

CONCISE EXPLANATORY STATEMENT

In accordance with the Administrative Procedures Act, R.I. Gen. Laws § 42-35-2.6, following is a concise explanatory statement:

AGENCY: Department of Children, Youth and Families

DIVISION: Case Management

RULE IDENTIFIER: 214-RICR-30-00-1

REGULATION TITLE: Rules and Regulations of Case Management

REASON FOR RULEMAKING: This rule is being promulgated to replace several existing Case Management regulations.

R.I. Gen. Laws § 14-1-36.2 provides that children and youth placed in the custody of the Department of Children, Youth and Families receive suitable treatment, rehabilitation and care in the least restrictive environment.

ANY FINDING REQUIRED BY LAW AS A PREREQUISITE TO THE EFFECTIVENESS OF THE RULE: N/A

TESTIMONY AND COMMENTS: None

CHANGES TO THE REGULATION: None

REGULATORY ANALYSIS:

Introduction

The Department of Children, Youth and Families (Department) proposes to amend the existing Rules and Regulations for the Case Management of the Department to be consistent with updated statutory requirements of the Administrative Procedures Act (APA), R.I. Gen. Laws § 42352.9. Pursuant to § 42352.9, the Department has conducted a regulatory analysis for the proposed regulation. The Department used the best available information at the time of publication to estimate the benefits and costs of the proposed regulatory provisions. The following analysis examines the costs and benefits of the discretionary decisions made by the Department.

The following regulations have been amended and consolidated into the singular

regulation known as Case Management: Administrative Review (ERLID 6791), Adoption Policy (ERLID 7883), Adoption Subsidy (ERLID 6319), Authorization for Medical Care for Child in Placement (ERLID 7506), Clearance of Agency Activity (ERLID 6795), Collaboration Between DCYF and DHS to Improve Services for Dual-System Families (ERLID 4219), Comprehensive Assessment and Service Planning (ERLID 7505), Concurrent Planning (ERLID 1260), Contents and Format for Departmental Record Keeping (ERLID 6600), Educational Stability (ERLID 6797), Educational Surrogate Parent Referral (ERLID 6859), Early and Periodic Screening, Diagnosis and Treatment (EPSDT) Program (ERLID 1223), Federal Benefits for Children in DCYF Care (ERLID 5569), Flow of Active Case during CPS Investigation of Child Abuse/Neglect (ERLID 6605), Foster Parents and Relative Caregivers - Notice of Court Proceedings (ERLID 7126), Guardianship for Education (ERLID 1199), Health & Education Passport (ERLID 1081), Higher Education Opportunity Incentive Grant Program (ERLID 1200), Housing Assistance (ERLID 1201), Independent Living (ERLID 1202), Implementing the Indian Child Welfare Act (ERLID 7591), Initial Visitation (ERLID 1210), Interstate Compact on the Placement of Children (ICPC) (ERLID 6606), Issues of Sexuality and Pregnancy Affecting Youth in DCYF Care (ERLID 1215), Kinship Care (ERLID 5572), Legal Guardianship and Kinship Guardianship Assistance (ERLID 6979), Locating and Engaging Absent Parents (ERLID 5574), Mental Health Evaluation and Counseling Services (ERLID 6642), Missing Children/Runaways (ERLID 1218), Placement Unit Coverage During Weekends and Holidays (ERLID 1221), Respite Care Services (ERLID 1224), Retirement, Survivors, Disability Insurance (RSDI) (ERLID 6742), Rhode Island Children's Information System (RICHIST) (ERLID 6534), Services to Youth Ages 18 – 21 (ERLID 5071), Substance Abuse Treatment Services (ERLID 1226), Supplemental Security Income (SSI) (ERLID 6456), Support Services (ERLID 1227), Transitioning Mentally Disabled Youth from the Care of DCYF to the Adult Mental Health Care System (ERLID 1250), Veteran Administration Benefits (ERLID 6430), Visitation (ERLID 1253), Voluntary Placement (ERLID 2840), Worker/Client Contact (ERLID 5578).

Background

The above regulations included in the new Case Management Regulation were revised sporadically since their establishment. It became clear over time that the regulations were no longer meeting the needs of the changing regulatory climate due to changing federal legislation, standards, and priorities through the U.S. Department of Health and Human Services, Office of the Administration of Children and Families requirements for federal funding, which supports many of the Department's programs. Additionally, the stakeholder community's continued growth in recognizing, embracing and implementing evidenced-based and person-

centered practices required that the regulations reflect that progress.

Lastly, the Governor's initiative to reduce the regulatory footprint by fifteen percent (15%) was very timely. In reviewing these regulations, it was clear that there were redundancies, areas in which the regulations exceeded its mandate and areas in which the stated regulations could be better addressed in more appropriate formats, such as Department Operating Procedures (DOPs) and Guidance Documents. The project to rewrite and consolidate the Case Management Regulations was, therefore, established to improve the regulations, make them more accessible and to ensure that they are reflective of industry standards and actual required practice.

Regulatory Development

In considering what constitutes "regulation," the Department's policy office regularly asked the following questions before committing the rule to the regulatory document:

- is it regulatory in nature;
- does it meet the standard of requiring the "force and effect of law;" and
- is it within the mandate of these regulations?

Their revisions were presented to a select group of other DCYF staff for comment. The Department's legal team reviewed the completed drafts.

Main Changes to Status Quo

While specific changes are analyzed in the section titled "Cost-Benefit Analysis by Provision", overall the proposed changes cover three (3) areas.

First, the most significant change to the regulations is that they have been modernized to conform with current practice, industry standards and best practice in the delivery of case management services. Evidenced based, person-centered and community based themes and language were addressed throughout the document. Safety of staff and clients was also a major focus.

The second significant focus is on clearly defining the types of services associated with the levels of care provided by social workers and ensuring alignment with best practice standards established by nationally recognized bodies.

The final significant changes were to remove redundancies and language that is nonregulatory in nature. The policy office worked to ensure that rules were only stated once in the document. Policy statements were removed from the document

to be addressed by the appropriate oversight authority. For example, language in the regulations governing the Department was removed to be addressed under the Department's Operating Procedures as regulations are not intended for agencies to regulate themselves. Similarly, all language in the regulations that exceeds the Department's regulatory mandate was removed. The changes are documented and references are made on how those changes are addressed to maintain appropriate safeguards for the population served by these regulations.

Key Alternatives Considered

Pursuant to the APA, R.I. Gen. Laws § 42352.9(b)(1), the regulatory analysis must include:

- Analysis of the benefits and costs of a reasonable range of regulatory alternatives; and
- Demonstration that there is no alternative approach among the alternatives considered during the rulemaking proceeding which would be as effective and less burdensome to affected private persons as another regulation.

During the regulatory revision process described above, the Department considered a number of options that would meet the goals for updating the regulations to meet the current required standards, practices and federal requirements. It was vitally important that the final regulations would be evidence based and person-centered, which remained the guiding force throughout the process.

More information about alternatives to specific provisions can be found in the section titled "Cost-Benefit Analysis by Provision."

Determination

The Department has determined through its internal work and this analysis that the benefits of the proposed Case Management Regulations justify the costs, and that the proposed rule has greater net benefits than other regulatory alternatives.

Cost-Benefit Analysis by Provision

This section of the analysis looks at individual proposed changes in more detail, and discusses the benefit and costs of each change. These following changes examined are:

- Voluntary Extension of Care (VEC); and
- Educational Stability;

As noted earlier, the current Regulations that are consolidated into the new Case Management Regulation are being repealed and replaced with a new version. This analysis looks at the status quo for DCYF staff and clients and analyzes how this new regulation will change their experience.

Voluntary Extension of Care (VEC)

Overview of proposed change:

Proposed regulation allows DCYF to comply with RI Article 15 regarding the FY 2019 budget for DCYF. The legislation authorizes youth to remain in care of the Department and have access to select services until age twenty-one (21).	<i>Citation in previous regulation:</i> N/A
	<i>Citation in new regulation:</i> 1.17
	<i>Was this change discretionary?</i> No

Costs of proposed change:

In July of 2018 the Governor signed the fiscal year 2019 budget which included Article 15, allowing the Department to provide eligible foster care youth who elect to enter the Voluntary Extension of Care program with services and supports up to the age of twenty-one (21). The Department determined the Voluntary Extension of Care program to be budget neutral as the Fostering Connections to Success and Increasing Adoptions Act (Pub. Law 110-351) expanded funding under Title IV-E of the Social Security Act to allow states to claim federal reimbursement for eligible foster care youth up to the age of twenty-one (21).

Benefits of proposed change:

Youth in foster care often lack the foundational tools and supports need to successfully transition into adulthood. Compared to their peers who do not age out of the foster care system, these youth face significantly worse outcomes such as higher rates of unemployment, poverty, incarceration; additionally, these youths are less likely to complete high school or seek higher education and struggle to access healthcare services.

The Voluntary Extension of Care program addresses these issues by creating an effective transition plan that details and tailors the supports and services available to youth who are ageing out of foster care so they can achieve success in adulthood. The program provides services to youth in areas such as: educational, vocational, and employment supports; connections to behavioral, emotional, and physical care providers; financial literacy and money management skills; acquisition of key documents; and assistance with

developing long term natural supports. Additionally, the Department assists young adults with accessing an array of living settings that allow them to gradually assume more independence over time within a supportive atmosphere.

Rationale for proposed change:

To comply with Article 15 of the Rhode Island state budget for FY 2019.

Other alternatives considered:

<i>Alternative:</i>	<i>Rationale for not selecting this alternative:</i>
Status quo	Regulations do not comply with Article 15