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Director



DEPARTMENT OF HEALTH AND HUMAN SERVICES

DIVISION OF CHILD AND FAMILY SERVICES
Helping people. It's who we are and what we do.



Ross Armstrong
Administrator

INSTRUCTIONAL MEMORANDUM

DATE: August 19, 2021

TO: Timothy Burch, Director, Clark County Director of Family Services
Amber Howell, Director, Washoe County Human Services Agency
Betsey Crumrine, Social Services Manager V, Division of Child and Family Services

FROM: Ross Armstrong, Administrator, Division of Child and Family Services

A handwritten signature in blue ink, appearing to read "Ross Armstrong".

SUBJECT: NRS 424.043 no longer in effect as of July 1, 2021

LEGAL REFERENCES: NRS 424.042 – 424.043

PURPOSE: This Instructional Memorandum is to provide information and instruction regarding the sunseting of NRS 424.043, which changes data collection requirements for youth in Specialized Foster Care.

Previously, child welfare agencies and specialized foster care providers were required to provide certain data and clinical assessments to the State of Nevada Division of Child and Family Services (DCFS) to facilitate compliance with NRS 424.043, which required the State of Nevada to submit an annual report to the Governor and the Legislative Council Bureau regarding the placement, care of, and services provided to children in specialized foster care. This requirement ended on June 30, 2021.

NRS 424.043 Division to prepare report concerning placement of children in specialized foster homes and provision of services to children placed in such homes. [Effective through June 30, 2021.]

As of July 1, 2021, DCFS will no longer require certain data and clinical assessments to be submitted to us or to otherwise be made available. However, DCFS will still be responsible for periodically reviewing placement of children in specialized foster homes in accordance with NRS 424.042. In these instances, the Division must be able to access demographics, clinical evaluations, case files, and any other information determined to be relevant in order to review placement and to ensure that youth are receiving the care and services that they need. Therefore, child welfare agencies and specialized foster care providers must still adhere to the evidence-based model (Together Facing the Challenge) and must make available upon request any documentation that will demonstrate that the needs of youth in the specialized foster care system are being met.

Please see table below for guidance on what will and will not be required ongoing (i.e., “SB107 requirements”).

No Longer Required	Still Required
<ul style="list-style-type: none"> ✗ Tracking of educational status and legal status *Please note: Although no longer required by DCFS, it is recommended to continue documentation of educational progress and legal status as a best practice 	<ul style="list-style-type: none"> ✓ Tracking of demographic information needed for routine care (e.g., demographics, placements, hospitalizations, medications)
<ul style="list-style-type: none"> ✗ Caregiver Strain Questionnaire 	<ul style="list-style-type: none"> ✓ Documentation of mental/behavioral health diagnosis and SED status
<ul style="list-style-type: none"> ✗ Child PTSD Symptom scale (CPSS) 	<ul style="list-style-type: none"> ✓ Caregiver/youth satisfaction surveys
<ul style="list-style-type: none"> ✗ Child and Adolescent Needs and Strengths Tool (NV-CANS) *Please see below 	<ul style="list-style-type: none"> ✓ Use of Together Facing the Challenge or other nationally recognized treatment foster care model delivered to fidelity including agency certification and recertification ✓ 100% of one month’s TFTC fidelity monitoring tools submitted annually

The NV-CANS is no longer required. However, in order to ensure uninterrupted coordination of care for specialized foster care youth, who typically have multi-system needs, it is strongly recommended that agencies and providers maintain current policies around completion of and updates to the NV-CANS. Any referral to a DCFS program for a specialized foster care youth, including referrals to higher level of care programs, will need to include a current, updated NV-CANS completed by a certified rater.