



INDIANA DEPARTMENT OF CHILD SERVICES	
CHILD WELFARE POLICY	
Chapter 8: Out-of-Home Services	
Section 37: Holding a Placement During a Hospitalization	
Effective Date: May 1, 2023	Version: 9

- [Procedure definitions](#)
- [Forms and Tools](#)
- [Legal References](#)
- [Related Policies](#)
- [Practice Guidance](#)

POLICY OVERVIEW

When a child in out-of-home care is hospitalized, efforts are made to maintain the child's current placement to promote stability for the child and continuity of care.

[Back to Top](#)

PROCEDURE

The Indiana Department of Child Services (DCS) will continue to make foster care payments to a resource parent or residential treatment facility for a maximum of five (5) consecutive days when a child in out-of-home care enters a hospital if the intent is for the child to return to the same resource parent or residential treatment facility. A bed hold will end prior to five (5) consecutive days if there is no intent for the child to return to the resource home or residential treatment facility.

When a child is hospitalized for more than five (5) consecutive days and the resource parent maintains care of the child (as evidenced by continued participation in the youth’s treatment and care) DCS may, upon approval of the Regional Manager (RM), make a determination to pay either:

1. Per diem and travel expenses exceeding 162 miles in a month; or
2. Travel expenses only starting at mile one (1).

The Family Case Manager (FCM) will:

1. Engage the Child and Family Team (CFT) to determine if it is appropriate for the child to return to the same resource home or residential treatment facility when the child is released from the hospital. See policy 5.07 Child and Family Team Meetings for additional information;
2. Engage the CFT to discuss any possible changes to the current placement and/or the second permanency plan if concurrent planning. For further guidance, see policy 5.15 Concurrent Planning;
3. Encourage the resource parent to have frequent face-to-face contact with the child during the hospitalization;
4. Ensure the resource parent will have all of the necessary resources and support systems in place upon the child’s return to the home (e.g., counseling services and medical equipment);
5. Submit a Request for Additional Funding form to the RM for per diem and/or travel expenses, if a resource parent travels and maintains visits, including overnight stays, with a child who is hospitalized for longer than five (5) consecutive days; and

6. Document all decisions and actions taken for the steps above in the case management system.

The RM will approve or deny the Request for Additional Funding form for per diem and/or travel submitted by the FCM for a resource parent who maintains visits, including overnight stays, with a child who is hospitalized longer than five (5) consecutive days.

Note: When per diem is approved to be paid for the resource parent, only travel exceeding 162 miles in a month may be approved for payment.

DCS will **only** pay a Licensed Child Placing Agency (LCPA) per diem in excess of five (5) consecutive days for a bed hold when a child is hospitalized if the extension has been approved in writing by the Deputy Director of Child Welfare Services.

Note: An LCPA must seek approval from the Deputy Director of Child Welfare Services when requesting per diem for a child who is hospitalized in excess of five (5) consecutive days.

DCS will not pay for a five (5) day bed hold if the child is receiving residential treatment or placed in a setting other than a hospital (e.g., detention center, emergency shelter care facility, residential facility) unless a Request for Additional Funding (RAF) is approved.

The Deputy Director of Child Welfare Services will approve or deny a request from an LCPA for per diem of a child who is hospitalized in excess of five (5) consecutive days.

[Back to Top](#)

RELEVANT INFORMATION

Definitions

N/A

Forms and Tools

- [Request for Additional Funding \(SF 54870\)](#)

Related Policies

- [5.07 Child and Family Team Meetings](#)
- [5.15 Concurrent Planning](#)

[Back to Top](#)

LEGAL REFERENCES

N/A

[Back to Top](#)

PRACTICE GUIDANCE – DCS POLICY 8.37

Practice Guidance is designed to assist DCS staff with thoughtful and practical direction on how to effectively integrate tools and social work practice into daily case management in an effort to achieve positive family and child outcomes. Practice Guidance is separate from Policy.

N/A

[Back to Top](#)