



South Carolina Department of Social Services
Work Aid (16.6): Service Referral

Supplemental to DSS Policy: Service Referral Policy

A. Service Referrals for FAST or CANS Safety Items	1. The FAST or CANS assessment helps to identify the safety items within twenty-four (24) hours of initial contact with the child and family. 2. Service recommendations identified for these safety items are documented on the Family Permanency Plan by the Case Manager.
B. Service Referrals related to Other Conditions	1. The FAST or CANS assessment determines the needs and strengths of the child and family. 2. Service recommendations identified for these safety items are documented on the Family Permanency Plan by the Case Manager. 3. The Case Manager completes the service referral in CAPSS.
C. Prior to Making a Service Referral	1. The Case Manager completes the safety items on the FAST or CANS within twenty-four (24) hours of initial contact, or entry into foster care, and identifies any safety concerns. a. Within those twenty-four (24) hours of completion of safety items, the Supervisor reviews and consults with the Case Manager; The Case Manager and Supervisor discuss any identified needs and recommended services during case consultation throughout the investigative period as part of the teaming process. 2. Within thirty (30) calendar days of initial contact, the Case Manager:

	a. Completes the remaining FAST items. The FAST items identify the service needs; b. Meets and collaborates with the family to discuss the identified service needs and the services to address those needs. c. Teaming between program areas occurs continually. This ensures that the FAST assessment completed during the investigation and the CANS Assessment completed during foster care align with each other. d. Provides the family with a list of at least three (3) service providers within their community to address the identified service needs. If applicable, the family determines or ranks their preferred service provider for the recommended service; e. Discusses the service recommendation with the family and acknowledges the discussion in the Family Permanency Plan; f. Engages the family in the finalization of the Family Permanency Plan. Requests their signatures on DSS Form 4001 Request for Privacy Protection for Protected Health Information and the Family Permanency Plan. g. Enters all services, paid or unpaid, into the service authorization tab in the Child and Adult Protective Services System (CAPSS). Note: If safety items are rated and there is a score of two (2) or three (3), this is an immediate service need and requires immediate service intervention.
D. Referral Process	<u>Initial Referral Process</u> The Initial Referral Process occurs after the Case Manager has completed the FAST and CANS and consulted with the family and Supervisor. 1. During the Initial Referral Process an electronic referral will be sent by the Case Manager from CAPSS to the service provider that is selected by the family and identified on the Service Authorization tab through the Provider Portal and includes, but not limited to the following:

	a. Referral date b. Service Type c. Age of client d. Service authorization number e. Service authorization start date f. Service authorization end date g. Service category h. Presenting problem and identified needs i. FAST item(s) and rationale related to this service j. CANS item(s) and rationale related to this service h. Description of needed services 2. Selected service providers receive the initial referral and will be asked for a response within twenty-four (24) hours to their capacity to service the family. 3. If there is no acceptance or denial from the provider within one business day of the referral, the referral will expire on that day. 4. If the service provider is unable to fulfill the service request, CAPSS automatically advances to the family's next identified and selected service provider on their list. a. The family will be informed that the CAPSS system will advance through the selected provider list until the referral has been accepted. 5. Once the service provider accepts the initial referral, CAPSS advances to the next step which is the full acceptance process. 6. This referral could be sent back due to, but not limited to the following: a. Outside of the scope of practice; b. Outside of the geographic service area; c. No staff available to service client or insufficient staffing; d. Waiting list to receive requested services or untimely access to services.
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Referral Acceptance Process

The Referral Acceptance process begins after the service provider accepts the initial referral.

1. During this process, the service provider reaches out and schedules a meeting with the family to gather more details on the family and child or youth's needs.
2. The service provider establishes services with the family.
3. This referral could be sent back due to, but not limited to the following:
 - a. Inappropriate level of care;
 - b. Specialty service needed;
 - c. Client failed to show up for service appointment;
 - d. Client refuses services once they begin;
 - e. Client requests a change of provider.

Note: The Case Manager continues to assess the family and the services received by the family during monthly visits to determine if they are completing the services and if there are any issues.

Qualified Provider Listing (QPL) Service Referrals

The QPL Service Referral is automatically generated once services are input into the service authorization tab and the family consents to receiving services.

1. Each week, the service provider meets with the family and submits progress reports through provider portal in CAPSS.
2. CAPSS automatically alerts the Case Manager and Supervisor via email when the progress reports have been entered and can be accessed.

	3. The Case Manager reviews and approves the progress reports within three (3) business days and records in CAPSS dictation. 4. If it is not approved or there are billing and reimbursement questions, the Case Manager and Supervisor to contacts the Office of Child Health and Well-Being at servicereferrals@dss.sc.gov. 5. If the service provider submits a progress report that is not detailed enough, the Case Manager requests more information from the service provider through the CAPSS Service Referral Portal. 6. Until the Case Manager receives a response from the service provider regarding the request for additional information, the reimbursement process will be delayed.
E. Emergency Service Referrals	Upon initial contact with the family, the Case Manager will complete the FAST and CANS safety items with the family. 1. The FAST helps the Case Manager and family identify services that can support the family in maintaining the child safely in the home. 2. If the child can remain safely in the home with services, the Case Manager completes a family Permanency Plan with the family to maintain the child's safety and stability while in the home with the established services. a. The Case Manager meets with the family to discuss the identified service needs and discuss the possible services to address those needs. b. Together, the Case Manager and the family collaborate to determine specific service referrals. c. Refer back to box D, Referral Process, to make a service referral.

F. Service Referrals for Case Closure and Unfounded Cases	If an ongoing case is unfounded or the case is proceeding to case closure, the Case Manager: a. Staffs the case with the Supervisor to determine how to utilize previous referral credits and discuss case closure; b. Notifies the family of case closure or case decision; c. Discusses with the family their option to continue with remaining approved service authorization referral credits if they wish to do so; d. Alerts the service providers that the case has been closed or the agency is no longer involved with the family; e. Enters dictation in CAPSS to indicate case closure.
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