



Tom C. Rawlings

Director

FY 22 RBWO
Minimum
Standard
Updates





57 responses

33 Directors

7 Case Managers (HSP, LC, CSW)

5 Case Support Supervisors

12 Other Roles



18 CCIs
33 CPAs
3 ILPs
3 Other

Revision

- Revised Standard 1.6 Providers must have two face-to-face contacts a month with each child placed. One of those contacts must be an Every Child Every Month (ECEM) contact. The other contact is called a general contact. A General Contact is a purposeful visit; however, it does not have to occur in the home. The General Contact must be conducted by the CCI Human Services Professional (HSP), Life Coach (LC) or the CPA Case Support Worker (CSW) or Case Support Supervisor (CSS) and generally focuses on safety and well-being. The General Contact will be documented in the standard narrative type in Georgia SHINES or the Safety, Permanency, and Well-being narrative type. All documentation must be entered and approved into GA SHINES within 72 hours of the contact. Some of these contacts should be unannounced visits. (For details on ECEM contacts, review RBWO Minimum Standard ECEM 6.21)

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 5 |
| Met expectations | 48 |
| Below expectations | 4 |
| TOTAL | 57 |



Revision

- Revised Standard 1.15 Providers must conduct and document the results of a Child Protective Services history check through the Georgia Investigation Outcome Notification System (IONS) at <https://ionsrequestportal.dhs.ga.gov/General> for all staff within 30 days prior to hiring and annually within 30 days prior of the staff's anniversary date. Each Contractor must have a policy on checking CPS history through IONS and if the results of the IONS check reveal a substantiated case, this individual is unable to be employed or continue employment to work with children in the custody of the Division.

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 8 |
| Met expectations | 47 |
| Below expectations | 2 |
| TOTAL | 57 |



Revision

- Revised Standard 1.18 Providers must screen all known names initially and annually for staff and caregivers. Known names includes any name change due to marriage, divorce, etc. (Note: Refer to DFCS Child Welfare Policy Manual 19.9 Safety Screenings for guidance).

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 10 |
| Met expectations | 44 |
| Below expectations | 3 |
| TOTAL | 57 |



Revision

- Revised Standard

1.20 Providers must develop a policy on water safety and assessment procedures. For CCIs and CPA foster homes that have swimming pools, spas, or other large bodies of water nearby, a water safety assessment must be completed. The age, special needs, and number of children in a home should guide decisions around placement in such homes. Water safety assessments must be completed annually. The water safety assessment can be found at www.gascore.com.

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 7 |
| Met expectations | 47 |
| Below expectations | 3 |
| TOTAL | 57 |



Revision

- New Standard

1.21 RBWO Providers are required to obtain a reference from any prior RBWO agency for which an applicant served as an employee. References should be obtained prior to hire and must be maintained in the employee's file.

DIVISION OF FAMILY & CHILDREN SERVICES

ANSWER CHOICES

RESPONSES

Exceeded expectations

7

Met expectations

46

Below expectations

4

TOTAL

57



Revision

• Revised STANDARD 4.8

A. Foster Homes

1. For ALL foster youth in the legal custody of Fulton and/or DeKalb county:

a. No child will be placed in a foster home if that placement will result in more than three (3) foster children in that home or, a total of six (6) children in the home, including the foster family's biological and/or adopted children, without the written approval of the Caregiver Coordination Section Director or designee. Note: Capacity waivers are not required for sibling groups over 3 *if* they are the only placements in the home. Youth with specialty program designation will still require a capacity waiver. See 11.28 for details.

b. No child will be in a placement that will result in more than three (3) children under the age of three (3) residing in a foster home including the children of the caregiver's family.

Note: The only exception to these capacity limits shall be the placement of a sibling group in the foster home with no other children in the home.

For foster youth in the legal custody of all other counties:

Please refer to Child Welfare Policy Manual 14.1 regarding Safety and Quality Standards (SQS) which states:

The number of foster children cared for in a foster family home may exceed six for any of the following reasons:

1. To allow a parenting youth in foster care to remain with the child of the parenting youth;
2. To allow siblings to remain together;
3. To allow a child with an established, meaningful relationship with the family to remain with the family; and
4. To allow a family with special training or skills to provide care to a child who has a severe disability.

B. Group Care or CCI Settings

- a. No child younger than twelve (12) years of age (0-11) will be placed in a group care setting. EXCEPTION: An age-based waiver shall be granted before a child age 10 and under can be placed in a congregate care or group home setting. For a child age 11, the Regional Director shall make the age-based waiver approval decision. For a child age 10 and under, the State Office Placement and Permanency Services Director or designee shall make the age-based waiver approval decision. If the child is under the age of 10 and the child of a teen parent who is also placed in the CCI, an age-based waiver request is not required. The request should be submitted through www.gascore.com and must include a complete explanation of the supporting circumstances and concurrence from the County and Regional Director.
- b. No child under age twelve (12) that has been appropriately approved for a CCI placement will be placed in any group care setting that has a capacity in excess of twelve (12) children. This will not apply to a child who is under six (6) years of age (0-5) and who is also the son or daughter of another child placed in a group care setting.

NOTE: The Regional Director has night and weekend approval authority until the next business day for waivers requiring the Caregiver Coordination Section Director or designee's approval.

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 6 |
| Met expectations | 44 |
| Below expectations | 2 |
| TOTAL | 52 |



Revision

- Revised STANDARD 4.18

The provider's intake process should include but is not limited to the following:

- Ensuring that the admission criteria includes that youth up to 21 years may be served.
- Utilization of the RBWO Universal Application and Referral Form as the sole referral documentation needed to determine whether a potential placement match exists. If a potential match exists, the provider will proceed with its own admission application package. The admission application package may not require a psychological evaluation report. However, the admission application package may ask if a psychological evaluation report exists and is available and if so, may require that the psychological evaluation report be provided as a part of the application. (NOTE: This standard does not apply to ILP placements as the Scattered Site Placement Youth Readiness Assessment is required.)

DIVISION OF FAMILY & CHILDREN SERVICES

ANSWER CHOICES

RESPONSES

Exceeded expectations

10

Met expectations

39

Below expectations

5

TOTAL

54



Revision

- Revised STANDARD 5.0

A Family Team Meeting (FTM) or PAUSE process should be conducted when potential disruption of a child's placement is threatened or imminent, including children returning from runaway or hospitalizations where they will not return to the same placement. Providers must alert DFCS of the need to hold an FTM or PAUSE when children in their care may experience a placement disruption. Providers must participate in these FTMs or PAUSE as invited by DFCS. The child should be included when deemed appropriate.

DIVISION OF FAMILY & CHILDREN SERVICES

ANSWER CHOICES

RESPONSES

Exceeded expectations

8

Met expectations

46

Below expectations

2

TOTAL

56



Revision

- Revised STANDARD 5.6

In all cases where discharge is determined to be in the best interest of the child but due to safety issues a 14-day notice cannot be provided, a minimum of 72-hour notice shall be given prior to discharge. If the 72-hour notice is not possible, the reasons for the failure to notify in advance must be documented in the child's record. (NOTE: This standard applies to CCI and CPA placements only).

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 9 |
| Met expectations | 46 |
| Below expectations | 1 |
| TOTAL | 56 |



Revision

- Revised STANDARD 11.2

CPAs must ensure that prospective caregivers are drug screened per DFCS Child Welfare Policy Manual Chapter 14.1 & 19.25 using a qualified drug testing laboratory.

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 9 |
| Met expectations | 41 |
| Below expectations | 2 |
| TOTAL | 52 |



Revision

Revised STANDARD 11.15

- For youth in the custody of Fulton and Dekalb counties

CPAs must ensure that the number of children placed or approved to be placed in a foster home will not displace the foster family's children or other members living in the household from reasonable and expected accommodations (i.e., bed, personal space and privacy). CPAs must ensure that placements also comply with the following requirements:

- Only bedrooms shall be used as sleeping space for children.
 - Each non-related child must have a separate bed.
 - Any collapsible (pack and play), sofas, cots or other such temporary sleeping structures may not be used as the planned bed space for children.
 - A maximum of two (2) children may sleep in a double or larger bed if they are siblings, the same sex and under age 5 years. Preferably all children will have separate beds, however, infants must always be in a separate bed or crib.
 - No child shall sleep in a bed with an adult. Infants may not sleep in a bed with anyone.
 - Preferably, a maximum of three (3) children will share a bedroom. The suitability of children sharing a room must be thoroughly assessed and based on the background/history of the children and the space.
 - Children age five (5) years and older and of different sexes shall not share a bedroom.
 - Cameras should not be used in a manner that violates privacy of youth. Cameras in bedrooms and bathrooms are prohibited.
- In all instances, the suitability of children sharing rooms or beds (as in item C) must be thoroughly assessed and re-assessed as circumstances dictate.

- For youth in the custody of all other counties

11.15(a) CPAs must ensure that placements also comply with the following requirements: a. Caregivers must provide a safe sleeping space including sleeping supplies, such as a mattress and linens, for each individual child, as appropriate for the child's needs and age. b. All children in the home must be treated equitably, meaning each child has sleeping arrangements similar to other household members. c. Caregivers must not co-sleep or bed-share with children in foster care. d. Caregivers with infants must adhere to the infant safe sleeping practices outlined in the Infant Safe to Sleep Guidelines and Protocol. Any collapsible (pack and play), sofas, cots or other such temporary sleeping structures may not be used as the planned bed space for children. e. Cameras should not be used in a manner that violates privacy of youth. Cameras in bedrooms and bathrooms are prohibited.

- RCCL requirements must still be met as well

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 9 |
| Met expectations | 36 |
| Below expectations | 5 |
| TOTAL | 50 |



Revision

Revised STANDARD 11.26

If a CPA suspects or is notified that a caregiver may have violated a safety, behavior management, quality of care, well-being or other such policy, the suspected violation must be reported to and screened by the CPS Centralized Intake Call Center. Whether or not the report is investigated by CPS, providers must complete a Policy Violation Assessment (PVA) related to the issue and develop a Corrective Action Plan (CAP) with the caregiver as appropriate following the policy outlined in DFCS Child Welfare Policy Manual Chapter 14.22. Care should be taken to avoid interfering with any related CPS and/or law enforcement investigations. For violations that the Office of Provider Management becomes aware of, providers will be notified via a GA+SCORE generated e-mail of the need to complete a PVA. Providers must make face to face contact with the foster family and youth within 24 hours of receiving a PVA request notification via GA+SCORE. Completed PVAs must be uploaded into GA SCORE by the provider within 8 days of receiving the CPS notification. OPM will in turn review the PVA and provide feedback to the provider within 10 days. Any required CAPs must be uploaded into the Corrective Action tab in GA+SCORE within 3 days of notification. The provider must satisfy all action items in the CAP within six (6) months of submission. Appeals to OPM's PVA determinations should be directed to the OPM Director by the provider within 10 days of notification. The OPM Director will review the appeal and reply to the provider within 15 days. Providers who display a pattern of not submitting PVA's and CAP's by the designated deadline are subject to an admission suspension.

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 11 |
| Met expectations | 40 |
| Below expectations | 6 |
| TOTAL | 57 |



Revision

Revised STANDARD 11.28

Children with a Specialty program designation have intensive needs and require significant levels of care and supervision. Therefore, children who have a Specialty Watchful Oversight program designation --Specialty Base (SBWO), Specialty Maximum (SMWO) and Specialty Medically Fragile (SMFWO)—must be the only placement in the foster home. This includes respite for the Specialty designation child or another child coming into the Specialty home for respite. If a home is considered to provide care for more than one youth with a specialty program designation, the foster home must meet the following requirements:

The foster home must be a two-parent foster home in which at least one of the foster parents is a stay-at-home parent. At least one of the foster parents must have a clinical or nursing background or have professional experience in caring for children and youth with specialty specified medical diagnoses and/or disabilities. Any exceptions to this standard (whether for respite or placement) must be approved in advance of the placement by the Office of Provider Management. Waiver requests should be sent to www.gascore.com and include a complete explanation of the supporting circumstances and concurrence from all children's DFCS Case Manager(s).

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 13 |
| Met expectations | 35 |
| Below expectations | 9 |
| TOTAL | 57 |



Revision

Revised STANDARD 11.35

CPA Providers must ensure that foster parents maintain a home environment that provides for the safety and well-being of children placed in their care. Foster parents are required to comply with the following safety requirements for children in foster care placement.

- a. The foster home and surrounding property must be kept reasonably clean and uncluttered, properly maintained, and free of safety and health hazards, and uncontrolled rodents and insects.
- b. All hazardous substances including, but not limited to, flammable and poisonous substances, medications, industrial cleaning supplies and alcoholic beverages are stored out of the reach of children.
- c. Ceilings, walls, and floors will be maintained and kept clean and free from graffiti, dirt, or stain buildup.
- d. Foster parents must have a plan for regular maintenance and upkeep of the living environment, furniture, and grounds.
- e. Each child placed must have a suitable bed, bedding and storage for personal items.
- f. Children must be able to personalize their bedrooms to the extent possible.
- g. Bath, showers and toilets must be of a number and standard to meet the needs of the children placed and must be free of mold, mildew and debris.
- h. Kitchen should be maintained with operable appliances and reasonably clean.
- i. The home must have proper water heater temperature.
- j. Weapons and ammunition must be stored separately, locked, unloaded and inaccessible to children.
- k. Pets must be vaccinated in accordance with state, tribal and/or local law.

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|------------------------|-----------|
| Exceeded expectations | 10 |
| Met expectations | 40 |
| Below expectations | 1 |
| Other (please specify) | 6 |
| TOTAL | 57 |



Revision

Revised STANDARD 12.35

If a CCI suspects or is notified that a staff member may have violated a safety, behavior management, quality of care, well-being or other such policy, the suspected violation must be reported to and screened by the CPS Centralized Intake Call Center. Whether or not the report is investigated by CPS, providers must complete a Policy Violation Assessment (PVA) related to the issue and develop a Corrective Action Plan (CAP) with the caregiver as appropriate following the policy outlined in DFCS Child Welfare Policy Manual Chapter 14.22. Care should be taken to avoid interfering with any related CPS and/or law enforcement investigations. For violations that the Office of Provider Management becomes aware of, providers will be notified via a GA+SCORE generated e-mail of the need to complete a PVA. Completed PVAs must be uploaded into GA SCORE by the provider within 8 days of receiving the CPS notification. OPM will in turn review the PVA and provide feedback to the provider within 10 days. Any required CAPs must be uploaded into the Corrective Action tab in GA+SCORE within 3 days of notification. Appeals to OPM's PVA determinations should be directed to the OPM Director by the provider within 10 days of notification. The OPM Director will review the appeal and reply to the provider within 15 days. Providers who display a pattern of not submitting PVA's and CAP's by the designated deadline are subject to an admission suspension.

DIVISION OF FAMILY & CHILDREN SERVICES

ANSWER CHOICES

RESPONSES

Exceeded expectations

7

Met expectations

39

Below expectations

3

TOTAL

49



Revision

- Revised STANDARD 13.32

Providers should obtain references from an applicant's or volunteer's previous or current employer if the applicant is or has been employed in a job situation that involves children (e.g. school, daycare center, group residential care or intensive residential care facility, etc.), within the last 10 years, prior to hiring the prospective employee. If the applicant or volunteer has served as a previous foster or adoptive parent, obtain references from the former county/agency. Obtain additional references if conflicting, ambivalent or inadequate statements are received from those initially requested.

DIVISION OF FAMILY & CHILDREN SERVICES

ANSWER CHOICES

RESPONSES

Exceeded expectations

9

Met expectations

43

Below expectations

5

TOTAL

57



Updated Kenny A Modified Consent Decree & Infrastructure Results

- 3.4 Average Rating
- 40% rated it a 3
- 27.5% rated it a 4
- 15% rated it a 5
- 12.5% rated it a 3
- 5% rated it a 1

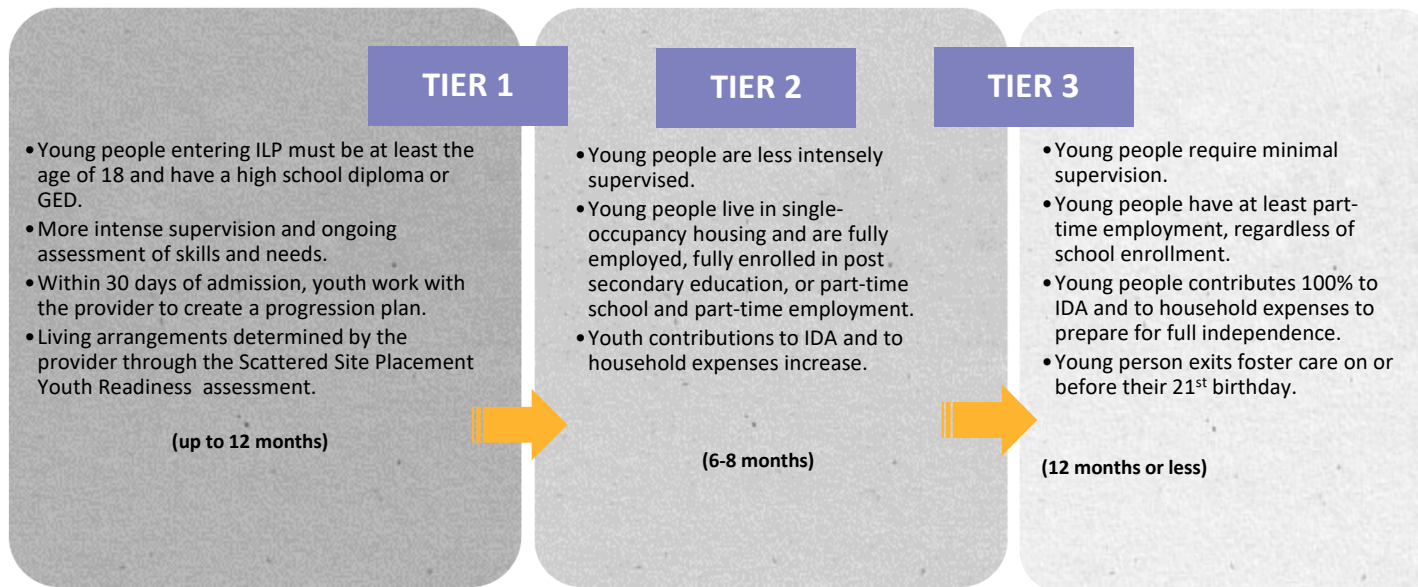
Revision

- Revised Independent Living Program Standards: (Please review the standards for changes)

ILP REDESIGN MATRIX

| Previous RBWO Minimum Standards | New RBWO Minimum Standards |
|---|--|
| Assessment is being completed independently by the RBWO ILP Provider | Assessment will be completed in conjunction with the RBWO ILP provider and Independent Living Specialist (ILSs) |
| Young people 18 years and older can be placed in ILP without High School Diploma and/or GED (*Note: youth 17 1/2 can be considered for placement via waiver request). | Young people must be 18 years and older with a High School Diploma or GED to be considered for placement |
| RBWO ILP Providers do not have a formal agreement process as it relates to assessing a young person for placement. | Young people must sign the Scattered Site Placement Youth Readiness Assessment and it must be approved prior to being placed with ILP provider. |
| All ILP types are categorize together there is no graduating progression throughout the independent living program. | Tier 1, Tier 2 or Tier 3 (*Note youth must successfully complete the requirements of each tier in subsequential order) |
| Young person must be employed at least 15 - 20 hours or attending school full-time. | Young people must be employed at least 80 hours per month or attending post-secondary school full-time (12 or more credit hours per term) or working part-time and enrolled part-time. A young person not attending school must be employed full-time: 30 hours per week, no less than 120 hours per month. |
| RBWO ILP Providers are required to visit the young person daily for the first week and twice a week for the 2nd through the 4th week along with daily telephone calls. | Depending on placement tier this will determine the frequency of in-person visitations and contacts with the young person. |
| RBWO ILP Providers and the young person are meeting together for ongoing assessment of support that is needed such as education, mental/physical health and social needs. | Each young person entering the ILP must have a staffing within the first 30 days of placement, which must include the youth, DFCS Case Manager, ILS and other supports. The purpose of the staffing is to review the results of the Assessment, program expectations, the WTLP and ILP ISP and to discuss the youth's eligibility for services and funding. |
| RBWO ILP Providers are required to give a monthly stipend but a dollar amount is not specified. | Youth in Single Occupancy Housing must be provided with a monthly allowance of \$300 to cover hygiene products, food and other essentials. Providers must assist youth with creating a shopping plan/schedule for the purchase of said items and food. All youth are eligible to apply for food stamps, however, food stamps are supplemental and the food allowance provided must not be lowered based on the amount of food stamps the youth receives to ensure an adequate food supply. |
| | |

DIVISION OF FAMILY & CHILDREN SERVICES



The Role of Assessment

Ongoing assessment by providers, IL specialists, and young person ensures ILP youth progress appropriately. That includes a completed Scattered Site Placement Youth Readiness Assessment with GA RYSE/Chafee prior to admission; creating a progression plan between the provider and young person within 30 days of admission; assessment of progress on the plan at least every 90 days; a youth-led assessment midway through Tier 2; and assessments before beginning each tier.

DIVISION OF FAMILY & CHILDREN SERVICES

| ANSWER CHOICES | RESPONSES |
|-----------------------|-----------|
| Exceeded expectations | 5 |
| Met expectations | 43 |
| Below expectations | 1 |
| TOTAL | 49 |



Any
Questions