

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY	
	Chapter 11: Older Youth Services	Effective Date: December 2, 2015
	Section 21: Collaborative Care (CC) Case Transfers	Version: 4

STATEMENTS OF PURPOSE

The Department of Child Services (DCS) will ensure that all youth age 16 years and older with a Permanency Plan of Another Planned Permanency Living Arrangement (APPLA) **only**, who plan to either voluntarily enter Collaborative Care (CC) or remain under a Child in Need of Services (CHINS) case, have their case transferred to a Collaborative Care Case Manager (3CM) to support their transition to successful adulthood. The 3CM will manage the case until case closure.

DCS will engage the youth to determine the best path for the youth based on the youth's direction and voice. The youth may request to do one (1) of the following upon turning 18:

1. Remain under the care and supervision of DCS through the CHINS case;
2. Enter CC under the care and supervision of DCS; or
3. Request that his or her CHINS case be dismissed and enter into Voluntary Older Youth Services (OYS).

Note: Probation youth 18 and over with an open Juvenile Delinquency (JD) case **may be able to** receive CC services. See separate policy, [11.20 Youth Adjudicated as Juvenile Delinquents Accessing Collaborative Care](#).

DCS will ensure the Child and Family Team (CFT), including the Court Appointed Special Advocate/Guardian ad Litem (CASA/GAL), support and approve a decision to change a youth's case plan goal to APPLA. The Regional Permanency Team (including a member of OYS) must also review and approve the decision to change the Permanency Plan to APPLA. The request to change the Permanency Plan to APPLA must then be approved by the Regional Manager (RM) and the court.

Continuity of care will continue when transferring a case from the FCM to the 3CM by conducting a transition meeting that includes the FCM, 3CM, the youth, the youth's child representatives, and any other relevant persons. The transition meeting can be held during a CFT meeting or concurrently with the youth's Transition Plan for Successful Adulthood meeting that occurs every six (6) months beginning at the age of 14. See separate policy, [11.06 Transition Plan for Successful Adulthood](#).

Code References

1. [IC 31-28-5.8-7: Periodic reviews by court: notice: participation: orders](#)
2. [IC 31-9-2-13: "Child"](#)

PROCEDURE

For youth age 16 or older, the FCM will:

1. Staff the case with his or her FCM Supervisor to determine if the youth's case plan goal should change to APPLA and if the case should transfer to a 3CM;
2. Complete a CFT to ensure the team, including the CASA/GAL, supports and approves of the decision to change the case plan goal to APPLA prior to transferring the case to a 3CM;
3. Request that the Regional Permanency Team (including a member of OYS) reviews and approves of the decision to change the Permanency Plan to APPLA. A Permanency Plan of APPLA must then be approved by the Regional Manager (see separate policy, [11.06 Transition Plan for Successful Adulthood](#));
4. Seek court approval of the case plan goal change;
5. Ensure all case information is entered into the case management system and is up-to-date (see related information);
6. Document the following in the case file:
 - a. Court reports (e.g., if the court hearing is within 30 calendar days of the transfer, the FCM is responsible for this report, unless negotiated otherwise at the transition meeting),
 - b. Court notices,
 - c. The [Transition Plan for Successful Adulthood \(SF 55166\)](#), and
 - d. Completed [Collaborative Care Case Transfer Checklist \(SF 56107\)](#).
7. Schedule a transition CFT Meeting and invite all identified necessary participants (e.g., youth, youth's child representatives, informal supports, substitute caregivers or resource parents, and Older Youth Service Providers, etc.) within 15 calendar days of the case transfer;
8. Document the notification of all parties within contacts in the case management system; and
9. Notify the DCS Staff Attorney and the youth's CASA or GAL of the case transfer, if applicable.

Note: Prior to selecting APPLA as a case plan goal and transitioning a youth at age 16, it is critical to ensure other viable Permanency Plan options (i.e., reunification, adoption, or guardianship) have been considered and actively pursued.

The FCM Supervisor will:

1. Ensure that the FCM continues to be responsible for attending all court hearings and monitoring the youth's safety, stability, and well-being until the case is transferred to a 3CM;
2. Ensure the youth's pertinent information is up-to-date in the case management system prior to the case transfer; and
3. Work with the 3CM Supervisor and FCM to ensure that any missing or incomplete information from the youth's electronic or hard copy file is completed.

The 3CM Supervisor will:

1. Identify and assign the case to a 3CM in the case management system within 48 hours of the case transfer meeting;
2. Ensure the case management system has all pertinent information and is up-to-date upon case transfer; and

Note: If information is incomplete or missing, it is the 3CM Supervisor's responsibility to work with the FCM Supervisor to ensure the youth's former FCM completes the data input/updates.

3. Ensure the 3CM receives the hard copy case file from the youth's FCM within 48 hours of the case transfer meeting.

The 3CM will:

1. Attend the transition meetings;
2. Thoroughly review the case file in the case management system;
3. Thoroughly review the hard copy case file;
4. Ensure continuity of services, particularly those services that are related to the youth's physical and mental health and well-being including, but not limited to:
 - a. Psychiatric treatment and care,
 - b. Treatment and care for a chronic medical condition,
 - c. Education, employment, and financial literacy,
 - d. Establishing a primary health care provider, dentist, ophthalmologist, gynecologist (if applicable), etc.,
 - e. Therapeutic treatment and care, and
 - f. Continuation of service referrals through DCS.
5. Ensure the youth does not lose contact with any siblings by adhering to the established visitation plan. If a visitation plan has not been created or is out of date, the 3CM will ensure that the visitation plan is completed; and
6. Ensure that the youth does not lose contact with family members and other informal supports due to the case transfer.

PRACTICE GUIDANCE

Preparing a Youth for Case Transfer

In any case transfer, ensuring a youth's safety is given the highest priority. The best way to ensure safety is to maintain consistency with services for the youth. At the Transition Plan for Successful Adulthood meeting, the youth and the 3CM may begin to identify formal and informal supports in his or her community. Immediately after transferring a case, a youth may need a higher level of support from the 3CM because he or she will be adjusting to his or her surroundings and may not have access to the same services and/or formal and informal support systems as before.

Placement Disruption

When a case is transferred, the placement of the youth is not expected to be disrupted unless all parties agree that it would be in the best interest of the youth.

FORMS AND TOOLS

1. [Transition Plan for Successful Adulthood \(SF 55166\)](#)
2. [Collaborative Care Case Transfer Checklist \(SF 56107\)](#)
3. [Collaborative Care Supervisor Map](#)

RELATED INFORMATION

Transfer Meetings

If possible, transfer meetings may take place during the youth's Transition Plan for Successful Adulthood meeting. The FCM, 3CM (or a supervisor/delegate), and the youth's child representatives should be present at the transfer meeting.

Examples of information that should be shared and discussed at the transfer meeting include, but are not limited to:

1. The youth's individual strengths and needs;
2. The youth's education, employment, and financial literacy;
3. Needs that may arise in the near future, especially with the case transfer;
4. What supports are currently in place to support those needs;
5. What support will need to be in place after the case transfer;
6. Review and update of the youth's [Transition Plan for Successful Adulthood \(SF 55166\)](#);
7. The expectations of the next steps for the case;
8. Formal and informal supports for the youth that will be utilized after case transfer;
9. Steps to address what could go wrong with any plans that are created; and
10. Visitation arrangements, as applicable.

Case File

Prior to transferring the hard case file or the case in the case management system, the FCM is responsible for ensuring that all information is current and accurate. The originating county is not required to keep a copy of the case file. The data entry must be complete for each of the following:

1. Hearings;
2. Placements;
3. Services;
4. Visitation Plan (if applicable);
5. Case Plan;
6. [Transition Plan for Successful Adulthood \(SF 55166\)](#);
7. Demographic information;
8. Information entered in the National Youth in Transition Database (NYTD) (e.g., education, services, and survey);
9. Contacts;
10. School information and other related education information (e.g., Individualized Education Program);
11. Medicaid Number;
12. Health Information (e.g., medical and dental health issues and current treatment);
13. Indiana Support Enforcement Tracking System (ISETS) interface, if appropriate;
14. Court Reports and Orders;
15. Notices;
16. Mental Health Screen;
17. Medical Passport (including immunization records); and
18. Other information not included in the above list that is:
 - a. Specific to the youth's individual circumstances; and
 - b. Pertinent to the continuity of the youth's services and case.

Contacting Older Youth Initiatives Team

The [Collaborative Care Supervisor Map](#) may be utilized to contact a member of the Older Youth Initiatives Team (3CM Supervisor).

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