



## Tennessee Department of Children's Services

# Case Intake Packet Documents and Native American Heritage Verification

Date	Electronic Record System Case ID	County	Case Worker

### Native American Heritage Veto/Verification

Native American/Tribal Affiliation includes:

- An Indian child under the age of 18;
- A member of an Indian tribe;
- Eligible for membership in an Indian tribe; or
- The biological child of a member of an Indian tribe.

Child Name	DOB	Race	Hispanic Origin	Child is <b>NOT</b> Native American or affiliated with a tribe	Is Native American or has Tribal Affiliation
				<input type="checkbox"/>	<input type="checkbox"/> with:
				<input type="checkbox"/>	<input type="checkbox"/> with:
				<input type="checkbox"/>	<input type="checkbox"/> with:
				<input type="checkbox"/>	<input type="checkbox"/> with:
				<input type="checkbox"/>	<input type="checkbox"/> with:

Note: If the family reports having Native American heritage, form letter [Confirmation of Native American Heritage](#) must be completed to capture tribal information. Form letter [Determination of Tribal Affiliation](#) must be completed if it is believed or confirmed that the child or parents are Native American, but the tribe or registration information is not known as outlined in DCS policy [16.24, Children of Native American Heritage](#).

Mother/ Caregiver Initials	Father/ Caregiver Initials	Youth Initials	Name of Document
			<b>Client's Rights Handbook</b> I have reviewed the required documents and was provided the opportunity to ask questions. I was made aware of the form in other languages. A copy was provided for my records.
			<b>Notification of Equal Access to Programs and Services and Grievance Procedures, CS-0158</b> I have read the above procedure of how to file a Title VI complaint. This procedure was explained to me in detail and a copy was issued to me for my records. I was advised that this form is available in other languages.
			<b>Notice of Privacy Practices, CS-0699</b> , which describes how DCS may use my health information, my rights to privacy regarding my health information, and how I can exercise those rights.
			<b>Independent Living Youth Handbook/A Guide for Teens in Foster Care</b> (For youth ages 14 and older who are in state custody) *Must be printed/separate from packet
			<b>Authorization for Release of Information to the Department of Children's Services: TennCare Eligibility and Authorization for the Department of Children's Services to Release Information to TennCare, CS-0789</b>

By providing my initials and signature below, I acknowledge that I received the following paperwork, the case worker has reviewed the paperwork with me, I verify that the information I provided regarding Native American Heritage is correct and I had the opportunity to review and ask questions.

_____ Parent/Caregiver Signature	_____ Date	_____ Parent/Caregiver Signature	_____ Date
_____ Youth over age 14 Signature	_____ Date	_____ Witness	_____ Date

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval. Distribution:  
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RDA 11016



# Client's Rights Handbook

Tennessee Department of Children's Services | Policy | February 2025



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# A Note About this Handbook

The information inside this handbook is very important. It spells out how the Department of Children's Services (DCS) process works in Tennessee. It describes what happens when DCS gets called, what we will seek to do, and how we work to keep a child/youth's best interests at heart.

We know that this process can be very hard on children/youth and on families, but we also know that when we remember to do what is best for children/youth, we are often very successful in making this a positive turning point in a child/youth's life.

DCS works closely with the courts; there are specific laws that describe how we do what we do. For many people, these laws and procedures are long and confusing. This handbook is designed to help you better understand those laws and procedures.

DCS staff will work with clients and families to accommodate special needs as listed below, including but not limited to:

- ◆ Providing bilingual personnel or translators and arranging for the use of communication technology;
- ◆ Accommodating sign language needs;
- ◆ Providing for the needs of hearing-impaired clients and persons;
- ◆ Providing communication assistance for persons with special needs who have difficulty making their service needs known, and
- ◆ Accommodating all literacy levels of clients and family.

A Case Manager will review all of these rights and expectations with you in person and will be happy to go back over it with you if you wish. If you require any special accommodations as listed above, please let the Case Manager know your specific needs.

Working with DCS can be a stressful and challenging time for a family. While DCS understands family members may become emotional, clients and visitors will not harass, become violent, or threaten violence towards a DCS employee or other persons. If DCS personnel or other persons feel threatened, meetings or visitations may be ended and local law enforcement may be contacted to maintain everyone's safety.

Many families find it useful to have all of the information they need in writing so they can review it later. If you need help understanding anything here, please ask for help. You may want to ask your lawyer or someone you trust to review the information in this handbook with you.

## Contact Information

DCS Staff	Name	Telephone Number
DCS Case Manager		
Team Leader/Lead Investigator		
Team Coordinator/Investigations		
Regional Director/Regional Investigations Director		

**DCS hours of operation are 8:00 a.m. – 4:30 p.m. If you have an emergency after hours, please contact:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_

**The Tennessee Child Abuse Hotline, 1-877-237-0004**, is available twenty-four (24) hours per day, five (5) days per week. On weekends, the online reporting system should be used at <https://apps.tn.gov/carat/>.

## Rights and Responsibilities

### ***You and Your Child/Youth Have the Right to:***

- ◆ Available services, regardless of your age, race, ethnicity, gender, religious or political affiliation, sexual orientation, sexual identity, physical or mental disability, or infectious disease, and the right to referral, as appropriate, to other service providers.
- ◆ Competent professional services, including an individualized written treatment or service plan, services based on the plan, periodic review and assessment of needs, and revisions to the plan including a description of services that may be needed for follow-up.
- ◆ Ongoing participation in the planning of services and in the development and periodic revision of the treatment or service plan, including the right to an explanation of all aspects of one's own condition and treatment.
- ◆ Refuse services and/or treatment in accordance with state and federal laws.
- ◆ Appeal adverse actions (delays, denials, reductions, suspensions, or terminations) of TennCare services (if you are TennCare eligible).
- ◆ Services and treatment under conditions that support your personal liberty and restrict such liberty only as necessary to comply with treatment needs and/or to ensure the safety of you, your family, or other persons.

- ◆ Confidentiality of your records and protected health information.
- ◆ Review, upon request, your own records.
- ◆ Practice the religion of your/his or her choice within reason and opportunities will be provided to do so.
- ◆ Information regarding client's rights including a copy of this document and/or an explanation of client's rights in a language of your choice, to the extent possible.
- ◆ Consult with your attorney or seek assistance from the Tennessee Commission on Children and Youth's (TCCY) Ombudsman Program.
- ◆ Assert complaints with respect to infringement of these rights, including the right to have such complaints considered in a fair, timely and impartial procedure. You may lodge complaints with the DCS Customer Relations Unit at 1-800-861-1935 Monday through Friday between the hours of 8:00 a.m. – 4:00 p.m. CST, or by email at: [dcscustsrv@tn.gov](mailto:dcscustsrv@tn.gov), for routing to the correct office for response.

### ***Your Responsibilities are to:***

- ◆ Provide all relevant information to DCS.
- ◆ Inform your Case Manager and court, if applicable, of any special needs. This includes current or chronic health conditions, information about school and education, and any family customs or cultural practices important to your family or your child/youth.
- ◆ Attend all Court hearings and team meetings.
- ◆ Cooperate with your Case Manager.
- ◆ Participate in developing your child/youth's permanency plan.
- ◆ Participate in the services that are offered and work on your child/youth's permanency plan, including all activities and services the court may order you and other family members to complete.
- ◆ Attend health and medical appointments with your child/youth when feasible, consent to medical treatment for your child/youth, attend family therapy when prescribed, and participate in your child/youth's treatment plan.
- ◆ Stay in touch with your Case Manager and be sure that the Case Manager always has your current address and telephone number.
- ◆ Provide your child/youth's Case Manager with information about your progress towards the goals stated in your child/youth's permanency plan and any changes in your life.
- ◆ Visit and communicate with your child/youth as agreed upon.
- ◆ Communicate any concerns that you have to the Case Manager or to your lawyer.
- ◆ Pay child support if applicable.

### ***Case Manager's Responsibilities:***

- ◆ Contact you for more information and to ask you some questions.
- ◆ Visit you and your child/youth regularly.
- ◆ Help you understand the problems that brought you and your child/youth to court.
- ◆ Schedule a Child and Family Team Meeting (CFTM) to develop a plan which lists the steps you must take to have your child/youth returned to you. This meeting should happen within thirty (30) days after your child/youth is removed from you.
- ◆ Assist you in obtaining the services that are listed in the permanency plan. This is called **"reasonable efforts."** Reasonable efforts may include assisting you in obtaining counseling, parenting classes, transportation and/or other services that are necessary.
- ◆ Inform you of health and medical appointments and assist with attendance and transportation when feasible.

## **Resolution of Grievances**

If you are dissatisfied with an action taken by DCS you should discuss the situation with your Case Manager. If the action is one taken by DCS pursuant to a court order or one which is the subject of pending judicial proceedings, DCS is obligated to follow the court's decision and cannot change the decision without going back to court. In such a situation, you should contact your attorney to discuss your concerns.

Grievances should first be addressed through the Child and Family Team Meeting (CFTM) process. If the issue cannot be resolved through a CFTM, you can contact the DCS Customer Relations Hotline:

- ◆ By e-mail at: [dcscustsrv@tn.gov](mailto:dcscustsrv@tn.gov),
- ◆ By phone at 1-800-861-1935, or
- ◆ By mail at Department of Children's

Services DCS Customer Relations:

**UBS Building Nashville**

**315 Deaderick St. 7<sup>th</sup>**

**Floor Nashville, TN**

**37243**

A customer relations representative who has not been involved in your case can review your case and help work through grievances.



# Indian Child Welfare Act (ICWA)

Indian tribes have jurisdiction over Indian child/youth custody proceedings. If your child/youth is either (a) a member of an Indian tribe, or (b) is eligible for membership in an Indian tribe and is the biological child/youth of a member of an Indian tribe, you must inform your DCS Case Manager.

## Confidential Child Specific Information

All information created or collected, directly or indirectly, in any medium, which identifies you and/or your child/youth, shall be kept confidential in order to protect your privacy, and will not be shared except as provided for by law. Child/youth case files and related information are official records which have been designated as confidential by law.

Photographs, audio, and video recordings of children/youth that will be utilized for social media or research purposes require written parental consent. Written consent can be obtained by completing form [0559, Authorization of Release of Information and HIPPA PI To or From DCS and Notification of Release](#) and selecting the “other” option. Written consent is not required for active child abuse/neglect investigations ([Tenn. Code Ann. § 37-1-406](#)).

## Equal Access to Programs

You will receive notification of your right to equal access to services ([CS-0158, Notification of Equal Access to Programs and Services and Grievance Procedures](#)) and will be asked to sign a form indicating you received that notification. If you do not receive notification of your right to equal access, please notify your Case Manager.

## Child Abuse Hotline

At the Tennessee Department of Children’s Services, we are serious about keeping kids safe.

*To report child abuse or neglect in Tennessee, call the state **Child Abuse Hotline at 877-237-0004**. Reports can also be made online through a form found on our secure site (<https://apps.tn.gov/carat/>).*

Our experienced staff members will guide Hotline callers through a series of questions. It’s okay if callers don’t know all of the details. The staff uses the information you provide to determine the severity of the situation and how best to intervene.

## Abuse and Neglect Allegations

The Department utilizes a Multiple Response System for allegations of child abuse and neglect. This approach assists the Department in:



- ◆ ensuring children/youth are safe;
- ◆ working in partnership with parents/guardians to identify the family's strengths and needs; and
- ◆ asserting that families are the experts at solving their own problems.

The Multiple Response System begins when the Department receives an allegation of child abuse or neglect through the Child Abuse Hotline. Allegations may be received by way of telephone, fax, web, or in-person. The Child Abuse Hotline guides concerned citizens through the referral process, gathering important information to assist in making a determination regarding DCS involvement. Possible levels of involvement include connecting families to resources, opening an assessment case, or opening an investigation.

## What to Expect During a Child Protective Services Case

A Child Protection Services Case Manager will be assigned to investigate the allegation(s) if the allegation meets criteria for assignment of an investigation or assessment case. This Case Manager will inform you of your rights and responsibilities, the allegation(s) being investigated, and an outline of the investigative process. This process may involve the assistance of Child Advocacy Centers, Law Enforcement, Medical Personnel, Juvenile Court, and/or Prosecutors to ensure the safety and wellbeing of your child/youth.

If the case meets certain criteria, the Case Manager will hold an initial interview with your child/youth to determine his or her immediate safety. This interview will take place away from the alleged perpetrator either at home, school, or in another safe location. Your consent is not required for an interview to take place.

During the initial interview for an investigation case, the Case Manager may identify the need for a:

- ◆ Forensic Interview- a second interview which takes place at a Child Advocacy Center.
- ◆ Medical evaluation to assess any injuries.
- ◆ Mental health evaluation.

If any of the above services are needed, the Case Manager will accompany your child/youth to that interview or evaluation(s) or follow up with you to ensure completion of the interview or evaluation(s). The Case Manager will consult with a DCS attorney to determine how to proceed if any of the above services are refused. Refusal to participate in any of the above services could lead to court involvement.

If, during the investigation or assessment case, the Case Manager determines there is no immediate risk of harm, your family may be offered services before the closure of the case. However, if the Case Manager determines there is an immediate risk of harm to your child/youth, the investigator may:

- ◆ Engage you in a voluntary Immediate Protection Agreement, placing the child/youth

with a temporary caregiver; or

- ◆ Remove the child/youth into the Department's custody.

If the Case Manager engages you in a voluntary Immediate Protection Agreement, you and the Case Manager will agree to who the temporary caregiver is and where the caregiver(s) and/or child/youth will reside and any restrictions involving contact with the caregiver or others. In addition to these agreements, a Family Permanency Plan will be developed. The Family Permanency Plan outlines the actions to be completed by the child/youth, caregiver(s), and/or the Case Manager prior to the child/youth returning home and/or the closing of the investigation.

In addition to interviewing your child/youth and determining their immediate safety needs, the Case Manager will:

- ◆ Interview the alleged perpetrator;
- ◆ Interview anyone who may be able to provide additional information about the allegations;
- ◆ Interview you and other caregivers in the home;
- ◆ Interview siblings, if applicable;
- ◆ Make a visit to your home; and
- ◆ Make a visit to the location where the alleged abuse or neglect occurred if it differs from the family's residence.

After all interviews are conducted and other evidence is collected, the Case Manager will evaluate the information and make a determination to classify the case.

For cases assigned as an investigation case, there will be a classification determination to substantiate or unsubstantiate the allegations. A classification of substantiated means there was enough evidence to say the child/youth was abused or neglected. If the classification is unsubstantiated, this means there was not enough evidence to say the child/youth was abused or neglected.

For cases assigned as an assessment case, the Case Manager will evaluate the information and make a determination to classify the allegations as 1) No Services Needed, 2) Services Recommended or 3) Services Required. A classification of Services Required means there was enough evidence to say the child/youth was at risk. At this point, the family must comply with services, or the Department can seek a court order to ensure the services are completed. If the services were recommended, then the family can choose whether or not they wish to accept services and support from DCS.

If during the case, the Case Manager determines there is no immediate risk of harm, but that services may benefit your family before the closure of the case, the Case Manager will work with you and your family to identify the supports and services needed to eliminate the concerns and potential safety risks to your child/youth.

# Appeal Rights

For CPS investigation cases, if the alleged perpetrator is substantiated, he or she will receive a letter notifying him or her of the substantiation and his or her appeal rights. The alleged perpetrator has the right to request a review of the substantiation by the DCS Commissioner or designee. This review will determine if the investigation was properly classified. Written notice of the request for review must be received by the Commissioner, or designee, within twenty (20) business days of the date noted on the letter.

# Non-Custodial Interventions

## ***Family Crisis Intervention Program (FCIP) and Family Support Services (FSS)***

A **Family Crisis Intervention Program** (FCIP) is a brief intervention with families who have unruly children/youth at risk for state custody. The intervention is designed to help the family and child/youth through the present crisis period so they can access less intrusive community services without requiring further court intervention and/or custodial care from the Department of Children's Services.

A **Family Support Services** (FSS) case is one that is transferred to a Case Manager with the goal of addressing identified family needs to minimize risk to the child/youth.

In addition, the court may issue an Order of Referral compelling the Department's assessment of a family's circumstances.

Safe Baby Court (SBC) is a specialized court docket that uses a collaborative, multi-disciplinary approach to dependency and neglect cases for families with at least one child aged zero through three. For SBC cases, there is a dedicated SBC coordinator; more frequent court hearings and CFTMs; and a special focus on the mental health and development of infants and toddlers. SBC works to get children to permanency faster. Not every county in Tennessee has a SBC, and there is no right to participate in SBC.

# Juvenile Probation

Juvenile probation is court-ordered and includes supervision of the youth and treatment services to address the problems the youth is encountering. Probation may be used at the "front end" of the juvenile justice system for first-time, low-risk offenders or at the "back end" as an alternative to institutional confinement for more serious offenders. In some cases, probation may be voluntary where the youth agrees to comply with a period of informal probation in lieu of formal adjudication. More often, once adjudicated and formally ordered to a term of probation, the juvenile must submit to the probation conditions established by the court. Youth on probation can expect to follow a curfew, submit to announced and unannounced home and school visits from the Case Manager, and submit to random drug screening when applicable.

# If Your Child/Youth Enters DCS Custody

There are three (3) main ways a child/youth may enter or be committed to state custody. At these times, a child/youth is placed into the legal and physical custody of DCS:

- ◆ If the child/youth is found to be **dependent** and **neglected**;
- ◆ If the child/youth is found to be **delinquent**, also referred to as a juvenile justice child/youth who has been found by the court to have committed an offense which would be considered a crime if it had been committed by an adult; or
- ◆ The child/youth is **unruly**, which refers to a child/youth who is in need of treatment or rehabilitation, habitually, and without justification, is truant from school, is habitually disobedient to the degree that his or her health and safety is endangered, and/or is a runaway.

In limited circumstances, children/youth may also enter state custody through Voluntary Placement Agreements between the Parents/Guardians and DCS. The protocols set out here apply to all children/youth committed to DCS, no matter their committal status.

When a child/youth enters DCS's physical custody, restrictive behavior management (handcuffs and/or leg shackles) may be used if necessary. Each child/youth is assessed based on risk to the community, risk to self, legal charges, and history of running away. Parents/Guardians assist with the assessment by participating in the development of a crisis plan where they are asked to share the child/youth's triggers and/or any positive techniques that help in de-escalating the youth. If restrictive behavior management is used, parents/guardians will be notified and debriefed within 24-hours.

If your child/youth has been committed to the Department, DCS will be completing various assessments with your child/youth to identify the areas that the child/youth and the family need to address in order to obtain permanency for your child/youth. DCS honors your role as parent/guardian and will make every effort to involve you in the decision-making process involving the care of your child/youth. You can expect the following to occur during your child/youth's placement with the Department:

- ◆ **Intake:** The intake process usually occurs at the time of removal or in court following the Judge's decision. Basic information will be gathered such as family information, address, and telephone numbers. You will be asked to sign releases of information to enable DCS to obtain items such as school records, medical records, insurance, or TennCare information. DCS will request that you provide basic health information about your child/youth and provide a copy of your child/youth's Social Security card, birth certificate, and health insurance card.
- ◆ **Home Visit:** A home visit will be scheduled. The purpose of the home visit is to obtain information for the functional assessment of the child/youth and family. You can expect this visit to last approximately one (1) hour and at least one (1) parent or guardian needs to be present.
- ◆ **Initial Child and Family Team Meeting:** An initial child and family team meeting (CFTM) will be held (within 7 days prior to or after commitment) and will include the

parents/guardians, DCS staff, the child/youth, attorneys, and any others who may have a significant influence in the child/youth's life. You are encouraged to invite personal supports to attend with you. Within thirty (30) days, an initial permanency planning CFTM will be held. In this meeting, strengths, concerns, risks, and goals for the child/youth and/or family will be identified, and a permanency plan will be created. Everyone's responsibilities will be outlined in that document. The responsibilities will be reasonably related to the goal, designed to remedy the conditions which necessitated foster care, and in the best interests of the child/youth. The plan will then be sent to the court for ratification and will become a legal document.

- ◆ **DCS Contact:** The DCS Case Manager will maintain contact with you to ensure all needs are being met. Either the court or a Foster Care Review Board will review your child/youth's case within ninety (90) days and then at least every six (6) months.
- ◆ **Exit Custody:** Your child/youth will be released from custody when ordered by the court. The release date depends on the circumstances at the home that the child/youth will be returning to and progress of the child/youth and parents/guardians toward their plan.

## Foster Care and Kinship Foster Care

When a child/youth is not able to safely stay in his or her home and there is not another option to prevent state custody, the child/youth enters foster care.

In Tennessee, we place a strong emphasis on keeping the child/youth in a family-like setting. When possible, the child/youth is placed with a known relative/kinship with whom he or she already has an established relationship or connection. DCS strives to keep sibling groups together, and our staff make every effort to keep children/youth as close to their home communities as possible.

Kinship foster care refers to cases in which the child/youth is placed in the legal custody of the State by a judge. DCS then places the child/youth with relatives/kin. In these situations, DCS has legal custody and must answer to the court, whereas the relative/kin has physical custody.

Relatives/kin can include grandparents, close family friends, teachers, etc.

In kinship care, the child/youth's relative/kin caregivers have rights and responsibilities similar to those of non-relative foster parents. All relative/kin caregivers must complete a criminal background history check, caregiver suitability assessment, and home safety assessment before DCS can provide regular financial support through foster care board payments.

If there is not a relative/kinship option, a traditional or non-relative foster home will be explored for the child/youth. DCS recruits foster families to provide safe and supportive homes in which the child/youth's emotional, physical, and social needs can be met.

While the child/youth is in foster care, DCS makes legal decisions for that child/youth, including deciding where he or she lives. DCS is responsible for ensuring that the

child/youth receives medical care and attends school. If the court has approved visitation with parents, DCS is also responsible for making sure that the visits occur as ordered by the court.

Foster care is a temporary service until the family and, in some cases, the child/youth can address the problems which made placement necessary. When parents/guardians cannot or will not make their home safe for the child/youth's return, other permanent options are sought. These options include adoption, exiting custody to a relative/kin, permanent guardianship, or, for older youth, independent living.

## Juvenile Justice

In Tennessee, young people who are adjudicated delinquent after breaking the law are placed with DCS. Many of them have been victims of trauma, abuse, and neglect themselves. DCS offers children/youth a wide range of mental-health services, treatment programs, highly effective educational programs, and vocational training opportunities.

DCS is required to place youth in the least restrictive setting possible. Many of our youth participate in programs that are operated by our network of private providers. This population of youth often have mental-health issues and substance-abuse problems that Department staff and providers work to address.

Youth with more serious crimes on their records, generally at least two felonies or crimes against a person, are housed at one of the Department's secure facilities. Tennessee operates one youth development center (YDC). It operates as a year-round school and offers a wide range of case management and therapeutic services, but unlike other schools, it has hardware-secure facilities. The youth's movements are largely managed by youth's services officers, and the grounds are surrounded by tall anti-climb fences.

If a youth's behavior becomes out of control at the YDC and he/she is at risk of self-harm or harming others, staff may use restrictive behavior management techniques to protect the youth and others from harm. Restrictive behavior management includes methods such as physical restraint, handcuffs, or leg shackles. These methods are only used in emergency situations. As soon as the youth calms down and is no longer a threat to self or others, the youth will be released from confinement and/or the restraints. As the parent/guardian, you will be notified within 24 hours if any of these methods are used with your youth.

It is DCS's job to try to get youth back on track. Each youth has a Case Manager who follows his or her progress. Regular CFTMs are held so that parents/guardians can discuss concerns and monitor youth's progress.

Our education specialists determine each student's needs and develop a plan for them to reach educational success.

# Permanency Planning

Permanency Plans are created for children/youth that are in custody, and for those that remain in their homes or in a non-custody placement. Custodial Permanency Plans are created to ensure that you and your child/youth's needs are met during a custodial episode and that your child/youth attains safe, timely, and permanent placement in the care of a family/relative/kin. Non-Custodial Permanency Plans are created to ensure that you and your child/youth's needs are met to reduce the risk of an out-of-home placement or entry into foster care, and to reduce the likelihood of abuse and/or neglect. The Permanency Plan will include all necessary actions to be completed by the parents/guardians, child/youth, and/or DCS to facilitate achievement of the permanency goal(s).

Permanency Plans will be developed during a Child and Family Team Meeting (CFTM) and, to the extent possible, will reflect the agreement of the meeting's participants. DCS's responsibility is to ensure safety, permanency, and well-being for your child/youth.

Unless parental rights have been terminated, all known parents will be included in the permanency planning process including legal, biological, and alleged fathers. If your child/youth is six years old and older and can understand planning, his or her participation will be requested. If your child/youth is age twelve and older, his or her participation in planning is required.

You may identify and invite additional parties, such as extended family members or other support persons, to help develop the Permanency Plan and to support you throughout your involvement with DCS.

Placement options such as a foster home, residential treatment, or relative/kinship placement will be discussed and decided during the CFTM. You will be a part of this decision-making process. When assessments are completed, recommendations from the assessments will also be added to the Permanency Plan. With the help of you and the Child and Family Team, DCS strives to create a Permanency Plan that addresses all strengths of your family and the concerns that brought your child/youth into DCS custody. If new concerns arise, the Permanency Plan will be updated.

Permanency Plans are revised when new issues are identified that delay accomplishment of the permanency goals, when there is a change in the time frame for meeting the goals, or when there is a need for changes in services or treatment for you or your child/youth. Custodial Permanency Plans are updated every six months. Non-Custodial and Custodial Permanency Plan can also be revised when accomplishments and successes have occurred that will aid in achieving permanency sooner. A Permanency Plan progress review Child and Family Team Meeting should occur at least every three months. Custodial Permanency Plan must be approved by the Juvenile Court. If you do not agree with a Permanency Plan, you have the right to present your concerns to the court during the Permanency Plan approval hearing. Once the concerns are resolved, you, the Child and Family Team, and DCS will meet to begin exploring your child/youth leaving DCS custody. Court approval is required for a child/youth to leave custody. Failure to complete Permanency Plan tasks can prevent your child/youth from being returned to your custody.

If your child/youth is on TennCare, you have a right to appeal decisions made about



TennCare funded services provided by DCS. You will be provided a notice of appeal rights, called a Notice of Action, and a TennCare Medical Appeal form at the CFTM.

## Informed Consent

As indicated in the parent/guardian responsibilities section, a child/youth's parent, unless or until parental rights are terminated, has the legal right and responsibility to consent to medical treatment for his/her child/youth in most circumstances. DCS will have the child/youth's parent/guardian sign an Authorization for Routine Health Services for Minors form at the time the child/youth enters state custody or no later than the initial CFTM. The form allows for the child/youth to receive general medical treatment and a Comprehensive Medical Examination and follow-up. DCS is authorized, by virtue of the court's order granting DCS legal custody, to consent to ordinary and/or necessary medical care and/or treatment and may provide consent without parental permission if absolutely necessary. Further treatment or psychotropic medication require a separate informed consent once the parent/legal guardian has received sufficient information about the risks and benefits of taking and not taking a prescribed or recommended treatment by the health care provider.

If the parent/guardian refuses to consent to medical treatment or procedures, DCS will consult with the prescribing health care provider. If it is determined that the treatment is "ordinary and necessary" to protect the child/youth from harm and receiving the treatment is in the best interest of the child/youth, DCS will give consent for the treatment. If the treatment is determined to be necessary but beyond the scope of authority outlined by the court, then DCS will ask the court to decide what should be done.

## Behavior Management and Restrictive Interventions for Children/Youth in Custody

DCS requires that all DCS staff and all facilities serving children/youth in state custody use positive behavior management techniques that provide positive incentives for good behavior and minimize reliance on intrusive and restrictive disciplinary measures. DCS policy prohibits the use of any form of corporal punishment on any child/youth in custody.

DCS seeks to prevent and eliminate the use of physical restraint and to protect the child/youth's health and safety while preserving his or her dignity. Restrictive interventions such as physical restraint will be used only in circumstances in which a child/youth poses an imminent risk of harm to self or others.

Restrictive interventions will never be used as a means of punishment, discipline, coercion, in absence of treatment or programming, or due to staff convenience or retaliation by staff.

# TennCare Appeals

If your child/youth needs a health screening or a prescribed health service, and there is a delay, denial, reduction, termination, or suspension of that service, you have the right to file an appeal regarding this determination (adverse action). DCS Case Managers and DCS Child Health staff will assist you in accessing TennCare services for your child/youth and in filing an appeal if there is an adverse action.

As indicated above, if DCS is responsible to provide a TennCare funded placement service, you have the right to appeal that determination (adverse action). If a placement decision is made involving a TennCare funded placement, a Notice of Action and TennCare Medical Appeal form will be provided at the CFTM or mailed to you if you did not attend the CFTM.

## Credit Checks & Independent Living

All children/youth in DCS custody who enter custody and are 14+ years of age will have an annual credit history check completed on Transunion, Experian, and Equifax to address any inaccuracies in their credit report. Children/Youth will be engaged in this process in order to learn valuable independent living skills regarding credit and credit reporting. If any inaccuracies are found in your child/youth's credit report, your Case Manager will address those with you.

A handbook specific to Independent Living can be requested, if applicable.

## Termination of Parental Rights: Voluntary & Involuntary

You may voluntarily surrender your parental rights by appearing before a Chancery, Circuit, or Juvenile Court Judge and signing a voluntary surrender form. If you decide that you would like to surrender your rights, you should discuss it with your Case Manager. DCS can refuse to accept the surrender of a child/youth. Parents/Guardians can access counseling and legal assistance if they are considering surrendering their parental rights. Please contact your Case Manager for more information.

Parental rights may be terminated involuntarily if a Chancery, Circuit, or Juvenile Court Judge upon a petition finds statutory grounds for termination, and that termination is in the child/youth's best interest. Parents/Guardians will be appointed attorneys for termination, if the court determines they cannot afford to hire representation. Conditions that can justify termination of parental rights include abandonment, wanton disregard, substantial non-compliance with the permanency plan, conditions which led to removal have not been remedied or other conditions prevent return, severe child abuse, ten-year prison sentence, failure to establish or exercise paternity, failure to manifest an ability and willingness to assume custody, and/or mental incompetence. Parents can request a referral for counseling and support to cope with voluntary and involuntary termination of parental rights, grief, separation, loss, and the life-long implication of placing a child/youth for adoption when appropriate.

If parental rights have been terminated (either voluntarily or involuntarily), it means that the parents/guardians are no longer legally responsible for that child/youth. The parents/guardians cannot make medical, educational, or any other type of decisions regarding the care of the child/youth. The parents will not be notified of any future legal proceedings for the child/youth. Once all parental rights are terminated for a child/youth, that child/youth becomes eligible for adoption.

“Open adoption” typically refers to an adoption in which the parents/guardians maintains some legal rights to visit and obtain information about the child/youth after the adoption is finalized. The State of Tennessee does **not** have an “open adoption” policy. However, there are times when an adoptive parent is willing to work with the parent/guardian to maintain contact and/or visits. DCS can facilitate these conversations, but it is the decision of the adoptive parent whether contact with the parent/guardian is allowed.

In the State of Tennessee, parents/guardians have the following rights after their child/youth has been adopted:

- ◆ Once an adopted child/youth reaches the age of twenty-one (21), eligible parties (including parents/guardians) can request access to the child/youth’s adoption record if that child/youth gives written consent. ***T.C.A. 36-1-127.***
- ◆ The state can release non-identifying information to a parent/guardian without the consent of the adopted child/youth. ***T.C.A. 36-1-133.***

You may submit an online request for assistance with post adoption records on the DCS website ([tn.gov/dcs](http://tn.gov/dcs)) or contact DCS Post Adoption Services as follows:

**Department of Children’s Services**

**Attn: Post Adoption Services Unit**

**UBS Tower, 9<sup>th</sup> Floor**

**315 Deaderick Street**

**Nashville, Tennessee 37243**

**TEL: (615) 532-5637**

**[EI DCS.PostAdoptionRecords@tn.gov](mailto:EI_DCS.PostAdoptionRecords@tn.gov)**

Once an adoption has been finalized, the foster care and adoption record is sealed and cannot be accessed except in the situation described above or in limited circumstances as specifically authorized by state law. Parents’/Guardians’ confidentiality is maintained as described in the “Confidentiality” Section of this handbook.

Parents/Guardians have the right to participate in CFTMs until their parental rights have been terminated. These meetings can include discussions regarding DCS plans to file a petition to terminate a parent’s/guardian’s rights, adoption placement, termination process, assistance available to parents, the child/youth’s progress, and any other concerns. DCS encourages all parents/guardians to participate in CFTMs so they can provide input regarding their child/youth.

# When Your Child/Youth Exits Custody

If your child/youth is returning to your care, you have the right to information about their reapplication for TennCare benefits which can be done at your local Department of Human Services (DHS) office, or you may apply online at [healthcare.gov](http://healthcare.gov). Your Case Manager should provide this information.

For more information on TennCare, you may download this [Informational Flyer](#)

<https://www.tn.gov/content/dam/tn/dcs/documents/youthintransition/youth-resources/TennCare%20for%20Aged%20Out%20Youth%2005-02-18%20FINAL.pdf>

## Glossary

**Adjudication:** The outcome of the court's process to determine the validity of allegations made in a petition or complaint. The process consists of the presentation of witnesses and evidence by oral testimony or written statements, and arguments by counsel or the parties. The court decides the case based on the proof presented by the parties and their arguments. For example, the court determines whether a child/youth is dependent and neglected and then makes a disposition of the child/youth either immediately or at a later date. (See Disposition Hearing).

**Allegation:** A charge or claim of fact in a report of child abuse or neglect or in a petition. It must be proven if the report or petition is to be found true. The abuse report lists specific events, injuries, or threats (such as cuts, bruises, welts, or medical neglect) referred to as the report allegations. The report also suggests the type of allegation (such as physical abuse, neglect, sexual abuse, or emotional abuse) as an introduction to the report's specific allegations.

**Child/Youth's Attorney:** The attorney appointed by the court or retained by the child/youth or his/her family to represent the wishes of the child/youth. The child/youth's attorney differs from the Guardian ad Litem in that the Guardian ad Litem represents the child/youth's best interest to the court even if the child/youth's best interests differ from what the child/youth wants. Under most circumstances when a child/youth is alleged to be unruly or delinquent, that child/youth is entitled to an attorney prior to adjudication and disposition as long as that constitutional right is not waived. However, in a dependency and neglect case, a Guardian ad Litem must be appointed by the court for that child/youth.

**Classification Staffing:** A meeting called for the purpose of discussing diagnostic data, identifying problems and strengths, formulating recommendations, and deciding a child/youth's placement.

**Custody:** The control of actual physical care of the child/youth and includes the right and responsibility to provide for the physical, mental, and moral well-being of the child/youth TCA 37-1-102 (b) (9).

**Child Support:** Court-ordered or voluntary money payments made to or on behalf of a

child/youth by the parent(s) (legal or natural parent(s) who admit(s) paternity). Child support paid while a child/youth is in the custody of the Department of Children's Services may be used to reimburse the State for the child/youth's board payment and other costs of care in compliance with applicable state and federal laws and regulations.

**Disposition Hearing:** A Juvenile Court hearing during which arguments are made as to what should be done with a child/youth already adjudicated as dependent and neglected, unruly, or delinquent. This hearing is often combined with the adjudicatory hearing, but it may be scheduled up to 15 days later if the child/youth is in custody (or 90 days if the child/youth is not in custody). Further evidence is presented at this time to determine if the child/youth will be placed in foster care, will remain in foster care or some other placement, or will remain with the parents/guardians.

**Ex Parte Review:** A chance for a Judge to hear only one party's side at that time. However, a Judge will set a later time for all parties to be included. While fairness and the law dictate that all sides get an equal hearing before a Judge, this isn't always possible. For example, if parents/guardians who pose a risk to a child/youth are threatening to flee, a Judge may hold an ex parte review to hear the Department's concerns without alerting the people who are threatening to leave with the child/youth.

**Family Crisis Intervention Program (FCIP):** A brief intervention with families who have unruly children/youth at risk for state custody. The intervention is designed to help the family and child/youth through the present crisis period so they can access least intrusive community services without requiring further court intervention and/or custodial care from the Department of Children's Services. TCA 37-1-168

**Foster Care Review Board (FCRB):** In some jurisdictions, an advisory body appointed by the Juvenile Court Judge will review the status of each child/youth's care in DCS custody at least once within the first ninety (90) days of initial placement and every six (6) months thereafter.

**Family Service Worker:** A Family Service Worker (FSW), also referred to as a Case Manager, is a DCS employee responsible for providing case management services to children/youth under the State's supervision, in State custody, or at risk of State custody and their families.

**Family Support Services Worker:** A Family Support Service Worker (FSSW), also referred to as a Case Manager, is a DCS Case Manager who provides support to children and families in need of services to reduce the risk of an out-of-home placement or entry into foster, and to reduce the likelihood of abuse and/or neglect.

**Guardian:** Parents are natural guardians of a child/youth. The court may appoint a guardian for a child/youth whose parent(s) is (are) deceased or unable to provide for the child/youth's care. The court may give guardianship to DCS following a termination of parental rights. DCS may, as authorized by law, act as guardian when there is no natural guardian or when a child/youth has been abandoned. The guardian of a child/youth, if appointed by the court or if acting under statute, has all the duties of a parent to provide for the child's support, education, and medical care, subject only to any remaining parental rights.

**Guardian ad Litem (GAL):** The attorney appointed to represent the best interests of the child/youth in court proceedings. The Guardian ad Litem's role differs from that of the child/youth's attorney, in that the child/youth's attorney is bound to do what the child/youth, his client, directs, while the Guardian ad Litem must represent the child/youth's best interest to the court, even if the child/youth's best interests differ from what the child/youth wants. The Guardian ad Litem represents the child/youth in litigation only but is not responsible for the child/youth's care on a daily basis.

**Informed Consent:** The agreement to treatment given after the patient, legal custodian, and/or legal guardian has received sufficient information about the risks and benefits of taking and not taking a prescribed or recommended treatment.

**Interpreter:** A person who translates orally for parties conversing in different languages.

**Juvenile Court:** A court with jurisdiction under Tennessee statutes to hear and decide matters pertaining to children/youth.

**Magistrate:** An attorney appointed by the Juvenile Court Judge to hear cases. A magistrate serves at the pleasure of the appointing Judge and has the same authority as the Juvenile Court Judge to issue orders. In the conduct of the proceedings, the magistrate has the powers of a trial Judge. Most findings made by a magistrate are appealable to the Juvenile Court Judge upon a motion by any party. For more specific information, see T.C.A. § 37-1-107.

**Permanency Planning:** The process of intervention and decisive casework on the part of the Case Manager and Child and Family Team. Such intervention focuses on choosing the least restrictive permanent outcome for the child/youth, i.e., return to parent/guardian, relative placement, adoption, independent living, or permanent foster care, in a timely manner.

**Petition:** A formal written application to the court requesting judicial action on a certain matter.

**Reasonable Efforts:** The Department's obligation under state and federal law and as a part of sound casework practice, to attempt risk reduction services prior to removing children/youth from their homes and subsequent to removal, to make it safe for the child/youth to return home. If DCS must remove the child/youth, the court's disposition order must include documentation of the reasonable efforts that DCS exhausted in order to prevent foster care or to prove that services could not reasonably be expected to protect the child/youth.

**Restitution:** A legal action serving to make good or give back an equivalent for some injury or deed.



## Tennessee Department of Children's Services Notification of Equal Access to Programs and Services and Grievance Procedures

Title VI of the Civil Rights Act of 1964 makes it illegal for people to be discriminated against on the basis of their race, color or national origin in all programs, benefits, and services provided by the Department of Children's Services (DCS) which receives Federal Financial Assistance. The Americans With Disabilities Act Amendment of 2008 (ADA) and the Rehabilitation Act of 1973 makes it illegal for people to be discriminated against on the basis of disability in all programs, benefits, and services provided by DCS that receives Federal Financial Assistance."

It is the policy of the State of Tennessee, Department of Children's Services, to ensure that all management staff, contractors, and service beneficiaries are aware of the provisions of Title VI of the Civil Rights Act of 1964 and the Americans With Disabilities Act Amendment of 2008 (ADA) as well as the Rehabilitation Act of 1973. If you feel that you have received disparate treatment based on race, color, national origin, disability or any other classification protected by Federal and/or Tennessee State Law, you are encouraged to file a complaint with the DCS Office Civil Rights. To file such complaint, you should do the following:

1. You must file a written complaint within one hundred-eighty (180) days to the date of the alleged discrimination. You are encouraged to file your complaint as soon as possible in order to allow sufficient time to file an appeal with an external agency if you are not satisfied with the results of the DCS investigation.
2. In your complaint, be sure to include your name, address, and telephone number.
3. The complaint should contain the name and address of the agency, institution, or department you believe discriminated against you.
4. Indicate how, why, and when you believe you were discriminated against. Include as much specific detailed information as possible about the alleged acts of discrimination and any other information that you deem relevant to your complaint.
5. If known, provide the names of any persons who the DCS Office of Access and Engagement could contact for clarity regarding your allegations.
6. Please sign your written complaint and then submit it to:

**Office of Access and Engagement  
Department of Children's Services  
UBS Tower, 7<sup>th</sup>  
Floor 315  
Deaderick Street  
Nashville, TN 37243  
Telephone: (615) 741-8422  
Fax: (615) 532-8537**

7. You may also file your complaint in writing to the offices listed below:

**Director  
Tennessee Human Rights Commission  
Attention: Title VI Compliance  
William R. Snodgrass Building/Tennessee  
Tower  
312 Rosa L. Parks Blvd, 23<sup>rd</sup> Floor  
Nashville, TN 37243  
Telephone: (615) 741-5825  
Fax: (615) 253-1886**

or

**Director  
Office for Civil Rights  
U.S. Department of Health & Human Services  
61 Forsyth Street, S.W.  
Suite 3B70  
Atlanta, GA 30323  
Telephone: (404) 562-7886  
Fax: (404) 562-7881**

You should file a complaint under this procedure if you feel you have been excluded from participation in, denied the benefit of a service or subjected to discrimination under a program or activity receiving federal financial assistance from the Department of Children's Services.

☐ I have read the above procedure of how to file a Title VI or ADA complaint. This procedure was explained to me in detail and a copy was issued to me for my records. I was advised that this form is available in other languages.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution: Child/Youth's Case File

Copy: Client

CS-0158, Rev. 2/25



RDA 11016  
Page 1





## Tennessee Department of Children's Services Notice of Privacy Practices

**This notice is only for your information. You do not have to do anything with this information.**

**THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU  
MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.  
PLEASE REVIEW IT CAREFULLY.**

**Effective Date of This Notice: October 2, 2017**

### **Information About Your Health is Confidential**

The Department of Children's Services (DCS) is required by law to maintain the privacy of information about your health and your child's health. DCS is required to give you this notice which describes the rules of the privacy law that we must follow to keep information about your health and your child's health confidential. These rules are subject to change by the federal government, and our Department is obligated and committed to tell you about any important changes which may be made in the future. DCS reserves the right to change its privacy practices described in this notice and apply those changes to any health information DCS maintains. We will give you a copy of any revised privacy notice while you are receiving services from DCS. DCS is required to follow the Privacy Notice currently in effect. DCS is required to notify you if there is a breach of your unsecured health information. Everyone who works with our Department must agree to keep health information private. The people who work with us include, but are not limited to:

- Department of Children's Services (DCS) employees
- Foster Parents
- DCS contract providers and their employees
- TennCare and TennCare health plans
- The State of Tennessee
- The Federal government
- Companies that have contracts with the State of Tennessee or the Federal government
- Health care providers, like a doctor or therapist

### **How DCS Uses Information About Your Health or Your Child's Health**

When you and your child begin receiving services from DCS, we obtain health information about you and your child in order to provide those services. DCS is involved in providing services such as Family Support Services or Family Crisis Intervention for children who are not in DCS custody. DCS is also involved in providing court-ordered probation and aftercare services. The health information that DCS obtains in providing these services may include things such as the need for counseling, therapy, or substance abuse treatment.

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*Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.*

Distribution: Copies: Pages 1-4 – Client

Page 5 –Signed Client Acknowledgement -Case File

When a child comes into DCS custody, the court will give DCS the authority to consent to any necessary and routine medical care for that child. DCS may need to consent to medical care for a child in custody because the parent or legal guardian is not available or is unwilling to consent to medical care for the child. DCS needs as much information as possible about the child's health to make sure the child gets proper health care. This would include such things as:

- Notes or records from the child's doctor, drugstore, hospital or other health care providers
- Lists of illnesses the child and family members now have or have had before
- Lists of the medicines the child takes now or has taken before
- Results from x-rays and lab tests

### **DCS Shares Information About You and Your Child Only as the Law Allows**

**DCS would share information about you or your child to:**

- **Make sure that you get the treatment you need;**
- **Pay health care providers;**
- **Check on our program to ensure you are receiving quality health care;**
- **Help if anyone's health or safety is in danger;**
- **Prove that your child is enrolled in TennCare with your child's doctors or other providers;**
- **Check how health programs are working. Your information may help us find insurance fraud;**
- **Report cases of abuse or neglect;**
- **Tell you about appointments and other health information. We may send you or your child reminders for your child's check-ups. We may also send you information about health services that may be available to you;**
- **Obey laws on workers' compensation.**

**DCS may share information about you and your child with:**

- **Your family, foster families, or others who are involved in your child's care;**
- **The Court when the law says we must or we are ordered to do so;**
- **Schools or school nurses so they can treat your child or watch for any signs and symptoms of an illness or condition your child may have;**
- **TennCare Consumer Advocates or attorneys who represent your child on a TennCare appeal or are trying to help your child access services;**
- **Law enforcement;**
- **Public health agencies to update records for births and deaths or to track diseases;**
- **A coroner, funeral home, or people dealing with organ transplants;**
- **Medical research organizations. They must keep information about**

*Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.*

Distribution: Copies: Pages 1-4 – Client

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you and your child private.

- DCS may share information for research if we take out the identifying information that tell who you and your child are;
- Government agencies involved in military and veteran's activities, national security activities or correctional institutions.

### **DCS May Need Written Approval to Share Private Health Information**

- When we need approval to share private health information, we must ask for it on a written authorization form. You can take back your approval at any time, but you must tell us in writing.

### **YOUR HEALTH INFORMATION RIGHTS**

You have the right to:

- See and get copies of your health records. If you want a copy, you must ask for it in writing. We may charge a fee for the cost of copying and mailing. DCS has the right to refuse to disclose certain information. If we cannot give you the information you want, we will send you a letter that tells you why.
- Ask questions about how we share your health information or ask questions about the information in this notice.
- Complain about how we share your health information. Please refer to the section in this notice entitled,
- Contact DCS with Questions or Complaints Regarding Your Rights to Privacy.
- Ask us to change health information that is wrong. You must ask us in writing. You must give us a reason why we need to change it. We may not be able to agree to the change. If we cannot make the change, we will send you a letter that tells you why.
- Ask us for a list of who got your health information. The list will tell you who got your information. You must ask us in writing for a copy. The law says that we do **not** have to give you a list when:
  - We have your written authorization to give out your health information;
  - We use it to help you get health care;
  - We use it to help with payment for your care;
  - We use it to operate our programs.
- Ask us not to share certain information about your health. You must ask us in writing. You must tell us what information you do not want shared, and with whom you do not want us to share that information. There may be some cases when we cannot agree to your request. If we

cannot agree to your request, we will send you a letter that tells you why.

- Take back your approval for us to share your health information. If we ask you to sign an authorization form, you can take it back at any time. You must do it in writing (to the appropriate DCS office or facility that is maintaining your records). This will not change any information that we have already shared.
- Ask us to contact you in a different way or at a different address. You must ask us in writing, and tell us why we need to change.
- Ask for another copy of this notice or copies of any new notices.

**The Rights Listed Above Apply to the Following Persons**

- Persons 18 years old or older and emancipated minors, regarding their own health information;
- Persons 16 years old or older who have mental illness or serious emotional disturbance, regarding their own mental health information;
- Persons who have the legal authority to make health care decisions for another individual, regarding the health information of the individual.  
***Note: The law defines this being someone's "personal representative". DCS will have to verify that you are authorized to be someone's personal representative. DCS may also decide to not treat you as the personal representative of someone with regard to their private health information, if we believe that you have abused, neglected, or subjected that person to domestic violence, that treating you as their personal representative could put that person in danger, and that it is not in the best interest of the person to treat you as their personal representative;***
- Persons under the age of 18 in specific situations where they consent to treatment that does not require parental consent, or when the doctor has determined that the minor is mature enough to consent to treatment and the doctor does not require parental consent. In these situations, the minor has privacy rights about their own health information related to such treatment.

## **How to Contact DCS with Questions or Complaints Regarding Your Rights to Privacy**

**Do you have questions or a complaint about your right to privacy? You can send your question or complaint to one of the following offices below. Asking questions or making a complaint will not have any affect on the services that you or your child receives. Be sure to include in your letter the name, birth date and social security number of yourself, your child or the person you are representing and keep a copy for your records.**

<u>Send complaints or questions to:</u>  <b>Customer Relations Unit Department of Children's Services 315 Deaderick St., UBS Tower, 7<sup>th</sup> Floor Nashville, TN 37243-1290 Toll free telephone number: 1-800-861-1935 E-Mail: <a href="mailto:DCS.Custsrv@tn.gov">DCS.Custsrv@tn.gov</a></b>	<u>You may also send complaints to:</u>  <b>Office for Civil Rights U.S. Department of Health and Human Service Atlanta Federal Center, Ste 3B70, 61 Forsyth Street, SW Atlanta, GA 30303-8909 Voice phone (404) 562-7886 FAX (404) 562-7881 TDD (404) 331-2867  For complaints filed by email send to: <a href="mailto:OCRComplaint@hhs.gov">OCRComplaint@hhs.gov</a></b>
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**THIS NOTICE AND THE INFORMATION CONTAINED HEREIN DOES NOT APPLY TO THE RELEASE OF SEALED ADOPTION RECORDS, PURSUANT TO TENNESSEE CODE ANNOTATED, TITLE 36.**



## HIPAA Notice of Privacy Practices – Client Acknowledgement

The purpose of the *Notice of Privacy Practices* information that you have been given and asked to read is to inform you about the law protecting your health information and how the Department of Children's Services may use your health information.

This *Notice* describes your privacy rights regarding your health information and how you may exercise those rights. This *Notice* also gives you information about where to direct your questions or comments about the policies and procedures the Department of Children's Services uses to protect the confidentiality of your health information.

Please review this document carefully and ask for clarification if you do not understand any portion of it.

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### Client Acknowledgement

I have received the Department of Children's Services (DCS) *Notice of Privacy Practices*, which describes how DCS may use my health information, my rights to privacy regarding my health information, and how I can exercise those rights.

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Signature - Client (or Personal Representative)

Date

**Note:** Department of Children's Services retains this signed page. The Client retains the Notice of Privacy Practices information attached.



Tennessee Department of Children's Services

**Authorization for Release of Information to the  
Department of Children's Services: TennCare Eligibility and  
Authorization for the Department of Children's Services to  
Release Information to TennCare**

I hereby authorize representatives of the Tennessee Department of Children's Services, to include only the Health Advocacy Unit, Fiscal Team, Child- Benefit workers and case managers with applicable authority, bearing this release, or a copy of same, to obtain ONLY confidential TennCare **eligibility** information from your files. I hereby direct you as an individual or agency to release this information upon request of said representative. This release is executed with the full knowledge and understanding that the information released is for the official use of the Department of Children's Services within the scope of providing services to children.

I also authorize DCS to release the following information to TennCare or auditors of TennCare services, for the purpose of arranging, accessing, or obtaining services for my child, or proving that services were provided to my child: Child's name, SSN, DOB, Medicaid number, and diagnosis: type of service provided, provider information, and proof that the service was provided.

It has been explained to me, and I understand that there are statutes and regulations protecting the confidentiality of certain written and oral record information and that by signing this authorization only my eligibility status in TennCare will be released - no other TennCare records will be released for me. I can revoke my consent at any time. Should I choose to revoke this consent, I understand that the revocation must be in writing to be effective. I also understand that any release which has been made prior to my written revocation and which was made in reliance upon this authorization shall not constitute a breach of my right to confidentiality. Unless I revoke this authorization prior to such time, this authorization is valid until such request is fulfilled, but not to exceed one year from date of my signature. I understand that I may ask and receive a copy of this authorization. I hereby request and authorize the release of ONLY confidential TennCare **eligibility** information.

**Identifying Information of Individual to Whom this Release Pertains:**

Name: Last		First		Middle	
Address					
City		State		Zip Code	
SSN		DOB		Place of Birth	
				<input type="checkbox"/> Male	<input type="checkbox"/> Female
Telephone Numbers: Home		Work		Cell	
This form is effective from:		Date:		to	Date:

Date not to exceed one year from begin date.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature of Authorized Representative\*: \_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

\*Authorized Representative means you have legal proof you can act for this person. A representative signs for an applicant who may or may not legally sign on his or her own. We may have to get this proof from you.

\*\*\*\*\*

\*\* ☐ Unable to locate requested Information ☐ Requested information could not be released

Reason			
Information released by		Date	
DCS Contact Person		Telephone Number	
DCS Office Address			

DCS Staff Requesting Release of TennCare Eligibility Info: \_\_\_\_\_ Date: \_\_\_\_\_

DCS Staff Who Accessed TennCare Eligibility Info: \_\_\_\_\_ Date: \_\_\_\_\_

Check the "Forms" Webpage for the current version and disregard previous versions. This form may not be altered without prior approval.

Distribution: Child/Youth's Case File, Information Recipient

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