



Tennessee Department of Children's Services

Protocol for Accessing a Transitional House

Supplemental to DCS Policy: 16.46, Child/Youth Referral and Placement

Transitional Houses are community-based locations where a custodial child awaiting placement in a foster home or facility may, for a short period of time, wait in a home-like setting, while still under the direct supervision of Department staff. Transitional Houses in regions may also be used as an alternative location to conduct supervised visitation, child and family team meetings (CFTMs), and to wait with noncustodial children in limited circumstances. Each region will have a designated point of contact for any Transitional House located within the region.

Applicability

This protocol is applicable to all DCS Case Managers, Team Leaders, Team Coordinators, and Regional Administrators or Directors, including Family Services, Child Protective Services, and Juvenile Justice.

For the purposes of this Protocol, these individuals will be collectively referred to as "DCS Case Manager."

NOTE: Some Transitional Houses may have their own protocols or procedures that must be followed prior to accessing the property. The DCS Case Manager shall ensure they are familiar with the local protocols, if any, and will comply with those protocols in addition to these requirements.

Onboarding Transition Houses

When an organization or non-profit wishes to provide a community-based space for DCS to access as a transitional house, the DCS Regional Director (RD)/designee confers with the DCS Executive Director/Designee to determine if DCS wishes to use the space offered.

Upon determination by the Commissioner that DCS is interested in using the community-based space, then the RD/designee ensures that the following are completed prior to DCS accessing the space as a transitional house:

- ◆ RD will complete a walkthrough of the community-based space to ensure that the space has the minimum amenities identified in this protocol to be accessed as a transitional house.
- ◆ RD will liaise with the organization to ensure that any necessary local protocols or other agreements related to access to the community-based space are completed.

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- ◆ RD will request a courtesy site visit of the community-based space by a representative of the DCS Office of Child Welfare Licensing. While transitional houses are not subject to licensure, the DCS OCWL may make recommendations related to the physical plant of the communitybased space.
- ◆ RD will ensure that appropriate fire inspections have taken place at the community-based space.

Accessing a Transitional House for Custodial Child Awaiting Placement

When a custodial child does not have a placement, DCS Case Managers may be able to access a Transitional House to wait with the child while placement is located.

1. Prior to taking a child to a Transitional House, the DCS Case Manager will contact the regional DCS designee, to determine if a Transitional House is available and appropriate for the child. If required by the Transitional House, the regional DCS designee will contact the Transitional House to determine availability and will they accept the child.
2. When deciding whether a Transitional House is the appropriate setting for a child/youth, an assessment of each child's needs will be considered, to determine if and what safety concerns are present and if needed, develop a safety plan to ensure the transition space can be safely shared with others.
3. If it is determined by the regionally identified Department staff that a Transitional House will be used while the child is awaiting placement, a DCS Case Manager has the responsibility to transport the child to and from the Transitional House. Transportation of children to and from a Transitional House will follow DCS Policy [31.15, Guidelines for Transportation of Child/Youth By Regional Employees](#).
4. Prior to transporting a child to a Transitional House, the DCS Case Manager ensures that any personal items or belongings that will accompany the child to the Transitional House are appropriate and do not pose a health or safety concern to the child or others that may be present at the Transitional House. See DCS Policy [31.4, Search Procedures](#). Subsequent random searches will be conducted to ensure the safety and well-being of the child and others.
5. A folder will be created for and accompany each child/youth taken to a transitional house and will include a child daily log form, [CS-4227, Child Daily Log for Transitional Houses](#). Any safety plan that was created will also accompany the Child Daily Log for Transitional Houses. The DCS Case Manager transporting the child to the Transitional House ensures that the log is completed and is provided to any subsequent DCS Case Manager that may be sitting with the child, along with a verbal update about the status of the child and any pertinent information (e.g., when the child last ate; any medication distributed; any information learned in the last shift, etc.). At the beginning of each DCS Case Manager's shift at a Transitional House, the DCS Case Manager will also assess the safety of the location, including checking windows and doors to ensure the structure is secure; removing any sharp objects or other hazards; and securing items that could be damaged.

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6. If a child/youth waiting at a Transitional House is prescribed medication, the DCS Case Manager complies with [Protocol for DCS Case Managers to Distribute or Observe Self-Administration of Medication for Custodial Youth](#) and DCS Policy [20.15, Medication Administration, Storage, and Disposal](#).

The DCS Case Manager and/or designated staff will ensure all medication is, including over-the-counter medications, is secured using a “double lock” system that combines a locked door and a locked container, two locked doors, etc. Any refrigerated medication will be refrigerated in a single-lock leak proof box. The DCS Case Manager will notify regional nursing staff of every youth waiting at a transitional house for more than one night.

7. Technology access for the child/youth should be limited and only allowed when the DCS Case Manager can directly supervise the screen of the device. Children/Youth should not be allowed to access cell phones while in the Transitional House unless it is for the purpose of conducting a supervised phone call visitation with the parent(s). The child and family team can assess the appropriateness of a child’s/youth’s access to a cell phone once the child is permanently placed.
8. Prior to using a Transitional House, the DCS Worker/Department will ensure that any child waiting at the Transitional House has access to following minimum amenities: ♦ Restroom/Toilet
♦ Shower/bathing facilities
♦ Adequate sleeping space
♦ Linens (e.g., towels, bedding, pillows, etc.)
♦ Personal care items/toiletries ♦
Regular meals and snacks
9. While waiting at the transition house, children/youth should be provided the ability to use the restroom and shower with reasonable privacy. Children must be accompanied to the entry of the restroom and the DCS Case Manager should remain within visual distance of the restroom entrance while it is in use but afford the child/youth with reasonable privacy to shower or use the restroom. Children may not be accompanied by other children inside the restroom/showering area.
10. To meet the nutritional needs for children and youth waiting at transition houses, regional leadership or designated staff will:
♦ Secure a caterer or other form of routine meal delivery.
♦ Create and post weekly menus/meal plans for staff and youth to review/access when needed.
♦ Consult the agency dietician for guidance on meal planning to ensure dietary needs are met.

Day to Day Care, Support, and Supervision

1. While a child is at a Transitional House, DCS maintains the responsibility of providing continuous supervision of the child. The DCS Case Manager or DCS contracted provider (e.g., a sitter service) will ensure twenty-four (24) hour a day supervision whenever a child/youth is present at a Transitional House. While Transitional Houses may have approved volunteers at the location to assist DCS Case Managers, supervision remains DCS’ responsibility.

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2. Children will be directly supervised in a manner that allows the DCS Case Manager to always see and hear the child/youth. Bedroom doors should not be closed.
3. While the DCS Case Manager may be able to complete some other work while supervising a child, the DCS Case Manager must still be able to view and hear the child. The DCS Case Manager shall not discuss confidential information in front of a child or any volunteers at the Transitional House. Any phone calls taken while supervising children should not discuss confidential information and should be as brief as possible to ensure appropriate supervision of the child. The DCS Case Manager will not conduct CFTMs while supervising children unless it is a CFTM for the child being supervised.
4. All DCS staff and/or contracted providers supervising and supporting children/youth in transition houses will:
 - ◆ Sign in and sign out for their shift ;
 - ◆ Adhere to agency policy related to professional decorum; and
 - ◆ Make sure children/youth adhere set schedules and all to transitional house protocol and procedures.
5. Though the number of DCS staff present at a transitional house will vary based on the number of children/youth waiting at the transitional house, DCS staff and/or contract providers will adhere to the following:
 - ◆ At least two (2) DCS staff will be present; with both staff providing continuous supervision in the Transitional House when children/youth are present.
 - ◆ Under no circumstances shall the ratio of children/youth to DCS staff exceed 3:1. Additional DCS Case Managers may also need to be present based upon the needs of the child/youth.
6. DCS Case Managers should alternate in shifts to provide supervision and care of children in a Transitional House:
 - ◆ A DCS Case Manager's shift of direct supervision of children/youth in a Transitional House should not exceed six (6) consecutive hours and/or twelve (12) total hours within a twentyfour (24) hour period.
 - ◆ DCS Case Managers providing supervision of children should be allotted a thirty (30) minute break if working a shift for six (6) consecutive hours which should be alternated between cosupervisors.
7. When DCS Case Managers change shifts at a transitional house, the outgoing Case Managers update the incoming Case Managers with necessary information (e.g., overview of youth waiting in the house; any safety plans in place; any tasks needing to be completed; etc.).
8. The Regional Education Specialist will work with the assigned FSW for children/youth in transitional housing to ensure educational needs are met.

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9. If the child/youth was receiving therapy services prior to the child waiting for placement in a transitional house, the DCS Case Manager and/or designated staff will work with the Regional Clinical Psychologist/designee, to coordinate continuation of services or to arrange for local therapeutic services within in twenty-four (24) hours of the child/youth entering a transitional house.
10. For children/youth without pre-existing therapeutic support and presenting with exceptional needs (e.g., psychosis, physical aggression, self-harm, property destruction, anxiety/sadness, runaway, recent suicidal ideation/hospitalization, defiance etc.) a designated DCS staff member will submit a request for clinical support via form stack.
11. If an incident occurs while a child/youth is waiting at a transitional house, the DCS Case Manager and/or designated staff complies with DCS Policy [1.4, Incident Reporting](#).
12. If a youth expresses homicidal or suicidal thoughts, is engaging in self-harm, or is exhibiting symptoms of psychosis that place the youth or others in danger (e.g., hearing voices telling them to harm people), the onsite DCS Case Manager and/or designated staff will contact Mobile Crisis services immediately (855-274-7471) and follow their recommendations, including implementation of any safety plans that may be developed. The DCS Case Manager and/or designated staff will also complete an incident report (DCS Policy [1.4, Incident Reporting](#)) and notify the regional director, immediately. The regional director will notify the regional executive director.
13. Once placement has been located, the DCS Case Manager transports the child from the Transitional House to the child's placement according to DCS Policy [31.15, Guidelines for Transportation of Child/Youth By Regional Employees](#).
14. Prior to leaving the Transitional House, the DCS Case Manager ensures that the Transitional House is left in a good condition (e.g., toys picked up and put away; dishes washed; garbage removed; etc.). The DCS Case Manager also contacts the regionally identified Department staff or Transitional House staff to advise that they are leaving the Transitional House.
15. In the event an emergency arises while the DCS Case Manager and a child are at a Transitional House, the DCS Case Manager will follow regular regional procedures (e.g., use of the regional oncall protocol in the event of a child behavior issue; contacting 911 or law enforcement if needed; etc.).
16. When a child is taken to a transitional house to wait overnight, the DCS Case Manager ensures a Notification of Change of Placement is completed that same day. This is completed at the "Report a Placement Change" link on the Placement Central for Staff web portal ([Placement Central for Staff \(teamtn.gov\)](#)) selecting DCS Office Overnight as the placement type and indicating the address of the transitional house. The Network Development team enters the placement as "in office". Additionally, the designated regional DCS Case Manager ensures that the Youth in Office or Transitional House Overnight data collection spreadsheet is updated each day.

Overview of Roles and Responsibilities

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<u>Role</u>	<u>Activities</u>
Regional Nursing Staff	<ul style="list-style-type: none">• Regional nursing staff are notified of every youth waiting at a transitional home for more than one night.• Nursing staff review Medication Observation Logs to verify they are being completed according to policy.• Nurses are available by phone for recommendations regarding symptoms or illness.• Nurses provide education for any staff related to medication distribution and documentation.
Regional Mental Health Consultants	<p>The regional clinician reviews form stack requests for support; contacts the assigned case manager and/or designated DCS staff at a transitional house to gather addition information regarding risks; and then:</p> <ul style="list-style-type: none">• Helps create a support/safety plan.• Checks if the youth has been seeing a therapist recently that could continue seeing the youth.• Makes placement and treatment recommendations.• Looks at therapeutic support needed while youth is in transition.
	<ul style="list-style-type: none">• Helps assigned case manager and designated DCS staff member in a transitional house to get a rapid intake if needed.• Checks if the youth have psychotropic medication and ensure staff understand the importance of daily and timely dosage.
Regional Education Specialists	<ul style="list-style-type: none">• Education specialist and FSW ensures the Best Interest Determination (BID) meeting occurs.• Upon enrollment to the new school, Education Specialist and/or FSW ensures the completed Education Passport is delivered to the school.• Education specialist ensures special education records and the Individual Education Plan (IEP) are transferred to the new school district.

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	<ul style="list-style-type: none">• Education Specialist follows up with the school and/or FSW to ensure a new IEP is completed and special education services are being provided.• Education specialist continues to collaborate with the school district's foster care point person to identify any concerns and barriers.
Regional Case Managers and/or Contracted Provider	<ul style="list-style-type: none">• Regional case managers work as a team to ensure the daily activities at a transitional house are executed safely and within department policies and protocols.• Enter Incident Reports• Coordinate daily meals• General housekeeping• Complete notations in each youth's transitional house binder<ul style="list-style-type: none">○ Medication Observation Record (MOR) – CS-4223 ○ Child Daily Log for Transitional Houses – CS-4227
Regional Transition House Managers	<ul style="list-style-type: none">• Serve as the transitional house manager; generally responsible for day-to-day operations and partnering with other transition home team members (i.e., professionals listed in the table below) to develop schedules for therapeutic and recreational activities, meals, medication, etc.
	<ul style="list-style-type: none">• Coordinates staffing rotation and provides oversight to ensure appropriate schedule.• Provides daily supervision of DCS staff present in a transitional house.• Manages and forecasts daily staffing level needs.• Ensures all Incident Reports are entered.• Completes CSRs for sitter services and requests/authorizations for security services.• Coordinates daily meals and food pantry stocking.

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| | <ul style="list-style-type: none">• Provides quality checks of each youth's transitional house binder.<ul style="list-style-type: none">○ Medication Observation Record (MOR) – CS-4223 ○ Child Daily Log for Transitional Houses – CS-4227 |
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Accessing a Transitional House for Other Purposes

1. The primary purpose of a Transitional House is to provide a safe and appropriate place for a child to wait until placement is found. However, some Transitional Houses may allow access to the Transitional House for reasons beyond a temporary waiting place for custodial children awaiting placement. Examples include, but are not limited to, a place for supervised visitation for custodial or noncustodial cases; a place for CFTMs for custodial and noncustodial cases; and a place for noncustodial children while expedited placement referrals are being completed or a parent/custodian is being located to pick up the child.
2. Each region will have a designated point of contact for any Transitional House located within the region and will be responsible for knowing whether the Transitional House is willing to allow the location to be used for any purpose other than waiting for placement of a custodial child. Prior to accessing the Transitional House for these purposes, the DCS Case Manager confirms with the designated regional point of contact that the Transitional House is available and willing to allow the activity to occur.
3. If the Transitional House is used to conduct supervised visitation or a CFTM, the DCS Case Manager ensures all applicable DCS Policy is followed.
4. Prior to a DCS Case Manager transporting any noncustodial child to a Transitional House, the DCS Case Manager obtains parent's consent to transport the child and consent to wait with the child at the Transitional House. This is documented by obtaining the parent's signature on [CS-0827, NonCustodial Consent for Transportation](#), and notating the purpose of waiting at the Transitional House on the form.
5. Prior to leaving the Transitional House, the DCS Case Manager ensures that the Transitional House is left in a good condition (e.g., toys picked up and put away; dishes washed; garbage removed; etc.). The DCS Case Manager also contacts the regionally identified Department staff or Transitional House staff to advise that they are leaving the Transitional House.
6. After using the Transitional House for a purpose other than waiting with a custodial child, the DCS Case Manager enters a case recording documenting the use of the Transitional House and the purpose of the use in the child's case in TFACTS.