comparative difficulty of care that the children in their region require. It is felt that this procedure will provide regional uniformity and still provide for professional judgment. It is the responsibility of the regional foster care supervisors to maintain the standard for uniformity of payment level in the region. Regional supervisor questions regarding appropriateness of EMP levels will be discussed with the Administrator, Foster Care Program.~~

Before an EMP payment can be **authorized for payment to a family foster care provider**~~made for specialized family foster care~~, there must be:

1. Evaluation: A completed (SFN 1865), "Specialized Family Foster Care/Adoption Assistance Level of Care Evaluation ~~Form, completed and signed by the case manager, county director (or designee) and regional supervisor (or designee)~~ **and**

2. Agreement: A signed SFN 904, "Agreement to Furnish Specialized Family Foster Care Services, Excess Maintenance Payment" ~~signed by the foster parent, county social service board representative, and regional foster care supervisor.~~

The duration of the agreement cannot exceed six months from the effective date, the end of the court order, or the end of the primary placement, whichever comes first.

Review of the need for an EMP will be required with each quarterly child and Family Team meeting. However, at any time a foster parent or other member of the Child & Family Team may request the EMP be re-evaluated if there is a significant change in the child's functioning.

~~The EMP payment in Specialized Family Foster Care is handled as part of the maintenance payment as an irregular payment on CCWIPS. Refer to Service Chapter 623-05 for more information.~~

Specialized Payment Procedure 624-05-20-10-25

Deleted section; this is repeated in 623-05.

Levels of Specialized Family Foster Care Payments 624-05-20-10-15

Deleted section; this is repeated in 623-05.

Request for an Adjustment in the Level of Excess Maintenance Payment (EMP) 624-05-20-10-30

Deleted section; this is repeated in 623-05.

Agreement to Furnish Specialized Family Foster Care Services, SFN 904 624-05-30-15

Deleted section; this is unnecessary.

Purpose ~~and Use~~ of SFN 904 624-05-30-15-05

SFN 904 must be completed before a specialized foster care payment can be made to the family foster care provider. The form is initiated after a need for an excess maintenance payment (623-05-30-30) is determined.

The dollar amount or level to be paid is determined based on the evaluation score from the SFN 1865. Payments identified on the SFN 904 must be reviewed at quarterly Child and Family Team meetings and cannot exceed

six months in duration, the end of the court order, or the end of the primary placement, whichever comes first.

Signatures are required on the SFN 904 from the foster parent, county social service board financial county, and the regional foster care supervisor co-facilitating the Child and Family Team meeting. Copies of the signed SFN 904 must be distributed accordingly.

PI 17-24

Responsibilities of the Department of Human Services and Regional Human Services Centers - TPR Children 624-05-15-30-20

1. Authorize releases of information where disclosure is controversial or required by another agency.
2. Authorize treatment for medical emergencies, surgeries, and hospitalizations, including unplanned psychiatric hospitalizations.
3. Approve participation in events with life changing consequences (marriage, enlistments, etc.).
4. Authorize participation in high-risk activities (horseback riding, hunting, driving farm/yard equipment, operating water equipment, etc.).
5. Authorize participation to obtain the seeking of a license, certification, and permit. **NOTE:** The Department is not able to authorize a minor to secure a driver's license. Please refer to NDDHS Service Chapter 622-05 Foster Care for Children Licensing Standards, at 05-55. Motor Vehicle Operation by Youth in Foster Care for a complete discussion of this subject. Department personnel are not authorized to sign for a minor to secure a permit or driver's license. However, the application of a minor for an operator's license may be authorized by an individual (responsible adult) who is willing to assume the obligation imposed under NDCC 39-06-08.
6. Approve participation in significant religious ceremonies, (baptism, confirmation).
7. Authorize out-of-state trips as well as trips that have unusual circumstances or risk.
8. Authorize law enforcement interviews including the administration of polygraph tests.

9. Authorize the child's depiction in any media advertisements or publications including those for adoptive home recruitment.
 10. Approve requests to interview or question a child, including instances where the child is a subject of a sexual abuse investigation.
 11. Approve any loan, credit card applications, or checking accounts by the child.
 12. Act to resolve any issues where a child has an interest in a trust, inheritance, or gift. Approve the commitment of a significant amount of the child's funds, unless there has been a conservator of the child's estate appointed.
 13. Approve Individualized Education Plans if requested by the completing Special Education District.
 14. Through the permanency planning/wraparound process, discuss the child's treatment plan and approve placement level of care.
 15. If concerns arise regarding the current placement, the custodial representative will work with the county case manager and the placement agency to resolve concerns and seek alternatives if needed.
 16. The custodian is responsible for the child through adoption finalization and must concur with the adoptive home selected. Assistance from the Regional Director may be requested when there are differing opinions regarding such placement.
 17. There are times when conflicting opinions will exist on the permanency planning/Foster Care Child & Family team. Our goal is to resolve all conflicts at the lowest possible level. If issues cannot be resolved during the permanency plan/Foster Care Child & Family Team meeting, the county case manager and the HSC/CSS supervisor(s) may be asked to assist in reaching an agreeable resolution. If no resolution can be achieved, the HSC or CSS worker may request to meet with the Regional Director who will facilitate a resolution. If resolution cannot be accomplished on the local level, the case will be referred to Central Office for resolution.
- *Further sub-delegation of this role to the county case manager may happen occasionally, on a case-by-case basis and with the knowledge/approval of the DHS representative/Regional Director. Further sub-delegation of this role may happen when a formal adoptive placement is made through the AASK Program.

Authorization by CSS Director/Designee Permitted

1. Authorize releases of information to facilitate an agreed upon treatment plan.
2. Approve routine medical treatment including medication changes for a child under direct care of a physician. Notify custodial representative at next permanency planning/Foster Care Child & Family Team meeting of changes.
3. Approve planned for psychological or psychiatric testing and evaluation as part of a child's treatment plan (send copy to custodial representative when completed).
4. Authorize a change in placement (notify custodial representative if less restrictive placement; consult with custodial representative on change if more restrictive).**
5. Authorize crisis bed or hospitalization that is part of an agreed upon crisis plan/safety plan.**
6. Manage issues around a family crisis (notify custodial representative if it involves placement outside of the home or change in placement).**
7. Approve child's involvement in local events, concerts, or family activities (not high risk).
8. Approve participation in religious education or church sponsored activities.
9. Approve Individual Education Plans.
10. Approve school sponsored educational or sports activities.
11. Approve employment activities.

**Further sub-delegation of this role may happen occasionally on a case-by-case basis and with the knowledge of the DHS representative. Further sub-delegation of this role happens when a formal adoptive placement is made through the AASK Program.

Notification of Custodial Representative:

Notification of the Custodial Representative or tribal representative upon a change in placement serves several purposes. First, it assures that the child's custodian or tribe is aware of where the child is placed; second, it can serve as notification in order to complete FRAME tasks; third, it will assure appropriate payment for eligible services; and finally, it can provide notification of special circumstances that may have medical, psychiatric, or legal consequences.

Recommendations for notification of change in placement include:

Change in Placement:

- Less restrictive (including respite home) - next perm plan* /FECFT meeting or 30 days
- Adoptive placement - Across regions or placement into new adoptive home - prior notification to all regional offices and counties involved and perm plan/FECFT meeting within 30 days
- Adoptive placement - In current foster home - 1-2 days
- Safe House (notify as soon as possible so can enter in FRAME) or 3-5 days
- More restrictive foster care placement - Prior consultation required for FRAME - Notification when placement made if different than FRAME
- Detention/Attendant care - 1-2 days
- Planned Psychiatric/medical hospitalization- 2-3 days
- Unplanned psychiatric/medical hospitalization - immediate
- Child running (or picked up from run) - immediate

* Child & Family Team

FIX an unintended shortened policy issuance PI 15-15 from a prior manual letter #3461 (December 2015):**Another Planned Permanency Living Arrangement (APPLA)
624-05-15-115-30**

In cases in which a compelling reason has been shown that it would not be in the child's best interests to return home, to have parental rights terminated, to be placed for adoption, to be placed with a fit and willing relative, or to be placed with a legal guardian, whether and, if applicable, when the child, aged 16 or older, will be placed in another planned permanent living arrangement. The court shall:

- 1) Verify the child is age 16 or greater;
- 2) Ask the child whether the child has a desired permanency outcome of APPLA,
- 3) Make a judicial determination explaining why APPLA is the best permanency plan for the child, and

4) Identify the compelling reasons it continues not to be in the best interest of the child to return home, be placed for adoption, be placed with a legal guardian, or be placed with a fit and willing relative.