Statement of Consideration (SOC)

The following comments were received in response to SOP drafts sent for field review. Thanks to those who reviewed and commented. Comments about typographical and grammatical errors are excluded; these errors have been corrected as appropriate

**SOP 4.3 Relative and Absent Parent Search**

1. **Comment:** Relative Search #7 Provide a timeframe that a worker should begin attempting to get the signed Affidavit of Paternity (i.e. INV, 10-Day, Periodic Reviews, Home Visits, etc.) If workers are not told specific times to get information/ documents the tasks may not be completed. This task needs to be completed along with the 1275 at the beginning of the investigation to move quicker in permanency.

**Response:** Change will be made to add ‘at ten (10) day conference or as soon as the father is identified’. Workers should be attempting to get this information throughout the life of the case.

1. **Comment:** We would like clarification re: the topic of DNA. It states “Pursuant to KRS 406.012 ll cost associated with genetic testing shall be paid by the party who requested that the action be brought.  When administratively ordered, the cabinet shall pay the cost of genetic testing to establish paternity, subject to recoupment from the alleged father when paternity is established”.   Who determines if recoupment is appropriate?  Also, will a worker have to ask the court for recoupment or will the cabinet be asking for this in another manner?

**Response:** This language is in HB 1. The court/judge determines when/if recoupment is appropriate and how the process will take place.

1. **Comment: Pursuant to KRS 406.012 all cost associated with genetic testing shall be paid by the party who requested that the action be brought.  When administratively ordered, the cabinet shall pay the cost of genetic testing to establish paternity, subject to recoupment from the alleged father when paternity is established.  That could get costly…we do this on a 101?**

**Response: This is statutory language, and because it is referenced under Legal Authority/Introduction, it will be removed from Practice Guidance. If the Cabinet is court ordered to pay for testing, then a CHR-101 should be completed.**

**SOP 4.17 Preparation for and Completion of the Ten (10) Day Conference**

1. **Comment:** Practice Guidance- Since this is under guidance, does that mean that it is not required, but only suggested?

**Response:** Change will be made; this will be placed under **During the ten (10) day case planning conference with SSW.**

1. **Comment**: Is Practice Guidance required or suggested?

**Response**: Practice guidance is a further explanation of policy.

1. **Comment:** Under Practice Guidance- bullet point 5- Add- Supports identified by SSW, FSOS, other community partners)

**Response:** No change will be made.

1. **Comment:** The bullet identifying who “all parties” to be invited to the FTM; “caregivers” should have an i.e. who might the caregivers be “relative, fictive, foster parents”.

**Response:** The word ‘caregiver’ is used throughout SOP to signify anyone who cares for the child.

1. **Comment:** How will the partnership plan be reflected in I-TWIST?

**Response**: Partnership plan should be reflected in service recordings, and a copy should be uploaded to case plan document.

1. **Comment: I like a partnership plan concept, not the name though.**

**Response**: This concept originated from the QPI website and the term is being used by other states as well.

**SOP 4.18 Ongoing Case Planning**

1. **Comment:**  Would it be possible to include language in 4.18 somewhere about discussing the child’s latest CANS assessment and incorporating to the case plan?

**Response:** This will be considered in future updates**.**

1. **Comment**: Under Procedure # 7- Does this include foster parents, absent parents, relative placements, PECCS?

**Response:** Caregiver includes any person who is taking care of the child**.**

**SOP 4.19 Visitation Agreement**

1. **Comment:** Under Procedure # 7 add (and all relevant caregivers, including foster parents, PECCS, relative placements, etc.

**Response:** Caregiver includes any person who is taking care of the child**.**

**SOP 4.24 SSW’s Ongoing Contact with the Birth Family and Child, Including the Medically Complex Child**

1. **Comment:** ”has a face to face visit with the child, **and their caregiver** in their placement at least once every calendar month in order to assess progress toward case plan goals and objectives and to assess adjustment to the out of home care placement”.

This SOP (without the new edit) exists for safety.  We want to see the child is safe in placement, and we are supposed to be having one on one face to face contact ALONE with the child.  If you also want the worker to converse with the caregiver, that is fine, but it should not reduce, rescind, or replace the expectation that the worker is to see the child alone in placement.  That “alone” is important, and the feds will look for that contact during CFSR case reviews.  I think the intent here is that we have contact with both, and that is cool, it just needs to be rewritten/reworded to preserve our intention that we do both, and that the child’s contact is alone and one on one.

**Response:** This will be changed to indicate ‘**private face to face visit with the child, and face to face with their caregiver**’.

1. **Comment:** Under The SSW: B- add “and ensure appropriate referrals are made within 10 business days” after caregiver.

**Response:** No change will be made.

1. **Comment: Thoroughly documents: Observations regarding the family and the home setting;** yet in (X region) if the caregiver is a Foster Parent, home visits are regionally ordered to be announced ONLY unless an investigation is received….. so how accurate of an observation is being made?

**Response**: No change will be made.

**SOP 11.31 Determining Who has Legal Right to the Child**

1. **Comment:** The purpose of the practice guidance sections are to provide the overarching best practice for the activity covered in the section below,  i.e. what program or legal purpose are we serving, and what is that best practice.  The 2 bullets here are just new tidbits that are already covered in the section, and they are not “practice guidance.”  It there is no “practice guidance” for this section, the section can just be deleted from the SOP; but generally, I think we determine who has legal right to the child to ensure that we are providing the right reasonable efforts to the right party, and that when we do a legal removal, we are removing from the right party—and that we are never infringing on the KRS that conveys legal rights to parents.  That would be the right practice guidance for this section.

**Response:** No change will be made**.**

1. **Comment**: Procedure, The SSW: #2 Would be helpful to refer SSWs to SOP 4.3 regarding timeframes to obtaining certain documents re: absent parent search.

**Response:** Change will be made, reference to SOP 4.3 will be added.

**SOP 12.10 Rights-Responsibilities of DCBS Foster and Adoptive Home Parents**

1. **Comment:** Foster parents “have the right to attend and have a right to be heard in, either verbally or in writing, any cabinet or court proceeding in regards to the child. It should be noted that a pre-permanency planning conference is not a cabinet proceeding but rather an attorney-client confidential meeting”. Our question should this be specific court hearings? For example, an adjudication? TPR? We thought foster parents could be at the TPR hearing and know of the hearing but could not be in the room during the TPR.

**Response**: This is statutory language, the judge determines who should be invited to court proceedings.

**DCBS Partnership Plan**

1. **Comment**: This will essentially be a new administrative burden that probably won’t improve an outcome. We should not be using our workforce in this way. We should only invest worker time and energy in requirements, changes, or efficiencies that actually have a positive impact in our measurable outcomes.

**Response:** There is an abundance of research documenting the positive impact of partnership and family engagement on timely achievement of permanency and other outcomes. No change will be made.

1. **Comment:** We already develop a secondary FLO for the relatives. (We do not see a need for a Partnership Plan and separate meeting.  That is additional paper work and burden on front line staff.  The relative is already part of the case planning process and so is the foster parent.  Why add this additional step?)

**Response:** The plan is to engage the family and foster parents, this occurs during the case plan and is not an additional step. No change will be made.

1. **Comment:** Where is this plan entered in ITWIST?? (This should be changes just to expand the secondary FLO that we already do and give more guidance on what it should include, not an additional plan or step).

**Response:** Partnership plan should be reflected in service recordings, and a copy should be uploaded to case plan document.

1. **Comment**: Partnership plan spelled out- I really like all that, again, not the name.

**Response:** No change will be made.

**Ongoing OOHC Case Consultation Template**

1. **Comment:** The point of this document is to ensure the case moves timely to permanency, i.e. that we are providing reasonable efforts and effectively monitoring the parents’ success and child’s stability.  I get that the partnership plan is the shiny new dime with this release, but it’s proper role is to support the relationship between parents and new caregivers for the sake of the child.  It is not realistically going to be tied to reasonable efforts, and doesn’t need to be a specific review item on the template.

**Response:** This document ensures the completion of the partnership plan**.**

1. **Comment:** I’m not sure what problem we are solving with partnership plans, but it is creating a new administrative burden—so I hope that it’s being done with some specific goal in mind.  If the problem we are solving is the caregiver/family of origin conflict, then I don’t know that this plan will solve that.  These families are already supposed to be in the same room, and working together on the child youth action portion and visitation agreements—so why aren’t we covering the partnership plan content in the child youth action plan and consolidating to one work product?

**Response: The plan helps to guide the process and define roles for the individuals involved.**

1. **Comment:** On the OOHC Case Consultation, can we add:
   * 1. Has this child received a CANS?
     2. Have you communicated with the provider about any concerns or questions about the results?
     3. Have the recommendations been added to the case plan?

**Response: Changes will be made.**

**OOC Visitation Tip Sheet**

1. **Comment**: Are we really going to say the partnership plan is a tool to develop the visitation agreement?  Aren’t they both being developed at the same time?  Again, I get that’s it’s the bright and shiny new thing, but let’s not pretend it’s going to do more than it will.  It should come off this tip sheet.

**Response:** The partnership plan is a tool, which documents preferences about communication for all parties. If used appropriately it will prevent visitation agreements from being developed in the absence of input from all parties. No change will be made.

1. **Comment:** In the first set of bullets, the last item is that the SRA has to approve a suspension of visits.  Please strike that altogether.  This is covered by SOP, and this bullet is an oversimplification of what it takes to halt visits.  This, if it were read alone without the SOP, is misleading.

**Response:** Change will be made, point will be removed.

1. **Comment**: In the second set of bullets that addresses frequency.  In the third bullet:  the new sentence around sibling visits should be its own bullet on a new line.  It now reads like infants should be visiting more frequently with siblings (as opposed to their parents, which was the original meaning) due to the order of the sentences.

**Response:** Change will be made, additional point will be added.

1. **Comment:** I would strongly encourage the language around visitation especially the tip sheet be softened.  As it reads, there is a judge in ------ County who will order visits by CHFS on all children removed weekly.  We do not have enough staff in the field to meet this demand.  Also in the TIP sheet, it refers to best practice (my words) of having visits 2 to 3 times a week being recommended.  This same judge interprets this to mean we “shall” provide those visits 2 to 3 times a week for at least an hour.  Again, we do not have the staff in the field, especially ----- County to meet that demand.

**Response:** DCBS drives practice, no change will be made.

1. **Comment:** Page 2 under Frequency 3rd bullet:

We agreed there should be a specific timeframe for sibling visits. It is difficult to measure “as frequently as possible” to enhance and support the sibling relationship while taking into consideration “circumstances of the case”. This statement could be interpreted in different ways amongst front line staff. It would be ideal for there to be a specific minimum for sibling visitation to occur. For example, “no less than once each month, etc.”

**Response:** The tip sheet reflects SOP and SOP doesn’t prescribe time frames**.**