

# Stillaguamish Tribe of Indians

PO Box 277  
3310 Smokey Point Drive  
Arlington WA 98223

## STILLAGUAMISH TRIBE OF INDIANS

### BOARD OF DIRECTORS

Resolution 2014/171

#### RESCINDING RESOLUTION 2010/59 AND APPROVING THE MEMORANDUM OF UNDERSTANDING BETWEEN THE STILLAGUAMISH TRIBE OF INDIANS AND THE WASHINGTON STATE DEPARTMENT OF SOCIAL AND HEALTH SERVICE CHILDREN'S ADMINISTRATION

\*\*\*\*\*

**WHEREAS**, the Stillaguamish Tribe of Indians is a party to the Treaty of Point Elliott of January 22, 1855, 12 Stat. 927; and is a sovereign, Federally Recognized tribe, which the U.S. Government acknowledged in October 1976; and

**WHEREAS**, the Stillaguamish Tribe of Indians Board of Directors is the duly constituted Governing Body of the Stillaguamish Tribe of Indians, in accordance with Articles III, IV and V of the Stillaguamish Constitution; and

**WHEREAS**, the Stillaguamish Tribe of Indians Board of Directors, acting in the best interest of its people is embarked on a course of self-determination; and

**WHEREAS**, the authority to protect the Tribe as a sovereign political entity is vested in the Stillaguamish Tribe of Indians Board of Directors ("Board of Directors" or "Board") under Article III and Article V, Sec. 1 of the Constitution, which Board has enumerated authority under Article V, Sec. 1 (b) to administer the affairs and assets of the Tribe, develop appropriate contracts, leases, permits, loan documents, sale agreements and, under Article V, Sec. 1(h), to exercise other necessary powers to fulfill the Board's obligations, responsibilities and purposes as the governing body of the Tribe; and

**WHEREAS**, pursuant to Resolution 2010/59, certified copy of which is attached herein and incorporated by reference, the Board approved the execution of a Memorandum of Agreement between the Tribe and Washington State Department of Social and Health Service Children's Administration, which Agreement was never executed by the State of Washington; and

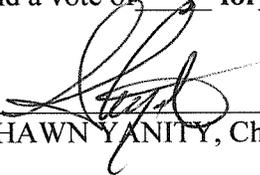
**WHEREAS**, the Board recognizes that protecting the physical, emotional, and spiritual well-being of its children is of the utmost importance to the Tribe, and therefore wishes to execute a new Memorandum of Understanding with the State of Washington Department of Social and Health Services Children's Administration (hereinafter "2014 Memorandum of Understanding", also attached and incorporated by reference); and

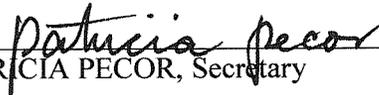
**WHEREAS**, in the process of entering into the 2014 Memorandum of Understanding, the Board finds it would be in the best interest of the Tribe to rescind Resolution 2010/59 and execute the 2014 Memorandum of Understanding in its place; now

**THEREFORE BE IT RESOLVED**, that the Stillaguamish Tribe Board of Directors hereby authorizes the Chairman, or in his absence the Vice-Chairperson or Secretary, to execute the 2014 Memorandum of Understanding with DSHS Children's Administration and to take all steps necessary to carry this Resolution into effect.

**CERTIFICATION**

As Chairman and Secretary of the Stillaguamish Tribal Board of Directors, we hereby certify that the above resolution was duly adopted at a meeting of the Stillaguamish Tribal Board of Directors held on the 14th day of December, 2014 at which time a quorum was present and a vote of 5 for 0 opposed and 0 abstain was cast.

  
\_\_\_\_\_  
SHAWN YANITY, Chairman

  
\_\_\_\_\_  
PATRICIA PECOR, Secretary

# Stillaguamish Tribe of Indians

PO Box 277  
3310 Smokey Point Drive  
Arlington WA 98223

## STILLAGUAMISH TRIBAL BOARD OF DIRECTORS

### RESOLUTION 2010/59

#### MEMORANDUM OF AGREEMENT BETWEEN STILLAGUAMISH TRIBE OF INDIANS AND WASHINGTON STATE DEPARTMENT OF SOCIAL AND HEALTH SERVICE CHILDREN'S ADMINISTRATION

\*\*\*\*\*

**WHEREAS**, the Stillaguamish Tribe of Indians is a party to the Point Elliot Treaty of January 22, 1855; and has been Federally Recognized since October 1976; and

**WHEREAS**, the Stillaguamish Tribal Board of Directors is the duly constituted Governing Body of the Stillaguamish Tribe of Indians, in accordance with Articles IV and V of the Stillaguamish Constitution; and

**WHEREAS**, the Stillaguamish Tribal Board of Directors acting in the best interest of its people is embarked on a course of self determination; and

**WHEREAS**, the Stillaguamish Tribal Board of Directors wishes to approve Memorandum of Agreement with Washington State Department of Social and Health Services, Children's Department; and

**NOW THEREFORE BE IT RESOLVED** that the Stillaguamish Board of Directors does hereby accept and approve the Memorandum of Agreement with Washington State Department of Social and Health Services, Children's Department.

**BE IT FURTHER RESOLVED**, that the Stillaguamish Board of Directors hereby authorizes its Vice-Chairwoman or Executive Director to negotiate and execute this resolution that shall continue until revoked by the Board of Directors.

#### CERTIFICATION

As Vice- Chair and Secretary of the Stillaguamish Tribal Board of Directors, I hereby certify that the above resolution was duly adopted at a meeting of the Stillaguamish Tribal Board of Directors held on the 29<sup>th</sup> day of April, 2010 at which a quorum was present and a vote of 4 for, Zero (0) opposed was cast.

  
PATRICE K. KEMPF, Vice Chair

  
JODY R. SOHOLT, Secretary

Resolution 2010/59

Page 1 of 1.

**MEMORANDUM OF UNDERSTANDING BETWEEN THE STILLAGUAMISH TRIBE  
OF INDIANS AND DSHS CHILDREN'S ADMINISTRATION FOR SHARING  
RESPONSIBILITY IN DELIVERING CHILD WELFARE SERVICES TO CHILDREN  
OF THE STILLAGUAMISH TRIBE OF INDIANS**

**I. INTRODUCTION**

This memorandum of agreement is entered into between the Stillaguamish Tribe of Indians ICW Program and the Washington State Department of Social and Health Services Children's Administration (CA), each acting in its representative capacity. This Agreement is based on the fundamental principles of the government-to-government relationship acknowledged in the 1989 Centennial Accord. It will supersede the existing Stillaguamish DCFS MOA.

This Agreement recognizes the sovereignty of the Tribe and of the State of Washington and each respective sovereign's interests.

The Tribe and CA acknowledge that a court of either the Tribe or State of Washington may have jurisdiction over a child welfare proceeding. Each acknowledges that the law of the jurisdiction in which a child welfare judicial proceeding is initiated and maintained is sovereign within that jurisdiction and governs the proceeding.

**II. PURPOSE**

Washington State law authorizes CA to provide for the care of Indian children who are in the custody of an Indian tribe, pursuant to a tribal court order, subject to the same eligibility standards and rates of support applicable to children in the custody of the CA, pursuant to a state juvenile court order. The purpose and objective of this agreement is to clarify the roles and responsibilities of the Tribe and CA, to clarify the responsibilities of the Tribe and CA when Child Protective Services are provided to tribal children, to enhance coordination and cooperation between the Tribe and CA in providing appropriate child welfare services to Indian children who are under the jurisdiction of the tribal court, and to coordinate with the Tribe when its children are in the custody of CA and under the jurisdiction of a state juvenile court. The overarching purpose of this agreement is the safety and well-being of Indian children.

**III. AUTHORITY**

The Indian Child Welfare Act (ICWA), 25 U.S.C. § 1919, authorizes states and tribes to enter into agreements for the care and custody of Indian children. Under the Tribal-State Agreement, both the Tribe and CA are authorized to enter into this agreement. Additionally, the Tribe is specifically authorized to enter into this agreement by Tribal resolution. CA is specifically authorized to enter into this agreement by RCW chapter 39.34, the Interlocal Cooperation Act, which permits an agency to enter into an agreement with an Indian tribe for their mutual

advantage and cooperation. CA recognizes that the Tribe's execution of this agreement does not constitute a waiver of its right to sovereign immunity.

#### IV. DEFINITIONS

**“Jurisdiction”** as used in this agreement means the legal authority of a state or tribal court to hear a juvenile dependency action or other related juvenile matter. The Tribe and CA acknowledge that either or both of their child welfare programs may be involved in providing services, including Child Protective Services and Child Welfare Services, to Tribal children regardless of whether a court action has been initiated, or which court has jurisdiction over a child's case.

**“Indian child”** for purposes of applying the Indian Child Welfare Act means an unmarried and unemancipated Indian person who is under eighteen years of age and is either: (a) A member of an Indian tribe; or (b) eligible for membership in an Indian tribe and is the biological child of a member of an Indian tribe. The Tribe has sole authority to determine whether a child is a member or eligible for membership in the tribe.

**“Notice”** for purposes of compliance with the state and federal Indian Child Welfare Acts means the legal Notice required under RCW 13.38.070 and 25 U.S.C. § 1912 to inform tribes of (1) the initiation of an action to place an Indian child in foster care or to terminate parental rights of an Indian child and (2) the tribe's right to intervene. For purposes of this agreement and collaboration between the tribe and CA, notice means communication by the most expedient means – for example, by telephone, email, letter, personal contact, or fax.

#### V. CHILD PROTECTIVE SERVICES

##### Introduction

1. In every case in which an allegation of abuse or neglect of a child who resides on the reservation is received by CA, the Tribe will be notified of the allegation. Notification will be in writing, or by phone, fax, or email, within 24 hours, including cases that are not screened in by CA for investigation. The method and time of notification will be documented by CA. The method preferred by the Tribe is by phone, fax and email. See appendix for Point of contact.
2. If an allegation involves apparent criminal activity, Tribal/State/Local law enforcement in the jurisdiction where the alleged abuse or neglect occurred will be notified.
3. The Tribe and CA each agrees to inform the other of the outcome of CPS investigations that result in a “founded” for abandonment, child abuse, or child neglect involving Indian children.
4. If a child who is the victim of a CPS allegation does not live on the reservation, but is an Indian child of the tribe, and if the allegation is founded, or if CA determines the child is in danger in the home of the parent or other caregiver, CA will notify the Tribe of its intent to

provide services or to file a dependency petition and give the Tribe an opportunity to file the petition in Tribal Court or to take primary responsibility for providing services.

5. CA is in the process of implementing a two-path response to allegations of child abuse and neglect. Allegations that are screened-in for a response will be assigned by CA to either (1) the traditional investigative pathway or (2) to the new alternative Family Assessment Response pathway.

## **CPS Investigations**

### **CPS Investigative On Tribal Lands**

Tribe will respond to allegations of child abuse or neglect occurring on Tribal lands, unless the Tribe makes a specific written request that CA respond to the referral.

1. CA's CPS Intake will notify the Tribe within 24 hours if a child abuse or neglect referral has been received by CA, alleging the abuse or neglect occurred on Tribal lands.
2. CA will advise the referent (including mandated reporters) that the Tribe investigates or responds to allegations of abuse or neglect which reportedly occurred on Tribal lands and that the Tribe will be notified of the allegation.
3. At the conclusion of the Tribe's investigation, the Tribe will notify CA regarding founded allegations, providing names, allegations and outcomes.
4. If the Tribe needs services for a family during a Tribal CPS investigation, CA will assist the Tribe in accessing services and supports for the family.
  - a. Children served by the Tribe are eligible for services funded and contracted by CA. Eligibility for these services must be consistent with the eligibility criteria used for children served by CA.
  - b. A description of the services and supports currently available to families and children under the CPS program, including a limited description of the eligibility criteria for those services, is attached to this agreement as Attachment C.
  - c. When the Tribe requests CPS services for children and youth being served Tribal CPS, CA will:
    - i) Assign the case to a specific worker, selected by CA, who will assist the Tribal social worker in accessing services and supports.
    - ii) Maintain a file consisting of the referral information, the Tribal assessment or investigation, voluntary service plan, and payment/resource information.

- iii) Work with the Tribal social worker to determine what services and supports would best meet the needs of the child and family.
- d. Information needed by CA to determine eligibility will be provided by the Tribal social worker prior to service approval and supplemented by the Tribal social worker when requested. The Tribe is responsible for recommending and overseeing the administration of services.
- e. CA will provide a point of contact to assist the Tribe in accessing CPS voluntary services. The CA point of contact is the Tribe's contact for requesting services and will work with the tribe to clarify eligibility for services, to expedite services and to verify payment. The CA point of contact will be available to assist, or arrange for another worker to assist the Tribe in preparing the necessary documentation to request adolescent services and will invite the Tribal social worker to attend staffings to approve intensive services, such as Behavior Rehabilitation Services, specialized teen mother programs, and services for sexually aggressive youths.
- f. The Tribe will provide a point of contact to work with CA on service issues. See Attachment A.
- g. The CA point of contact are listed in Attachment B.

**CA CPS Investigation Pathway off Tribal Land**

1. CA's CPS investigator directs all aspects of the investigation, including but not limited to deciding which social workers will interview which individuals and which social workers will gather other information.
2. A Tribal social worker will have the opportunity to be present during interviews and investigations of child abuse/neglect allegations.
3. CA will consult with the Tribe in making the determination whether the allegation is founded or unfounded. Ultimate responsibility for making the decision is CA's.
4. CPS investigations should be completed within 60 days and Tribe will be given the investigative report (no matter what the finding) and any documentation needed to file a dependency action in Tribal court.
5. If the allegation is founded for abuse or neglect, the subject of the investigation has a right to challenge that finding under state law.
6. The Tribe may determine that it will continue, at its own expense, to provide community or Tribal supports and services to the family after the CA services are concluded. The Tribe acknowledges that CA services is time limited – to 45 days or, if the family is actively engaged in services that will require the case to remain open longer and the family agrees, to a maximum of 90 days.

## **VI. SERVICES FOR CHILDREN UNDER THE JURISDICTION OF THE TRIBAL COURT**

1. The Tribal court has exclusive jurisdiction over any child custody proceeding involving an Indian child who resides on or is domiciled on the Tribe's reservation.
2. Children served by the Tribe are eligible for services funded and contracted by CA. Eligibility for these services must be consistent with the eligibility criteria used for children served by CA.
3. A description of the services currently available to families and children, including a limited description of the eligibility criteria for those services, is attached to this agreement as Attachment A.
4. When the Tribe requests child welfare services for children and youth being served by the Tribe, CA will:
  - i) Assign the case to a specific social worker, selected by CA, but who recognizes that the Tribe has custody of and decision making authority over the child, and who is willing to accept the customs and traditions of the Tribe. The CA social worker will not be responsible for case management, but instead will assist the Tribal social worker in accessing services.
  - ii) Maintain a child file consisting of the referral information, the Tribal case plan, Tribal court documents, and payment information.
  - iii) Work with the Tribal social worker to determine what services would best meet the needs of the child and, at the request of the Tribe, pursue intensive services for the child, using established CA procedures. The CA social worker will help make the Tribe aware of appropriate services available through CA, as well as how to access those services.
5. Information regarding eligibility will be provided by the Tribal social worker and supplemented by the Tribal social worker when requested. The Tribal social worker has responsibility for recommending and overseeing the administration of services.
6. CA will provide a point of contact to assist the Tribe in accessing services. The point of contact is the Tribe's contact for requesting services and will work with the tribe to clarify eligibility for services, to expedite services and to verify payment.

The CA point of contact will be available to assist, or arrange for another worker to assist, the Tribe in preparing the necessary documentation to request adolescent services and will invite the Tribal social worker to attend staffing's to approve intensive services,

such as Behavior Rehabilitation Services, specialized teen mother programs, and services for sexually aggressive youths.

The Tribe will provide a point of contact to work with CA on service issues. See Attachment A.

The CA contacts are listed in Attachment B.

## **VII. SERVICES FOR INDIAN CHILDREN UNDER THE JURISDICTION OF THE STATE COURT**

1. If an Indian child as defined by state and federal law is the subject of a dependency action filed by CA in the juvenile court of the State of Washington, CA will timely notify the Tribe of its right to intervene in the action. The Tribe has the right to intervene at any point in a State Juvenile Court proceeding involving a child who is a member of or is eligible for membership in the Tribe. CA agrees to assist the Tribe in achieving intervention in such cases.
2. If jurisdiction of the action is not transferred to Tribal court, then the Tribe will designate a specific person or position to work with the CA social worker to assist in locating an appropriate placement and to consult with the CA social worker in developing an appropriate case plan.
3. If CA has placement authority for an Indian child, placement shall be within reasonable proximity to the child's home when possible and appropriate. Placement decisions shall be consistent with the following Tribal preferences and RCW 13.38.180:
  - Relatives or family members;
  - A Tribal member or descendent of the Stillaguamish Tribe licensed or approved by ICW;
  - Other Native home, licensed or approved by ICW;
  - Non-Tribal home, licensed or approved by ICW.
4. The Tribe will designate an individual who has authority and responsibility for providing an expert witness for state court dependency and termination proceedings governed by the Indian Child Welfare Act. The Tribe agrees that it will provide an expert witness at the time and place of any trial in which an Indian expert is required.
5. The Tribe and CA will work together to develop a plan for any Indian child who is placed in a non-Tribal foster home to assist the child in developing or maintaining an understanding of the Tribe's customs, traditions and history.

## **VIII. INFORMATION SHARING AND CONFIDENTIALITY**

1. It is the policy of both the Tribe and CA to share with each other full information about a child that will assist the other in protecting the child and in assessing the child's need and

eligibility for and receipt of services. CA is required to follow state and federal laws governing confidentiality of children's records. The Tribe agrees that it will follow state and federal law, or tribal law, if the Tribal Code meets or exceeds state and federal law requirements to protect the records of children receiving services from CA.

2. Pursuant to a separate agreement the Tribe has full access to the Statewide Automated Child Welfare Information System (SACWIS), known as FamLink.

#### **IX. COLLABORATIVE ACTIONS**

1. CA, through the Alliance for Child Welfare Excellence will provide Tribal ICW staff with the opportunity to take advantage of relevant trainings that are available to CA staff. A catalog of courses will be sent to the Tribe electronically by the Alliance on a quarterly basis.
2. The Tribe will provide technical assistance and consultation on Native American cases, as requested by CA.
3. The Tribe will designate at least one candidate from the Tribe for representation on the Local Indian Child Welfare Advisory Committee.

#### **X. CONFLICT RESOLUTION**

The Tribe and CA agree that if a dispute arises under this agreement, the process set forth in the 7.01 Policy or in the General Terms and Conditions of the Intergovernmental Agreement will apply. A copy of the applicable process is set forth in Attachment D.

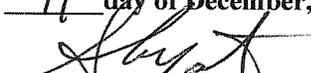
#### **XI. EFFECT AND MODIFICATION**

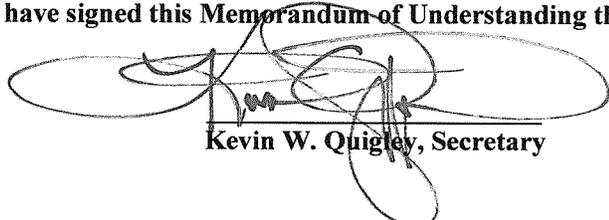
This is a working document to guide the Tribe and CA in supporting Indian children in need of services. Its description of services may be changed as programs are added or eligibility requirements are changed. Contact persons, services and other subjects set forth in the Attachments may be updated at any time at the request of either party.

This agreement will be in effect until modified or terminated. However, this agreement may be modified at any time by mutual agreement of the Tribe and CA. Any modification may be reflected in an addendum and attached to the agreement and must be approved by the Stillaguamish Tribal Board of Directors by Resolution.

This agreement is subject to state and federal law and Tribal code, as they exist and as amended during the course of this agreement.

**IN WITNESS WHEREOF, the Tribe and CA have signed this Memorandum of Understanding this**  
11 day of December, 2014.

  
Shawn Yantty, Chairman

  
Kevin W. Quigley, Secretary

## **ATTACHMENTS**

**ATTACHMENT A – Tribal Points of Contact**

**ATTACHMENT B– Children Administration Services Points of Contact**

**ATTACHMENT C – CA Services**

**ATTACHMENT D - Dispute resolution process**

**ATTACHMENT E – Tribal Resolution**

**ATTACHMENT A – Tribal Point of Contact**

Notice related to CPS issues will be provided to Tribe by contacting:

Name: Tyree Bell  
Address: 4126 172<sup>nd</sup> St. NE, Suite B, PO Box 3782, Arlington, WA 98223  
Phone: (360) 435-5029 Ext. 40 or cell (425) 232-7906  
Email: [tbell@stillaguamish.com](mailto:tbell@stillaguamish.com)

Notice related to CPS issues will be provided to CA by contacting:

Name: Gloria Green  
Address: 4126 172<sup>nd</sup> St. NE, Suite B, PO Box 3782, Arlington, WA 98223  
Phone: (425) 359-6954  
Email: [ggreen@stillaguamish.com](mailto:ggreen@stillaguamish.com)

If emergency or after-hours services are needed by a child in Tribal care, the contact is:

Daytime (8AM – 4PM hours): (360) 435-5029  
After hours: (425) 232-7906 or (425) 359-6954

The Tribal point of contact is:

ICW Case Manager is:

Name: Tyree Bell  
Address: 4126 172<sup>nd</sup> St. NE, Suite B, Arlington, WA 98223  
Phone: (425) 232-7906  
Email: [tbell@stillaguamish.com](mailto:tbell@stillaguamish.com)

Or

ICW Director

Name: Gloria Green  
Address: 4126 172<sup>nd</sup> St. NE, Suite B, Arlington, WA 98223  
Phone: (425) 359-6954  
Email: [ggreen@stillaguamish.com](mailto:ggreen@stillaguamish.com)

## **ATTACHMENT B – CA Point of Contact**

DSHS-Children's Administration:

Region 2 North-

Natalie Green, Regional Administrator

840 N. Broadway, Bldg. B, Ste. 540, Everett, WA. 98201

206-639-6201/425-339-4776

Yen Lawlor, Deputy Regional Administrator, Region 2 North

840 N. Broadway, Bldg. B, Ste. 540, Everett, WA. 98201

425-339-4782

Bolesha Johnson, Deputy Regional Administrator, Region 2 South

500 1<sup>st</sup> Avenue S., Ste. 300, Seattle, WA. 98104

206-629-6202

Area Administrators:

Smokey Point - Acting Area Administrator Marie Fujii

3906 172<sup>nd</sup> St. NE, Ste. 200, Arlington, WA. 98223

360-651-6954

Mount Vernon – Silvia Johnson

900 E. College Way, Mount Vernon, WA. 98273

360-429-3072

Bellingham - Laurie Alexander

1720 Ellis St., Ste. 100, Bellingham, WA. 98225

360-647-6106

Tribal Liaison – Carmelita Adkins

840 N. Broadway, Bldg. B, Ste. 540

Everett, WA. 98201

425-339-2914

## **ATTACHMENT C: Children's Administration Services Region 2**

### **Placement Prevention, Reunification and Support Services**

#### **Early Family Support Services**

##### **Description of Services:**

Early Family Support Services (EFSS) contractors provide direct services to families and link families to community resources to accomplish the following goals:

- Reduce risk of abuse or neglect of children in the home;
- Enhance parenting skills, family and person self-sufficiency, and family functioning;
- Reduce stress on the family;
- Reduce the likelihood of additional referrals to CPS; and
- Enhance the health status of families and linkages to health services.

Families are eligible for EFSS services if item numbers 1 through 3 (below) have occurred **or** if item number 4 has occurred:

1. Abuse or neglect allegations have been reported to CPS; AND
2. CPS has designated the case to be a (1) low or (2) moderately low risk case using the guidelines set forth in RCW 74.14D.020; AND
3. DCFS refers the case to the Contractors; OR
4. The Department has completed a CPS investigation of the family and risk has been reduced to (1) low or (2) moderately low. The family is referred to EFSS contractor using the agency protocol for transferring a case from CPA to EFSS.

#### **Early Intervention Program:**

##### **Description of Services:**

Early Intervention Program (EIP) contractors provide direct services to families and link families to community resources to accomplish the following goals:

- Reduce risk of abuse or neglect of children in the home;
- Enhance parenting skills, family and person self-sufficiency, and family functioning;
- Reduce stress on the family;
- Reduce the likelihood of additional referrals to CPS; and
- Enhance the health status of families and linkages to health services.

Families are eligible for EIP services if item numbers 1 through 3 (below) have occurred or if item number 4 has occurred:

1. Abuse or neglect allegations have been reported to CPS; AND
2. CPS has designated the case to be a (1) low or (2) moderately low risk case using the guidelines set forth in RCW 74.14D.020; AND
3. DCFS refers the case to the Contractors; OR

4. The Department has completed a CPS investigation of the family and risk has been reduced to (1) low or (2) moderately low. The family is referred to EIP contractor using the agency protocol for transferring a case from CPA to EIP.

Additionally, EIP Contractors can serve the following clients:

1. Pregnant or parenting substance abusing women with children currently living in the home;
2. Cases referred to DCFS that do not meet intake sufficiency screening but would benefit from public health intervention.

**Daycare:**

Child Daycare Services for Child Protective, Family Voluntary Services and Child and Family Welfare Services.

**Description of Services:** To provide daycare for children in their home or when placed with relatives or in foster care.

**Eligibility:** Child care must be part of the CA case plan and the child is either in their own home, placed with unlicensed relatives or placed in licensed foster care. The child care provider cannot be a relative when the child is in their own home or in foster care.

**Intensive Family Preservation (Homebuilders)**

**Description of Service:**

Intensive Family Preservation Services (IFPS), as defined in RCW 74.14C.050, is a family focused, behavior-oriented, in-home counseling and support program. Services must be available 24 hours a day, and include both clinical assistance (counseling, case management, parent education) and concrete help (financial, housing, utilities, clothing, and food). The intent is to connect the family with natural supports in their community to meet their ongoing needs. Services must be provided in accordance with the HOMEBUILDERS ® model, which includes using “motivational interviewing” techniques.

**Eligibility**

The family must have an open case with Children’s Administration. (This can include foster & kinship families if they are the child’s proposed permanent home.) Children must currently be in out-of-home placement and can be reunited within 7 days of the first appointment. Referrals can also be made when the social worker has determined that, without intervention, the child is at imminent likelihood of being placed out-of-home due to at least one of the following:

1. Child abuse or neglect.
2. A serious threat of substantial harm to the child's health, safety, or welfare.
3. Family conflict.
4. (“Imminent placement” means that the social worker is planning to ask the parents to sign a VPA, or plans to file a Dependency petition to remove the child within the next 72 hours.)

IFPS would NOT be appropriate in the following situations:

- The family is in need of in-home crisis resolution or therapeutic services to avoid possible family disruption or foster care placement *at some unspecified time in the future*.
- When a decision has been made to move a child, but interim measures are needed in the current home until that is found.
- The social worker or the service provider determines that the safety of a child, a family member, or the staff providing services would be threatened.
- The family explicitly refuses to participate in IFPS after it was thoroughly explained to them.

**How to Access:**

- CA social worker must call the provider to discuss the case and obtain approval for the service.

**Family Preservation Services (FPS)**

**Description of Services:**

Family Preservation Services (FPS), authorized and described in RCW 74.14C.050, are family-focused, behavior-oriented, in-home counseling and support programs. FPS may be used when youth are at substantial risk of placement or for children returning to the home from out-of-home care.

FPS begins within 48 hours of referral, is available 24 hours a day, and can be up to six (6) months in duration. FPS is designed to be less intensive than IFPS/Homebuilders and interventions are focused on improving family functioning and assisting with getting connected to local community resources. FPS is provided by contracted vendors.

**Eligibility:**

Families and children are eligible for FPS when a child is in out-of-home placement and can be reunited within 30 days or the social worker determined that, without intervention, the child, is at substantial likelihood of being placed out-of-home due to at least one of the following:

1. Child abuse or neglect;
2. A serious threat of substantial harm to the child's health, safety, or welfare or
3. Family conflict

The family must have a case open for service with CPS, FRS or CWS. The child must be either residing in the family home or be able to return home immediately, within 30 days.

**Note:** There is up to \$500 available for concrete goods with this contract. The CA social worker can provide information about what kind of items may be paid for using these funds.

**How to Access:** Social worker must make request.

**Family Reconciliation Services (FRS)**

**Description of Services:**

The goal of Family Reconciliation Services (FRS) is to preserve, strengthen, and reconcile families in conflict. The range of services provided is designed to help families find solutions

to their conflicts by developing skills and supports to maintain the family unit. Service delivery begins with the least intensive, least intrusive intervention appropriate in the individual case circumstance. Services are voluntary, family-focused, and rely on the family's participation. FRS is available at no cost to the family.

FRS is comprised of two service categories:

**Assessment & Brief Intervention:** Which are short-term interactions between Children's Administration (CA) staff and the family requesting FRS. The services are directed towards deescalating the immediate crisis, defining the goals of the family seeking services, and exploring options to meet those goals. When possible, the family's kinship and community support systems should be utilized.

**Contracted Counseling:** When it is determined the family would benefit from services from CA beyond assessment and brief intervention, the social worker may offer the family contracted services based on unique needs of the family. Contracted counseling for FRS primarily consists of **Crisis Family Intervention** and **Functional Family Therapy**.

**Eligibility:** CA intake staff must accept referrals for FRS Services:

From a youth age 12-17, caregivers (to include biological, custodial and noncustodial parents, guardians, and informal relative placements), law enforcement, CA staff, HOPE centers, crisis residential centers or a Tribal social worker when at least one of the following two occurs:

- At least one person in the family is voluntarily requesting services and he or she is requesting:
  - A family assessment for a Child in Need of Services (CHINS) or At Risk Youth (ARY) petition
  - Assistance for a family experiencing immediate family crisis due to conflict, or
  - Assistance for a family with a youth who is exhibiting high risk behaviors
- A child is identified as a sexually exploited youth as defined in the Children's Administration, Practice and Procedure Manual, Appendix A.

How to Access: Caregivers/youth to contact 1-800-609-8764.

### **Foster Care**

#### **Crisis Family Intervention Services (CFI):**

##### **Description of Services:**

Crisis Family Intervention (CFI) is a brief in-home crisis intervention service available to adolescents and their families who are experiencing brief conflict. CFI is not solely for Family Reconciliation cases, but is also an option for families involved in CPS, FVS or CFWS.

Services are limited to 12 hours over 45 days. The referring social worker maintains all case management responsibilities through the conclusion of service.

**Eligibility:** CFI is available for youth and families who have an open FRS, CPS, FVS or CFWS case if they meet the following criteria:

- The youth is 12 to 17 years of age.
- The reason for referral is brief family conflict and not ongoing chronic issues.
- The youth is exhibiting high-risk behaviors such as drug use, missing from care, or running away from the family home.

Foster parents and relative caregivers who are experiencing conflict with a youth in their care may access CFI by contacting the youth's social worker and requesting the service.

CFI is **NOT** appropriate for:

- Families who require monitoring to maintain child safety.

**Goals of CFI --** This service is designed to strengthen, preserve, and restore family functioning by meeting the following goals:

- Working with families to resolve the immediate crisis within 45 days.
- Identifying community resources to support family functioning after the conclusion of CFI.
- Developing protective supports for the youth.

**Access to service:--** CA social worker needs to make a request for this service through their supervisor CFI gatekeeper.

### **Evidenced Based Practices for Placement Prevention and Reunification**

Evidence Base practice is a published practice back by multiple randomized studies by an outside party. These are services that are researched and deemed to be effective consistently when delivered as the practice is designed. This practice also ensures a level of clinical knowledge and skill by the provider. EBP also measures outcome and skill level

EBP Services currently available;

### **Incredible Years (IY)**

The intent of this service is to safely prevent out of home placement of children who are considered at risk of placement due to child abuse or neglect. The services are also designed to facilitate the earlier safe return of a child from out of home care.

Incredible Years Parenting Program is delivered in a Group setting. Some of the expected Outcomes include; Increased appropriate parenting skills, increased appropriate parental discipline, increased in family communication and relationship and Increase placement stability

### **Description of Services**

Families must have an identified need to learn appropriate parenting skills, methods of appropriate discipline, or a need to improve the bond between the child and the parent or caregiver.

Parents are instructed in elements of child development and how to engage a child in playful and rewarding activities. Once the child shows enthusiasm and pleasure in the play, the parent learns how to shape desired behaviors and discourage unwanted behaviors. Children often respond well once a positive playful bond is established. Parents practice and respond to each other during the group sessions and are encouraged to connect with each other outside of the class for additional support.

#### **OUTCOMES EXPECTED TO BE IMPACTED BY SERVICES PROVIDED INCLUDE:**

- A. Increased appropriate parenting skills.**
- B. Increased appropriate parental disciplining.**
- C. Increase in supportive family communication and relationship.**
- D. Increased placement stability.**

#### **CLIENTS SERVED**

- 1. Families who have come to the attention of CA because of neglect may be referred to Incredible Years to facilitate a child's return home, or to maintain a child in a placement. Families may also have a history of referrals for abuse.**
- 2. Children must be between the ages of 0 and 7 years.**

### **Project SafeCare**

SafeCare is a parent training curriculum for Parents who are at risk of or have been reported for child maltreatment. This is one of our services for Neglect. This service is delivered in the parents' home to improve parenting skills in several domains. To be eligible for this service, parents with at least one child birth to 5 and the Department is trying to prevent out of home placement or help reunify a child.

### **Description of Services**

Project Safe Care is an evidenced based program which provides home-based training designed to improve parenting skills and the home environment. Using a three-pronged approach for families with chronic neglect situations, Safe Care targets health, home safety, and parent-child interactions. Information is specific and concrete; and a variety of handouts and teaching aids are used to help the parents learn. The intent is to prevent removal of a child who is considered at risk of placement, or to facilitate the return of a child from out of home care.

#### **OUTCOMES EXPECTED TO BE IMPACTED BY SERVICES PROVIDED INCLUDE:**

- 1. Improved home environment, especially around immediate safety threats.**
- 2. Increased health outcomes for the child.**
- 3. Improvement in parent's ability to make good health care decisions for their child.**
- 4. Improved interactions between the parent and their child.**

## CLIENTS SERVED

1. Families are identified by CA to need help learning appropriate child care skill, home safety information, or skills to manage the child's or infant's behavior.
2. Children are between birth and five years of age.

**Parent Child Interaction (PCIT)** The Intent of PCIT is to prevent Out of Home placement of a minor child who is considered at risk of placement due to abuse, neglect or severe family conflict. The service is also designed to facilitate the earlier return home of a child from Out of Home care or to avoid placement disruption

### **Outcome Expected:**

Decrease in Child disruptive behavior, increased appropriate parenting, increased appropriate parenting disciplining, increased in supportive family communication and relationship, increased placement stability, and improved parent child bond accomplished through increased positive interactions between the parent and child.

This service can be delivered in home or in clinic.

### **Positive Parenting Program (Triple P)**

Triple P is a parent education services using the Positive Parenting Program with parents who have an open case with CA due to physical abuse or neglect or to a Caregiver who are caring for a dependent child who has behavior issues.

The children who are the focus of services must be between the ages 1 through 12 years.

Parents referred to Triple P must have identified needs that require improvement of appropriate parenting skills, methods of appropriate discipline, skills to manage child behavior or the bond between parent and child.

### **Functional Family Therapy (FFT)**

The intent of the service is to provide in home counseling to parents to improve parenting and supervision. The service is also appropriate for high conflict Families, youth with history of delinquency.

### **What is FFT?**

- FFT is a family-based intervention for acting out youth
- Effective with youth and their families in various multi-ethnic, multicultural contexts.
- It is provided in home or a clinical setting
- Services averages 12 family sessions lasting about 3 - 4 months

### **What are the referral criteria?**

- Youth in the family are between 11-17 years of age
- Common family problems include:
  - Family conflict and/or violence
  - Youth behavior problems or delinquency
  - Verbal or physical aggression between family members
  - Need for improved communication skills

- Inadequate connection to community supports and services
- FFT can be used to decrease youth behavior problems that could result in foster care placement or incarceration.
- FFT can also be used as part of a reunification plan, as long as the parent(s) and youth have daily contact or are already living together.

**What outcomes can be expected from FFT?**

- Increased appropriate parental disciplining
- Increased supportive family communication and relationship
- Increased placement stability
- Decreased youth disruptive behaviors
- Increased positive peer relationships
- Reduction in substance use

**Out of Home Placement Services**

**Relative Care-**

Relatives play an essential role in helping to meet the needs of children who are unable to live with their parents. When a child is placed with a person recognized as a relative by the court or Tribes, they can access financial and medical assistance through their local DSHS, Community Service Office. Relatives also have the option to become licensed foster parents.

**Foster Care**

Foster Care is temporary out-of-home care in a family home that is licensed to provide this service. Foster parents are part of the professional team working to complete the permanency plan for the child and his/her family. Foster parents provide the day-to-day care for children and receive monthly reimbursement payments to help cover the cost of caring for the child. The child and the foster parent are supervised by the assigned social worker as long as the child is in placement.

**Behavioral Rehabilitation Services**

**Purpose:** Behavior Rehabilitation Services (BRS) is a temporary intensive wraparound support and treatment program for children between the ages of six and seventeen who present with complex and high level service needs. Through the implementation of a structured and individualistic care and support plan, the primary objective is the stabilization of behavioral concerns which interfere with the child’s ability to progress and maintain stability and continuity in multiple life domains. Simultaneously, BRS is to assist in the identification and achievement of the permanency planning goal. Services within BRS include the provision of intensive in home supports or through out of home placement in facility based or therapeutic foster care and are provided by contracted agencies.

**Eligibility Criteria:** Through case consultation/staffing and the submission of specific supporting documentation to the Regional BRS Program Consultant, eligibility is

assessed. Regular reviews of progress determine continued justification of BRS service. Children/youth must present with a severe emotional behavioral disorder and a demonstrated inability to be successful in a less supported living situation. They have often experienced multiple failed placements and have challenges in multiple life domains. Alternatively, eligibility may be based on significant developmental delays or a medically fragile determination.

**Access to Services:** DCFS Social Worker to contact BRS Program Manager.

**Additional Services for Adolescents and their Families:**

**Crisis Residential Centers:**

A Crisis Residential Center (CRC) is a temporary residential placement, assessment and services for youth who are runaways, missing from care, in conflict with their families, or who are in need of emergency placement. Services are intended to:

- Support the stabilization of a youth's behaviors.
- Minimize the time a youth spends in this crisis placement to ensure a quick return to a more permanent placement.
- Identify a youth's needs for further comprehensive assessment or services.
- Support engagement of youth and families in plans to maintain the youth's stabilization through meetings with kin, community members, and child welfare workers.
- Support reunification with the family or transition to another safe placement.

Services shall be available 24 hours per day, 7 days per week. Placement may only be made by CA staff, though law enforcement can request a bed through CA Intake. Priority is for FRS youth, although Dependent teens may also be placed in a CRC bed if space is available. Youth may stay in any type of CRC placement for no longer than 15 consecutive days, including Saturdays and Sundays and holidays.

Contractor must notify CA of the youth's presence within 24 hours, and conduct an assessment of the youth's strengths and needs within 72 hours to create a written transition plan which will address the youth's high risk behaviors, referrals to community resources, school participation, family counseling efforts aimed at reconciliation, and identification of alternative safe long term placement (if needed). If requested the contractor will participate in the Department's FTDM or host a multi-disciplinary meeting themselves to create the plan.

**Secure Crisis Residential Centers (located in King County):**

**Eligibility** -- Youth must be between the age of 12-17, and in need of short-term, emergency placement as a result of:

- Being listed by the police as a run-away.
- Found in a dangerous situation. (This is determined based on the youth's age, developmental level, location, and time of day.)
- Found in the community in violation of a curfew ordinance.

**Referrals** -- Only law enforcement may place youth in a Secure CRC. Length of stay

is strictly limited to 15 calendar days, and the intent is the youth will be moved much sooner. (RCW 13.32A.130 requires dependent youth stay a minimum of 24 hours.) Teens may be transferred to a regular CRC bed with fewer restrictions if the staff decides they are not at high risk of running away. However, the total stay still cannot exceed 15 days.

**Provider Activities:**

SCRC staff must notify the child's parent and CA within 24 hours of the youth's arrival. Parents must be told how to access Family Reconciliation Services, and that the Contractor's staff can answer their questions about ARY, CHINS, client rights, and the option of having a multi-disciplinary meeting to discuss their family's situation.

**Responsible Living Skills Program:**

**Description of Services:**

The Responsible Living Skills Program (RLSP) provides a supervised residential program that encourages positive youth development and teaches youth independent living skills. The program structure, philosophy, service planning and delivery shall emphasize the following:

- a. Youth achieves competency in independent living skills.
- b. Youth participation in personal decision making.
- c. Youth participation in program planning, implementation and evaluation.
- d. Youths' contribution of time, talent and skills to the community.

**Eligibility**

Adolescents are eligible for RLSP placements if they meet the following criteria:

1. Teen must meet the definition of a "street youth" in that they are under 18 years of age, and are living outdoors or in another unsafe location not intended for occupancy by the minor; and one who is not residing with his or her parent, or at his or her legally authorized residence.
2. YOUTH MUST HAVE RESIDED IN A HOPE CENTER OR IN A SECURE CRISIS RESIDENTIAL CENTER PRIOR TO ADMITTANCE INTO A RLSP. – NOTE: THIS REQUIREMENT MAY BE WAIVED BY SOCIAL WORKER IF HE/SHE FEELS THAT GIVEN THE MINOR'S CURRENT CIRCUMSTANCES RLSP IS THE MOST APPROPRIATE PLACEMENT FOR THE YOUTH.
3. Youth must already be dependent under Chapter 13.34 RCW.
4. Youth's primary and alternate permanency planning goals are not to return home.

Priority for entrance into the RLSP program shall be as follows:

1. First priority for RLSP beds shall be for youth age 16 to 17 years old whose primary permanency planning goals are not to return home, and for whom placement in an RLSP will enable the youth to make a transition from a street living situation to an independent living situation.
2. Second priority shall be for youth age 14 to 15 years old who are not succeeding in family based foster care, and for whom placement in an RLSP would enable the youth to make a transition from a street living situation to a more stable supervised living environment.

### **HOPE Centers:**

**Description of Services** -- The purpose of these services is to provide temporary residential placement, assessment, and permanency planning services 24 hours a day, 7 days a week, for youth who are currently not living in a safe and approved residence; and who are vulnerable to becoming involved in high risk behaviors associated with street life: homelessness, criminal activity, prostitution, substance abuse, etc. It is understood that these “street youth” have unique service needs and often little is known about them upon entry to services. HOPE beds represent a key strategy for engaging youth missing from care to return to safe permanent placements.

**Length of stay is limited to 30 days** -- If there is not a long term placement available by that date, a 30 day extension can be approved by the Regional Administrator or their designee. This must be done in writing to the contractor, and a second written extension will be needed if the placement must go beyond 60 days. Youth returning home at the direction of the youth’s parents may remain in the HOPE Center no longer than the time it takes to make those arrangements.

### **Independent Living/Transitional Living Services**

**Description Services** -- The contractor shall provide services, as required, to help clients prepare to live independently by increasing their skills, knowledge and competency in the following areas:

- Achievement in the following areas shall be considered as performance goals:
- Educational Stability and Achievement
- Post secondary education preparation
- Income Maintenance
- Employment/Vocational Readiness and Placement
- Housing
- Daily Living Skills
- Interpersonal Skills
- Youth Self Advocacy
- Bridging of healthy connections to biological and extended family
- ILS funds, up to \$500, may be available to provide support for the youth to meet their IL goals.

### **Eligibility for the Independent Living Program (including Transitional Living services)**

- Youth must be 15 years old or older (through their 21st birthday), is/was in foster care in an open dependency action through DSHS or a tribal child welfare agency for at least 30 days after their 15th birthday.
- Once initial eligibility is determined the youth will continue to be eligible until age 21 regardless of any permanent plan achieved (return home, guardianship, adoption)

**Note:** Transitional \$ may be available to assist eligible youth to obtain housing from ages up to 21 years of age.

### *Sexually Aggressive Youth Services*

The Division of Children and Family Services (DCFS) receives annual funding to contract the services of therapists that specialize in this area of evaluation and treatment.

As defined by the Revised Code of Washington (RCW) 74.13.075, sexually aggressive youth are described as having the following characteristics and circumstances:

- Have been abused and have committed a sexually aggressive act or other violent act that is sexual in nature; and
- Are in the care and custody of the state or a federally recognized tribe located within the state; or
- Are the subject of a proceeding under chapter 13.34 RCW or a child welfare proceeding held before a trial court located within the state; or
- Cannot be detained under the juvenile justice system due to being under age twelve and incompetent to stand trial for acts that could be prosecuted as sex offenses as defined by RCW 9.94A.030 if the juvenile was over twelve years of age, or competent to stand trial if under twelve years of age.

### *EDUCATION AND TRAINING VOUCHER (ETV) PROGRAM*

#### **Service/\$\$**

- Provides financial assistance based on need **up to \$3000** annually toward the cost of attendance for college after high school
- Individualized awards are unique to each student

#### **Eligibility**

The ETV program provides financial assistance for current and former foster youth for post-secondary education. You may be eligible if you are enrolled in or accepted for a post-secondary degree or certificate program and any one of the following applies:

- You are 16 years old or older, are currently involved in dependency action in a Washington state or tribal court, are in the custody of the Department of Social and Health Services or a tribal child welfare agency, and are in foster care.\*
- You are age 18 to 20 and exited state or tribal foster care because you reached the age of majority at age 18. Youth who exited foster care in a state other than Washington may be eligible for the Washington ETV program.
- You are age 16 to 20 and left Washington state or tribal foster care at age 16 or older for an adoptive or relative guardianship placement.
- You are age 21 to 23 and received ETV funds before your 21st birthday.

Once you are qualified to receive ETV, you can receive funds each year as long as you are enrolled in school at least half time, are maintaining a 2.0 grade point average, and are under 23 years old.

\*"Foster care" means 24-hour per day temporary substitute care for a child placed away from the child's parents and for whom the Department of Social of Health Services, a licensed or certified child placing agency, or a tribe has placement and care responsibility. This includes but is not limited to placements in foster family homes, foster homes of relatives, licensed group homes, emergency shelters, staffed residential facilities, and pre-adoptive homes, regardless of whether the Department licenses the home or facility and/or makes payments for care of the child.

January 1, 2014 – Updates to Service Array:

- **Promoting First Relationships (PFR) Enhanced – New Evidence Based Practice**
  - For caregivers and children ages birth to 3 years of age
  - Outcome – caregiver develops responsive and nurturing caregiver-child relationships
  - Provided in the family home and last 10 to 14 weeks
  - Allows the PFR counselor up to 12 additional hours to support the family with other service related goals (e.g. support family with household safety issues, attend staffings as invited)
  - Access to \$500 in concrete funds
  
- **Family Support Services (FSS) – New In-home Service**
  - For caregivers and children birth to 18 years of age
  - Outcome - crisis de-escalation, increasing safety in the home, and connecting families with community supports (formal and informal)
  - Delivered in the family home and last up to 30 hours within 30 days
  - Access to \$500 in concrete funds
  
- **SafeCare Enhanced – Modified Evidence Based Practice**  
 As of January 1, 2014 the SafeCare service will be modified to include up to:
  - For caregivers and children ages birth to 5 years of age
  - Outcomes – increase parenting skills and safety in the home
  - \$500 in concrete funds
  - Allows the SafeCare counselor up to 12 additional hours to support the family with other service related goals (e.g. support family with household safety issues, attend staffings as invited)

If you have questions please contact your regional In-home Service Leads below:

<b>Regional Program Leads</b>		
Region 1	Annie Kurtz	<a href="mailto:Annie.Kurtz@dshs.wa.gov">Annie.Kurtz@dshs.wa.gov</a>
Region 1	Rebecca Wilson	<a href="mailto:Rebecca.Wilson@dshs.wa.gov">Rebecca.Wilson@dshs.wa.gov</a>
Region 2	Bill Barrett	<a href="mailto:William.Barrett@dshs.wa.gov">William.Barrett@dshs.wa.gov</a>
Region 3	Veronica Hinojosa	<a href="mailto:Veronica.Hinojosa@dshs.wa.gov">Veronica.Hinojosa@dshs.wa.gov</a>

**ATTACHMENT D – Dispute resolution**

In light of the sovereign government status of Tribes, when consultation alone has not been successful in resolving issues at the regional level, Tribes have the authority to raise the issues to the Assistant Secretary, Secretary, or the Governor.

Nothing herein shall be deemed to waive the sovereign immunity of the Stillaguamish Tribe of Indians, or its enterprises, agents, or employees.

ATTACHMENT E: Tribal Resolution