
POLICY TRANSMITTAL NO. 05-31	DATE: JUNE 1, 2005
CHILDREN & FAMILY SERVICES DIVISION	DEPARTMENT OF HUMAN SERVICES OFFICE OF PLANNING, POLICY & RESEARCH

TO: ALL OFFICES

SUBJECT: MANUAL MATERIAL

OAC 340:75-6-88; 75-13-79; 75-15-45; and 75-15-124.

EXPLANATION: Revisions to ITS only in Subchapters 6, 13, and 15 of Chapter 75 reflect the clarification of: (1) SoonerStart referral procedures; (2) travel reimbursement procedures for foster parents; (3) acknowledging full disclosure information and using a preadoptive placement agreement; and (4) using an adoption post placement service plan.

340:75-6-88 ITS is revised to reflect current referral procedures to SoonerStart for a child in OKDHS custody.

340:75-13-79 ITS is revised to detail travel reimbursement procedures for foster parents when transporting children in OKDHS custody.

340:75-15-45 ITS is revised to specify that all information used in full disclosure is stamped with the OKDHS Full Disclosure Acknowledgement stamp and when to utilize Form DCFS-41-A, Preadoptive Placement Agreement, with adoptive families.

340:75-15-124 ITS is revised to reflect the use of Form CWS-KIDS-26, Adoption Post Placement Service Plan (APPSP), when working with adoptive families that request post adoption services.

Original signed on 5-31-05

Linda Smith, Director
Children & Family Services Division

Sharon Neuwald, Co-Interim Administrator
Office of Planning, Policy & Research

WF # 05-K

INSTRUCTIONS FOR FILING MANUAL MATERIAL

OAC is the acronym for Oklahoma Administrative Code. If OAC appears before a number on an Appendix or before a Section in text, it means the Appendix or text contains rules or administrative law. Lengthy internal policies and procedures have the same Chapter number as the OAC Chapter to which they pertain following a “DHS” number, such as personnel policy at DHS:2-1 and personnel rules at OAC 340:2-1. The “340” is the Title number that designates DHS as the rulemaking agency; the “2” specifies the Chapter number; and the “1” specifies the Subchapter number.

The chronological order for filing manual material is: (1) OAC 340 by designated Chapter and Subchapter number; (2) if applicable, DHS numbered text for the designated Chapter and Subchapter; and (3) all OAC Appendices with the designated Chapter number. For example, the order for filing personnel policy is OAC 340:2-1, DHS:2-1, and OAC 340:2 Appendices behind all Chapter 2 manual material. Any questions or assistance with filing manual material will be addressed by contacting Policy Management Unit staff at (405) 521-3611.

REMOVE

340:75-6-88

340:75-13-79

340:75-15-45

340:75-15-124

INSERT

340:75-6-88, pages 1-4, revised 5-26-05

340:75-13-79, pages 1-2, revised 5-26-05

340:75-15-45, pages 1-3, revised 5-26-05

340:75-15-124, pages 1-3, revised 5-26-05

340:75-6-88. Medical services to custody children

(a) **Medical services for custody child(ren) in out-of-home care.** The CW worker is responsible for ensuring, in coordination with the placement provider, that a child(ren) in out-of-home care receives all needed routine and specialized medical care in a timely manner; this includes all medical, dental, visual, and counseling needs. ■ 1

(1) The worker's and placement provider's responsibilities for children's services include:

(A) Early Periodic, Screening, Diagnosis and Treatment (EPSDT) screening according to the schedule of frequency or at a minimum an annual physical exam. In addition, the Department provides as soon as practicable after the filing of the petition an initial health screening for each child placed in the Department's emergency custody to identify any health problems that require immediate treatment, diagnose infections and communicable diseases, and evaluate injuries or other signs of abuse or neglect. The law also requires the Department to provide medical care as necessary to preserve the child's health and protect the health of others in contact with the child; [10 O.S. § 7004-1.1] ■ 2

(B) yearly mental health or developmental screening. The first screening is conducted no later than 90 days after the child(ren)'s removal from the home;

(C) yearly dental exam for children over three years of age. Children under the age of three years receive dental services as needed;

(D) immunizations initiated and kept current;

(E) visual and hearing evaluation exams and corrective lenses or hearing aides, if indicated;

(F) outpatient or inpatient behavioral mental health treatment, when appropriate;

(G) physician's services, if child is sick. This service is not considered a physical exam; and

(H) follow-up and referral services as recommended by a qualified professional.

(2) If requested by a placement provider, the Department provides examinations or tests regarding HIV on the child based on the Centers for Disease Control guidelines for time and frequency of testing. [10 O.S. § 7003-5.4] ■ 3

(b) **Medical services for custody children in parents' homes.** A child in custody of DHS and living in the home of a parent may continue to be eligible to receive financial assistance from the Oklahoma Health Care Authority for necessary medical services. The parents of children in DHS temporary custody and living in their own home have the primary responsibility to provide and arrange for the medical needs of their children. ■ 4

(c) **Sending notice regarding injury to the child requiring medical examination or treatment.** When medical attention is sought or required for a child in DHS legal custody placed outside the child's home, the Department notifies the court of jurisdiction, the child's parents, the parents' attorney, the child's attorney, the district attorney, and the court-appointed special advocate of any accidental or non-accidental injury to the child. ■ 5

INSTRUCTIONS TO STAFF

1. **Initial health and developmental screening.** The Child Welfare (CW) worker ensures the child's initial health and developmental screening is completed no later than 30 days after the child's placement in Oklahoma Department of Human Services (OKDHS) custody. If the child is younger than three years of age, the CW worker:

(1) refers the child to SoonerStart via Form DCFS-121, Child Welfare SoonerStart Referral, no later than 15 working days after the child's initial placement in out-of-home care, excluding shelter and emergency foster care;

(2) notifies the parent(s) and placement provider of the referral to SoonerStart;

(3) informs the placement provider that cooperation is required with SoonerStart in the provision of any service recommended for the child;

(4) updates KIDS Contacts screen with purpose type – SoonerStart Referral;

(5) notifies SoonerStart of any change in placement of the child by providing a copy of Form DCYFS-CWS-8A, Change in Placement Notification, within two working days if the screening, evaluation, or both, has not been completed by SoonerStart;

- (6) discusses with the parent(s), within 15 working days of receipt, the information supplied by SoonerStart;**
 - (7) documents SoonerStart information in KIDS Medical screen;**
 - (8) includes SoonerStart information in KIDS Family and Child Strengths and Needs Assessment screens;**
 - (9) files SoonerStart information in the child's paper case record; and**
 - (10) when notified by SoonerStart of the placement provider's lack of cooperation or follow through with recommendations, completes Form DCFS-117, Report of Violation of Rules in an OKDHS Resource Home.**
- 2. (a) Early Periodic, Screening, Diagnosis and Treatment (EPSDT) schedule.**
- (1) The schedule of frequency for EPSDT provides for:**
 - (A) six health screenings during the child's first year of life;**
 - (B) two screenings in the child's second year of life;**
 - (C) one screening yearly for the child age two through five years; and**
 - (D) one screening every other year for the child age six through 20 years.**
 - (2) Eligible children may receive dental screening services once every 12 months.**
 - (3) More frequent screening services are allowed when a medical condition is suspected.**
- (b) Documentation of medical services. The CW worker and placement provider ensure the continuity of medical services and records while a child is in out-of-home care.**
- (1) These records are made:**
 - (A) part of the child's paper case record and Life Book; and**

(B) available to the parent(s), any subsequent provider, and the youth leaving care for independent living.

(2) The CW worker updates the:

(A) appropriate KIDS screens no later than 30 days after each child's appointment for medical, dental, or psychological services; and

(B) child's immunization and prescriptions records and KIDS Service Log.

(c) Medical consent. Refer to OAC 340:75-13-65 regarding consent for medical services.

3. HIV-related services. Refer to OAC 340:75-1-115 for testing related to Human Immunodeficiency Virus (HIV).

4. Healthcare for children in parent(s)' home. Refer to OAC 340:75-13-62 for medical coverage when the child resides with the parent(s).

5. Notification of medical injury or treatment.

(1) Form DCFS-93, Notice of Injury to Child Requiring Medical Examination or Treatment, is completed by the CW county of placement worker when a child in OKDHS custody requires medical treatment as a result of an accidental or non-accidental injury and to advise the parties of the:

(A) nature of the injury;

(B) date of occurrence; and

(C) medical care provided or planned to meet the child's needs.

(2) All injuries, other than normal minor childhood scrapes and bruises, such as small bruises to the knee or shin, are made known to CW staff.

(3) Any injury to the child involving the face, head, neck, stomach, or genitals, burns, broken bones, deep bruises or wounds, or any type of injury requiring medical attention, even when the injury is accidental, is immediately reported, per OAC 340:75-3-6.

340:75-13-79. Transportation and subsistence

(a) Travel expenses can be defrayed only for necessary medical services not available in the community in which the custody child resides. The Oklahoma Health Care Authority (OHCA) ensures that necessary transportation is available to foster children who are in need of medical services not available in the community. All children with Medicaid eligibility are eligible. Community-based residential care contractors providing the transportation cannot receive reimbursement. Caregivers are responsible for transportation to routine medical appointments. Caregivers who must travel out of the community for necessary and non-routine medical services for a custody child use the Sooner Ride Non-Emergency Transportation (NET) service. All NET routine services must be scheduled by advance appointment at least three business days in advance of the health care appointment, but may be scheduled up to fourteen business days in advance. Scheduling for recipients with standing appointments may be scheduled for those appointments beyond the 14 days but not more than 30 days. The caregiver is required to call the Sooner Ride call center and identify himself or herself as a foster parent for custody children. The call center will offer the caregiver the option of receiving a gas voucher for providing the transportation if they choose not to use public transportation or it is not available.

(b) If Sooner Ride cannot provide or the caregiver chooses not to use NET for urgent care, the caregiver will be offered a gas voucher. In such cases there must be an attempt to schedule the service through Sooner Ride first, or the service must have become necessary during a time that Sooner Ride scheduling was unavailable, such as after hours or on weekends. For NET urgent services provided after hours or on weekends, the caregiver must notify Sooner Ride within two business days of the date of service. If a child requires out of state medical care such that a commercial airline must be secured, approval for airfare must be secured by contacting OHCA, Special Health Care Outreach and Development Unit, to make the necessary flight arrangements. Transportation by bus, any form of ambulance, and airplane is compensable for individuals from Title XIX when other available transportation does not meet the medical needs of the individual. Subsistence, sleeping accommodations and meals, are available to one essential person accompanying the child and may be paid from Title XIX funds at the state per diem rate. Any subsistence expense claimed on Form ADM-6, Travel Claim, must be documented with receipt and is initially handled through the local county office. The completed Form ADM-6 is sent to OHCA, Finance Division, Travel Claims. ■ 1

INSTRUCTIONS TO STAFF

1. **(a) Difficulty of care payment for travel. The Child Welfare (CW) worker explores a difficulty of care payment to offset the foster parent's expense**

when providing transportation several times a week to medical or counseling appointments for a child in Oklahoma Department of Human Services (OKDHS) custody.

(b) Reimbursed travel expenses. A foster parent, including a tribal foster parent, providing care for a child in OKDHS custody, may be reimbursed for travel expenses when:

(1) the CW worker would be required to provide transportation for the child if not provided by the foster parent, including, but not limited to:

(A) visits with a parent(s);

(B) visits with a sibling;

(C) court hearings; or

(D) medical, mental health, dental, or vision appointments when not available in the community;

(2) the CW supervisor prior authorizes the trip;

(3) the round trip for the single event is in excess of 150 miles; and

(4) the trip is documented on Form ADM-6, Travel Claim. Form ADM-6 is submitted to the CW worker and processed through the local OKDHS office.

340:75-15-45. Adoptive placement recommendation, authorization, and offer of child

The adoption recommendation process involves professionals who have knowledge of the specific child and adoptive family, and experience in areas related to adoption and children with special needs. The professionals include the child's Child Welfare (CW) worker, the CW worker's supervisor, and the area adoption specialist. Others who may be included are the area adoption supervisor, the tribal worker, and the CW field liaison (CWFL). The adoption authorization process involves members of the State Office, Children and Family Services Division, Adoption Section who review each recommendation submitted.

(1) When there are concerns regarding the recommendation or there is an objection to the recommendation, efforts are made to resolve the issues through communication with field staff.

(2) When no resolution is reached, the State Office adoption placement coordinator notifies the CWFL and county director to hold a grand staffing.

(3) When the recommendation is denied, it is referred to the program administrator for final review. ■ 1

(4) Approval of the adoption placement recommendation gives the adoption specialist the authority to offer the child for placement and complete full disclosure with the authorized adoptive family, utilizing Form DCFS-89, Affidavit of Information Disclosure for Adoption, and to determine the family's interest in proceeding with pre-placement visits. ■ 2

INSTRUCTIONS TO STAFF**1. Placement recommendation.**

(1) **The Child Welfare (CW) worker contacts the assigned adoption specialist for the county or group to answer any questions or to help facilitate the placement process.**

(2) **The resource family assessment that is submitted for consideration must be current within one year or have a current update or re-evaluation utilizing Form DCFS-72, Guidelines for Adoptive Home Annual Evaluation and Re-Application, per OAC 340:75-15-89.**

(3) From the resource family assessments submitted for consideration, the child's CW worker:

(A) selects three families best able to meet the child's identified needs;

(B) ranks the families in order of preference; and

(C) completes Form DCFS-91, Placement Recommendation Worksheet, and submits to Children and Family Services Division (CFSD) Adoption Section along with a copy of the resource family assessment for each family.

(4) The adoption specialist for the family is notified of the authorized recommendation and contacts the child's CW worker.

2. Full disclosure and offer of child.

(1) The adoption specialist:

(A) offers the child to the adoptive family within three weeks of the authorization date;

(B) completes Form DCFS-89, Affidavit of Information Disclosure for Adoption;

(C) provides to the adoptive family:

(i) Form DCFS-89. Form DCFS-89 and all attachments are stamped on each page with the Oklahoma Department of Human Services Disclosure Acknowledgement stamp;

(ii) de-identified Form DCFS-29, Child Profile Assessment for Adoption;

(iii) copies of Oklahoma State Department of Health (OSDH) Form ODH 347, Medical and Social History Report for Adoption; and

(iv) medical, dental, psychological, and educational records available at that time;

(D) reviews all information in OAC 340:75-15-45(2)(1)(C) Instructions to Staff with the family prior to initiating pre-placement visits.

(i) Non-related families who wish to proceed with pre-placement visits are referred to the local OSDH Child Guidance Center for additional review of the full disclosure packet.

(ii) Upon completion of this review, pre-placement visits are coordinated utilizing Form DCFS-41-A, Preadoptive Placement Visit Agreement; and

(E) if the family declines the offer, either before or after pre-placement visits, or fails to respond to both verbal and written contact attempts, promptly notifies the child's CW worker and Adoption Section placement coordinator by e-mail to proceed with review of the second recommendation.

PART 14. POST ADOPTION SERVICES

340:75-15-124. Post adoption services

Post adoption services are an essential component of the adoption program. OKDHS provides post adoption services designed to assist the adoptive family in maintaining the child in the home and to support the adult adoptee and birth family members to deal with the lifelong impact of adoption. Post adoption services available through OKDHS include (1) through (7). ■ 1

(1) **Adoption assistance.** OKDHS administers the federal and state adoption assistance programs. The program is designed to assist with the adoption of children with special needs. [OAC 340:75-15-128]

(2) **Comprehensive Home-Based Services.** OKDHS provides comprehensive services for adoptive families through Oklahoma Children's Services. [OAC 340:75-1-176]

(3) **Medicaid services.** Children who are approved for adoption assistance are eligible for services within the scope of the Medicaid program. In these cases, the adoptive family is responsible for any medical services provided to the child which are not within the scope of the Medicaid program.

(4) **Respite vouchers.** Eligible individuals may request respite vouchers to be used to prevent adoption dissolution. ■ 2

(5) **Disclosure of information after finalization.** [OAC 340:75-15-104]

(A) **Adoptee and birth family.** OKDHS provides, upon request, a copy of Form ODH 347, Medical and Social History Report for Adoption, and any additional medical and social history information in its possession to:

(i) the adoptive parent(s) or legal guardian(s) of the minor adopted child;

(ii) an adult adoptee age 18 or older;

(iii) an adult whose biological parents' parental rights were terminated and who was never adopted.

(B) **Direct descendant.** OKDHS provides medical information only upon request to:

- (i) an adult direct descendant of a deceased adopted person or of a deceased person whose biological mother's and biological father's parental rights were terminated and who was never adopted; and
 - (ii) the parent or guardian of a minor direct descendant of a deceased adopted person or of a deceased person whose biological mother's and biological father's rights were terminated and who was never adopted.
- (C) **Genetic information.** OKDHS provides, upon request, a copy of significant supplemental genetic information about an adopted person, or about a person whose parental rights were terminated, which became available after the issuance of the final decree of adoption or the termination order to:
- (i) a biological parent or biological relative of an adopted person; and
 - (ii) a biological parent or biological relative of a person whose biological mother's and biological father's rights were terminated and who was never adopted.
- (D) **Post finalization.** If any additional information about an adopted child, the adopted child's biological parents, or the adopted child's genetic history is submitted to OKDHS after the adoption is finalized, this information is retained in the adoption record for as long as those records are maintained. A copy of this supplemental information is filed with the clerk of the court that issued the decree of adoption, to be made a part of the court's permanent record of that adoption.
- (E) **Tribal information.** OKDHS may not provide identifying information directly to an adult adoptee to establish tribal rights or membership, but will provide identifying information to the tribe, the court, or Secretary of the Interior for purposes of establishing Native American heritage. ■ 3
- (F) **Inheritance.** Termination of parental rights does not terminate the child's right to inherit from the biological parent(s). OKDHS assists with locating heirs and will act as an intermediary, upon request.
- (6) **Mutual Consent Voluntary Registry.** This registry allows adult adoptees and persons separated from birth family members through termination of parental rights proceedings to receive assistance in locating birth family members. [OAC 340:75-15-132] ■ 4
- (7) **Confidential Intermediary Search Program.** Eligible persons may request the services of a Confidential Intermediary to search for members of their birth family. [OAC 340:75-15-133]

INSTRUCTIONS TO STAFF**1. Post adoption services.**

(1) When an adoptive family requests post adoption services, such as Comprehensive Home-Based Services (CHBS), a case is opened and Form CWS-KIDS-26, Adoption Post Placement Service Plan (APPSP), is developed with the family.

(A) If the family adopted through Oklahoma Department of Human Services (OKDHS), the KIDS number assigned at the time of placement is utilized.

(B) The original case record is not released from Children and Family Services Division Adoption Section due to confidentiality requirements.

(2) Information regarding the child's background and medical history may be obtained upon request from the Adoption Section.

(3) The Adoption Section manages the review and claims processing of the adoption assistance case.

2. Respite. The adoption specialist refers the family to Oklahoma Areawide Services Information System (OASIS) for a respite application. An eligible family has finalized adoption of a child with special needs through OKDHS, and is at risk of adoption dissolution. Respite vouchers are not used for a family with a child in foster care or a child whose adoption is not final.

3. Native American heritage information. Requests to the Adoption Section for Native American heritage information from federally recognized tribes are made on tribal letterhead.

4. Disclosure of medical and social history. Eligible persons may request their non-identifying medical and social history on Form DCFS-22, Oklahoma Mutual Consent Voluntary Registry.