



Andy Beshear  
GOVERNOR

**CABINET FOR HEALTH AND FAMILY SERVICES**  
**DEPARTMENT FOR COMMUNITY BASED SERVICES**

275 East Main Street, 3W-A  
Frankfort, Kentucky 40621  
Phone: 502-564-3703  
Fax: 502-564-6907

Eric Friedlander  
SECRETARY

Marta  
Miranda-Straub  
COMMISSIONER

**PROTECTION AND PERMANENCY TRANSMITTAL LETTER 23-02**

**TO:** Service Region Administrators  
Service Region Administrator Associates  
Service Region Clinical Associates  
Regional Program Specialists  
Family Services Office Supervisors

**FROM:** Kelli Root, Assistant Director  
Division of Protection and Permanency

**DATE:** January 18, 2022

**SUBJECT:** SOP 4.51.1, SOP 4.3, Residential Treatment Extension Request, QRTP 431, and New Vista forms.

The purpose of this transmittal letter is to notify staff of the following revisions to Standard of Practice (SOP).

Effective 1/20/2023, if a youth is being considered or referred for residential treatment, or if the youth is placed in a residential program, the SSW will submit the referral (and all accompanying documents) for the 30-calendar day qualified residential treatment program (QRTP) assessment in TWIST. The request will no longer be emailed to the Children's Review Program (CRP). This change is reflected in [SOP 4.51.1 Placement in a Congregate Care \(Residential Treatment\) Setting](#) and [SOP 4.3 Relative and Absent Parent Search](#). The [Residential Treatment Extension Request](#) form has been updated and can be found under the [Resources](#) tab in the online SOP manual. A link to the [QRTP 431](#), [New Vista Consent for Participation in QRTP Assessment](#), and [New Vista Authorization for Release of Information Form](#) has been added to [SOP 4.51.1](#).

If you have any questions regarding this transmittal letter, please contact:

Kristin Breeden, Out-of-Home Care Branch Manager  
[kristin.breeden@ky.gov](mailto:kristin.breeden@ky.gov)  
(502) 564-2147