



State of South Carolina Department of Social Services

Policies and Procedures: Child Welfare Services

Subject:	590 Placement in a Qualified Residential Treatment Program
Authority:	S.C. Code Ann. Sections 63-7-1730, 63-7-1740 and 63-7-770; DSS Regulations 114-550: Licensure of Family Foster Homes and Approval of Adoptive Homes for Children in Foster Care; DSS Regulation 114-590 through 114-595: Residential Group Care Facilities for Children; Fostering Connections and Increasing Adoptions Act of 2008 (P.L. 110-351) and Family First Prevention Services Act (P.L. 115-123)
Standards:	Guiding Principles and Standards (GPS) Practice Model
Application:	All Child Welfare Services Staff and County Attorneys
Purpose:	To explain policies and procedures that govern the placement of children who are in the custody of the South Carolina Department of Social Services (DSS) and are being placed in a Qualified Residential Treatment Program (QRTP).
Policy Statement:	When a child cannot safely remain in the home of a parent or guardian and needs out-of-home placement, DSS places the child in the least restrictive, most family-like setting, giving priority to placing children who need out-of-home placement with kinship caregivers. Case managers must make concerted efforts to place the child in a kinship foster family home, in the guardianship or custody of kin, or if a kinship caregiver is not available, in a non-kin foster family home. To meet the individualized needs of a child DSS may place a child in a QRTP. The decision to place a child in a QRTP must be based upon the Qualified Individual's completion of a functional assessment, the Child and Adolescent Needs and Strengths (CANS), and the convening of a Child and Family Team Meeting (CFTM). The family court's approval is required for a child to remain in a QRTP for more than 14 days. Long-term placement requires the approval of the family court and the State Director.
Policy Administration:	The Office of Permanency Management is the owner of this policy. The Director of Permanency Management, or director's designee, will review this policy annually, or more frequently if necessary, and make any needed changes.

Procedures:	
A. Before Placement in a QRTP Setting	Whenever DSS intends to place a child in a QRTP, the following shall occur: 1. QRTP level of care is recommended by the CANS 2. A CFTM must be held prior to the child's placement in a QRTP consisting of the following team members: a. Parents, child, kin, and/or fictive kin; b. Appropriate professionals who are a resource to the child's family (i.e., teachers, medical or mental health providers who have treated the child, and clergy); c. In the case of a child who has attained age fourteen, the team shall include members of the permanency team selected by the child; d. The Qualified Individual (QI); and e. Other members of the Well-Being Team. 3. Prior to the child's placement in a QRTP, a QI, must work in conjunction with the child and family team while conducting and making the assessment. a. Based on the information provided in the CANS and within the context of the CFTM, the QI must determine whether the child's needs can be met with family members or through placement in a foster family home. If not, the QI must determine the placement setting that would provide the most effective and appropriate level of care for the child in the least restrictive environment. b. If, based on this information, the QI determines the child's needs cannot be met by the family of the child or in a Foster Family Home, the QI must explain the reasons. A shortage or lack of foster family homes is not an acceptable reason for determining that the needs of the child cannot be met in a foster family home. c. The QI must develop a list of child-specific short- and long-term mental and behavioral health goals. d. The QI must specify why the recommended placement in a QRTP is the setting that will provide the child with the most effective and appropriate level of care in the least restrictive environment, and how placement in a QRTP is consistent with the short- and long-term goals for the child, as specified in the child's permanency plan. e. Once completed, the assessment is to be provided to the case manager. f. The case manager shall update the strengths and needs of the child using the CANS to reflect information gathered during the course of the QI assessment.

	4. The case manager will consult with the Placement Services Division regarding QRTP bed availability and if available, next steps. 5. Once placement has been secured, the case manager will send an internal email to the QI, regional attorney and county attorney advising that physical placement in a QRTP has been made.
B. Upon Placement in a QRTP	1. Within one day of the child's placement in a QRTP, the case manager must properly document the child's QRTP placement in the DSS Policy 1647: Family Permanency Plan and must provide the county managing attorney with a copy of the Family Permanency Plan, DSS Form 37520: Qualified Individual Assessment, and any other necessary QRTP documentation. 2. The county managing attorney files all required documentation with the family court and serves the child's parents and guardian ad litem within five days of receiving the documentation from the case manager. 3. The child's parents and guardian ad litem must request a hearing if desired, otherwise the family court decides whether to approve or disapprove the placement in a QRTP based on the supporting documentation the county managing attorney filed with the court and served upon the child's parents and guardian ad litem. 4. The family court reviews the assessment, determination, and documentation supporting QRTP placement and issues an order approving or disapproving the child's placement within 60 days of the child's placement. If the court does not approve the child's placement in a QRTP, DSS has 30 days to remove the child from the QRTP placement. 5. The county managing attorney provides a copy of the family court's order to the case manager within seven days of the filing of the order and the court order is uploaded in CAPSS following standard procedure of legal documentation. 6. For as long a child remains in a QRTP the child's placement must be reviewed and the case manager must update the DSS Policy 1647: Family Permanency Plan. The case manager ensures the progress notes and supporting evidence is included in the Foster Care Review Board (FCRB) update, any court hearing, and FPP. a. The FCRB will review the QRTP placement during regularly scheduled foster care review board Administrative Case Reviews. Refer to DSS Policy 540.1: Foster Care Review Board Meetings – Administrative Case Review.

	b. The Family Court must review the QRTP placement during regularly scheduled Permanency Planning Hearings. Refer to DSS Policy 520: Permanency Planning. 7. No child under the age of 13 may remain in a QRTP for more than six consecutive or nonconsecutive months unless the State Director provides written approval for the placement. 8. No child 13 or older may remain in a QRTP for more than 12 consecutive months or 18 nonconsecutive months unless the State Director provides written approval for the placement.
C. State Director Continued Placement Review	1. Whenever continuation of a child's placement in a QRTP will exceed the time limits, the written approval of DSS State Director must be obtained. 2. The following documents must be submitted to the Placement Services Director or designee no later than 30 days prior to the expiration of the allotted time: a. DSS Form 37520: Qualified Individual Assessment; b. A signed court order verifying approval for the QRTP placement and if available, the most recent court order addressing the current QRTP placement; c. Most recent DSS Policy 540.1: Foster Care Review Board Meetings – Administrative Case Review; d. Most recent Child and Family Team Meeting Report; and e. Current progress report from the QRTP provider that shows current progress and recommendation for continuation in a QRTP. 3. The DSS State Director will review the documentation and provide the written decision on DSS Form 37521: QRTP Extension of Time Written Review. 4. The signed copy of DSS Form 37521: QRTP Extension of Time Written Review must be linked in CAPSS.

Forms:	DSS Form 37520: Qualified Individual Assessment DSS Form 37521: QRTP Extension of Time Written Review DSS Form 37509: Diligent Efforts to Provide Foster Home Placement DSS Form 37508: Foster Care Placement Notification Form DSS Form 37168: Service Tracking Form for Specialized Funding Sources DSS Form 37402: Placement Staffing
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Glossary:

Child and Family Team Meeting (CFTM): a family-centered, trauma-informed, individualized, strengths-based, and culturally responsive. The meetings are goal-oriented and problem-solving processes that bring together the Child and Family Team to make decisions about the safety, permanency, and well-being of their children through the development of an individualized Family Permanency Plan. CFTMs are planned ahead of time to provide more opportunity for meaningful participation by all members. Interpreter services are scheduled as needed.

Childcare Institution: a private or public childcare institution which accommodates no more than twenty-five children and is licensed by DSS; Childcare institution does not include wilderness camps, training schools, or any facility that exists primarily for the detention or correction of children.

Congregate Care (or Group Home): a residential organization, including residential institutions and child care institutions, licensed by DSS to provide temporary or long-term residential care for children on a year-round basis; The term also includes emergency shelters. Boarding schools that do not operate year-round nor offer services beyond those associated with school programs are not congregate care facilities. DSS further categorizes congregate care facilities into non-specified congregate care settings and specified congregate care settings.

Family Permanency Plan: a sole collaborative plan (case plan) that describes the reasons for agency involvement, the actions and services required to change behaviors, and the strategies to reduce safety concerns and risks that promote the safety, permanency, and well-being of the child and family.

Foster Family Home: the home of an individual or family that is licensed by DSS and where a child in foster care has been placed under the care of an individual who resides with the child and who provides 24 hour substitute care for the child; An individual or family who DSS deems is capable of adhering to [DSS Policy 760.3: Reasonable and Prudent Parenting](#) and that provides foster care for no more than five children, subject to the following exceptions:

- a. to keep a sibling group together
- b. to keep a child in the child's home community
- c. to return a child to a home in which the child was previously placed
- d. to comply with a court order, or
- e. if it is in the best interests of the child as determined by the court

Kinship Caregiver: a caretaker, protector, and nurturer of a child, youth, or young adult who is temporarily unable to live with their parent; The term includes an adult who is related to a child or youth by blood, marriage, or adoption, as well as an adult who is not related by blood, marriage, or adoption, but who has a relationship with the child, youth, or young adult, or their family (fictive kin).

Qualified Individual (QI): at DSS this individual is the Regional Therapeutic Services Coordinator. This person is an employee of the Department and must maintain objectivity in determining the appropriate placement for the child.

Qualified Residential Treatment Program: a group home that has a trauma-informed treatment model that is designed to address the needs, including clinical needs as appropriate, of children with serious emotional or behavioral disorders or disturbances and is able to implement the treatment identified for the child/youth in the required 30 day assessment of the appropriateness of the QRTP placement; A program that has registered or licensed nursing staff and other licensed clinical staff who provide care within the scope of their practice as defined by state law, are on-site according to the treatment model referred to in subitems below, and are available 24 hours-a-day and seven days a week.

- a. to the extent appropriate, and in accordance with the child's best interests, facilitates participation of family members in the child's treatment program
- b. facilitates outreach to the family members of the child, including siblings; documents how the outreach is made, including contact information; and maintains contact information for any known biological family and fictive kin of the child
- c. documents how family members are integrated into the treatment process for the child, including post-discharge, and how sibling connections are maintained
- d. provides discharge planning and family-based aftercare support for at least six months post-discharge, and
- e. is licensed by DSS and accredited by an approved independent, not-for-profit organization

Note: A Psychiatric Residential Treatment Facility (PRTF) is not a Qualified Residential Treatment Program.

Specialized Congregate Care Setting: a treatment-oriented congregate care setting licensed by DSS which provides services and programming to meet the individual needs of children; Specialized settings provide prenatal, post-partum, or parenting support for youth. The term includes settings that provide high-quality residential care and supportive services to children and youth who have been found to be, or are at risk of becoming sex trafficking victims, and supervised independent living settings for young adults aged 18 - 21.

Note: Title IV-E allows DSS to claim reimbursement for foster care board payments for specified congregate care settings. Although DSS does not currently claim Title IV-E reimbursements for foster care board payments for young adults aged 18-21, DSS treats supervised independent living for this population as specified congregate care settings.

Victim of Child Trafficking: a minor who is under 18 years old who is sex trafficked or labor trafficked as defined in S.C Code Section 16-3-1210.