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## 25 **701**            **Administrative Hearings**

### 26 Philosophy

27 The goal and purpose of the Administrative Hearing process is to provide an avenue for an  
28 alleged perpetrator to challenge the conclusion of the Child and Family Services caseworker who  
29 has made a supported finding of one of the non-severe types of child abuse or neglect. This  
30 opportunity is provided through an informal hearing before an administrative law judge. This  
31 process is distinct from that used when a finding of severe abuse or neglect is challenged.  
32  
33

### 34 **701.1**            **Right To Hearing For Alleged Perpetrators Of Non-Severe Abuse** 35 **And Neglect**

#### 36 Major objectives:

37 Child and Family Services will advise individuals of their hearing rights and assist them with the  
38 administrative hearing process.  
39

#### 40 **Applicable Law**

41 Utah Code Ann. [§80-2-1104](#). Request for division removal of name from Licensing Information  
42 System -- Petition for evidentiary hearing or substantiation.  
43  
44

#### 45 Practice Guidelines

- 46 A.     Hearing opportunity: When a Child and Family Services caseworker makes a supported  
47 finding of non-severe abuse or neglect, the alleged perpetrator will be informed of their  
48 right to challenge that finding before an administrative law judge. The alleged  
49 perpetrator has responsibility to request the hearing from the Utah Department of Health  
50 & Human Services (DHHS), Office of Administrative Hearings.  
51
- 52 B.     Request for and Review of Documents: An alleged perpetrator has the right to review  
53 documents related to the finding made by Child and Family Services prior to a hearing.  
54 The documents will be provided only when a proper request is made using processes  
55 established under the Government Records Access and Management Act (GRAMA). All  
56 documents relevant to the caseworker’s finding, which can be released to the alleged  
57 perpetrator under GRAMA, will be prepared and released sufficiently in advance of the  
58 hearing to allow the alleged perpetrator to prepare for the hearing. The Child and Family  
59 Services caseworker making the supported finding and his or her supervisor will assist in  
60 the process of compiling and preparing the documents for release.  
61
- 62 C.     Internal Review of Findings: Upon receiving notice that a hearing has been requested,  
63 the caseworker making the supported finding will review the case with his or her  
64 supervisor or other person within their region designated to review such findings. If the  
65 Child and Family Services caseworker believes upon reviewing the case that the  
66 supported finding was reached in error, the caseworker will ask that the record be  
67 changed prior to the hearing.

- 68  
69 D. Caseworker participation and Administrative support: The Child and Family Services  
70 caseworker who made the original finding will appear at a hearing to provide testimony  
71 and information to the administrative law judge and the alleged perpetrator as  
72 appropriate. A supervisor or administrator will appear with each caseworker at every  
73 hearing.  
74
- 75 E. Appeal of the administrative law judge decision: If after a hearing the Child and Family  
76 Services caseworker believes the administrative law judge reached an incorrect  
77 conclusion, the caseworker, through their supervisor will request an appeal to the juvenile  
78 court. This request must be communicated to the Office of the Attorney General, Child  
79 Protection Division within 10 days of the date the administrative law judge signs the final  
80 order overturning the Child and Family Services caseworker’s finding.  
81
- 82 F. Effect of court proceedings: If the same allegations that underlie the Child and Family  
83 Services caseworker’s conclusions have already been adjudicated in a juvenile, district,  
84 or justice court, and the alleged perpetrator has been found to be responsible for acts that  
85 constitute abuse, neglect, or dependency, Child and Family Services will not provide a  
86 hearing to the alleged perpetrator. When these circumstances exist the Child and Family  
87 Services caseworker and his or her supervisor, through an Assistant Attorney General  
88 will request that the Office of Administrative Hearings dismiss the hearing request. The  
89 Child and Family Services caseworker will nevertheless appear at a hearing scheduled by  
90 the administrative law judge unless the case is dismissed by the Office of Administrative  
91 Hearings.  
92
- 93 G. Stay of Office of Administrative Hearings proceedings: When a district, juvenile, or  
94 justice court is considering allegations relating to abuse, neglect, or dependency against a  
95 person who is the subject of a supported finding, and that person has requested a hearing  
96 before an administrative law judge, Child and Family Services may request a “stay” in  
97 the Office of Administrative Hearings proceedings. This does not limit the alleged  
98 perpetrator’s rights and allows for the Office of Administrative Hearings to consider the  
99 Child and Family Services caseworker’s finding at a later time. Child and Family  
100 Services will not ask for a stay in the Office of Administrative Hearings proceeding  
101 unless there is a court case underway at the time the request for hearing is made. Once a  
102 decision is made by a court, the Child and Family Services caseworker will ask to have  
103 the stay lifted and to have the case move forward. Where appropriate, Child and Family  
104 Services will use the findings made by the court to prove the accuracy of the Child and  
105 Family Services caseworker’s finding.  
106
- 107 H. Standard for proving supported finding was appropriate: By statute, the standard to be  
108 applied by the administrative law judge in reviewing the Child and Family Services  
109 caseworker’s conclusion is the same as that which is applied by the caseworker when  
110 reaching a conclusion. That is, whether there is a reasonable basis to conclude that abuse,

- 111 neglect, or dependency occurred based on the evidence known to or available to the Child  
112 and Family Services caseworker at the time of the original finding.  
113
- 114 I. The administrative law judge is required to make a separate finding regarding every  
115 allegation of non-severe abuse, neglect, or dependency that the alleged perpetrator  
116 challenges. Allegations of severe abuse will not be heard before an administrative law  
117 judge. Allegations of non-severe abuse or neglect may be heard together with allegations  
118 of severe abuse in the juvenile court.  
119
- 120 J. If the case is appealed to juvenile court, the court will apply the same standard as applied  
121 by the administrative law judge.  
122
- 123 K. Whenever a caseworker receives a decision from the Office of Administrative Hearings  
124 they should determine whether it has also been sent to the Child and Family Services  
125 Administrative Hearing Tracker. If it has not they must forward a copy to the tracker.  
126 The tracker will ensure that the changes to the information system are made if the  
127 decision has been overturned.  
128
- 129 L. Once a decision is made the caseworker should enter the information into the SAFE  
130 system under the Hearings tab. If the decision changes the finding originally entered in  
131 SAFE the Administrative Hearing Tracker will be responsible for ensuring the change is  
132 made.  
133
- 134 M. Child and Family Services caseworkers should be aware that the Office of Administrative  
135 Hearings might dismiss a hearing request on certain allegations but not on all allegations.  
136 This might happen when some of the claims but not others have been decided by a court.  
137
- 138 N. A stay in administrative proceedings should only be asked for or agreed to when there is  
139 a court proceeding underway at the time the request for a hearing or a stay of hearing is  
140 made. Child and Family Services caseworkers should ask for a stay only when the court  
141 proceeding that is underway involves Child and Family Services as a party. There is no  
142 requirement for Child and Family Services to stay its proceedings while a criminal or  
143 delinquency proceeding moves forward.

144 **702 Child And Family Services Employees As Out-Of-Home**  
145 **Caregivers**

146 Major objectives:

147 Child and Family Services employees may be licensed to provide out-of-home care for Child and  
148 Family Services. Placement of a child with a Child and Family Services employee must be in the  
149 best interest of the child. Child and Family Services staff will not receive preferential  
150 consideration for placements. **Children considered for placement with a current employee must be**  
151 **either a kinship placement or as an adoptive placement for a child that is legally free.**

153 **Applicable Law**

154 Administrative Rule [R501-12-6](#). Foster and Proctor Parent Requirements.

156 Practice Guidelines

157 A. A Child and Family Services employee wanting to apply to be an out-of-home caregiver  
158 must:

159 1. Receive approval from the region director of the region in which the caseworker  
160 is employed.

161 **2. Children being considered for placement with a current employee must either:**

162 **a. Meet the definition of kinship to the current employee; or**

163 **b. Be legally free and the intent of the placement is for adoption.**

164 **[2]3.** Any conflict of interest matters must be addressed prior to approval of the waiver.

165 **[3]4.** Submit a completed waiver request form to the Office of Licensing.

166 **[4]5.** The case will be staffed in another Child and Family Services region for approval  
167 or denial of placement.

168 **[5]6.** If the Office of Licensing denies the waiver, an appeal process is available  
169 through the DHHS assistant director and/or the Office of Administrative  
170 Hearings.  
171

## 703 Interstate Compact On Placement Of Children

Refer to 703 Interstate Compact On Placement Of Children

### Major objectives:

Child and Family Services will adhere to the Interstate Compact on Placement of Children (ICPC). Children/youth in state custody who are placed out of state will receive comparable quality of services from Child and Family Services as a child/youth who is placed in state.

### Applicable Law

Utah Code Ann. §80-2, Part 9. Interstate Compact on the Placement of Children.

### 703.1 Placement Of Foster Child Outside Of Utah—Interstate Placement

A. Practice Model applicability. Practice Model principles and case requirements for a foster or prospective adoptive child placed out of state are the same as for a child placed in Utah. Additional effort will be required to ensure that care and services received out of state are satisfactory for the child and to help the child achieve timely permanency. The Utah caseworker is responsible to maintain close contact with the child and family throughout the ICPC placement to ensure well-being (court jurisdiction maintained).

B. ICPC request for out-of-state placement. State law requires that the ICPC process must be completed before a child may be placed out of state. These steps are located in SAFE and are also listed in the ICPC state website at <https://defs.utah.gov/icpc-2/>.

1. ICPC Forms—Available in SAFE or on the website at <https://defs.utah.gov/icpc-2/>, or see the ICPC Guidebook for help in completing forms.

a. 100A Interstate Compact Placement Request.

b. 100B Interstate Compact Report on Child's Placement Status.

c. Medical and Financial Plan.

d. Form 101 Sending State Priority Home Study Request.

e. Mandatory Court Language form ICPC3 (Regulation No. 7).

2. Financial responsibility will always be primarily Utah's responsibility until the courts have terminated jurisdiction and the PSS/SCF case is closed, even if the family is supporting the child's needs in the other state. The financial and medical plan should be clearly outlined by the Utah caseworker on the Financial/Medical Plan form found in SAFE (Form ICPC4).

3. Placement cannot be made in the Receiving State (RS) until the Utah ICPC has received approval. All correspondence, prior to placement, must go through the ICPC channels.

C. Approval of placement requires the following:

1. Receipt of the RS' home study with a recommendation of placement from the Utah ICPC.

2. Form 100A that has been signed by the RS' ICPC approving placement.

- 215 3. Documented completion of background checks necessary for the requested home  
216 study.
- 217 4. Approval must come from a designated ICPC person who has been given  
218 authority to act in this role.
- 219
- 220 D. Regulation No. 7, Priority Placement of a child (often referred to as Expedited) requires  
221 the RS to complete the home study within 30 days.
- 222 1. Regulation No 7 is appropriate when the following criteria are met:
- 223 a. A child is under the age of two years; or
- 224 b. A child is in an emergency shelter; or
- 225 c. A child has spent a substantial amount of time in the home of the parent or  
226 relative who is being proposed for placement.
- 227 2. A judge must order a Regulation No. 7 to be conducted, a copy of an acceptable  
228 order can be found in SAFE ICPC3. This order must be signed by the judge and  
229 submitted to the ICPC office along with the Sending State Priority Home Study  
230 Request Form 101, also found in SAFE.
- 231 3. The court will send its order to the Child and Family Services caseworker within  
232 two business days. The Child and Family Services caseworker then has three  
233 business days to send the ICPC packet to the designated ICPC person. The ICPC  
234 person has two business days after receipt to forward the packet to the RS.  
235 Overnight mail will be required to meet priority deadlines.
- 236 4. Priority Placement of a child, Regulation No. 7 will not apply to any case that is  
237 for licensed or approved foster family care or adoption.
- 238 5. Priority Placement of a child, Regulation No. 7 will not apply if the child is  
239 already in the RS in violation of ICPC.
- 240
- 241 E. Consideration of placement of a child, out of state, with a biological parent requires you  
242 to follow ICPC process. The only time this would not be necessary is if the judge gives  
243 custody directly to the parent and Child and Family Services jurisdiction is terminated.
- 244
- 245 F. A separate 100A must be submitted to the Utah ICPC office for each type of home study  
246 or placement requested. For example:
- 247 1. A child is placed with a relative and they either want to become a licensed foster  
248 home or adopt the child. In either of these cases a new 100A and ICPC request  
249 must be made.
- 250 2. A child is placed in a licensed foster home and they want to change to adoption,  
251 so a new 100A and ICPC request must be made.
- 252 3. A child must be legally free to make an adoption request, and TPRs must be  
253 submitted with the request.
- 254
- 255 G. Providing a visit prior to placement could allow the child to build a relationship of trust  
256 with potential caregivers, and give caregivers the opportunity to engage with the child. If  
257 Child and Family Services wants to allow child visitation, prior to ICPC approval, the  
258 following steps must be completed:

- 259 1. If an ICPC request is made during or prior to the visit, the caseworker must  
260 clearly identify the duration of the visit including specific dates of arrival and  
261 departure. If this is not done the visit will be considered a placement and not a  
262 visit.
- 263 2. A local background screening must be done on the proposed family where the  
264 visit will be taking place. This includes local law enforcement and child abuse  
265 registry. The family could obtain and send copies of this document.
- 266 3. The caseworker must obtain court approval.
- 267 4. The above steps must be documented prior to the visit taking place.
- 268 5. A visit is outlined as follows in ICPC Regulation No. 9:
- 269 a. The purpose is to provide the child with social/cultural experience for a  
270 short duration,
- 271 b. The visit can be no longer than 30 days,
- 272 c. The child cannot be enrolled in school, and
- 273 d. The intent cannot be to have the child at a visit until official ICPC  
274 approval is received.
- 275 6. If a visit extends longer than 30 days it is considered a placement and is a  
276 violation of the ICPC guidelines.
- 277
- 278 H. If the child is an American Indian/Alaskan Native and thus covered by the Indian Child  
279 Welfare Act (ICWA), the child's tribe must be notified of the ICPC request. The ICWA  
280 law as outlined in Child and Family Services Practice Guidelines Section 705 must be  
281 adhered to when considering an ICPC placement. The Utah caseworker will clearly  
282 indicate in the cover letter as well as the 100A that ICWA applies and what notification  
283 has been provided to the tribes, along with any resulting correspondence.
- 284
- 285 I. Provider requirements when considering placing a child outside of Utah:
- 286 1. Prior to making any kind of home study request, the caseworker is responsible to  
287 engage with potential caregivers to assess their ability, desire, and motivation to  
288 have a home study completed that may result in a child being placed in their care.  
289 A copy of suggested questions can be found in the ICPC Guidebook or in the  
290 Kinship Limited Home Inspection/Safety Assessment Quick Reference as  
291 outlined in Safety Questions for Kinship Caregivers.
- 292 2. Requirements for a Parent Home Study request:
- 293 a. The caseworker must submit the ICPC packet to the State Office. All  
294 requirements for the ICPC packet are available in SAFE in the ICPC  
295 document file named "The Seven Steps to ICPC".
- 296 b. The parent must pass a criminal and child abuse registry check in the state  
297 they are living. Fingerprinting may be necessary if the parent has lived  
298 outside the state of current residence within the past five years or if there  
299 are indications of hits from other states found during the local checks.
- 300 c. The parent is responsible for meeting the financial and medical needs of  
301 the child. The parent does have the option of applying for TANF  
302 assistance in the state in which they reside.



- 303 d. Custody of the child cannot be given to the parent until the ICPC is  
304 approved and Child and Family Services has concurrence from the RS.  
305 e. The Utah caseworker is responsible upon receipt of the approved home  
306 study to:
- 307 (1) Review the home study, which includes information on criminal  
308 history and any recommendations.
  - 309 (2) Determine if the approved placement will be used:
    - 310 (a) If the child will be placed in the RS, submit form 100B to  
311 ICPC confirming the placement. Form 100B will initiate  
312 courtesy supervision in the RS.
    - 313 (b) If it is determined that the approved placement will not be  
314 used, submit form 100B to ICPC, terminating the case.
- 315 3. Requirement for a Relative Home request:
- 316 a. The Utah caseworker must submit the ICPC packet to the State Office.  
317 All requirements for the ICPC packet are available in SAFE in the ICPC  
318 document file named "The Seven Steps to ICPC".
  - 319 b. The relative must pass the Preliminary Placement Background Screening  
320 or the RS' equivalent to the Utah Criminal Justice Information System  
321 (UCJIS):
    - 322 (1) UCJIS or equivalent is searched to determine if the applicant has  
323 criminal convictions or patterns of arrests or convictions within the  
324 RS that indicate a likely threat of harm to a child.
  - 325 e. The relative must pass a Completed Background Screening – Fingerprint  
326 Based Check:
    - 327 (1) Fingerprint-based FBI national criminal history records are  
328 checked to determine if the applicant has criminal convictions or  
329 patterns of convictions that indicate a likely threat of harm to a  
330 child.
  - 331 d. The RS will follow their state laws pertaining to Adam Walsh  
332 requirements for relative placements. These laws may differ from the  
333 laws currently established in Utah. The Utah caseworker is responsible,  
334 upon receiving a home study, to determine if Adam Walsh requirements  
335 were met.
  - 336 e. The relative must pass the Preliminary Placement Background Screening –  
337 RS' Child Abuse Registry: The Child Abuse Registry is searched for the  
338 following:
    - 339 (1) To determine if the applicant has findings of a severe type of child  
340 abuse or neglect, or if other child welfare or domestic violence  
341 case history or patterns of behavior may pose a threat of harm to a  
342 child.
    - 343 (2) To determine if the applicant has findings of adult abuse.
  - 344 f. Any other requirements as expected by the RS.
  - 345 g. The child may be placed with the relative as a Preliminary Placement if  
346 the relative passes the above checks and placement is approved by the RS.

- 347 If the child is placed in a Preliminary Placement, the Utah caseworker  
348 must move to license the relative as a foster placement or determine if  
349 custody and guardianship will be given to the relative;
- 350 (1) — If the child is placed in a Preliminary Placement, the Utah  
351 caseworker will submit a new ICPC 100A request for a foster  
352 home study 90 days after placement of child, or
- 353 (2) — Indicate that custody and guardianship will be granted to the  
354 relative; this can only be done with the permission and approval of  
355 the RS, or
- 356 (3) — Indicate that the relative is going to adopt the child and submit an  
357 ICPC 100A request for an adoption home study 90 days after  
358 placement of the child.
- 359 h. — There is no payment made by Child and Family Services to a relative  
360 home placement.
- 361 i. — Utah is responsible for medical coverage of the child during placement.
- 362 j. — The Child and Family Services caseworker is responsible upon receipt of  
363 the approved home study to:
- 364 (1) — Review the home study, to include recommendations and criminal  
365 history.
- 366 (2) — Determine if the approved placement will be used; approval by the  
367 RS does not mean placement must be made.
- 368 (a) — If the child will be placed in the RS, submit form 100B to  
369 ICPC confirming the placement. Form 100B will initiate  
370 courtesy supervision in the RS.
- 371 (b) — If it is determined that the approved placement will not be  
372 used, submit form 100B to ICPC, terminating the case.
- 373 4. — Requirement for a Foster Care Home Study/licensure request:
- 374 a. — The caseworker must submit the ICPC packet to the State Office. All  
375 requirements for the ICPC packet are available in SAFE in the ICPC  
376 document file named “The Seven Steps to ICPC”.
- 377 b. — The potential foster parent must pass the Adam Walsh requirements,  
378 which include a full background screening with a fingerprint based  
379 criminal background check, and a review of the Child Abuse Registry. If  
380 the person has not resided in the same state for the past five years, requests  
381 for a review of the Child Abuse Registry need to be made to other states  
382 where the person has resided.
- 383 c. — Any other requirements as expected/outlined by the RS.
- 384 d. — The Utah caseworker is responsible to obtain a copy of the license (or the  
385 equivalent) that has been issued, in accordance with the Adam Walsh  
386 requirements.
- 387 e. — The Utah caseworker will need to obtain written documentation that Adam  
388 Walsh requirements have been met. This documentation is generally  
389 found in the home study.

- 390 f. In order for persons to be added as providers and to receive a Utah foster  
391 care reimbursement, the above documentation must be given to the  
392 region eligibility worker.
- 393 g. The foster care reimbursement to the out-of-state provider is based on the  
394 need of the child starting with the basic foster care rate. Utah caseworkers  
395 will follow Practice Guidelines Section 301.6 in determining the level of  
396 care and reimbursement rate. This also includes, but is not limited to,  
397 Placement Committee Approval. The agreed-upon amount will be sent to  
398 the RS, who must indicate their agreement prior to the child being placed.  
399
- 400 J. Exploring an out-of-state adoptive placement identified through a national website listing  
401 such as the Adoption Exchange:
- 402 1. Requirements of Adoptive Home Study Request: These are the basic steps for the  
403 caseworker in Utah to complete the interstate placement process for a child being  
404 sent to a RS. Information on prospective family in the other state:
- 405 a. A RS prospective adoptive family finds a child they may be interested in  
406 adopting from a national website listing. The Adoption Exchange is the  
407 Utah contracted provider that will accept calls from and give information  
408 about children listed on the website.
- 409 b. Contact information regarding a RS prospective adoptive family, who has  
410 a current home study, will be given to the identified Utah child's  
411 caseworker. The Utah caseworker can talk directly with the family about  
412 general considerations for the child and specific qualities Utah's Child and  
413 Family Services is looking for in a family.
- 414 e. The Utah caseworker may request that a current home study be sent for  
415 consideration.
- 416 d. When a RS prospective adoptive family is chosen for a Utah child, the  
417 Utah caseworker will confirm that the home study includes all background  
418 clearances required, both local clearances as well as Adam Walsh Act  
419 requirements (i.e., FBI fingerprint-based background clearance and out-of-  
420 state child abuse registry clearances).
- 421 e. When the chosen RS prospective adoptive family has met required  
422 background clearances, the family is contacted to convey detailed  
423 information about the child and address questions from the RS prospective  
424 adoptive family.
- 425 f. If the RS prospective adoptive family wants to continue with the adoption  
426 process after receiving detailed information about the child, services for  
427 the child will be identified in the prospective adoptive family's area.
- 428 g. The Utah caseworker will consult, verbally or through email, with the  
429 Utah ICPC compact administrator, to learn about specific requirements in  
430 the RS as each state's requirements vary.
- 431 h. The Utah caseworker will consult with the Adoption Subsidy Committee  
432 to determine possible medical and financial assistance including any  
433 subsidy amounts that may be available for the prospective adoptive

- 434 family. This will help address the financial plan for the child in the ICPC  
435 packet.
- 436 i. As part of developing the financial and medical plan, consult with Utah  
437 ICPC compact administrator to ensure medical assistance will be in place  
438 for the child in the RS through the Interstate Compact on Adoption and  
439 Medical Assistance (ICAMA).
- 440 j. The Utah caseworker will begin a conversation with the chosen  
441 prospective adoptive family to further determine their commitment to the  
442 child, assess needed supports, and begin to negotiate Adoption Assistance.
- 443 k. The Utah caseworker will fill out application forms with documentation  
444 for Adoption Assistance to present to the Adoption Subsidy Committee.
- 445 l. The Adoption Assistance Agreement should remain in draft status and  
446 NOT signed or implemented until the placement has been approved  
447 through ICPC.
- 448 m. Formal ICPC process overview: In the ICPC request, both states'  
449 requirements will be addressed. As part of ICPC, identified services will  
450 be requested, and medical and financial supports for the child will be  
451 determined.
- 452 (1) The Utah caseworker will prepare and send the completed ICPC  
453 packet to the Utah ICPC compact administrator. If any documents  
454 are missing, the Utah caseworker will be contacted.
- 455 (2) Form 100A is required for each child being placed. The Utah  
456 caseworker will prepare the Form 100A to formally request the  
457 placement of a child in the RS.
- 458 (3) Form 100A will define whether the adoption will be finalized in  
459 Utah or in the RS. The Utah caseworker will consult with a Utah  
460 Assistant Attorney General (AAG) to determine which state will  
461 finalize the adoption.
- 462 (4) Required documentation to be assembled for ICPC packet (found  
463 on "The Seven Easy Steps to ICPC" in SAFE as ICPC Form 2):
- 464 (a) Home study including BCI and Child Abuse/Neglect  
465 clearances required by the prospective adoptive parents'  
466 state of residence as well as the Adam Walsh Act.
- 467 (b) Documentation or statement regarding Native American  
468 heritage and compliance with ICWA, if applicable.
- 469 (c) Proof of IV-E eligibility, if applicable.
- 470 (5) The Utah caseworker will pull (ask your support people to help  
471 with this):
- 472 (a) Non-Identifying Background for both mother and father.
- 473 (b) Mental health assessment.
- 474 (c) Dental and medical forms.
- 475 (d) Most current Child and Family Plan.
- 476 (e) Two progress summaries.
- 477 (f) Child and Family Assessment.

- 478 (g) — All educational information.
- 479 (h) — Birth certificate.
- 480 (i) — Social Security card.
- 481 (j) — Signed court order verifying that Child and Family Services
- 482 has custody and jurisdiction or requesting the ICPC.
- 483 (k) — Court Order Terminating Parental Rights.
- 484 (6) — The Utah caseworker will complete the medical/financial plan
- 485 document found in SAFE. The Financial/Medical Plan should
- 486 include the adoption subsidy outline and ICAMA.
- 487 (7) — The Utah caseworker will prepare a cover letter telling the other
- 488 state:
- 489 (a) — Contact information: name, address, phone, fax, email.
- 490 (b) — Reason for ICPC request.
- 491 (c) — Why the child entered care in Utah and a brief summary of
- 492 the medical, psychological, and educational needs of the
- 493 child, specifically highlighting the child's special needs.
- 494 (d) — Whether or not the child is IV-E eligible.
- 495 (e) — Financial responsibility will be Utah's through Adoption
- 496 Assistance.
- 497 (f) — Anything else that is pertinent to the successful placement
- 498 of the child.
- 499 (8) — The Utah caseworker will make three complete copies of the ICPC
- 500 packet.
- 501 (9) — The Utah caseworker will fill out Form 100A in its entirety,
- 502 including all required signatures for each child. Form 100A can be
- 503 found in SAFE. Five copies will be required.
- 504 (10) — The Utah caseworker will submit the complete ICPC packet with
- 505 cover letter and form 100A to the Utah ICPC compact
- 506 administrator for processing and delivery to the RS ICPC compact
- 507 administrator.
- 508 (11) — The Utah ICPC transmittal will request a response from the RS
- 509 ICPC upon receipt and ask to be notified if there is any missing
- 510 information.
- 511 (12) — Most states will follow up with the Utah ICPC compact
- 512 administrator within two weeks to determine if the packet is
- 513 complete and/or if further information is needed.
- 514 (13) — Utah's ICPC compact administrator will check the status of ICPC
- 515 request if there is no response from the RS after a two-week time
- 516 period.
- 517 (14) — The Utah ICPC compact administrator will notify the caseworker
- 518 of the RS' decision to approve or deny the placement.
- 519 n. — If placement is denied, the child cannot be placed.
- 520 o. — If placement is approved:

- 521 (1) — The Utah caseworker will confirm with the Utah ICPC compact  
522 administrator that the process for the ICAMA has been completed  
523 by the RS to ensure receipt of Medicaid for the child, if  
524 appropriate.
- 525 (2) — The Utah caseworker will confirm with the prospective adoptive  
526 family that they understand the financial and medical plan and  
527 resources/supports, which may include IV-E or state-funded  
528 Adoption Assistance or foster care payments, Medicaid, and/or  
529 private insurance.
- 530 (3) — The Utah caseworker will communicate with the prospective  
531 adoptive family to ensure all special  
532 medical/educational/psychological services are in place.
- 533 (4) — The Utah caseworker will establish with the prospective adoptive  
534 family how visits and other transition plans will be carried out to  
535 maximize the child's adjustment to his/her new family and  
536 environment.
- 537 (5) — The Utah caseworker will arrange with prospective adoptive  
538 parents how and when they will review the child's case file and  
539 sign the Disclosure of Information form, sign the Adoption  
540 Placement Agreement, and review and sign the Adoption  
541 Assistance Agreement.
- 542 p. — Placing the child with the family:
- 543 (1) — The Utah caseworker will submit the completed Form 100B to the  
544 Utah ICPC compact administrator to notify the RS ICPC compact  
545 administrator of the child's placement and to initiate supervision  
546 services.
- 547 (2) — The RS ICPC compact administrator will arrange for the RS  
548 caseworker to supervise the placement and submit the agreed upon  
549 reports.
- 550 (3) — The Utah caseworker will communicate with the RS caseworker  
551 regarding required documentation about the child and family  
552 adjustment, the child's safety, progress regarding health, mental  
553 health education, and other services as needed to satisfy Utah.  
554 ICPC requires monthly in-home visits and quarterly reports.
- 555 (4) — The Utah caseworker will follow-up with the RS supervising  
556 agency, as needed, to ensure that required ongoing supports and  
557 services are appropriate and will be available after finalization.
- 558 (5) — The Utah caseworker is responsible to provide information and  
559 technical assistance to the prospective adoptive family and the RS  
560 caseworker, as needed, to ensure that finalization occurs properly  
561 and expeditiously.
- 562 (6) — At the time the adoptive family finalizes the adoption, the Utah  
563 caseworker will send form 100B, which will be forwarded to the  
564 RS ICPC Compact Administrator terminating the ICPC case. The

565 Final Adoption Decree is required to close the ICPC case, thus the  
566 Utah caseworker will send a copy, upon receipt, to the Utah ICPC  
567 Compact Administrator.  
568

569 **K. Exploring an out of state adoptive placement:**

- 570 1. The caseworker must submit the ICPC packet to the State Office. All  
571 requirements for the ICPC packet are available in SAFE in the ICPC document  
572 file named "The Seven Steps to ICPC".
- 573 2. Copy of the signed court orders, ordering Termination of Parental Rights or  
574 Parental Relinquishments must be included.
- 575 3. Any other requirements as expected/required by the RS. These requirements will  
576 need to be reviewed on a case by case basis as each state has its own adoption  
577 laws. It will be beneficial to all team members if as much information as possible  
578 is obtained prior to the ICPC request being made.
- 579 4. In most cases, if parental rights to a child have been terminated, Utah  
580 recommends that the ICPC request be for a foster home study and licensure of the  
581 proposed caretakers prior to the adoption request. Once the family has become  
582 licensed a new 100A request for the adoption must be submitted. (Note: This will  
583 allow any financial or medical issues, such as IV-E eligibility, to be addressed  
584 prior to the finalization). Other financial/medical options include TANF for  
585 relative support (such as Utah's specified relative grant) or an upfront adoption  
586 subsidy (if approved by committee.)
- 587 5. See the adoptions checklist to ensure that all necessary documentation is included,  
588 specifically the non-identifying background on biological parents, ICWA  
589 statement, and a Termination of Parental Rights signed by the judge.  
590

591 **L. Deciding to make the out of state placement:**

- 592 1. The RS will provide Utah with the results of the home study and background  
593 screening and will indicate whether or not the placement is recommended. The  
594 approved designated ICPC person will review the home study and assess that all  
595 Utah requirements have been met. If there are questions or concerns regarding  
596 the approval, the Utah caseworker must have approval from the supervisor and  
597 the region director prior to placement being made.
- 598 2. The Utah caseworker is responsible for reviewing the home study and any  
599 recommendations made by the RS as well as concerns or recommendations from  
600 the Utah compact administrator to determine if the placement is in the best  
601 interests of the child. The Utah caseworker has six months to make the placement  
602 in the approved ICPC home as the home study expires after six months if  
603 placement is not made. If the Utah caseworker still wants to consider the  
604 proposed placement after six months, a new ICPC request is required.
- 605 3. According to the Safe and Timely Act, the Utah caseworker has 14 days to decide  
606 if the placement is in the best interest of the child after receiving the completed  
607 home study and approval from the RS. The Utah caseworker will submit an

- 608 intent to use the placement to the designated ICPC person within the 14 day  
609 timeframe.
- 610 4. Form 100B in SAFE must be completed and submitted through the regional ICPC  
611 coordinator when the decision is made to place the child out of state and to  
612 request supervision of the child by the RS. This form serves as notification to the  
613 RS of the action being taken to place the child and must be submitted at the time  
614 of placement. If this form is not submitted, courtesy supervision will not take  
615 place in the RS and it may be considered an illegal placement.
- 616 5. If a decision is made not to place the child in a state after making a request for a  
617 home study, or after receiving the home study and approval from another state,  
618 the Utah caseworker must submit form 100B from SAFE to the regional ICPC  
619 coordinator to close the ICPC case.
- 620 6. Utah will retain jurisdiction over the child for a sufficient duration, generally  
621 about six months, to determine all matters in relation to the custody, supervision,  
622 care, treatment, and disposition of the child which it would have had if the child  
623 had remained in a placement in Utah. Termination of jurisdiction can be done  
624 only with concurrence of the appropriate authority in the RS. (See state law on  
625 Retention of Jurisdiction for full details.)
- 626
- 627 **M. Health Care Coverage/Medicaid:**
- 628 1. Availability of Medicaid coverage for a child that is placed out of state is  
629 contingent upon a child's Title IV E eligibility status.
- 630 a. If a child is Title IV E eligible and reimbursable and Utah is making a  
631 foster care payment to the out-of-state provider, the state in which the  
632 child is placed will issue a Medicaid card. The Utah caseworker will  
633 request this Medicaid in the cover letter and in the Financial/Medical Plan.
- 634 b. If a child is not Title IV E eligible and reimbursable, Utah is responsible  
635 for the child's health care coverage. If Utah is making a foster care  
636 payment to the out-of-state provider, then Utah Medicaid can remain open.  
637 An out-of-state health care provider has the option to enroll as a Utah  
638 Medicaid provider, if a willing provider can be located. If the child's  
639 health care needs cannot be met with Utah Medicaid, the Utah caseworker  
640 may work with the Fostering Healthy Children nurse to explore  
641 coordinating with an out-of-state health provider to bill for health care  
642 using the MI706 process.
- 643 c. The Utah caseworker will talk with the regional eligibility worker about  
644 questions concerning Title IV E or Medicaid eligibility for a child being  
645 placed out of state.
- 646 d. If the intent is for the kinship/relative placement to obtain TANF or a  
647 specified relative grant, it is the Utah caseworker's responsibility to  
648 provide copies of the court order pertaining to the placement of the child  
649 with this kin, a copy of the child's birth certificate, Social Security  
650 Number, and any other documents as required by the other state. In some  
651 cases, Medicaid is attached when TANF is approved for kinship



652 placement. The Utah caseworker may want to check with the RS'  
653 Medicaid eligibility office to make this determination.

654 e. If the permanency goal is adoption, the placement may qualify for an  
655 adoption subsidy. If placement is made and a subsidy is paid to the  
656 placement, the child may qualify for ICAMA.

657  
658 N. Courtesy Caseworker Visitation and Reporting: When Utah has decided to place a child  
659 after approval and review, the Utah caseworker will need to arrange for supervision by  
660 the RS by submitting form 100B to the appropriate region ICPC coordinator. If form  
661 100B is not submitted, courtesy supervision will not be provided by the RS and will not  
662 take place.

663 1. Utah will request that the RS make monthly face-to-face visits with the child and  
664 send a written report of the contact to Utah on a quarterly basis. [See: Purposeful  
665 Visits Practice Guidelines, Section 302.2.]

666 2. When submitting form 100B, the Utah caseworker will include any visitation  
667 plans or limitations as it pertains to the biological parents or other parties that the  
668 placement will be expected to adhere to. The Utah caseworker will also provide  
669 court orders with any specific orders in regards to this, if appropriate.

670 3. The Utah caseworker will talk with the child (if verbal) and out-of-state provider  
671 by phone on a monthly basis, in accordance with Purposeful Visitation Practice  
672 Guidelines, Section 302.2.

673 4. The Utah caseworker will invite the courtesy supervision worker to participate in  
674 any Child and Family Team meetings by phone and provide a copy of the Child  
675 and Family Plan so that the courtesy supervision worker is aware of the  
676 permanency goals and expectations. When changes are made to the plan or when  
677 a new plan is developed, a copy should be sent to the courtesy supervision  
678 worker.

679 5. Utah has both the authority and the responsibility to determine all matters in  
680 relation to the custody, supervision, care, treatment, and disposition of the child,  
681 the same as if the child had remained in a placement in the state of Utah.

## 683 **703.2 Child In Custody Of Another State To Be Placed In Utah**

### 684 **Interstate Placement**

685  
686 A. Before a child from another state may be placed in Utah, the sending state must complete  
687 the ICPC requirements and request a study be done on a proposed placement. The home  
688 will be assessed for safety and suitability by a designated Utah caseworker. This request  
689 is made by the sending state's ICPC compact administrator and must come through the  
690 Utah ICPC compact administrator for assignment. A child from another state may be  
691 placed in a foster family, with a parent, or in a kinship placement that has been approved  
692 for placement through a home study and criminal background screening completed by  
693 Child and Family Services. A child may also be placed in a licensed residential treatment  
694 center or group home; in this case a home study may not be required.

695

- 696 B. Timeframe for home study. A home study requested by a sending state (both licensing  
697 and kinship) should be completed and provided within 60 days of the date on the Utah  
698 ICPC transmittal. If the report cannot be completed within this timeframe, the Utah  
699 caseworker will notify the Utah ICPC compact administrator. The home study will be  
700 sent to the region ICPC coordinator who will forward to the Utah ICPC compact  
701 administrator, who will then forward it to the sending state.
- 702 1. Utah cannot grant final approval for the placement until the results of the  
703 background screening has been completed and the results have been approved.
  - 704 2. If the proposed caregiver has not responded within 60 days, the Utah caseworker  
705 will contact the region ICPC coordinator or ICPC compact administrator to staff  
706 case closure. If it is determined that the case will be closed, the Utah caseworker  
707 will send a report documenting the attempts to contact. This can be submitted  
708 through email or other correspondence.
- 709
- 710 C. Provider requirements when considering placing a child inside of Utah: The sending  
711 state will specify what type of home study they are requesting be completed by the Utah  
712 caseworker (the home study type will be indicated on the 100A and ICPC transmittal).  
713 The Utah caseworker will follow all Utah kinship requirements when conducting the  
714 home study.
- 715 1. Requirements for a Parent Home Study request:
    - 716 a. The parent must pass criminal and child abuse registry checks in the state  
717 of Utah. Fingerprinting may be necessary if concerns are found during the  
718 local checks.
    - 719 b. The parent is responsible for meeting the financial and medical needs of  
720 the child. The parent does have the option of applying for TANF.
    - 721 c. Custody of the child cannot be given to the parent until Utah gives  
722 concurrence to the sending state.
    - 723 d. The Child and Family Services caseworker is responsible upon completion  
724 of the requested home study to submit all documents to the region ICPC  
725 coordinator. The region ICPC coordinator will forward these to the Utah  
726 ICPC compact administrator.
    - 727 e. Include a copy of the home study along with the child specific home study  
728 form (SAFE KBS10), the background results, and all recommendations  
729 and conditions of placement.
  - 730 2. Requirement for a Relative Home request: The relative, and all persons 18 years  
731 and older residing in the home, must pass the Preliminary Placement Background  
732 Screening and the UCJIS, and must meet all Adam Walsh Requirements:
    - 733 a. UCJIS is searched to determine if the applicant has criminal convictions or  
734 patterns of arrests or convictions within Utah that indicate a likely threat  
735 of harm to a child.
    - 736 b. The relative must pass a Completed Background Screening—Fingerprint  
737 Based Check:
      - 738 (1) Fingerprint based FBI national criminal history records are  
739 checked to determine if the applicant has criminal convictions or

- 740 patterns of convictions that indicate a likely threat of harm to a  
741 child;
- 742 e. The relative must pass the Preliminary Placement Background Screening  
743 Utah Child Abuse Registry (SAFE): The Child Abuse Registry is searched  
744 for the following:
- 745 (1) To determine if the applicant has findings of a severe type of child  
746 abuse or neglect, or if there are other child welfare or domestic  
747 violence case histories that show patterns of behavior that may  
748 pose a threat of harm to a child;
- 749 (2) To determine if the applicant has findings of adult abuse.
- 750 d. Any other requirements as requested by the sending state.
- 751 e. If the sending state requests a kinship home study without a foster care  
752 license, the report can be completed and submitted to the sending state;  
753 however, the Utah caseworker completing the home study should indicate  
754 in the report to the sending state that this family would not qualify for a  
755 Utah foster care maintenance payment based on Utah policies and would  
756 not qualify for foster care Medicaid in Utah. If the sending state is going  
757 to pay a foster care maintenance payment to the kin, the home must meet  
758 licensing requirements. (Note: If the family will be seeking a specified  
759 relative grant under TANF, the child may qualify for Medicaid under that  
760 program.)
- 761 f. Under ICPC law the sending state retains legal and financial responsibility  
762 for the child; however, the relative can apply for TANF to help with  
763 financial and medical needs of the child;
- 764 g. The Utah caseworker is responsible, upon completion of the requested  
765 home study, to submit all documents to the region ICPC coordinator. The  
766 region ICPC coordinator will forward these to the Utah ICPC compact  
767 administrator;
- 768 h. The Utah caseworker will include a copy of the home study along with the  
769 child-specific home study form (SAFE-KBS10), the background results  
770 and all recommendations, conditions of placement, and indication that the  
771 Adam Walsh requirements were met.
- 772 3. Requirement for a Foster Care Home Study/licensure request:
- 773 a. A home study for a family home that is going to be licensed as a foster  
774 parent must meet the requirements of the Office of Licensing. A  
775 probationary license can satisfy this requirement if training is still pending  
776 for the family before a full licensure can be granted.
- 777 b. If a Foster Care Home Study is being requested, the Utah ICPC compact  
778 administrator will verify if the sending state is planning to make a Title  
779 IV-E foster care payment to the family for the child. The family must be  
780 licensed for foster care by the Office of Licensing if a Title IV-E foster  
781 care payment is planned. There may be cases when a child is not IV-E  
782 eligible, but the family may be licensed and receive a foster care payment  
783 from the sending state, and the child will not qualify for Utah foster care

- 784 Medicaid. The sending state will be responsible for all medical needs of  
785 the child. If there is no response from the proposed caregiver to the Office  
786 of Licensing within 60 days, the request should be denied.
- 787 e. The potential foster parent must pass the Adam Walsh requirements  
788 including a full background screening and a Finger Print Based criminal  
789 background check.
- 790 d. Review of Child Abuse Registry (SAFE), including any requests that need  
791 to be made to other states if they have not resided in the same state for five  
792 years.
- 793 e. The Utah caseworker will need to provide written documentation that the  
794 Adam Walsh requirements have been met. This documentation is  
795 generally found in the home study.
- 796 f. The Utah caseworker is responsible, upon completion of the requested  
797 home study, to submit all documents to the region ICPC coordinator. The  
798 region ICPC coordinator will forward these to the Utah ICPC compact  
799 administrator.
- 800 4. Requirements of Adoption Home Study Request:
- 801 a. Copy of the signed court orders ordering the termination of parental rights  
802 or parental relinquishments.
- 803 b. Any other requirements as requested by the sending state. These  
804 requirements will need to be reviewed on a case by case basis as each  
805 state has its own adoption laws.
- 806 e. If a foster home study has been completed, this study will fulfill the  
807 requirement for an adoption home study. If a foster home study has not  
808 been completed, an adoption home study will need to be done.
- 809 d. The Utah caseworker will review the adoption placement with the region  
810 adoption committee; provide documentation of the results of that review.  
811 This review will include consideration of the adoption subsidy that will be  
812 provided by the sending state, as well as if the child will be eligible for  
813 ICAMA.
- 814 e. The Utah caseworker is responsible, upon completion of the requested  
815 home study, to submit all documents to the region ICPC coordinator. The  
816 region ICPC coordinator will forward these to the Utah ICPC compact  
817 administrator.
- 818
- 819 D. Courtesy supervision provided to children from other state.
- 820 1. Practice Model Applicability. A Utah caseworker designated as a courtesy  
821 caseworker for a foster child placed in Utah from another state should follow  
822 basic Practice Model principles and requirements to support the child's safety,  
823 permanency, and well-being goals. The sending state will provide a copy of the  
824 case plan and assessment information. The Utah caseworker should work with  
825 the child and foster family to develop a Child and Family Team to support the  
826 placement and coordinate with the sending state. The Child and Family Team  
827 will address the need for respite care and other services and supports necessary to

- 828 provide for the child's safety and well being and to help the child achieve timely  
829 permanency;
- 830 2. Utah cannot provide courtesy supervision for children who have been placed in an  
831 ICPC approved home unless the sending state has provided form 100B,  
832 confirming that placement has been made. Form 100B will be sent from the Utah  
833 ICPC compact administrator to the region ICPC coordinator and assigned as  
834 determined by the region.  
835
- 836 E. Caseworker visitation and reporting: Face to face visits will be provided monthly, and a  
837 written report will be provided on a quarterly basis (refer to Purposeful Visitation  
838 Practice Guidelines Section 302.2). These reports will be sent to the Utah ICPC to be  
839 forwarded to the sending state. The Utah caseworker will submit a copy of the quarterly  
840 report to the region ICPC coordinator, who will forward it to the Utah ICPC compact  
841 administrator. The Utah caseworker may also provide a copy to the sending state's local  
842 worker. It is important that all correspondence be routed through ICPC compact  
843 administrators.  
844
- 845 The sending state is required by ICPC guidelines to maintain jurisdiction throughout the  
846 time the child is in the approved placement. Generally, supervision services will last four  
847 to six months but may be longer depending on the permanency goals of child. During  
848 this time, the sending state is responsible for the legal and financial support of the child.  
849 The sending agency has the both the authority and the responsibility to determine all  
850 matters in relationship to the "custody, supervision, care, treatment, and disposition of the  
851 child", just as the sending agency would have "if the child had remained in the sending  
852 agency state." (APHA Guide to the Interstate Compact for Placement of Children.)
- 853 1. Utah must provide courtesy supervision until the sending state's jurisdiction  
854 terminates. The sending state must have the agreement of Utah in order to close  
855 the ICPC case. Courtesy supervision ends when the child is returned to the  
856 sending state, the adoption finalizes, or permanent custody/guardianship is given  
857 to a relative or parent. In some cases the sending state may obtain court  
858 jurisdiction (PSS) when temporary custody and guardianship of the child is given  
859 to a relative or parent. In such instances, the case will remain open until the  
860 sending state's jurisdiction terminates.
- 861 2. The Utah caseworker can recommend that the case be closed when it is felt that  
862 the family is stable and is no longer in need of supervision services. This can be  
863 done by submitting a written report to the region ICPC coordinator.
- 864 3. The Utah caseworker will adhere to the case plan provided by the sending state as  
865 it pertains to the needs of the child. This may include visitation, obtaining  
866 counseling, school enrollment, and other resources as outlined in the plan.]  
867

## 868 **704 Placement Of A Child In Protective Custody**

869

### 870 **Applicable Law**

871 Utah Code Ann. [§80-3-303](#). Post-shelter hearing placement of a child in division's temporary  
872 custody.

873

### 874 Practice Guidelines

875 A. When children are placed in protective custody, caseworkers will immediately work with  
876 the staff designated by the region, such as resource family consultants and/or kinship  
877 specialists, to find a placement for the child within 24 hours or removal. The caseworker  
878 will also consult with the family and/or available or potential Child and Family Team  
879 Members at removal regarding potential placement options. The placement decision is  
880 subject to the best interest of the child.

881

882 B. The best interest of the child will be taken into account when considering preference for  
883 placement. The child's needs should be considered, such as the following (these are in no  
884 particular order, rather they should be considered in the context of each case and  
885 situation):

886 1. Safety factors in regards to the potential placement, including the threats of harm  
887 to the child, the protective capacity of the caregiver, and the child's  
888 vulnerabilities.

889 2. Reasonable proximity to the child's home.

890 3. Potential benefit of placing siblings together.

891 4. Educational needs, including proximity to the child's school and child's need for  
892 maintaining connections to school.

893 5. Needs specific to the child's age, including developmental progress.

894 6. Cultural factors, language, and religion specific to the child.

895 7. Existing relationship between a kinship caregiver and the child.

896 8. Health and mental health needs.

897 9. Potential for ongoing care or permanency with the kinship caregiver to prevent  
898 unnecessary changes in placement.

899

900 C. The following order of preference applies to placement of a child in the custody of Child  
901 and Family Services, and is subject to the child's best interest:

902 1. A noncustodial parent of the child.

903 2. A relative of the child.

904 3. A friend designated by the custodial parent or guardian of the child or an extended  
905 family member of the child, if licensed as a foster parent or if the friend obtains a  
906 child specific license. The custodial parent or guardian may only designate one  
907 friend as a potential Preliminary Placement, unless Child and Family Services  
908 otherwise agrees. A foster parent who has formerly adopted a sibling of the child  
909 may be considered as a kinship placement.

910 4. A former foster placement if still licensed, and if applicable.

911 5. Other licensed family resource home.

- 912 6. “Crisis placements,” such as Christmas Box House, Family Support Centers, or  
913 resource families who will take the child on a temporary basis while another  
914 placement is being explored. Using these facilities or crisis placements for longer  
915 than 24 hours will be the last consideration, in order to reduce the trauma  
916 experienced by the child as a result of multiple moves. (Please refer to Practice  
917 Guidelines [Section 704.1](#) regarding Crisis placements.)
- 918 7. An eligible Indian child must be placed within the foster placement preferences  
919 established by ICWA:
- 920 a. A noncustodial parent of the child.
  - 921 b. Member of the child’s extended family, according to the tribe’s customary  
922 definition of extended family (25 U.S.C. §1903(2)).
  - 923 c. Foster home licensed, approved, or specified by the Indian child’s tribe.
  - 924 d. Indian foster home licensed or approved by an authorized non-Indian.
  - 925 e. An institution for children approved by an Indian tribe or operated by an  
926 Indian organization that has a program suitable to meet the child’s needs.
  - 927 f. If none of the above is possible, the child may be placed in a non-Indian  
928 foster home or other appropriate out of home placement.
- 929
- 930 D. The caseworker will follow the protocol outlined in Practice Guidelines [Section 502](#),  
931 Kinship services – Preliminary Placement in order to investigate if there is a non-  
932 custodial parent or other relatives available that would be able to have the child placed in  
933 the home.
- 934
- 935 E. If Child and Family Services is unable to locate a placement for the child with a non-  
936 custodial parent or in a kinship home, then the child may be placed in a home with a  
937 licensed resource family. If the child is not placed with a noncustodial parent, a relative,  
938 or a designated friend, as defined in statute and guidelines, the caseworker will send an  
939 email to his or her supervisor explaining why a different placement was in the child’s  
940 best interest, and will copy and paste this email into the activity logs.
- 941 F. Each region will implement a process that will allow caseworkers to match children who  
942 have been removed with appropriate resource homes. Caseworkers should also refer to  
943 Practice Guidelines [Section 301.4](#) for further considerations when selecting an out-of-  
944 home caregiver.
- 945 1. If a child has been in foster care previously and reenters protective custody, the  
946 child's former foster parents will be notified if still licensed. Child and Family  
947 Services will make a determination of the former foster parent’s willingness and  
948 ability to safely and appropriately care for the child. If the former foster home is  
949 determined by Child and Family Services to be appropriate, the former foster  
950 parent will be given a preference over other foster parents for placement of the  
951 child.
  - 952 2. In order to minimize the number of placement moves for a child, Child and  
953 Family Services should attempt to locate a resource family that is willing to have  
954 the child remain with them while the case progresses and the permanency plan for  
955 the child is being worked on. Permanency planning will continually be assessed



- 956 and explored by the caseworker and the Child and Family Team. Child and  
957 Family Services will work with the resource family to provide them with support  
958 and services in order to maintain the child in the placement and to minimize the  
959 number of placement moves that the child experiences.
- 960 3. The resource family should not be pressured to make a decision on whether they  
961 are willing to adopt the child when the child is first placed in the home.
- 962 4. Upon placement of the child in a resource home, the caseworker will include the  
963 resource family in the Child and Family Team and ensure that they understand the  
964 permanency goal and concurrent plan for the child. Child and Family Services  
965 will keep the resource family informed of progress towards reunification, other  
966 potential placement options for the child (including kinship), and imminent  
967 changes in the long-term view and/or permanency goals.
- 968 5. Taking into account the permanency needs of the child, Child and Family  
969 Services may give preference for the initial placement of the child to be in a  
970 resource home of a family that has already expressed a desire to adopt a child.  
971 However, if a home that has expressed a desire to adopt is unable to be located at  
972 the initiation of a case, the child may be placed in a resource home that is willing  
973 to keep the child while reunification is still in progress and/or until another  
974 potential permanent placement can be located (kinship placement or another  
975 adoptive family). The resource family will then assist with the transition of the  
976 child to the permanent home.
- 977 6. The caseworker should use sensitivity when approaching the subject of adoption  
978 with a kinship or resource family and should allow the family an opportunity to  
979 get to know the child, understand the child's issues, and explore how adopting the  
980 child would affect their family. Keeping in mind the urgent permanency needs of  
981 the child, the caseworker will continually assess the resource family's desire to  
982 provide permanency to the child and will have ongoing discussions with the  
983 resource family to assess the situation. When a family that the child is placed  
984 with states that they will not adopt the child, the child does not have to be moved  
985 immediately; however, the caseworker will take immediate steps to initiate the  
986 process to locate another permanent placement for the child. In the event that  
987 reunification is not successful, no kinship placement options are located, and the  
988 resource family does not desire to adopt the child, the caseworker will maintain  
989 the child in the home of the resource family until another appropriate permanent  
990 family is located. The resource family will then assist with the transition of the  
991 child into the permanent home.
- 992 7. If Child and Family Services is unable to immediately locate a resource family  
993 that is willing to provide care for the child, a "crisis placement" may be used for  
994 the child. Crises placements are a last resort and should be use sparingly and only  
995 after all other placement options have been explored. (Refer to Practice  
996 Guidelines [Section 704.1](#) for definitions and guidelines related to crisis  
997 placements.)  
998



- 999 **G.** The Child and Family Services caseworker will make reasonable efforts to obtain  
1000 information essential to the safety and well being of the child and provide the information  
1001 to the out-of-home caregivers within 24 hours of placement. Either the regional resource  
1002 family consultant or the caseworker may provide the information so the out-of-home  
1003 caregiver can make an informed decision regarding the care of the child. Form CPS23 is  
1004 used for removals as a result of a CPS case (see Practice Guidelines [Section 205.2](#)), and  
1005 may be used to gather the information and provide it to the caregiver for children who  
1006 come into protective custody through other means.
- 1007 1. The Child and Family Services staff that provided the information to the caregiver  
1008 will document that the information has been provided to the caregiver in the  
1009 SAFE activity logs and will add the policy attachment “Placement – Child info  
1010 Given to caregiver prior to placement”.
  - 1011 2. Caseworkers should refer to Practice Guidelines [Section 301.4](#) for further  
1012 guidance on the type of information that should be provided to the out-of-home  
1013 caregiver as well as information on allowing the out-of-home caregiver to review  
1014 the child’s case file.  
1015
- 1016 **H.** The Child and Family Services caseworker will visit the child in the placement by  
1017 midnight of the second day after the date of removal from the child’s parents/guardians to  
1018 assess the child’s adjustment to the placement and the child’s well-being. Following the  
1019 visit, a Child and Family Services caseworker will continue to visit the child in the  
1020 placement once per week for the first four weeks that the child is in care.  
1021
- 1022 **I.** Once the ongoing caseworker has been assigned, that caseworker will be responsible to  
1023 complete the weekly visits for the first four weeks that the child is in care. After the first  
1024 four weeks, the caseworker will follow Practice Guidelines [Section 302.2](#) regarding  
1025 “Purposeful visiting with a child, out-of-home caregivers, and parents” while the child is  
1026 still in care.  
1027
- 1028 **J.** The Child and Family Services caseworker will offer the parents a visit with the child  
1029 within three working days of removal, if appropriate.  
1030
- 1031 **K.** The caseworker will ensure that any immediate medical needs for a child brought into  
1032 protective custody are addressed. A physical, dental, and mental health evaluation will  
1033 each be completed within 30 working days from the time the child is placed in protective  
1034 custody.  
1035
- 1036 **L.** The ongoing case will be opened in accordance with the timelines outlined in Practice  
1037 Guideline [Section 301.01](#) “Opening a Foster Care Case”.  
1038
- 1039 **M.** The placement information for each child will be documented in SAFE by midnight of  
1040 the second business day after the removal or change in placement.

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## 704.1 Crisis Placements

### Major objectives:

When a child enters protective custody, Child and Family Services will minimize the use of “crisis placements” while other placement options are explored. Using any crisis placement for longer than 24 hours will be the last consideration, in order to reduce the trauma experienced by the child as a result of multiple moves. Placing a child in a crisis placement in a “congregate care” setting is a placement of last resort, when all other placement options have been exhausted or when there are extenuating circumstances.

### Practice Guidelines

Using a crisis placement is acceptable for less than 24 hours while the caseworker explores placement options. The caseworker should take measures to explain to the child in an age appropriate manner (if the child’s mental capacity permits) that the placement is temporary.

- A. A “crisis placement” is a placement that is willing to keep the child for a temporary, short term basis, and there is an understanding that Child and Family Services is actively working towards moving the child to a kinship placement, another resource family, or another type of placement appropriate for the child’s needs. It does not include group or therapeutic settings whose purpose is to provide assessment and/or treatment for mental health or delinquency issues. A child placed in a crisis placement will have at least one unavoidable placement move. Examples of crisis placements include Christmas Box House, Family Support Centers, or resource families who will take the child on a temporary, short term basis while other placements options are sought.
  - 1. A “congregate care” setting is a facility that provides temporary, 24 hour care to a child by trained, rotating staff. A congregate care facility generally combines living quarters with centralized dining services, shared living spaces, and access to social and recreational activities.
  - 2. Children aged zero to five will be placed directly into a family home setting unless:
    - a. There are extenuating circumstances, such as they are part of a sibling group, and it is determined by the caseworker or regionally designated personnel that keeping them together outweighs the benefit of single caregiver placement. Extenuating circumstances will be documented in activity logs and approved by regionally designated personnel.
  - 3. The caseworker should make every effort so that the child will not remain in a crisis placement for more than 14 days. The Child and Family Services caseworker will coordinate with staff designated by the region, such as resource family consultants, to locate a placement appropriate for the child’s needs if the child is placed in a crisis placement.
  - 4. If a placement has not been found within 14 days, the Child and Family Services caseworker will review the child’s case weekly with the designated regional Placement Screening Committee.

- 1085 5. For children that are initially placed in congregate care settings, there will be daily  
1086 efforts made to find a placement for the child. Child and Family Services will  
1087 implement a specific high-level administrative review process in each region for  
1088 children placed in congregate care that includes review of all children placed in  
1089 congregate care at placement and weekly thereafter.  
1090 6. Efforts to find a placement for the child will be documented in the SAFE activity  
1091 logs.  
1092

## 704.2 Voluntary Placements

### Major objectives:

The parents or guardian of a child may request that Child and Family Services place their child in a voluntary temporary out-of-home placement, or a Child and Family Services caseworker may offer a voluntary temporary out-of-home placement. A voluntary out-of-home placement will only be used when the parents or guardian can have unrestricted access to the child without presenting a risk to the health, safety, or well-being of the child.

All voluntary foster care placements will be reviewed every 45 days with the Shelter Placement Screening Committee. A child needing to remain in a voluntary out-of-home placement beyond 180 days may only do so through a court order that finds that continued placement is in the best interest of the child.

### **Applicable Law**

Utah Code Ann. [§80-2-301](#). Division responsibilities.

### Practice Guidelines

- 1110 A. Ensure that the parent or guardian has explored all possible options for placement of the  
1111 child with relatives, friends, neighbors, etc. prior to initiating a placement through Child  
1112 and Family Services.  
1113  
1114 B. Before a child is accepted for foster care placement on a voluntary basis, the parents or  
1115 guardians must express a willingness to involve themselves in a time-limited child and  
1116 family plan. The parents, child, and caseworker will develop a plan (typically 45 days) to  
1117 resolve the crisis and return the child home within that time period.  
1118  
1119 C. Parents will be notified prior to the placement that they are required to pay child support  
1120 to the Office of Recovery Services while the child is in the voluntary out-of-home  
1121 placement to help defray costs of the child's care.  
1122  
1123 D. A written voluntary placement agreement must be in place at the time a child enters care  
1124 and specifies, at a minimum, the legal status of the child and the rights and obligations of  
1125 the parents, the child, and Child and Family Services while the child is in placement. The  
1126 time period that the agreement is in effect for 45 days.  
1127  
1128

- 1129 E. The family must provide documentation of medical coverage and understand that they are  
1130 responsible for the medical costs. The parents must also provide all information  
1131 necessary to make a Title IV-E and Medicaid eligibility determination for the child while  
1132 in the voluntary out-of-home placement.  
1133
- 1134 F. The family must provide the child's current medical provider of the child's current health  
1135 and immunization status, or arrange for the child to have a CHEC screen to insure the  
1136 child's health needs are current while in the voluntary out-of-home placement.  
1137
- 1138 G. At any time, parents may terminate the voluntary placement and have their child return  
1139 home.  
1140
- 1141 H. Payment for initial clothing or other special items will be based upon the parents' ability  
1142 to pay. These items may be paid by Child and Family Services at the discretion of the  
1143 supervisor and region director (or designee) and based on the needs of the child.  
1144
- 1145 I. In situations where the crisis is not resolved and it appears the child will require ongoing  
1146 foster care, the caseworker will petition the court for temporary custody. If the child  
1147 needs to remain in out-of-home care for longer than 180 days, the caseworker may  
1148 petition the court for custody prior to the end of the voluntary placement period.  
1149

## 704.3 Domestic Violence Shelters

### Major objectives:

Shelter services are offered to all persons meeting the definition of co-habitant who either voluntarily or through a court order seek domestic violence services.

The Child and Family Services caseworker may coordinate and link domestic violence victims with emergency shelter placements and services.

### **Applicable Law**

Utah Code Ann. [§80-2-301](#). Division responsibilities.

### Practice Guidelines

Victim and Dependent Services:

- 1164 A. Emergency Shelter: A 24-hour shelter care facility that provides supervision for families.  
1165
- 1166 B. Crisis Counseling Services will be made available to a domestic violence victim and  
1167 dependents upon request  
1168
- 1169 C. Alternate Crisis Housing: May be in motels, community shelters, or other comparable  
1170 facilities. \*Refer to Domestic Violence Principles 600 Guidelines for victim and  
1171 dependant services and alternative crisis housing.  
1172

- 1173 D. If the placement in a domestic violence shelter is made by the Child and Family Services  
1174 caseworker as an alternative to removing the children from the parent or guardian's  
1175 custody, a child and family team meeting will be coordinated within three working days.  
1176 (This meeting will include domestic violence shelter staff.)  
1177
- 1178 E. Shelter staff will provide information to the Child and Family Services caseworker when  
1179 the family plans to leave the shelter facility.  
1180

## 704.4 Emergency Foster Care Placements

### Major objectives:

1182 When a child is removed from a foster care placement, the Child and Family Services caseworker  
1183 may place a child in a temporary emergency foster placement. Shelter homes or facilities may be  
1184 utilized.  
1185

1186  
1187 Emergency Foster Care Placements must be staffed with supervisors.  
1188  
1189

### **Applicable Law**

1190 Utah Code Ann. [§80-2-301](#). Division responsibilities.  
1191  
1192

### Practice Guidelines

- 1193 A. Emergency foster care placements may be used:  
1194  
1195 1. When the Child and Family Services caseworker has made the determination that  
1196 the child's out-of-home placement may be unsafe and removal is necessary.  
1197 2. When a more permanent placement cannot be identified.  
1198 3. When determined to be in the best interest of the child.  
1199
- 1200 B. When emergency foster care placements are initiated, notification needs to be provided  
1201 to:  
1202 1. The parents.  
1203 2. The Assistant Attorney General.  
1204 3. The Guardian ad Litem.  
1205 4. The Juvenile Court.  
1206
- 1207 C. Following an emergency foster care placement, a child and family team meeting will be  
1208 convened within three working days.  
1209
- 1210 D. The Child and Family Services caseworker will visit the child in the temporary placement  
1211 within 48 hours.  
1212

1213 **705 Indian Child Welfare Act**  
1214  
1215 (*See Practice Guidelines [Section 705.](#)*)  
1216

## 1217 706 Drug Testing Protocol

### Major objectives:

The purpose of this protocol is to provide guidance for caseworkers who need to drug test their clients. It covers the purpose of drug tests, the referral process, talking to clients about drug testing, choosing test types and frequency, how to address no-shows, positive and diluted tests; it also addresses testing of youth, collaboration with other agencies, and obtaining DOPL reports on clients. Drug testing can be a helpful monitoring tool when used sensibly, but cannot be used alone to determine whether children are safe.

### Practice Guidelines

The following protocol may differ depending on the client's participation in drug court. If a client is participating in a drug court program, the protocol of that program must be followed. Otherwise, the following applies.

#### A. Purpose.

1. Drug testing in child welfare is used to help facilitate decision making with families. It can be used to detect substance use during an investigation, monitor treatment compliance, or as a deterrent.
2. Drug testing should not be the only means used to determine the existence or absence of a substance abuse disorder or to monitor treatment compliance. In addition, drug tests do not provide sufficient information for substantiating allegations of child abuse or neglect or making decisions about the disposition of a case. Drug tests alone shall not be used to determine whether children are safe.

#### B. Evaluation for Drug Testing.

1. In order to decide if and what drug tests are needed for a client, a good assessment of the client's current and past substance abuse is necessary. This may include:
  - a. A formal substance abuse assessment performed by a qualified outside provider.
  - b. A review of the CPS investigation including any initial drug tests performed by CPS.
  - c. Third party reports.
  - d. Caseworker's direct observations and conversations with the client.
  - e. Caseworker's continuous efforts in engaging the client and building a trusting relationship with the client to obtain more accurate information about the client's drug use (though some people initially are in denial of their drug use and guarded against government intervention). Completing a time-line with a client can be a way for them to open up about their drug history.

#### C. Discussing Drug Testing with Clients.

1. The caseworker advises the client of the purpose of the drug testing before testing begins, which is to assist in case planning and to monitor progress if substance



- 1261 abuse treatment services are warranted. The client needs to understand the  
1262 consequences of positive and negative drug test results, as well as the  
1263 consequences of the client's refusal to undergo testing or failing to call in to the  
1264 drug testing provider.
- 1265 2. If the children are living at home (in-home case/trial home placement), the  
1266 caseworker should discuss a relapse plan with the parent that addresses the  
1267 children's safety and care.
- 1268 3. The caseworker needs to discuss the client's use of medications, including  
1269 prescribed and over-the-counter medications they are currently using and for what  
1270 condition, and explain that some medications will show up positive in drug tests.  
1271 The caseworker shall make a copy of the client's prescriptions and ask them to  
1272 sign a release so that they can talk to their prescribing doctor. If the client is  
1273 participating in drug court, the caseworker needs to go over the drug court  
1274 requirements, in particular when the court forbids the use of any medications.
- 1275 4. Prior to sending clients to drug test, the caseworker will review with the client the  
1276 Drug Testing Agreement for DCFS Client form, which explains client rights and  
1277 responsibilities, drug testing requirements and potential consequences of test  
1278 results. The caseworker will go over the drug testing procedure, including call-in  
1279 number and other check-in methods, testing locations, and hours of operation,  
1280 along with the need to bring identification to every test. The client and the  
1281 caseworker will both sign the form. The client will get a copy of the form, and  
1282 the original will be kept in the case file. If the client refuses, the caseworker will  
1283 document the refusal in SAFE. CPS caseworkers are advised to keep blank forms  
1284 (SAFE Form DCFS44) with them when visiting clients, in order to have it  
1285 available when requesting a client to drug test.
- 1286 5. In addition, the caseworker will ask the client to sign a release so that Child and  
1287 Family Services can share the drug testing results with partner agencies  
1288 (probation, treatment, courts).  
1289
- 1290 D. Referral Process.
- 1291 1. The caseworker will complete a SAFE drug test referral form, which is  
1292 automatically sent to their regional drug testing coordinator. Within 24 hours  
1293 (during a workweek), the regional drug testing coordinator will review the form,  
1294 obtain any additional information if necessary, enter the referral on the contracted  
1295 drug testing provider's website, and inform the caseworker that their client is  
1296 setup to start drug testing. Drug tests are subject to regional approval and must be  
1297 re-approved at a specified interval.
- 1298 2. If the client needs to drug test before the required 24 hours, the caseworker shall  
1299 call their regional drug testing coordinator immediately. The regional drug testing  
1300 coordinator will then process the request as soon as possible.
- 1301 3. Caseworkers shall not enter any referrals directly into the drug testing provider's  
1302 website.
- 1303 4. The regional drug testing coordinator shall help guide the caseworker's decision  
1304 on the type of drug tests to perform and the frequency of tests (see Determining



1305 Frequency below). The regional drug testing coordinator shall also serve as the  
1306 point of contact in each region/office for the contracted drug testing provider and  
1307 for any drug testing related questions.  
1308

1309 E. Child Protective Services – Initial Drug Test.

- 1310 1. One-time drug testing may be needed to determine if someone is abusing  
1311 substances. The preferred test types are:
- 1312 a. Broad-panel, which is a test that can detect a wide range of substances.
  - 1313 b. ETG, spice, bath salts, and oxycodone tests are single substance tests that  
1314 can be added to a 5- or broad-panel test, when indicated.
  - 1315 c. Oral swabs (saliva testing) can be used in rural areas or with special  
1316 permission on a case-by-case basis in urban areas.
    - 1317 (1) Collection sites may revert to oral swabs if a specimen collector of  
1318 the same sex is not available.

1319  
1320 F. Determining Frequency.

- 1321 1. After initial drug testing occurs, a randomized ongoing drug testing schedule may  
1322 be indicated to provide evidence of success for parents, monitor compliance, and  
1323 evaluate progress of treatment.
- 1324 2. Testing frequency should be based on the individual’s circumstances and the  
1325 purpose of the test. When determining the testing frequency, caseworkers need to  
1326 consider the following:
- 1327 a. The treatment provider’s recommendations, if client is in treatment.
  - 1328 b. The substance(s) the client is known to have abused or is suspected of  
1329 abusing. Some substances have a longer detection window, such as THC  
1330 (Marijuana): 1-7 days for light use, 10 days to 6 weeks for heavy use; or  
1331 Benzodiazepines (Sedative Hypnotics, for example: Xanax): 3 days to 6  
1332 weeks. This means that a lower frequency can be used. Some substances,  
1333 such as amphetamines (2-4 days) have a shorter detection window and  
1334 may require a higher frequency.
  - 1335 c. The purpose of the test: Investigatory/Assessment: One-time or occasional  
1336 testing (not on a schedule); Compliance / Court-ordered testing /  
1337 Treatment Progress: Random testing (no more than 3 times per week) with  
1338 decreasing frequency, based on client status; Deterrent: Random testing,  
1339 1-2 times per month.
  - 1340 d. Whether children reside with the person being tested or have unsupervised  
1341 visits with that person: During In-Home Services cases, use the findings of  
1342 the SDM risk assessment and reassessments as a guide. For example, if the  
1343 family is assessed at a “very high risk level” and the risks are related to the  
1344 parent’s substance abuse problem, then a higher frequency is indicated.
  - 1345 e. Special circumstances and transitions: For example, if a partner/spouse is  
1346 moving in with the client being tested, if children move back home, if the  
1347 client is changing jobs, etc., it may be indicated to increase the frequency  
1348 for a while or increase other forms of monitoring.

- 1349 f. If reports from treatment providers or third parties indicate a possible  
1350 relapse, or the client misses several appointments in a row, then increasing  
1351 the frequency may be necessary.
- 1352 g. Regional drug testing guidelines also need to be considered.
- 1353 3. The DHHS does not support random drug testing more than three times a week.
- 1354 4. Frequency must be reassessed when the referral expires (every 90 days). Factors  
1355 to consider include client's everyday functioning; ability to hold a job, attend  
1356 visits, maintain a household, and attend treatment/therapy; client's test results and  
1357 calling compliance, etc. If the client has been testing free of illicit substances  
1358 during this time, the testing frequency should be decreased, unless the above-  
1359 mentioned circumstances/transitions require otherwise.
- 1360 5. Caseworkers who suspect that a client is under the influence of drugs or seems to  
1361 smell of alcohol during a visit can request the client to go test the same day or by  
1362 the next morning, in order to assess whether the client is or is not using  
1363 drugs/alcohol. In that case, the caseworker needs to move the online random  
1364 testing schedule to the desired day.
- 1365
- 1366 G. Determining Which Drugs to Test For.
- 1367 1. Based on the client's substance abuse assessment and/or their initial drug test  
1368 results, the caseworker shall determine which substances the client may be prone  
1369 to use. The caseworker then selects the drug test(s) depending on the client's  
1370 choice of substances, in compliance with regional approval process.
- 1371 2. Child and Family Services prefers the testing methodology for which the federal  
1372 government (SAMHSA and/or the College of American Pathologists) has  
1373 developed standards. For this reason, urine and saliva are the preferred testing  
1374 specimens. The limitations of testing sweat, meconium, or other specimens shall  
1375 be communicated along with the results.
- 1376
- 1377 H. Confirmation of Positive Test Results.
- 1378 1. All positive drug tests will be confirmed by a SAMHSA certified laboratory using  
1379 gas or liquid chromatography-mass spectrometry (GC/MS or LC/MS) technology.  
1380 (This is currently done automatically by the contracted testing provider.)
- 1381
- 1382 I. Obtaining Results/Reporting to the Court.
- 1383 1. It is the caseworker's responsibility to access the contracted drug testing  
1384 provider's website frequently to check their clients' test results and call-in  
1385 compliance (at least weekly). If the final results are not yet posted, the  
1386 caseworker needs to go back to the website.
- 1387 2. Caseworkers need to print out the clients' test results and call-in compliance  
1388 before court hearings to submit to the attorneys. Attorneys need to see the actual  
1389 printout, not a summary of the results in the court report.
- 1390 3. If the client requests their drug test results and the client is involved in a juvenile  
1391 court case, the caseworker shall check with the assigned Assistant Attorney  
1392 General before releasing a copy of the test results to the client.

- 1393  
1394 J. Test Results.  
1395 1. Dilute test results, as well as no-shows, should trigger fact-finding. They alone  
1396 should not result in the removal of children from their home. Actions/sanctions  
1397 may be indicated before considering the removal of the child/children. Children  
1398 should only be removed on the basis of a safety assessment. If the client has a  
1399 medical reason for the dilute test result, like being diabetic or prediabetic, and the  
1400 medical reason is verified by a doctor, the dilute may be acceptable (need to look  
1401 at the creatinine levels and the specific gravity to determine if the dilution is  
1402 caused by this. The contracted drug testing provider can help with this). If the  
1403 fact-finding indicates that the dilutes and no-shows are the results of a relapse  
1404 AND the safety assessment indicates that the children are unsafe at home, a  
1405 removal may be indicated.
- 1406 2. When a client receives a positive drug test result, the caseworker shall:  
1407 a. Discuss the results in a timely manner with the client, giving the client the  
1408 opportunity to explain the results:  
1409 (1) Is the substance found in the sample the result of a valid  
1410 prescription? (-> check the prescription.)  
1411 (2) Is it part of the client's medication-assisted drug treatment, such as  
1412 methadone or suboxone?  
1413 (3) Is the client admitting to the drug use? If not, do they have a  
1414 possible explanation for the result?  
1415 b. Contact the drug treatment provider and get a report if the client is in drug  
1416 treatment.  
1417 c. Share the test result together with the caseworker's findings with the court.  
1418 d. If the client has custody of the children or unsupervised visits, the  
1419 caseworker must assess the children's safety and take necessary actions to  
1420 protect them. As mentioned above, children are not removed based on a  
1421 positive test, but on the basis of a safety assessment and staffing the  
1422 situation with other key team members. **THE REMOVAL OF A CHILD**  
1423 **OR SUSPENSION OF VISITS TO PUNISH A PARENT FOR A**  
1424 **POSITIVE TEST RESULT IS NOT ACCEPTABLE.**
- 1425 3. It is important that caseworkers (and the court) understand that relapse is part of a  
1426 drug addict's recovery process. A relapse does not necessarily mean that the client  
1427 is failing their recovery; it may be a hiccup in their road to recovery. It is  
1428 important for caseworkers to work closely with the client and the treatment  
1429 providers to figure out how to help the client get back on track. If the client is  
1430 unable or unwilling to resume their treatment or cooperate with Child and Family  
1431 Services on a recovery plan, the team needs to re-evaluate the goals set for this  
1432 case.  
1433
- 1434 K. Drug Testing Children/Youth.  
1435 1. Children receiving services from Child and Family Services may be asked to  
1436 submit to drug tests, if deemed necessary. As with adults, it is important to

- 1437 consider the impact of drug testing on children before deciding to refer them to  
1438 test. Is drug testing necessary or are there other ways to obtain evidence, to  
1439 monitor, or to deter?
- 1440 2. There are two main purposes for drug testing children:
- 1441 a. When a child is suspected of using drugs themselves; and
- 1442 b. When a child may have been exposed to drugs by a third party (usually  
1443 their parents). For this latter purpose, a hair test is usually performed,  
1444 which provides a longer detection window.
- 1445 3. As with adults, it is important for the caseworker to discuss the purpose and  
1446 consequences of drug testing with children and explain the collection process. The  
1447 child's age and cognitive abilities need to be taken into consideration when  
1448 deciding what to say. Children often have questions they need to ask. This may  
1449 help reduce anxiety that children feel in anticipation of these tests.
- 1450 4. While the urinalysis sample collection for adults is by default observed by a third  
1451 party, the collection will NOT be observed for children under 18 years of age,  
1452 unless requested by the caseworker. Many children receiving services from Child  
1453 and Family Services have been victims of abuse; being observed by a stranger  
1454 while having to produce a urine sample can be traumatizing. Therefore, it was  
1455 decided to leave out the observation when testing children. However, if  
1456 caseworkers suspect that the youth could be tampering with the sample, they can  
1457 specify that this youth must be observed during the collection on the Drug Testing  
1458 Referral form (comment section).
- 1459 5. Children must show a valid ID when going to test. A school ID is accepted. If no  
1460 ID is available, the caseworker or caregiver can vouch for the identity of the child.
- 1461 6. Children in the custody of Child and Family Services do not need the parents'  
1462 consent to be tested. The parents, however, must be informed of the drug testing  
1463 results. If there are valid reasons to not share the results with the parents, the  
1464 caseworker shall discuss the reasons with the supervisor and document them in  
1465 the file.
- 1466 7. Drug testing shall not be used as a punishment by out-of-home caregivers or  
1467 caseworkers. Drug testing should not be the foster parent's decision and requires  
1468 caseworker approval.
- 1469
- 1470 L. Coordination and Collaboration.
- 1471 1. If clients are testing for other agencies or programs, the caseworker needs to  
1472 coordinate with these agencies/programs to try to avoid duplicate testing. These  
1473 agencies may include probation, drug court (juvenile or felony drug court), and  
1474 drug treatment providers. It is a waste of tax dollars and a burden on the client to  
1475 perform duplicative drug tests.
- 1476 2. The caseworker shall request the client to sign a release in advance to allow  
1477 agencies to share drug test results and avoid duplicate testing. The caseworker  
1478 needs to contact these agencies and service providers to discuss how to best  
1479 manage drug testing and sharing of results. It is in everyone's best interest to  
1480 collaborate closely among agencies to help a client's recovery from addiction.

- 1481  
1482 M. Obtaining a Utah Controlled Substance Database Report from DOPL.  
1483 1. Caseworkers who suspect their client of misusing prescription medications can  
1484 request a Utah Controlled Substance Database report from DOPL, which shows  
1485 this person’s prescription history and can help identify potential cases of drug  
1486 over-utilization and misuse of controlled substances. DOPL reports are an  
1487 effective tool to help determine whether this person is “doctor shopping” and  
1488 going to more than one pharmacy, which would be a sign of prescription  
1489 medication abuse and possible addiction.  
1490 2. The caseworker shall ask the client to sign the form “AUTHORIZATION TO  
1491 RELEASE INFORMATION FROM UTAH'S CONTROLLED SUBSTANCE  
1492 DATABASE PROGRAM”, have it notarized, and mail it to DOPL. If the client  
1493 refuses to sign the release discuss options with the Attorney General's office. Utah  
1494 Code Ann. [§58-37f-302](#) prohibits database information from being accessed by  
1495 "discovery, subpoena, or similar compulsory process”, which means that a client  
1496 cannot be forced or ordered to release this data.  
1497 3. The caseworker may also want to accompany the client to the DOPL office to  
1498 obtain a report (the DOPL office located in Salt Lake City).  
1499 4. Confidentiality is critical. The client’s DOPL report cannot be shared with  
1500 anybody, except with the AAG and GAL if their names are included on the  
1501 release. DOPL reports and copies of it cannot be given to therapists, treatment  
1502 providers, or other attorneys, and it cannot be attached to court reports, given to  
1503 the court, given to the parents, used in mental health or substance abuse  
1504 assessments, distributed in discovery or GRAMA requests, or used as an exhibit  
1505 at a hearing or trial.  
1506  
1507 N. Medication-Assisted Drug Treatment.  
1508 1. The DHHS supports the use of medication-assisted drug treatment (such as  
1509 Methadone, Suboxone, and Vivitrol). The DHHS does not approve blanket bans  
1510 on medication-assisted drug treatments.  
1511

1512 **707**            **Placement Prevention/Disruption Funds (Special Needs Funding)**  
1513  
1514    (See [Section 707.](#))  
1515

1516 **708** **Suicide Screener**  
1517  
1518 (See [Section 708.](#))  
1519