AGENDA ITEM or FINAL CONTRACT REVIEW SUBMITTAL FORM

AgendaTitle:
Consent 07 - Interagency Operating Agreement between Gunnison/Hinsdale County Department of Health and Human Services and Community Options, Inc., Early Intervention Colorado/Part C Agency; Child Abuse Protection and Treatment Act (CAPTA)

Action Requested: County Manager Signature

Parties to the Agreement: Gunnison County and Community Options

Term Begins: 2-5-15 **Term Ends:** 1/1/2016 **Grant Contract #:**

Summary:
This is an Operating Agreement for referral of founded child abuse/neglect cases for children under 3 years of age for Part C (child evaluation and special services) to Community Options per the Child Abuse Prevention and Treatment Act. The Agreement with Community Options original signature will be sent to County Administration.

Fiscal Impact: 0

Submitted by: Renee Brown **Submitter's Email Address:** renee.brown@state.co.us

Finance Review: ○ Required ● Not Required

Comments:

Reviewed by: Discharge Date:

County Attorney Review: ● Required ○ Not Required

Comments:

Reviewed by: GUNCOUNTY1\atrezise Discharge Date: 2/24/2015 Certificate of Insurance Required Yes ○ No ●

County Manager Review:

Comments:

Reviewed by: GUNCOUNTY1\mbirnie Discharge Date: 2/25/2015

● Consent Agenda ○ Regular Agenda ○ Worksession Time Allotted:

Agenda Date: 3/3/2015 Follow Up Agenda Date:

Revised April 2013

P.O. Box 31
336 South Tenth Street
Montrose, Colorado 81402-0031
Phone: (970) 249-1412
FAX: (970) 249-0245

Providing Services to Persons
With Developmental Disabilities

community Options

February 9, 2015

Dear Director of Human Services,

Enclosed you will find the updated Child Abuse Protection and Treatment Act (CAPTA) Interagency Agreement between your department and Community Options, Inc., the Community Centered Board for your area.

Please sign and date the agreement, copy it for your agency and send the original back to me at:

Lisa Thomason
Director of Support Services
PO Box 31
Montrose, CO 81402

Thank you for your timely review and return of this required document. If you have any questions, feel free to call me at (970) 249-1412 ext. 212.

Best regards,

L Thomason

Lisa S. Thomason, M.Ed., BCBA

RECEIVED
FEB 12 2015
GUNNISON COUNTY
DEPT. OF HUMAN SERVICES

Interagency Operating Agreement Between
Gunnison/Hinsdale County Department of Health and Human Services
and
Community Options, Inc.
Early Intervention Colorado/Part C Agency

February 5, 2015

The Early Intervention Colorado State Plan under Part C of the Individuals with Disabilities Education Act of 2014 defines the "Child Abuse Prevention and Treatment Act" (CAPTA) as follows:

> The CAPTA state grant program provides states with flexible funds to improve their child protective service systems. Reauthorized by the Keeping Children and Families Safe Act of 2003, the program requires states to provide assurances in their five (5) year child and family services plan that the state is operating a statewide child abuse and neglect program. This program includes policies and procedures that address the needs of drug-exposed infants and provisions for referral of children under age three (3) who are involved in a substantiated case of abuse and neglect to early intervention services under IDEA Part C.

The State Plan also requires Interagency Operating Agreements between each Community Centered Board and

> "County departments of social/human services agreements that include responsibilities for referrals under the Child Abuse Prevention and Treatment Act, as amended by P.L. 111-320, for a child who is less than three (3) years of age who
>
> 1) is involved in a **substantiated** case of child abuse or neglect; or
> 2) is identified **as affected** by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure."

Further requirements state that:

> "A Community Centered Board shall ensure that interagency operating agreements are signed by parties with the authority to carry out the responsibilities of the specific agencies or programs. The interagency operating agreements are reviewed annually and updated as needed."

With the spirit of these mandates in mind, this interagency operating agreement is entered into between **Gunnison/Hinsdale County Department of Health and Human Services,** here after referred to as **Gunnison/Hinsdale County DHHS**, and **Community Options, Inc./Early Intervention**, hereafter referred to as **COI/EI** regarding:

The referral process of children meeting the above criteria;
Procedural safeguards and participation of families in the process;
Screening and evaluation processes;
Information exchange;
Participation in the IFSP process
Dispute Resolution

STEP 1: The Referral Process

Identification for appropriate referral:
DHHS caseworkers shall refer to **COI/EI** all children less than three (3) years of age who are 1) involved in a substantiated case of child abuse or neglect or 2) are identified as affected by illegal substance abuse, or withdrawal symptoms resulting from prenatal drug exposure.

GUNNISON/HINSDALE COUNTY DHHS will be provided with a referral form (attached to MOU) that can be completed and faxed the same day to **COI/EI**, fax # 970-249-0245, or may be emailed to lisathomason@communityoptionsinc.org. **GUNNISON/HINSDALE COUNTY DHHS** caseworkers will give as much relevant information as they are able in order for **COI/EI** to plan for a relevant screening or evaluation.

STEP 2: Initial Sharing of information/ confidentiality safeguards.

GUNNISON/HINSDALE COUNTY DHHS will refer all children meeting the CAPTA definitions, or who are homeless or wards of the State who may be showing delays.

GUNNISON/HINSDALE COUNTY DHHS agrees to obtain a release of information from the family if rights are not terminated in order to share relevant information with **COI/EI**. Relevant information at referral includes but is not inclusive of:

1. Previous vision, hearing and developmental screenings if known
2. Outcomes of well-child check-ups and medical concerns/diagnosis
3. Behavioral concerns
4. Parent's concerns for their child/ challenges of the parent
5. Relevant Social and Family History
6. Placement and contact information for the child
7. Other agencies and professionals already involved
8. Observed developmental delays or challenges
9. The party or entity responsible for educational rights of the child

If a family's rights have been terminated, no release is necessary. If a family refuses to sign a release, a referral must be made and DHS is not held responsible for violating confidentiality per the Attorney General's office as stated in the Agency Letter sent to DHS on January 7, 2009 from the Division of Child Welfare.

COI/EI Service Coordinators will also obtain permission from parents to share information with **GUNNISON/HINSDALE COUNTY DHHS**.

Regarding children with no available parents: "Acting as a Parent"
Someone "acting as a parent" for the purposes of making early intervention service decisions is limited to the following circumstances: WHEN

the child is in the custody or guardianship of the DHS/DSS AND the child's parents are deceased, permanently absent or unable to be located or their parental rights have been terminated, OR

the child is living with a **primary caretaker** other than the parents, WHO may "act as a parent"; OR is a

Surrogate Parent as appointed to represent the child's best interests regarding early intervention, and no foster parent is acting as a parent.
(from Appendix J "Colorado Department of Human Services Memorandum of Understanding)

The issue to be addressed is: who is responsible for the "educational rights" of the child?

STEP 3: Assigning a Service Coordinator

COI/EI will verify with **GUNNISON/HINSDALE COUNTY DHHS**, within 2 working days, that they have received the referral, will assign a Service Coordinator and give contact information. **COI/EI** has 45 calendar days from the date of the initial referral to determine eligibility and develop an Individualized Family Service Plan (IFSP) for early intervention services, strategies, and current functioning levels in relation to the three global outcomes of: a. Positive Social-Emotional Skills; b. Acquiring and Using Knowledge and Skills; and c. Taking Appropriate Action to meet Needs.

STEP 4: Parent Permission and other procedural safeguards:

The **COI/EI** Service Coordinator will meet with the family prior to screening and/or evaluation to obtain parental consent, to assure that procedural safeguards are presented, and to present the EI informational documents and explain the contents, including parental rights and the procedural safeguards.

STEP 5: Screening and Evaluation Process

The referral will be routed to Child Find and the appropriate EI Service Coordinator. A "Notice and Consent for Post-referral Screening" will be obtained if a screening is determined necessary. If it is determined that an evaluation is necessary, bypassing the screening process or if the child fails the screening, a "Prior Written Notice and Consent for Evaluation and/or Assessment" will be obtained.

STEP 6: Eligibility and the initial IFSP

After the multi-disciplinary evaluation is completed by Child Find, a **COI/EI** Service Coordinator will invite parents, foster parents, and the caseworker from **GUNNISON/HINSDALE COUNTY DHHS** to the initial Individual Family Services Plan (IFSP) meeting as a team member, along with other professionals who assisted in the evaluation of the child. **GUNNISON/HINSDALE COUNTY DHHS** will encourage parent participation, especially if there is a reunification plan or safety plan. Phone conferencing will be available for parents who may be away from the area. On occasion **GUNNISON/HINSDALE COUNTY DHHS** may want to contact the Service Coordinator about scheduling the initial IFSP during scheduled parent visitation.

STEP 7: Provision of Services

Services and supports in Early Intervention are limited to the following, and will be described in the IFSP with very specific outcomes and frequency of services.

Assistive Technology and related services
Audiology Services
Developmental Intervention
Developmental Intervention Teaming
Health services necessary to enable the infant/toddler to benefit from EI Services
Medical services for diagnostic and evaluation purposes only
Nursing Services for evaluation or joint visit for assessment purposes
Nutrition Services
Occupational therapy
Physical therapy
Psychological services
Social and Emotional Services
Speech-language pathology services
Transportation Services limited to travel to and from locations of EI services
Vision Services

GUNNISON/HINSDALE COUNTY DHHS agrees to assist families apply for Medicaid/CHP+ or other benefits which may assist the family to meet their goals, or to pay for any of the above services that can be provided by Medicaid.

Early Intervention Services will be provided in the home, foster home, child care setting, or other "natural" setting in which the child is involved.

STEP 8: Information Exchange

GUNNISON/HINSDALE COUNTY DHHS agrees to inform a child's service coordinator about any move the child has made in a timely manner, when a case is terminated or when parental rights are terminated, and to keep **COI/EI** informed of who is responsible for "educational rights" and any other changes that may affect service provision.

COI/EI Staff and Providers agree to mandatory reporting requirements and will respond to inquiries regarding child welfare investigations without a release of information from families.

Any signed release of information signed by parents will be time limited to one year unless otherwise specified for a shorter duration. **COI/EI** will not share third party information from their records.

COI/EI Staff and Providers will let the **GUNNISON/HINSDALE COUNTY DHHS** case worker know if parents terminate services or are not cooperating with services when there is an open case, or when there is an issue of abuse/neglect related to not receiving certain Early Intervention Services or health care services.

COI/EI Staff and providers agree to involve parents, as well as foster parents, in how to incorporate therapeutic and developmentally appropriate activities and strategies into ordinary home routines with the child.

COI/EI Service Coordinators will assist with any transfer of services to another area within Colorado or the Country upon request of the **GUNNISON/HINSDALE COUNTY DHHS** and/or family.

GUNNISON/HINSDALE COUNTY DHHS will receive a copy of all IFSPs as long as they are listed on the IFSP and a release of information is given by the parent.

STEP 8: DISPUTE RESOLUTION PROCESS

If at any time any of the above processes are not followed, or are unclear, every effort will be made to solve issues locally before calling the State Departments. If necessary, issues can be brought to the **COI/EI** Director of Support Services responsible for the implementation of Part C. If issues remain unresolved, the **COI** Executive Director, and if necessary the Director of the **GUNNISON/HINSDALE COUNTY DHHS** will be contacted to resolve the dispute.

This agreement will be reviewed next year in January, 2016, for amendments. If needed, either party can ask for a review or amendment prior to that time.

Tom Turner
Executive Director,
Community Options, Inc.

~~Renee Brown~~ Matthew Birnie
~~Director~~ County Manager
~~Gunnison/Hins~~dale County Department of Health and ~~Human S~~ervices