



State of Florida
Department of Children and Families

Rick Scott
Governor

Mike Carroll
Secretary

DATE: March 1, 2017

TO: Regional Managing Directors
Sheriff's Offices Conducting Child Protective Investigations
Community-Based Care Lead Agency CEOs

THROUGH: David L. Fairbanks, Deputy Secretary *[Signature]*

FROM: JoShonda Guerrier, Assistant Secretary for Child Welfare *[Signature]*
Vicki Abrams, Assistant Secretary for Operations *[Signature]*

SUBJECT: CFOP 170-10, Providing Services and Support for Children in Care and for Caregivers; Chapter 2, Behavioral Health Care

PURPOSE: The revised Behavioral Health Care operating procedure replaces Chapter 2 of CFOP 155-10 / 175-40, Comprehensive Behavioral Health Assessments. This update moves the chapter from the Mental Health and Substance Abuse and Family Safety series to the Child Welfare series and has been rewritten to include information on integration with the Child Welfare Practice Model.

BACKGROUND: The effort to establish a comprehensive set of child welfare operating procedures began in early 2015. Part of this process is updating and converting policies under other series to the 170 series (Child Welfare).

This operating procedure has been rewritten to include current technologies and better capture the current business flow.

ACTION REQUIRED: Please share this memorandum and revised operating procedure with all child welfare staff as appropriate and ensure that the revised operating procedure is implemented.

CONTACT INFORMATION: If you require additional information or have any questions, please contact Tory Wilson, Integration Specialist, Office of Child Welfare at (850) 509-0755 or Tory.Wilson@MyFLFamilies.com.

cc: Regional Family and Community Services Directors
Center for Child Welfare

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Mission: Work in Partnership with Local Communities to Protect the Vulnerable, Promote Strong and Economically Self-Sufficient Families, and Advance Personal and Family Recovery and Resiliency

CF OPERATING PROCEDURE
NO. 170-10

STATE OF FLORIDA
DEPARTMENT OF
CHILDREN AND FAMILIES
TALLAHASSEE, March 1, 2017

Child Welfare

PROVIDING SERVICES AND SUPPORT FOR CHILDREN IN CARE AND FOR CAREGIVERS

This operating procedure describes policy issues related to the provision of services and support needed for children and their caregivers to promote safety, permanency and well-being. This includes physical health, behavioral health, early learning, education, life skills, and caregiver supports. The integration of services includes proper assessment, referral, and coordination of services to promote child stability.

This operating procedure is applicable to all Department child welfare staff, child welfare community-based providers, child welfare subcontracted case management organizations, and all circuit/regional child protective and sheriff's office child protective investigations staff.

BY DIRECTION OF THE SECRETARY:

(Signed original copy on file)

JOSHONDA GUERRIER
Assistant Secretary for
Child Welfare

SUMMARY OF REVISED, DELETED, OR ADDED MATERIAL

Added Chapter 2 which supersedes Chapter 2 of CFOP 155-10 / 175-40 dated September 13, 2010.

This operating procedure supersedes Chapter 2 of CFOP 155-10 / 175-40 dated September 13, 2010 (superseded by Chapter 2).

OPR: Office of Child Welfare

DISTRIBUTION: X: OSES; OSGC; ASGO; Region/Circuit Child Welfare staff.

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Chapter 2

BEHAVIORAL HEALTH CARE

2-1. Purpose. This chapter defines the Department's responsibility to address the well-being needs of children under supervision and to provide children in out-of-home care with timely screening, assessment and treatment for behavioral health needs.

2-2. Scope. This chapter applies to all children served by child welfare professionals and to all staff within the Department and contracted service providers.

2-3. Authority. Relevant statutory provisions relating to medical screening, examination and treatment of children are as follows:

- a. Section 39.407, Florida Statutes (F.S.).
- b. Sections 394.455(9) and 394.459(3)(a), F.S., as referenced in s. 39.407, F.S.
- c. Section 39.304, F.S.
- d. Sections 743.064 and 743.0645, F.S.
- e. Chapters 65C-28 and 65C-30, Florida Administrative Code (F.A.C.).
- f. Community Behavioral Health Handbook.

2-4. Guiding Principles. Child welfare professionals are responsible for the oversight of well-being needs of children in out-of-home care. The following principles will direct the planning and delivery of behavioral health services for children in out-of-home care.

- a. A child's trauma history should be considered during all interactions.
- b. The Family Functioning Assessment-Ongoing and Progress Updates provide for the assessment of child functioning which includes specific indicators of well-being. The indicators, "Strengths and Needs," are assessed continuously during the child's and family's involvement with the child welfare system. (Refer to CFOP 170-9, Chapter 3.) The "Emotion/trauma" and "Behavior" indicators are a method for screening of behavioral health needs of children served. If any screening indicates a possible need for services, a referral for further assessment will be made.
- c. Behavioral health needs identified through a Comprehensive Behavioral Health Assessment (CBHA) or other mental health or substance abuse assessment must be considered when developing the family's case plan.
- d. The case plan will include a description of the behavioral health needs being addressed and a description of the services to be provided.
- e. For all children who are also served by the DJJ, Children's Medical Services Medical Foster Care and/or the Agency for Persons with Disabilities (APD), child specific planning and service delivery will be coordinated between the agency(ies) and the Department and their contracted providers.
- f. The Lead Agency should ensure transition planning in advance of youth leaving out-of-home care that includes identification of providers and source of payment for treatment.

2-5. The Child Resource Record. A child's resource record (CRR) is required to be developed for every child entering out-of-home care according to Rule 65C-30.011(4), F.A.C. This document serves to record the medical and behavioral health needs of the child.

2-6. Comprehensive Behavioral Health Assessment. All children entering out-of-home care ages birth through 17 years who are Medicaid eligible must be provided a CBHA. These Medicaid funded assessments are used to provide specific information about mental health and related needs.

a. The Department is authorized to have the CBHA performed without authorization from the court and without consent from a parent or legal custodian, per s. 39.407(1), F.S. Within seven (7) calendar days after the child is placed in shelter care, the assigned child welfare professional shall ensure that a referral for a Comprehensive Behavioral Health Assessment is submitted in accordance with local protocol.

b. As required in the Florida Medicaid Community Behavioral Health Services Coverage and Limitations Handbook, the CBHA provider will complete the assessment and send the results to the local point of contact within 24 calendar days of authorization receipt.

c. The local point of contact will distribute the completed CBHA in accordance with local protocol.

d. The assigned child welfare professional will review the CBHA recommendations and will make referrals as necessary within seven (7) business days.

e. The assigned child welfare professional will provide a copy of the CBHA to Children's Legal Services (CLS) upon receipt.

f. New information learned from the CBHA regarding the child's strengths and needs shall be reflected in the Child Functioning Domain of the Family Functioning Assessment Ongoing or Progress Update, whichever is due next.

g. The needs identified through the CBHA and the recommendations for services must be considered when developing or updating the family's case plan.

h. When a child is experiencing serious emotional disturbance in out-of-home care, the CBHA may be used to re-assess the child's behavioral health service needs as established in the Medicaid Handbook.

2-7. Behavioral Health Services.

a. Behavioral health services shall be provided to children in out-of-home care without delay once the need for such services is identified in a CBHA or other behavioral health evaluation or if the need for services is clear in the Family Functioning Assessment or Progress Update.

b. Behavioral health services may include, but are not limited to, individual, family and group therapy, behavior analysis and support, and substance use treatment. (The provision of psychotropic medications is addressed in Chapter 3 of this operating procedure.)

c. The assigned child welfare professional will ensure that all behavioral health service needs identified through screening or assessment are integrated into the case plan.

d. The assigned child welfare professional will ensure that all referrals for behavioral health services are made within seven (7) business days of identification.

e. The assigned child welfare professional will assist relative and non-relative caregivers in accessing needed behavioral health services.

f. The assigned child welfare professional shall contact the child's health plan provider as needed for assistance in coordinating services.

2-8. FSFN Documentation.

a. The child's behavioral health condition shall be recorded in the Medical/Mental Health section of the child's FSFN record. If the child has been clinically diagnosed with a specific disability, it should be recorded in the FSFN Disability tab. If the diagnosis changes or is determined by a clinical professional to no longer exist, it should be end-dated in FSFN.

b. The child welfare professional will scan the CBHA and any other professional evaluations received into the Medical and Mental Health section of the FSFN file cabinet.

c. The following FSFN resources are located on the [Center for Child Welfare](#) FSFN "How Do I Guide" page:

(1) "[Medical/Mental Health User Guide.](#)"

(2) "[File Cabinet User Guide.](#)"