

Section 4 Overview

This section pertains to the policy and procedures necessary when an out-of-home placement of a child is imminent or has occurred.

Chapter 1 Overview

This chapter pertains to the necessary activities when an out-of-home placement of a child is imminent or is needed immediately.

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1.1 Mandate and Rationale

Each time a child is placed in out-of-home care the probability exists for the permanent loss of family relationships and the probability increases the longer the child remains in out-of-home care. The first and greatest investment in time and resources should be made in the care and treatment of children in their own home.

When intervention becomes necessary it should begin with the Children's Service Worker and family jointly developing a strengths-based assessment. A strengths-based assessment focuses on the family's strengths through relabeling/reframing behavior rather than focusing on problems. Operating from this perspective inspires hope, reinforces the family's own problem solving, and encourages family empowerment. The worker's skill in engaging the family in the strengths assessment will set the stage for a continuing and productive relationship with the family. During the assessment process, the family and the worker will identify all resources available to keep the family intact and prevent out-of-home placement. If the provision of these services, the assistance of natural helpers identified by the family, and other reasonable efforts made by the Division cannot ensure the child(ren)'s safety, a referral for protective custody and placement of the child(ren) is appropriate.

Related Subject: [Section 4, Chapter 1 Attachment C, Resources to Prevent Placement](#)

Before recommending out-of-home care the Children's Service Worker shall thoughtfully examine the following factors which may influence their recommendations:

- Personal standards and biases;
- Knowledge of cultural/racial/ethnic norms;
- The desired outcome for out-of-home care;
- The way the worker views and approaches families;
- The way the worker views the family's participation in service delivery;
- The way the worker perceives his/her role with families; and
- Willingness to share his/her power with families.

Stop - Re-Evaluate What More can be Done to Prevent Out-of-Home Care

If the Children's Service Worker believes that his/her personal standards or biases and/or lack of knowledge/experience in a certain area may be unfairly influencing their recommendations, they should consult with their immediate supervisor.

Supervisors are responsible for the ongoing professional training and development of staff. This responsibility includes assisting staff to assess their abilities and limitations and to provide staff the opportunities to enhance their knowledge base and skill level.

If the provision of services and other reasonable efforts made by the Division cannot ensure the child(ren)'s safety, a referral for protective custody and placement of the child(ren) is appropriate. Hence, while the Division places great value on the family unit, the safety and welfare of the child(ren) must be the deciding factor in recommending out-of-home placement.

Related Subject: [Section 4, Chapter 1, Attachment A: Assessment of Safety and Risk Factors in Recommending Out-of-Home Placement](#)

Throughout the entire intervention with a family, it is imperative that the Children's Service Worker explains to the child, in an age appropriate manner, and the parents each step of the process and why each step is happening. This is inclusive of the initial interview during the investigation, plans for placement, placement, treatment planning, permanency planning, court hearings, etc.

The following procedures are to be used as a guide for the Children's Service Worker in providing out-of-home placement to a child(ren) and family:

1.1.1 Referral Source for Out-of-Home Placement

The referral that initiates an out-of-home placement may originate with a child abuse/neglect report, family/juvenile court, from an active Family-Centered Services or Intensive in-Home Services case, and/or as a placement request by the child's parent/caretaker. Any of these may result in an emergency or planned placement.

As an organization that is authorized to make decisions or recommendations for persons that may result, or have already resulted, in separation from their family, Children's Division staff should ensure that a licensed professional with an advanced degree in social work, or in another comparable human services profession with two years of related clinical experience, is part of the decision-making process. This includes staff with a Masters in Social work (MSW) and/or a Licensed Clinical Social Worker (LCSW), and should be consulted with and/or included in the Family Support Team (FST) when recommending an out-of home placement.

Staff may consider including their Children's Service Specialist in the decision-making process when appropriate. Participants involved in the decision-making process should be clearly identified and documented in the case record pursuant to CS1 instructions in place.

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1.2 Out-of-Home Placement Service Evaluation

NOTE: This process is to be followed any time transfer of the custody of the child to the Division is being considered, but has not yet occurred.

1. Involve, in the evaluation of the child, appropriate persons or agencies from among the following, but not limited to:
 - a. *Juvenile officer;
 - b. *Local school and health professionals;
 - c. Local mental health professionals;
 - d. Child care/foster care/residential care providers;
 - e. *Appropriate state agencies (DMH, DESE, etc.) (In most cases DESE would be working through the local school district);
 - f. Private practitioners knowledgeable of the child, programs or services appropriate to the child's needs; and
 - g. *Guardian ad Litem or CASA, where appointed.

***The participation of this individual must be requested in completing each child's evaluation.**

2. Discuss concerns for the welfare of the child with the family. Advise the family that Intensive In-Home Services (IIS) is a resource that may be available to them, which could help prevent the out-of-home placement of the child. If the family indicates a willingness to participate in IIS, make a referral to the program.
3. Identify the service needs of the child through consideration of the child's functioning in the following areas:
 - a. Relationships with adults/authority, as well as peers;
 - b. Academic performance (IEP, if appropriate);
 - c. Health - physical and mental (emotional adjustment);
 - d. Ability to tolerate closeness of family setting;
 - e. Self-image; and
 - f. Need for external controls.

4. Develop a plan for placement and services, using CS-1 and including input from child's family, given the service needs of the child. Submit this plan to the Permanency Planning Team and include the team's recommendation prior to submitting the plan to the court.
5. Obtain from the County Director/designee certification that services/funding are available, if the Family Support Team (FST) recommends placement or services available through the Division.
6. Develop an interim treatment plan if the placement and/or services recommended by the FST are not currently available because of lack of resources (financial, no provider, no openings, etc.). This plan would provide an available alternative until such time as the placement and/or resources can be provided.
7. Request relief of custody from the juvenile court if the Division determines, after completion of the above evaluation process, that the child placed in its custody is in need of care or treatment other than that which it can provide.

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1.3 Policy Requirements Relating to Juvenile Court Referrals and Placements

Referrals to the juvenile court, to gain assistance from the court, may be made at any time throughout the case life to gain assistance from the court. The Children's Service Worker shall obtain supervisory approval prior to making court referrals.

If the placement is an emergency, the court shall be requested to indicate in the court order that lack of preventive services was reasonable in light of the emergency circumstances.

Referrals that recommend out-of-home placement shall be made if the safety and risk assessment indicates the child(ren) is in danger if he/she remains in the home. In these referrals, the Children's Service Worker shall request a judicial determination be made that the provision of services provided met the "reasonable efforts" criteria and could not prevent the need for placement of the child. Reasonable efforts to maintain the child with his/her family include the consideration for and/or referral of the child's family to IIS.

Referrals for IIS will be immediately considered for all families whose children enter out-of-home placement during emergency situations.

NOTE: No child shall be removed from the care of the family without authority of the juvenile court or protective custody being taken by law enforcement or a physician [Section 210.125](#) and [211.031](#), RSMo.

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1.4 Reasons for Recommending Placement

Although it is the legal responsibility of law enforcement, juvenile officer, or physician to determine when protective custody is necessary, Children's Division (CD) staff should provide their professional opinion to the official making such a determination.

The reasons for requesting protective custody are found in the Missouri Law Handbook Section 211.031, RSMo. Briefly these include:

- The child is in need of care and treatment because the parent(s) has neglected him/her or refused to provide proper support, education, medical, surgical, or other care required by law;
- The child is otherwise without proper care, custody, or support;
- The behavior, environment, or associations of the child are injurious to his/her welfare or that of others; or
- The child is charged with an offense not classified as criminal if committed by an adult (status offender).

Additional authority to secure "protective custody" of a child is found in Section 210.125, RSMo. Briefly this is:

- Twenty-four (24) hour protective custody may be taken by a juvenile officer who has cause to believe the child is suffering from illness or injury, or is in danger of personal harm in his surroundings and that a case of child abuse or neglect exists and the threat of harm to the child may occur before a court can issue a court order assuming protective custody; or
- Twelve (12) hour protective custody may be taken by a police officer, law enforcement official, or a physician who has cause to believe the child is suffering from illness or injury, or is in danger of personal harm and a case of child abuse or neglect exists and the threat of harm to the child may occur before a court can issue a court order assuming protective custody.

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1.5 Factors in Recommending Out-of-Home Care

The Children's Service Worker and supervisor shall determine, through assessment and evaluation of the child and family, that a referral to the juvenile court is necessary to protect the physical/emotional well-being of the child.

A preliminary screening is required on all cases when a Children's Service Worker plans to recommend the removal of child(ren) except in the following situations:

- When a child cannot be adequately protected during the referral and assessment process and must be removed on an emergency; or
- When all caregivers have indicated that they will not cooperate with IIS.

A preliminary screening is defined as a conference between the Children's Service Worker and supervisor to determine if the case is appropriate to refer for Intensive In-Home Services.

Related Subject: [Section 3 Chapter 7, Intensive In-Home Services](#)

The following factors should be considered when determining the need to make a referral to the juvenile court for removal of the child from the home:

- Safety Assessment (CD-17)

Related Subject: [Section 2, Chapter 9.2 Safety Assessment](#); [Section 2, Chapter 9.3 Safety Planning](#); and [Section 2, Chapter 9.4 Assessment of Risk](#)

- Is the child in immediate danger or living in hazardous conditions that cannot be immediately remedied and may result in serious bodily harm?
- Is a crisis situation occurring which results in the temporary inability of parent(s) to give adequate care to the child?
- Do conditions of gross physical/emotional neglect, or abuse exist which cannot be immediately remedied or significantly reduced, or which can be expected to result in significant harm to the child?

Related Subject: [Section 4, Chapter 1, Attachment A Assessment of Safety and Risk Factors in Recommending Out-of-Home Placement.](#)

NOTE: Serious danger or harm to the child should result in a recommendation for immediate placement.

Related Subject: [Section 4, Chapter 2.2.1 Emergency Placement](#); and [Section 4, Chapter 5 Placement/Replacement of the Child](#)

- Is the strength of parent/child relationship so poor that the parent is providing inadequate support and guidance to the child?
- Is the mental and/or physical capacity of the parent(s) of such a nature that improving parenting skills to a minimally acceptable level becomes an extensive time-consuming process which interferes in the child's normal growth and development? Are community resources non-existent that could substitute for or mediate the parent's care?

Pursuant to Section [211.031 RSMo.](#), an individual's disability or disease cannot be the basis for a determination that a child is in need of care or it is necessary to remove a child from a parent's custody without a specific showing that there is a causal relationship between the disability or disease and a substantial and significant risk of harm to a child.

- Have all appropriate and available community/agency resources been offered to the family to prevent placement?
- Does the child have special needs that cannot be met if the child remains with the parent(s)?
- Do problems reoccur which affect the well-being of child and interfere frequently with his/her growth and development?
- Has the parent(s) requested out-of-home care placement? Does evaluation of this request confirm the plan to be appropriate?
- Has the Division made the required diligent and reasonable efforts to maintain the child in his/her own home?

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1.6 Referring Families to Intensive In-Home Services

Referrals to IIS will be immediately considered for all families whose children enter out-of-home placement during emergency situations.

Related Subject: [Section 3 Chapter 7 Intensive In-Home Services](#)

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Attachment A: Assessment of Safety and Risk Factors in Recommending Out-of-Home Placement

Safety assessment is the process by which the CD worker identifies threats of danger to vulnerable child(ren) in the household and assesses whether the caregiver's protective capacities are sufficient to control that threat. If the caregiver's protective capacity is insufficient to control the threat, outside safety intervention becomes necessary. The worker will work with the family to utilize the least intrusive intervention to keep the child safe. If safety interventions can be developed to control the threat of danger and allow the child to be safe and remain in the home a safety plan is implemented. If less intrusive interventions cannot be developed or agreed upon to control the threat of danger and keep the child safe then the safety plan must be out-of-home care.

Related Subject: [Section 2 Chapter 9.2 Safety Assessment](#) and [Section 2 Chapter 9.3 Safety Planning](#)

The standard must be that children should remain at home or be returned if the parents have sufficient caregiver capacity to protect their children from threats of danger or safety interventions can be put in place to control the threat. Another home is appropriate only when the child's situation in his own home has chronic inadequacies, which resist correction, and which are seriously detrimental to him physically or emotionally. The Children's Service Worker should ask, "If the child is returned, would I have concern for the child's welfare?"

The objective of out-of-home care is not to "rescue" endangered children by automatically removing them from their home. The first priority is to maintain the family in crisis. Although there will be situations where immediate removal is not only justified but imperative, individuals working with families strive to keep families together when appropriate. If separation is necessary, the objective is to develop a plan to enhance the caregiver's protective capacities; restore the caregiver to a protective role, and return the child home quickly. If this is not possible, permanency must be obtained for the child.

Assessment of safety begins at the point a CA/N report is made and permeates the entire family reunification treatment process. In order for the family reunification treatment process to be effective, the focus must be on the enhancement of the caregiver's capacity to protect the child(ren) from threats of danger.

Related Subject: [Section 2, Chapter 9.2 Assessment of Safety](#); [Section 2, Chapter 9.3 Safety Planning](#); and [Section 2, Chapter 9.4 Assessment of Risk](#)

Risk Assessment: The risk assessment and risk reassessment are used only when there are children in the home. If children are removed from the home during the investigation/family assessment or from an ongoing FCS case, the plan for keeping the child safe is out-of-home care and the plan for treatment is the enhancement of the caregiver's capacity to be protective, so that the conditions will be safe for the child to return home. Use of the risk assessment is suspended, unless at least one child remains in the home, or until the children are returned.

Factors in Recommending Placement

The following are factors to be considered when determining the need to make a referral to the juvenile court for removal of the child from the home.

As the Children's Service Worker reviews these factors in relation to the safety and well-being of the child(ren), consideration must also be given to culture, values, and traditions specific to the family:

- Is the child in immediate danger or living in hazardous conditions which cannot be immediately remedied and may result in serious bodily harm?
- Is a crisis situation occurring which results in temporary inability of parent(s) to give adequate care to the child?
- Do conditions of extreme physical, emotional neglect or abuse exist which cannot be immediately remedied or significantly reduced, or which can be expected to result in significant harm to child?
- Is the strength of parent/child relationship so poor that the parent is providing inadequate support and guidance to the child that may result in significant harm to the child?
- Is the mental and/or physical capacity of the parent(s) of such a nature that improving parenting skills to a minimally acceptable level becomes an extensive time-consuming process which interferes in the child's normal growth and development?
- Are community resources non-existent which can substitute for the insufficient caregiver capacity to protect the child from threats of danger?

Pursuant to Section [211.031 RSMo.](#), an individual's disability or disease cannot be the basis for a determination that a child is in need of care or it is necessary to remove a child from a parent's custody without a specific showing that there is a causal relationship between the disability or disease and a substantial and significant risk of harm to a child.

- Have all appropriate and available community/agency resources been offered to the family to prevent placement?
- Does the child have special needs which will not be met if the child remains with the parent(s) due to the parent's refusal to meet or give approval for the needs to be met?
- Do problems reoccur which affect the well-being of the child and interfere frequently with his/her growth and development?

- Has the parent(s) requested out-of-home care/placement? Does evaluation of this request confirm the plan to be appropriate; and
- Has the Division made the required “diligent and reasonable” efforts to maintain the child in his/her own home?

When determining if out-of-home care is appropriate, it is helpful for the Children’s Service Worker to consider what can and cannot be accomplished by out-of-home placement:

CAN	CAN'T
1. Provide safety.	1. Solve family problems.
2. Provide shelter.	2. Provide stability and continuity for the family members.
3. Provide respite for families.	3. Help parents deal with special needs of the child because the child is not in the home.
4. Provide a family while child is awaiting legal release or termination of parental rights following abandonment.	4. Increase bonding to birth family.
5. Provide an opportunity to assess child without the family and vice versa.	
6. Provide a positive parenting experience for some children.	
7. Provide for more adequate stimulation in some cases of neglect.	

Survival, security, and growth are terms which can be used to differentiate levels of adequacy in a child's life experience and may be used to determine if a child can remain in the home. Survival refers to physical and emotional survival, staying alive. Security, the next essential ingredient in life, includes safety and belonging. Finally, when a child is alive and secure, the child's physical, intellectual, and emotional development may proceed and growth can occur. A continuum of survival, security, and growth helps to describe the quality of a child's life experience.

Survival

Security

Growth

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Survival, of course, is the primary consideration and demands actions to resolve any threat to survival. Security issues can be serious, but whether they demand out-of-home care or require an alternative in-home plan will depend on how close they are to the survival end of the continuum. Growth includes a wide range of acceptable levels. If growth is believed to be hampered, change may be advisable but perhaps debatable; change simply to enhance growth will be entirely voluntary.

It is strongly advised that individuals seek a consensus among multidisciplinary team members and/or family support team members as to what constitutes minimum sufficient levels of care. It is also recommended that parents participate in the definition of those levels. The boundaries of survival, security, and growth will assist in identifying whether specific children in their family home are experiencing minimum sufficient levels of care.

Related Subject: Section 1, Chapter 4 Roles and Responsibilities of Community Partners
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Attachment C: Resources to Prevent Placement

Every "reasonable effort" should be made by the Children's Service Worker to preserve the family unit and prevent out-of-home placements for children. The selection of resources and services to prevent out-of-home placement should be based on the careful examination by the worker and the family, of the family's unique strengths and needs, the family's capacity to utilize and benefit from the resource, and the desired outcomes. Some families will benefit from established resources, which can be paid through traditional funding sources. Other families may have a unique need, which requires the development of an individualized resource. The following is a list of a few resources/services available to preserve and strengthen the family unit.

Crisis Intervention

All families experience stress from internal and external forces. Stress disturbs the family balance and may result in a crisis when usual problem-solving methods fail. Often, the Children's Service Worker's initial contact with a family will be during a period of crisis. During this time, the worker and others may be too quick to recommend that a child be removed from the home. The six (6) procedural steps of intervention during a time of crisis are as follows:

1. Make contact and rapidly establish a relationship: Families in crisis often have increased motivation for change. During this time the worker has the opportunity to establish strong bonds with the family.
2. Define the problem and assess dangerousness: Identifying problems requires that the worker ask the right questions and intently listen to the responses.
3. Find out what is happening in the family and the precipitating event: Identify the most pressing problem at the time and who is in crisis. During this step the worker should:
 - a. Avoid excessive questioning. Allow family members to speak their mind and ventilate their feelings. Model calmness for the family.
 - b. Use active listening skills with the family. These skills can be very helpful in releasing the client's feelings and defusing emotional situations.

When assessing danger the Children's Service Worker should observe the physical setting for items which are potentially dangerous or might be used as weapons. Also, the worker should observe the interaction of family members and each individual's mental or emotional state. Workers should also examine their own physical and emotional response to the situation when assessing danger, i.e., rapid heart beat, sweaty palms, shaking knees, tension, nervousness, and fear, etc.

4. Assess past coping strategies: Determine if the presenting problem is new or long-standing and how the family has coped with this problem in the past. Ask the family to identify which coping strategies have and have not worked in the past. Remind the family that they have handled crisis before and have been successful.
5. Explore alternatives: Allow the family to explore alternatives for resolving the crisis. Offer possible alternatives. Allow the family to evaluate whether they might work and if they are willing to try it. If the parent seems indecisive, the Children's Service Worker should take a more assertive role by identifying what alternatives should be attempted.
6. Develop an action plan: Take immediate steps to connect the family with needed resources and services.
7. Follow-up: Contact the family periodically to determine if they are finding the resources/services to be helpful in resolving the crisis.

Related Subject: [Section 3, Chapter 4.3 Crisis Intervention Guidelines](#)

Resources/Services

The Children's Service Worker should be familiar with the resources in the community and how to access them.

The following is a description of services the worker may offer, or use to preserve and strengthen the family to prevent out-of-home placement.

The Children's Service Worker should view these services as a continuum, that is assist the family to identify resources within their family and close personal friends, then to expand identification of resources to those within their community, and, finally to identify those services and resources available through the state.

Community Resources: The number and type of resources will vary from community to community. Often times the creative Children's Service Worker can access or develop a non-traditional resource to meet the individual needs of the family. Interagency or CASSP teams can be helpful in locating and developing resources for families. Community resources may include the following:

- a. Emergency Crisis Fund: The fund may be used to pay reasonable immediate expenses for families to assist them in resolving a crisis that might otherwise result in the out-of-home placement of a child. Examples of such immediate expenses may include utility deposits, food, transportation, clothing, hygiene, home repair expenses, housing, medical care, etc.

- b. **Intensive In-Home Services:** Intensive In-Home Services (IIS) are short-term, intensive, home-based crisis intervention programs which combine skill-based intervention with maximum flexibility to provide services that will be available to families according to their needs. The goal of IIS is to offer families in crisis the alternative to remain together, averting an out-of-home placement of children whenever possible. IIS are offered solely to those families that have a child or children at imminent risk of removal from the home caused by neglect, abuse, family violence or other serious circumstances. Services provided are geared toward assisting in crisis management and restoring the family to an acceptable level of functioning.
- c. **Community Respite Care:** Youth In Need/Youth Emergency Services (YIN/YES) KC Mental Health/DMH placement resources (to be developed).
- d. **Family Arranged Care:** Respite care provided by a neighbor, relative, church member, or friend of the family may provide the relief needed for the family to resolve the immediate crisis while ensuring the child's continued protection and safety. These time-limited arrangements prevent disruptions in the child(ren)'s school attendance while providing placement in a familiar setting with persons known by the family. The Children's Service Worker will work with the family to identify appropriate respite care resources and will assist in developing a child care plan with the private provider. The Children's Division (CD), if necessary, will reimburse the private respite care provider.
- e. **Crisis Nursery:** Provides temporary care for children, from birth to 18 years of age, who are at risk of abuse and neglect or who have experienced abuse or neglect. Most programs accept children at any time, day or night, in order to relieve a potential or existing emergency in the family. Most crisis nursery programs offer free child care 24 hours per day for a maximum of 30 days in any year.
- f. **Resources to Meet Intangible Needs:** The Children's Service Worker will assist the family in arranging mental health counseling, treatment for substance abuse, parenting skill training, and/or other services that may be necessary to stabilize the family. The worker should explore with the family their financial ability to pay for these services and/or explore insurance benefits prior to authorization for services utilizing CTS funds.
- g. **Orders of Protection:** The Children's Service Worker will assist the family in obtaining necessary child and adult orders of protection (ex parte orders) and securing services from law enforcement. This may include assistance in obtaining temporary shelter and/or other services necessary to ensure the safety of the family until an order of protection is issued.

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