## Nathan Deal, Governor

Clyde L. Reese, III, Esq., Commissioner

Georgia Department of Human Services • Family & Children Services • Ron Scroggy, Division Director Two Peachtree Street, NW • Suite 19-490 • Atlanta, GA 30303 • 404-651-8409 • 404-657-5105

August 24, 2012

## MEMORANDUM

TO:

All DFCS Staff

FROM:

Ron Scroggy, Division Director

RE:

Comprehensive Child and Family Assessment Guidelines

## **Purpose:**

The purpose of this memo is to provide you with information regarding changes in the Comprehensive Child and Family Assessment (CCFA) guidelines as of July 1, 2012.

The most significant change is that psychological evaluations have been removed as a component of the CCFA. The Administration for Children and Families (ACF), a federal agency in the Department of Health and Human Services, has informed state child welfare agencies that we must begin to implement trauma focused screening, assessment and treatment for children in foster care. The emotional well-being of our children is of utmost importance to us all and has a direct link to their ongoing safety and success of permanency plans. Therefore we have included trauma assessments as a component of the CCFA as a step towards becoming a more trauma-informed child welfare system. CCFA providers will now be reimbursed for coordinating trauma assessments for children in foster care at a rate of \$150.00. We are asking CCFA providers to provide a report which includes: 1) a trauma history which informs us of information regarding any trauma that the child may have experienced or been exposed to as well as how they have coped with that trauma in the past and present; 2) a standardized trauma screening tool; and 3) summary and recommendations for treatment (if needed). All providers have been made aware of this requirement and have been provided information that will guide them in providing the trauma assessment. Additional technical support is also being developed to ensure that CCFA reports as a whole provide staff with what is needed to make informed decisions regarding the ongoing needs of children and families.

The inclusion of the trauma assessment does not in any way indicate that there will not be situations in which psychological evaluations or other specialized assessments (psychosexual, neuro-psychological, and educational-psychological) will be warranted. This needs to be a decision made on a case by case basis after an overall assessment of the child's needs. If identified as a need, payment of psychological evaluations can in most cases still be paid for through Medicaid. In specific cases when it cannot, it can be

covered under Prevention of Unnecessary Out-of- Home Placement (PUP), UAS 521Code 54. This change will also not impact your ability to obtain RBWO determinations or make placement decisions. The Office of Provider Management (OPM) Director Dianne Yearby and the Office of Residential Child Care (ORCC) Director Carol Winstead are in agreement that this is an effective manner in which to assess children coming into care and should not reflect negatively on the policies and procedures currently in place for either program. Psychological evaluations are only required for placement in Outdoor Therapeutic Programs based on some exclusionary criteria for admission.

In addition to assisting with a focus on individualized treatment planning for our children, we also feel that assessing trauma will be valuable in placement decisions and placement provider's ability to understand the behaviors and needs of youth in care. This is another step towards being a trauma-focused child welfare system. We are confident that this change will allow us to provide more appropriate treatment for children in foster care. While currently this requirement only applies to children entering care, eventually it will expand to include all children.

cc: Kathy Herren, Deputy Division Director
Dianne Yearby, Office of Provider Management Director
Carol Winstead, Office of Residential Child Care Director