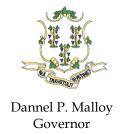


Making a Difference for Children, Families and Communities



Joette Katz Commissioner

DCF Application and Credentialing Overview

The Department of Children and Families has formalized the way in which it purchases individualized services through flexible funding. Only providers that have an executed provider agreement with the Department will be eligible to provide the following services:

- After School Services: Clinical Support for Children
 After School Services: Clinical Support for Youth
- After School Services: Traditional
 After School Services: Youth
- Assessment
- Assessment: Perpetrator of Domestic Violence
- CHAP Case Management (open to current CHAP providers only)
- Community Based Life Skills (CBLS) Program
- Supervised Visitation
- Support Staff
- Temporary Care Services
- Therapeutic Support Staff
- Transportation: General Livery
- Transportation: School

The Department has contracted with Advanced Behavioral Health (ABH) to assist in managing the application and credentialing process for these service types. The provider agreement for each of these service types contains a detailed description of the service as well as credentials required for service providers. Provider agreements, as well as Provider Applications for applying to be a DCF provider of these services are available on the ABH website at www.abhct.com. You may also contact ABH for application assistance at 860-638-5309.

In addition the Department has established a fee schedule for reimbursement of these services.

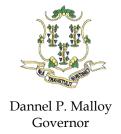


Joette Katz

Commissioner

DEPARTMENT of CHILDREN and FAMILIES

Making a Difference for Children, Families and Communities



Provider Agreement Service Definitions

After School Services are site-based and provide a range of developmentally-appropriate enrichment, socialization and experiential learning opportunities for children and youth in a safe, structured and supervised setting. This service has regularly scheduled hours both before and after the school day and during school vacations which may or may not include the summer vacation period.

After School services are multi-dimensional; they are not a single-sport or single-activity service.

Credentialing is required for all After School Programs that are exempt from licensing from the Department of Public Health (DPH). All others must be licensed by DPH.

Clinical Support for Children (Grades K-7) These services are designed to address the
individualized needs of children with a range of behavioral health needs. These children have a
current diagnosed behavioral health condition and require a structured program, clinical
intervention and support.

Eligible for this service are children ages 12 and younger, usually attending kindergarten to grade 7, currently active with the Department, children who are actively receiving Care Coordination services and/or children who have been identified as being at risk for detention.

The child may be residing with a biological, relative, foster, adoptive or other substitute caretaker family.

Programs are required to demonstrate the ability to provide programming and space for children in the target population.

Clinical Support for Youth (Grades 8-12) These services are designed to address the
individualized needs of children and youth with a range of behavioral health needs. These children
and youth have a current diagnosed behavioral health condition and require a structured program,
clinical intervention and support.

Eligible for this service are school-aged youth 13 and older, generally in grades 8 to 12, currently active with the Department, children and youth who are actively receiving Care Coordination services and/or children and youth who have been identified as being at risk for detention.

The child or youth may be residing with a biological, relative, foster, adoptive or other substitute caretaker family. The youth may also be residing in a DCF-supervised independent living or transitional living arrangement.

Programs are required to demonstrate the ability to provide programming and space for this age group.



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Joette Katz Commissioner Dannel P. Malloy Governor

• Traditional (Grades K-7) Eligible for this service are children ages 12 and younger, generally attending kindergarten to grade 7, currently active with the Department, children and youth who are actively receiving Care Coordination services; and children and youth who have been identified as at risk for detention.

The child or youth may be residing with a biological, relative, foster, adoptive or other substitute caregiver family. The child or youth may also be residing in a Department-supervised independent living or transitional living arrangement.

Programs are required to demonstrate the ability to provide programming and space for children in the target population.

 Youth (Grades 8-12) These services are designed to address the needs of youth by providing student-centered programming that promotes social and emotional development, life skills, and educational support; enhances peer and community connections; and provides opportunities for youth to participate in positive extracurricular activities.

Eligible for this service are youth ages 13 and older, usually in Grades 8 to 12, who are currently active with the Department, youth who are actively receiving Care Coordination services; and youth who have been identified as at risk for detention. The youth may be residing with a biological, relative, foster, adoptive or caregiver family. The youth may also be residing in a Department-supervised independent living or transitional living arrangement.

Assessment (Diagnostic/Functional)

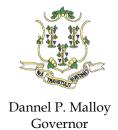
Individuals access a diagnostic/functional assessment when there is a concern that the individual has a mental health and/or a substance abuse issue that requires further evaluation. The assessment includes an initial face-to-face screening, additional face to face contacts with the individual and collateral contacts with family members, caretakers and other treatment providers to determine the individual's strengths and limitations, to determine functional capacity, to identify natural supports and to develop or review an individualized service plan.

Assessment: Perpetrator of Domestic Violence An assessment is requested when there is a concern that an individual is engaging in a pattern of coercive control behaviors impacting the safety and well being of his or her child(ren) and the non-offending partner. The assessment will include a face-to-face interview(s) with the alleged perpetrator and may include collateral contacts with family members, the Department staff, the police, court staff, victim advocates and other involved providers. The purpose of the assessment is to articulate the presence of risk factors, danger or threat posed by the individual to the non-offending partner and/or the child(ren), to make treatment recommendations and to permit the community providers to develop and implement appropriate and timely interventions to assure the safety and well being of all family members.

A screening for substance abuse or dependency and mental health issues shall be completed as part of the assessment.



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CHAP (Community Housing Assistance Program) Case Management

is a community-based program that provides case management, supervision, educational/vocational support or career development support, and life skills development services, utilizing the DCF approved Life Skills Program – LIST (Learning Inventory of Skills Training), to youth living in a community housing environment.

This case management service is intended as a component of a comprehensive treatment plan. As such, the individual providing this service is expected to collaborate with other service providers toward the implementation of the child's individual treatment plan.

Community Based Life Skills are a set of skills learned by teaching or by direct experience.

These skills are used to handle problems and questions commonly encountered in daily life from adolescence through adulthood. A community based services model focuses on the development and enhancement of the participant's knowledge of essential life skills to promote preparation for adulthood and self-sufficiency. Through program design and content, the model goal is to support and maintain a youth's connection with the community as the youth mature.

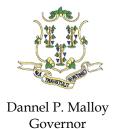
This service, through the use of the DCF approved Learning Inventory of Skills Training (L.I.S.T.) assessment tool and experiential learning approaches, provides youth with a set of skills necessary to assist in their transition from DCF care to self-sufficiency. This service includes an individual life skills assessment, followed by individualized and small group experiential learning opportunities.

This service is intended as a component of a comprehensive case plan. As such, the individual providing this service is expected to collaborate with other service providers toward the implementation of the child or youth's individual case plan.

<u>Supervised Visitation</u> is primarily a site-based service provided in order to facilitate contact between children in out of home care and their biological parents, relatives or significant others, to monitor this contact and to report on the contact to DCF social workers. All sites must be approved by the local DCF Area Office. Supervised visitation can also be provided in alternative, more normalized community settings as part of a reunification plan and as approved by the DCF Area Office.



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Support Staff is a service designed to address the individualized needs of a child or youth in the community who may be exhibiting mild to moderately challenging behaviors in the home, in school or in the community. This service provides a range of life supports focused on making positive decisions and behavioral choices; assisting with attaining social and emotional gains; connecting with positive peer and other community supports and reinforcing success in school. These individualized supports are provided by paid, trained and supervised individuals. This service is provided for up to five (5) hours per week per child or youth and includes a combination of structured and enrichment activities consistent with identified treatment plan objectives.

In order to emphasize consistency and relationship building, it is expected that the same staff person will continually provide this service during the course of care.

This service is intended as a component of a comprehensive treatment plan. As such, the individual providing this service is expected to collaborate with other service providers toward the implementation of the child's or youth's individual treatment plan.

Temporary Care Services provide a short term break or intervention, separating the child/youth from caregivers for a few hours, or other relatively short period of time in order to assist family members with the practicalities of living and their attending to the needs of all family members. This service is provided in the home of the parent or caretaker.

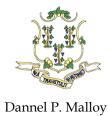
Therapeutic Support Staff is a service designed to address the individualized needs of a child or youth with complex behavioral health needs. These children or youth have a current diagnosable behavioral health condition that results in moderate to acute functional impairment which substantially interferes with, or limits the child's or youth's role or functioning in family, school, or community activities. This service is intended for children or youth whose level of functioning puts them at risk of entering a residential level of care, disrupting from their home or foster placement, or for children or youth who are being discharged from residential treatment or a more acute level of care. These individualized supports are provided by paid, trained and supervised individuals. This service is provided for up to eight (8) hours per week per child or youth and includes a combination of structured and enrichment activities consistent with identified treatment plan objectives. For children or youth discharging from residential treatment/congregate care, the service is provided for up to two (2) visits for no more than one (1) hour per visit prior to discharge.

In order to emphasize consistency and relationship building, it is expected that the same staff person will continually provide this service during the course of care.

This service is intended as a component of a comprehensive treatment plan. As such, the individual providing this service is expected to collaborate with other service providers toward the implementation of the child's individual treatment plan.



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Governor

Joette Katz Commissioner

Transportation: General Livery services are often needed to transport children when the service is not delivered by Department of Children and Families staff, family or caregivers, public transportation or school buses where the child resides. Credentialed transportation services shall not be utilized in cases where the child is younger than age five (5), unless accompanied by an adult, or a child's medical or psychiatric condition requires a highly trained or specialized service such as a medical cab or ambulance.

The **Provider Agency** shall be responsible for full compliance with all relevant Department of Transportation statutes and regulations including C.G.S. §13b-96-1 to 13b-96-51, ("Transportation of Passengers for Hire"), and C.G.S. §16-325-01 to 16-325-26 ("Livery Service").

All **Transportation Operators** must shall be responsible for full compliance with all relevant Department of Motor Vehicle statutes and regulations including C.S.S. § 14-44 "Public Passenger Endorsements."

Transportation: School services are often needed to transport children to and from school when the service is not available through the responsible Local Educational Agencies (LEA), family or caregivers, the Department of Children and Families staff, or public transportation. Credentialed transportation services shall not be utilized in cases where the child is younger than age five (5) unless accompanied by an adult or when a child's medical or psychiatric condition requires a highly trained or specialized service such as a medical cab or ambulance. The Provider shall be responsible for full compliance with all relevant Department of Motor Vehicles statutes and regulations C.G.S. § 14-44, including those related to "Public Passenger Endorsements,"