



DEVELOPMENTAL DISABILITIES ADMINISTRATION
VOLUNTARY PLACEMENT / ENHANCED RESPITE SERVICES

School District Communication

1. DATE

2. CLIENT NAME

3. DATE OF BIRTH

4. DDA ID NUMBER

5. COMMENTS (TRANSFER IN OR OUT OF PROGRAM OR APPROVED FOR ENHANCED RESPITE SERVICES INCLUDING LENGTH OF TIME CHILD WILL BE OUT OF SCHOOL)

Parent / Legal Representative Information

6. NAME

ADDRESS

CITY STATE ZIP CODE

TELEPHONE NUMBER

7. NAME

ADDRESS

CITY STATE ZIP CODE

TELEPHONE NUMBER

8. OTHER RELEVANT INFORMATION (COURT ORDER DELINEATING DECISION MAKING AUTHORITY)

Contracted Residential Provider Information

9. RESIDENTIAL AGENCY / FOSTER PARENT NAME

11. ADDRESS

CITY STATE ZIP CODE

TELEPHONE NUMBER

10. PRIMARY CONTACT

12. RESIDENCE TYPE (CHECK ONE)

- Foster Home
- Group Care Facility
- Staffed Residential
- Enhanced Respite Services

DSHS / DDA Contact Information

13. VPS SOCIAL WORKER / DDA CRM

15. ADDRESS

CITY STATE ZIP CODE

TELEPHONE NUMBER

FAX NUMBER

14. SUPERVISOR

16. ADDRESS

CITY STATE ZIP CODE

TELEPHONE NUMBER

FAX NUMBER

Previous School District Information

17. DATE

18. NAME OF SCHOOL

19. ADDRESS CITY STATE ZIP CODE

20. CONTACT PERSON

TELEPHONE NUMBER

FAX NUMBER

Receiving School District Information

21. DATE

22. NAME OF SCHOOL

23. ADDRESS CITY STATE ZIP CODE

24. CONTACT PERSON

TELEPHONE NUMBER

FAX NUMBER

25. Information Provided by DDA Social Worker / Case Resource Manager (Check all attached)

- Consent to release information – required
- Previous School Records/IEP
- Treatment Plans
- DDA Assessment/Care ISP
- Behavioral Plans – FA/PBSP
- Medical reports including OT, PT, SLP evaluations

Instructions

This form will be used for the following purposes:

- The Voluntary Placement Services (VPS) staff will utilize the School District Communication form to provide notification to school districts for children / youth who receive children's residential services out of the family home and are moving / changing local schools as a result of this service.
- The DDA Case/Resource Manager will utilize the School District Communication form to provide notification for documentation and planning purposes in the local school for children/youth who have been approved and authorized for Enhanced Respite Services and who plan to be out of school for an extended period of time. This form is to be utilized as a communication tool between the parent, department, and school.

1. Date: Insert date form is being completed.
2. Client name
3. Date of birth
4. DDA ID number: Insert DDA ID as identified in the CARE tool.
5. Comments: Include comments indicating whether the client is moving into a new residential facility / foster home from the family home, changing school districts as a result of a change in placement, or will be out of school for an extended period of time while receiving Enhanced Respite Services.
6. Parent / legal representative name, address and telephone number
7. Parent / legal representative name, address and telephone number
8. Other relevant information: Include information such as: court order delineating custody agreements, guardianship, 3rd party custody, etc.
9. Residential Agency / foster parent name
10. Primary Contact: Identify name of person responsible for having primary contact with the school.
11. Residential Agency / foster parent address and telephone number
12. Residence type: Check one based upon type of license.
13. DDA VPS social worker or case resource manager name
14. DDA VPS / CRM supervisor name
15. DDA VPS social worker / CRM address including telephone and fax number
16. DDA VPS / CRM supervisor address including telephone and fax number
17. Date: Projected date client will be leaving current school.
18. Name of School: Name of current school.
19. Address: Address of current school.
20. Contact person: Name, phone number and fax number of primary contact at client's current school.
21. Date: Projected date client will be attending new school.
22. Name of School: Name of new school.
23. Address: Address of new school.
24. Contact person: Name, phone number and fax number of primary contact at client's new school.
25. Information provided by DDA social worker: Check all information that is provided along with the form.

Process for children approved for Voluntary Placement Services

1. DDA Social Worker (SW) or designee will send the School District Communication form to the applicable school district upon confirmation of approval for Voluntary Placement Services in which the move from the family home results in the child / youth attending a new school district or a change in census for a DDA child / youth within a foster home, staffed residential, or group care facility.
2. Parent, guardian or legal representative for the youth selects a residential option and confirmation that a transition will occur.
3. DDA receives consent to release information to the school district signed by parent, guardian or legal representative. (Not applicable for youth transitioning out of the residential home.)
4. This form is faxed to applicable school district with attached appropriate information. (Ensure that current school contact information is provided if IEP is not available.)
5. Form provides all contact information and comments on youth's legal status with the decision maker identified.
6. School District to acknowledge the receipt of the census change form by contacting the DDA SW or designee.
7. DDA, residential agency / foster parent and school districts to correspond with transition timelines and support needs for the youth in order to provide continuity of service delivery.