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DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF CHILD AND FAMILY SERVICES
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MTL # 0215 – 02182022
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FROM: Dr. Domonique Rice, Deputy Administrator, Division of Child and Family Services

POLICY DISTRIBUTION

Enclosed find the following policy for distribution to all applicable staff within your organization:

0215 Qualified Residential Treatment Program Child Treatment Requirements

This policy is/was effective: 2/18/2022

- ☒ This policy is new. Please review the policy in its entirety
- ☐ This policy replaces the following policy(s): MTL # _____ - _____ Policy Name: _____
- ☒ This policy has been revised. Please see below for the type of revision:
- ☒ This is a significant policy revision. Please review this policy in its entirety.
 - Included IV-E eligibility information for FFSPA
 - ☐ This is a minor policy revision: (List page number & summary of change):
 - ☐ A policy form has been revised: (List form, page number and summary of change):

NOTE:

- Please read the policy in its entirety and note any areas that are additionally required by your agency to be in compliance with the policy enclosed.
- This is an **ALL STAFF MEMO** and it is the responsibility of the person listed above to disseminate the policy enclosed to appropriate staff within his/her organization and to ensure compliance.
- The most current version of this policy is posted on the DCFS Website at the following address:
<http://dcfs.nv.gov/Policies> Please check the table of contents on this page for the link to the chapter you are interested in.

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0215 Qualified Residential Treatment Program Child Treatment Requirements

Policy Approval Clearance Record

<input checked="" type="checkbox"/> Statewide Policy <input type="checkbox"/> Administrative Policy <input type="checkbox"/> DCFS Rural Region Policy	<input checked="" type="checkbox"/> New Policy <input type="checkbox"/> Modified Policy <input type="checkbox"/> This policy supersedes:
Date Policy Effective	02/18/20022
Attorney General Representative Review	
DCFS Deputy Administrator Review	01/18/2022
DMG Original Approval	10/1/2021
DMG Approved Review	02/08/2022

STATEMENT OF PURPOSE

Policy statement: A Qualified Residential Treatment Program (QRTP) is a new classification and national model of congregate care facility designed to provide treatment level care to children with mental and behavioral health needs. When a child is placed in a QRTP, an Agency must ensure certain requirements be met to comply with the Family First Prevention Services Act (FFPSA).

Policy purpose: This Policy provides instruction on the initial and ongoing requirements for admission of a child into a QRTP, including qualifications of a Qualified Individual (QI), training requirements for a QI, QRTP referral and assessment process, case planning and documentation requirements, QRTP Court Review and judicial determinations, ongoing QRTP admission requirements and post discharge requirements.

AUTHORITY

Federal: [Family First Prevention Services Act](#)

NRS: [NRS 424](#), [NRS 432B](#)

NAC: [NAC 424](#)

DEFINITIONS

Agency which Provides Child Welfare Services: A county whose population is less than 100,000, the agency is a local office of the Division of Child and Family Services; or in a county whose population is 100,000 or more, the agency of the county, which provides or arranges for necessary child welfare services. May also be referred to as "Agency" or Child Welfare Agency".

Administrator: The Administrator of the Division of Child and Family Services (DCFS).

CCDFS: Clark County Department of Family Services

Child Care Institution (CCI): Federally defined as a private child-care institution, or a public child care institution which accommodates no more than 25 children, which is licensed by the State in which it is situated or has been approved by the agency of the State responsible for licensing or approval of institutions of this type as meeting the standards established for the licensing.

DCFS: The Division of Child and Family Services of the Department of Health and Human Services of the State of Nevada.

Director: Child Welfare Agency Director in a county whose population is 100,000 or more.

Foster Family Home: The home of an individual or family

- a. That is licensed or approved by the agency in which it is situated as a foster family home that meets the standards established for the licensing or approval; and
- b. In which a child in foster care has been placed in the care of an individual, who resides with the child and who has been licensed or approved by the agency to be a foster parent;
 - i. That the agency deems the family foster home or individual is capable of adhering to the reasonable and prudent parent standard;
 - ii. That provides 24-hour substitute care for children placed away from their parents or other caretakers; and
 - iii. That provides the care for not more than six children in foster care.

Fiscal: The fiscal unit located within the Division of Child and Family Services.

Group Foster Home: A natural person, partnership, firm, corporation, or association who/that provides full-time care for 7 to 15 children who are: 1) Under 18 years of age or who remain under the jurisdiction of a court pursuant to NRS 432B.594; 2) Not related within the first degree of consanguinity or affinity to any natural person maintaining or operating the home; and 3) Received, cared for and maintained for compensation or otherwise, including the provision of permanent free care. Group foster homes are licensed by Child Welfare Agencies and can be referred to as "Group Home".

NAC: Nevada Administrative Code.

NRS: Nevada Revised Statutes (as enacted by the Nevada Legislature).

PEU: The DCFS Children's Mental Health Planning and Evaluation Unit.

Qualified Individual (QI): A licensed clinician or trained professional who conducts an assessment, using an age-appropriate, evidence-based, validated, functional assessment tool, of a child for appropriateness for placement into a QRTP.

Qualified Residential Treatment Program (QRTP): A specific category of a non-foster (resource) family home setting that is intended for children and youth with behavioral health challenges and that meets the federal definition of a Child Care Institution (CCI).

State: An alternate word for the Division of Child and Family Services (DCFS) or Family Programs Office (FPO).

Trauma Informed Care (TIC): A practice approach that is sensitive to a child's trauma history.

WCHSA: Washoe County Human Services Agency.

STANDARDS/PROCEDURES

1. "Qualified Individual" (QI)
 - a. A QI is a licensed clinician or trained professional who maintains objectivity with respect to determining the most effective and appropriate placement for a child while they conduct an assessment that determines the appropriateness of admission into a QRTP.
 - b. The QI may be an employee of the Nevada Department of Health and Human Services or Child Welfare Agency. The QI may not be an employee of or affiliated with a private placement provider for children in the care of a Child Welfare Agency.

- c. Each Agency will identify the professional(s) who will serve in the QI role. The Agency must maintain documentation that the identified professional(s) meet the professional qualifications for a QI which must be submitted annually to the Family Programs Office (FPO) for review and approval.
- d. The QI must meet the following professional qualifications:
 - i. Is a trained professional or licensed clinician. For instance, a QI may be a licensed social worker or trained child welfare worker.
 - ii. Has no direct case management responsibility, no professional association with placement providers, and will not make the treatment decision for the child under review to ensure objectivity.
 - iii. Will work in conjunction with the family of, and team for, the child.
 - iv. Has successfully completed QRTP QI training as evidenced by a certificate of completion.
- e. The QI must maintain current certification in the Division of Child and Family Services (DCFS) approved trauma-responsive, individualized, strengths-based functional assessment tool, that will be used to assess a child for admission to a QRTP.
- f. The QI must successfully complete the QRTP QI training as evidenced by a certificate of completion.
 - i. The QRTP QI training must include:
 - 1) Skill development related to the treatment referral and assessment process.
 - 2) Family and child engagement and family teaming practices.
 - 3) Assessment skills related to making a determination as to the intensity of services needed.
 - 4) Court process, review and oversight requirements.
 - 5) Service identification and service array.
 - 6) Specific training on area of program focus (e.g., substance use)

2. QRTP Referral and QI Assessment Process

- a. Decisions for children in need of the treatment intensity of a QRTP are determined through a comprehensive and collaborative assessment process completed by the QI in conjunction with the family of, and team for, the child.
 - i. Note, the child's team must consist of all appropriate biological family members, relative, and fictive kin of the child, as well as professionals (as appropriate) who are a resource to the family of the child, such as teachers, medical or mental health providers who have treated the child, or clergy. And, if the child is age 14 or older, the team must also include the members of the permanency planning team for the child that are selected by the child in accordance with the title IV-E case planning requirements.
- b. Each Agency must determine the process by which they will refer a child to a QI for QRTP evaluation. The assessment process must include:
 - i. Information and supporting documentation regarding the child's history and service needs must be provided to and reviewed by the QI.
 - ii. The QI must work in conjunction with the child's family and permanency team after review of the information and supporting documentation and while conducting and making the required 30-day assessment and ensuring team approval through the assessment.
 - iii. The QI and team must formally document its decision and supporting reasons for why the needs of a child cannot be met by placement in a family foster home. Documentation must include that a QRTP is the setting that will provide the most effective and appropriate intensity of treatment for the child in the least restrictive environment, the child should be placed in a QRTP, the QRTP will be consistent with the short- and long-term goals for the child, and reasons why the needs of the child cannot be met by the family of the child or in a family foster home, as specified in the permanency plan for the child.
 - 1) Note, a shortage or lack of family foster homes shall not be an acceptable reason for determining that the needs of a child cannot be met in a family foster home.
 - iv. In the event of a denial from the QI during the assessment process, the QI will provide resources and referrals to the family and team that reflect the ability of the child to be served in an individual family or home setting.

- c. This assessment and approval process for QRTP intensity of treatment must be completed prior to the child's admission to the QRTP and in cases where this is not possible, the assessment must be completed within 30 calendar days of the admission.
 - i. If the 30-day assessment is not completed and documented within the required timeframe, then the Agency shall not claim title IV-E foster care maintenance payments for the duration of the child's stay in that QRTP.
 - d. If the QI's assessment determines that the QRTP is not appropriate, or that the child is going to return home or achieve permanency through guardianship or adoption, then the Agency may claim Title IV-E foster care maintenance payments to transition the child from the QRTP to the next placement or permanent home for up to 30 days after the determination by the QI that the QRTP is no longer recommended or approved for the child.
 - e. For instances of cross jurisdictional cases, the licensing entity, and assistant director, and the program must approve the request prior to the placement. Some factors to consider when making a placement should include but are not limited to:
 - i. Current censuses and makeup of current placements.
 - ii. Is the program in good standing with the agency and have adequate staffing?
 - iii. The custodial agency is required to pay for all cost of care.
3. QRTP Case Plan Requirements
- a. For every child placed in a QRTP, the child's case plan shall document the following:
 - i. The child's short and long-term mental and behavioral health goals.
 - ii. Information about inclusion of the child's team, which include:
 - 1) The efforts made by the Agency to identify and include the child's family, caregivers, fictive kin, service providers, school professionals, and community supports on the child's team.
 - 2) Contact information for members of the child's family and team, and other family members and fictive kin who are not part of the team.
 - 3) If reunification is the child's permanency goal, evidence that the parent from whom the child was removed provided input on the members of the team.
 - 4) Evidence of meetings of the child's team and that the meetings are conducted at a time and place convenient for the family.
 - 5) Placement preference of the team relative to the required 30-day assessment that recognizes children should be placed with their siblings unless there is a finding by the court that such placement is contrary to their best interest.
 - 6) Evidence that the QRTP assessment is determined in conjunction with the family and permanency team.
 - 7) The reasons why the preferences of the team and of the child were not recommended (if the placement preferences of the family and permanency team and child are not the placement setting recommended by the QI).
 - iii. Evidence that the assessments of the child support a need for treatment in a QRTP.
 - iv. Any determination by a QI that the child should not be placed in a family foster home and the reasons why the needs of the child cannot be met by the family of the child, or in a family foster home.
 - v. Documentation of the Court's determination approving or denying placement in a QRTP.
 - b. Long Term QRTP Placement Case Plan Requirements
 - i. For every QRTP in which the child receives care for more than 12 consecutive months or 18 nonconsecutive months; or in the case of a child who has not attained the age of 13, for more than 6 consecutive or nonconsecutive months, the Agency must maintain the following additional documentation in the child's case plan:
 - 1) Evidence and documentation of information submitted at the most recent Semi-Annual Review or Permanency hearing demonstrating:
 - a) The assessments of the child support a need for continued treatment in a QRTP.
 - b) Documentation of treatment or service needs.
 - c) Evidence of Agency efforts to prepare the child to return home or to an appropriate alternative placement.

- d) Evidence of signed approval by the Director or Administrator of the Agency for the child to continue treatment in a QRTP.
 - i) This approval is required to claim foster care maintenance payments.

4. QRTP Court Review Requirements

- a. Within 60 days of placement into a QRTP, and at each Semi-Annual Review or Permanency hearing thereafter for as long as the child remains in the QRTP, the Agency will request the Court:
 - i. Consider the assessment, determination and documentation made by the QI
 - ii. Determine the safety of the child, and whether the needs of the child can be met through placement with their family or in a foster home, and, if not, whether continued treatment of the child in a QRTP provides the most effective and appropriate intensity of treatment for the child in the least restrictive environment.
 - iii. Consider whether a QRTP stay is consistent with the short and long-term goals for the child, as specified in the permanency plan for the child
 - 1) For the permanency plan of another planned permanency living arrangement (APPLA), determine the agency efforts to ensure the child's placement (family foster or CCI) is following the reasonable and prudent parent standard and ascertain the child has regular, ongoing opportunities to engage in age or developmentally appropriate activities.
 - iv. Determine the extent of progress made toward mitigating the causes for placement and project a likely date which the child may be returned and safely maintained at home or placed for adoption or legal guardianship; and
 - v. State, in writing, the reasons for the Court's decision to approve or disapprove the continued stay of the child in a QRTP.
 - 1) If the Court disapproves the QRTP continued stay, the child must be stepped up or down to a placement that is better able to address the child's needs within 30 calendar days of the Court's decision.
 - 2) The Agency may only claim Title IV-E foster care maintenance payments for up to 30 days after the determination is made by the Court that the QRTP stay is no longer recommended or approved for the child.
- b. At the hearing that occurs within 60 days of the start of each admission to a QRTP, and every 6 months at each Semi-Annual Review hearing or Permanency hearing thereafter for as long as the child remains in the QRTP, the Agency shall submit evidence of the following into the Court record:
 - i. Initial and/or Ongoing assessment documentation confirming that the child's strengths and needs cannot be met by their family or in a foster home setting, that the QRTP continues to provide the most appropriate intensity of treatment in the least restrictive environment for the child, and that the current QRTP setting is consistent with the short and long-term permanency goals for the child.
 - ii. Documentation confirming that the specific treatment or service needs that will be met for the child and length of time the child is expected to need the treatment or service.
 - iii. Documentation of the Agency's efforts to prepare the child and family for the child's return home or to be placed with a fit and willing relative, legal guardian, adoptive parent, or family foster home. For a child age 14 or older, include the services needed to assist the child to make the successful transition from foster care adulthood.
 - iv. For any child who is placed in a QRTP for more than 12 consecutive months or 18 nonconsecutive months (or, in the case of a child who has not attained age 13, for more than 6 consecutive or nonconsecutive months), the agency shall submit evidence and documentation specified at the permanency hearing and the signed approval by the Director or Administrator of the Agency for the child to continue treatment in a QRTP.

5. Ongoing QRTP Placement Requirements

- a. Within 30 days of the placement into a QRTP, the Agency, in collaboration with the child's team, convenes ongoing (no less than quarterly) meetings to assess strengths and needs of the child and monitor the child's continued progress and readiness for discharge.

- i. The Agency determines the composition and frequency of these meetings jointly with the family, treatment team, and child (unless clinically contra-indicated).
 - 1) The team must determine whether the needs of the child can be met through placement with their family or in a foster home, and, if not, whether continued treatment of the child in a QRTP provides the most effective and appropriate intensity of treatment for the child in the least restrictive environment;
 - 2) Consider whether a QRTP stay is consistent with the short and long-term permanency goals for the child, as specified in the permanency plan for the child; and if not, what strategies are needed to prepare the child for discharge from the QRTP.
 - 3) Develop a list of child-specific short and long-term mental and behavioral health goals.
 - b. Document this ongoing assessment in UNITY case notes, case note type "QRTP", specifically outlining the following information:
 - i. How the QRTP is meeting the child's needs.
 - ii. That the QRTP is the most appropriate and least restrictive setting.
 - iii. Explanation of any changes in the child's QRTP stay during the past 6 months and discussion about any anticipated changes in the child's QRTP stay in the next 6 months.
 - c. When a child is admitted to a QRTP setting for more than 12 consecutive months or 18 nonconsecutive months; or for a child who has not attained the age of 13, for more than 6 consecutive or nonconsecutive months, the Agency must submit to the Director or Administrator the most recent evidence and documentation supporting the continued need for treatment in a QRTP. The Agency Director or Administrator must review and approve the continued stay in a QRTP in writing, to be documented in the case plan as described in section 3 of this policy.
6. Discharge and Aftercare requirements
- a. The QRTP is required to provide discharge planning and family-based aftercare support for at least 6 months post-discharge, have ongoing contact with the child, attend ongoing Child and Family Team meetings and provide documentation of aftercare activities they provide to the Agency monthly, reference Policy QRTP Requirements and Oversight.
 - b. While the child remains in the custody of the Child Welfare Agency, the caseworker must:
 - i. Work with the QRTP to ensure the child and family is connected to community-based aftercare services and supports upon discharge from the QRTP and document efforts in UNITY.
 - ii. Participate and or facilitate ongoing Child and Family Team meetings occur for the child and include the QRTP for at least 6 months post discharge.
 - iii. Obtain documentation of all aftercare activities provided by the QRTP and document those activities in UNITY.

Documentation: This section outlines what documentation must be done in the case files and/or UNITY to be in compliance with the state policy.

Case File Documentation (paper)

File Location	Data Required
<ul style="list-style-type: none"> Location in primary file 	<ul style="list-style-type: none"> QI Assessment Treatment Plans Ongoing Treatment information

UNITY Documentation (electronic)

Applicable UNITY Screen	Data Required
Case Plan	Section 3. Case Plan Requirements
UNITY Case Notes	Section 2. QI Assessment and Referral Process Section 5. Ongoing QRTP Placement Requirements

JURISDICTIONAL ACTION

Development of Internal Policies: Agencies which provide child welfare services will follow this statewide collaborative policy as written.

Agencies which provide child welfare services must develop internal policies and procedures for the QI Documentation and QI Assessment and Referral Process to implement this policy.

Internal policies and/or operating procedures must be submitted to the Family Programs Office (FPO) for review and approval. The QI documentation will be submitted annually to the Family Programs Office for review and approval.

Supervisory Responsibility: Supervisors have the responsibility to consult and provide assistance to staff to ensure policy compliance.

STATE RESPONSIBILITIES

The state will provide technical assistance regarding program development and implementation to the Child Welfare Agencies. The state will review and approve policies and procedures described above.

POLICY CROSS REFERENCE

Policies: N/A

History and Updates: This is a new policy.

ATTACHMENTS

N/A