

FOR YOUR INFORMATION

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Issue 19-13

Date: 04/24/19

ADDITIONAL PAYMENT AVAILABLE FOR NONMINOR DEPENDENT (NMD) PARENT IN A SUPERVISED INDEPENDENT LIVING PLACEMENT (SILP)

The purpose of this FYI is to provide information regarding availability and eligibility criteria for the Parenting Support Plan Rate (PSP Rate) of \$200 in addition to the Infant Supplement currently paid to an NMD Parent residing in a SILP (NMD Parent).

Please refer to Policy Guide [0100-560.40, SILP](#) for the definition of a DCFS approved SILP and factors to consider when assessing whether a youth is ready or appropriate for a SILP.

The PSP Rate is similar to the \$200 available when a teen parent in a Whole Family Foster Home (WFFH) enters into a Shared Responsibility Plan with the foster parent. A NMD Parent may obtain the PSP Rate by entering into a [Parenting Support Plan \(PSP\)](#) with an identified and approved [Responsible Adult Mentor \(Adult Mentor\)](#).

A NMD Parent living in a SILP is eligible to receive the following monthly direct payments:

SILP Payment:	\$ 960.00
Infant Supplement:	\$ 900.00
PSP Rate:	\$ 200.00
Total:	\$2060.00

The Child Welfare Health Services, Expectant and Parenting Youth (EPY) (formerly Pregnant and Parenting Teen (PPT)) Conference Facilitators, help promote the use of PSPs as appropriate during EPY Conferences and through outreach at DCFS regional offices. The EPY Conference Facilitators are available for any questions regarding the development and implementation of PSPs. They can be reached at mendeh@dcfs.lacounty.gov and melenaa@dcfs.lacounty.gov.



If you have any questions regarding this release please e-mail your question to:

Policy@dcfs.lacounty.gov

Parenting Support Plan (PSP)

Developing the PSP

The PSP is written for the express purpose of identifying additional support and assisting the NMD Parent in providing the best care plan for her/his child. The PSP must specifically outline the ways in which the Adult Mentor will assist the NMD Parent with regard to the child in addition to identifying supportive services to be offered to the NMD Parent. When creating a PSP, please use the attached LA County [PSP form](#).

When the Adult Mentor and the NMD Parent have developed the PSP in cooperation with the Children's Social Worker (CSW), the PSP Rate will be initiated by DCFS. Additional input may be provided by any individuals identified by the NMD Parent, the other parent of the child and other extended family members.

- The PSP must be provided to DCFS and updated as needed to account for the changing needs of the NMD Parent's child or any changes in the employment, school or responsibilities of the NMD Parent.
- If the NMD Parent changes her/his Adult Mentor for any reason, a new criminal records check must be completed and a new PSP must be created.

The PSP should be developed and adopted as soon as practically possible. If one or more of the above stakeholders are not available to participate in the development of the PSP within the first 30 days of the NMD Parent's request to enter into a PSP, the NMD Parent and the Adult Mentor may enter into a PSP for the purposes of fulfilling the requirements to receive the PSP Rate. Retroactive payments may only be made for months in which all criteria were met and communicated with the CSW per [WIC 16501.27](#).

Approval of the PSP and Initiation of the PSP Rate

The PSP must be reviewed and approved by the CSW and SCSW. The CSW submits the approved PSP to the EW/TA to initiate the PSP rate. Refer to the [attached screen shot](#): "Instruction for the CSW to Initiate an Approved PSP Rate Via the Automated 280 in the Foster Care Search System (FCSS)" for instruction. A copy of the approved PSP must be attached to the FCSS Automated 280 request.

Upon receipt of the FCSS Automated 280 request and a copy of the PSP, the Eligibility Worker (case-carrying or Technical Assistance) will data enter the payment to the NMDs case per [existing procedure](#).



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Adult Mentor

The CSW should explain the following to the NMD:

- The Adult Mentor must be at least 21 years of age and complete both a Criminal Records Check ([Live Scan](#)) and a Child Abuse History Record Check [[Child Abuse Central Index \(CACI\)](#)].
- A negative result from either the criminal records check or CACI, while not desirable, does not mean the prospective Adult Mentor will automatically be excluded from being a viable candidate; it is another factor to be considered.
- Encourage the NMD to take into consideration when selecting a prospective Adult Mentor that any negative Live Scan or CACI result will result in a delay due to approval of a prospective Adult Mentor's criminal history requiring the submission of a [Criminal Record Waiver Request](#).
- If a negative result from either the criminal records check or CACI is received, without disclosing confidential results of the criminal records check, inquire if the parenting youth would prefer to suggest an alternative Adult Mentor candidate.
- A prospective Adult Mentor with a clear criminal history, does not have to be approved by DCFS, if other concerns exist.

Adult Mentor Criminal/Child Abuse History Exemptions

Non-exemptible Crimes/Child Abuse History:

Review the linked [Non-Exemptible Crime List](#). Under no circumstances may a prospective Adult Mentor be approved who has been convicted of any of the crimes listed.

Exemptible Crimes/Child Abuse History:

- CLETS results show no convictions other than minor traffic violations.
- The CACI results have determined that the prospective Adult Mentor does not pose a risk to the child.
- If a notice is received that the CACI will be delayed for 60 days, the Parenting NMD has the option to either wait for 60 days or to select an alternate prospective Adult Mentor.



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Criminal Record Waiver Request

If the prospective Adult Mentor has a criminal history record other than minor traffic violations reflected on the Live-Scan and the Children's Social Worker (CSW) and Supervising Children's Social Worker (SCSW) still want to approve the prospective Adult Mentor, the CSW must complete the [DCFS 5602-PSP](#), Criminal Record Waiver Request for a Prospective Responsible Adult Mentor's Participation in a Parenting Support Plan and submit it with the Live Scan, CACI results and other supporting documents if any, to the regional SCSW, ARA and RA for review and approval or denial. Review by regional out-stationed County Counsel may be sought if desired.

Upon receipt of an approved PSP Criminal Waiver Request, the CSW will assist the NMD Parent and Adult Mentor in the development of an appropriate Parenting Support Plan and initiation of the PSP Rate as indicated below.

CSWs must document the effectiveness of the approved PSP in the DCFS case record. The PSP remains in effect as long as it is relevant and may be amended at any time to meet the current needs of the family unit. As soon as any changes are made to a previously approved PSP, the Parenting NMD must advise the CSW.

Grievance/Appeals Process:

In the event that a prospective Adult Mentor is denied by DCFS, the youth should be sent a [NOA 300](#), Parenting Support Plan (PSP) Notice of Action. If the parenting youth wishes to challenge this decision, the NMD can appeal the decision by contacting the DCFS Youth Ombudsman Office at (213) 351-5720. The parenting youth, with the assistance of the case-carrying CSW, must complete the DCFS 123-C, Extended Foster Care (EFC) Grievance Request form and select "Other" under the Reason(s) for Grievance.



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The EPY Conference Facilitators are available to answer any questions regarding the development and implementation of PSPs. They can be reached at mendeh@dcfs.lacounty.gov and melenaa@dcfs.lacounty.gov.

For more information, please refer to [ACL 16-50](#), Additional Payment for a NMD Parent in a SILP Q&A.

Linked Attachments

[Non-Exemptible Crime List](#)

[All County Letter 16-50, Additional Payment for a NMD Parent in a SILP Q & A](#)

Forms

[DCFS 123-C](#), The Extended Foster Care Grievance Review Process For Non-Minor Dependents

[DCFS 5602-PSP](#), Criminal Record Waiver Request for a Prospective Responsible Adult Mentor's Participation in a Parenting Support Plan

[NOA 300](#), Parenting Support Plan (PSP) Notice of Action

[Parenting Support Plan](#)

Referenced Policy Guides

[0070-559.10](#), Clearances

[0100-560.40](#), Supervised Independent Living Placement (SILP)



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Instruction for the CSW to Initiate an Approved PSP Rate Via the Automated 280 in the Foster Care Search System (FCSS)

Request Actions

<input type="checkbox"/> Address Change	
<input type="checkbox"/> Clothing Allowance	
<input type="checkbox"/> Education Travel Reimbursement (Foster Care Only)	
<input checked="" type="checkbox"/> Infant Supplement	<p>Select the infant(s) for the request. (If the infant's name is not displayed in the selections below, please contact the SAAMS unit to add the infant to CWS/CMS or correct the infant's DOB/relationship in CWS/CMS)</p> <p>Effective Payment Date <input type="text"/></p> <p>Is this a certified Whole Family Foster Home? <input type="radio"/> Yes <input checked="" type="radio"/> No</p> <p><input type="radio"/> S-Non-WFFH Non-Dependent Infant No SRP</p> <p><input checked="" type="radio"/> Non-Minor Dependent Parent in a SILP</p> <p><input type="checkbox"/> Non-Minor Dependent Parent in a SILP (SCI 781)</p> <p><input checked="" type="checkbox"/> Non-Minor Dependent Parent in a SILP with an approved Parent Support Plan (SCI 789) **</p> <p>** Note: Above checked Special Projects Code must also be updated in CWS/CMS before requesting payment.</p>

Note: Selection of the check-box: “Non-Minor Dependent Parent in a SILP with an approved Parent Support Plan” will initiate both the Infant Supplement (\$900) and the PSP Rate (\$200).

If only the Infant Supplement is being sought, select the “Non-Minor Dependent Parent in a SILP” check-box.



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PARENTING SUPPORT PLAN

NMD Parent's Name /	Adult Mentor's Name /
NMD Parent's DOB and Age	Adult Mentor's DOB and Age
NMD Parent's DCFS Case #	Adult Mentor's Relationship to NMD Parent

The Parenting Support Plan (PSP) and PSP Rate (\$200) address the unique challenges of Nonminor Dependent parents (NMD Parent) residing in a Supervised Independent Living Placement (SILP) by providing additional support and services to preserve and strengthen the family unit. To be eligible for the PSP Rate the NMD parent and a qualified* responsible adult mentor must develop a DCFS approved PSP. The PSP will identify significant supports to assist the NMD parent in developing the skills necessary to provide a safe, stable and permanent home for her/his child. *Refer to FYI 16-xx for qualification requirements.



Communication is an essential part of the PSP. How will the NMD Parent, the Adult Mentor and the CSW communicate? Please check all that apply:

- Phone
 Text Message
 In-Person
 Email

CONTACT INFORMATION		
NMD Parent	Adult Mentor	CSW
Phone	Phone	Phone
Email	Email	Email
Residence Address	Address	Office Address



Do you need help with Transportation? Yes No
 I would like assistance with (Please check all that apply).
 Not all may apply. Feel free to add items.

- Public Transportation
 Rides/Carpooling
 School
 Healthcare Appts.
 Childcare
 Other: _____

I need transportation support to:	When or how often?	My Adult Mentor agrees to help me by:



Do you need help with Child Care? Yes No
 I would like assistance with (Please check all that apply).
 Not all may apply. Feel free to add items.

- Babysitting Day Care Other: _____

When do you need child care assistance?	My Adult Mentor agrees to help me by...



Do you need help with Life Skills as part of your Transitional Independent Living Plan (TILP)? Yes No
 I would like assistance with (Please check all that apply).
 Not all may apply. Feel free to add items.

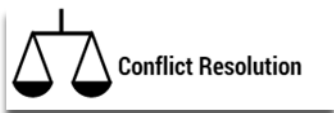
- Parenting Budgeting Self-Care
 Cooking Family/Life Balance Goal Setting
 Other: _____

What skills do you want to learn?	My Adult Mentor agrees to help me learn these skills by:

Use this space to include any other support your Adult Mentor can provide to meet your personal needs. This may include any visitation orders made by the court.



I would also like help with:	My Adult Mentor agrees to help me by...



If there is disagreement or conflict between myself and my Adult Mentor, I will attempt to resolve it :

Signatures

We have participated in the creation of this PSP and understand we can update it as needed and that the social worker must be informed of any changes.

NMD Parent Date

Adult Mentor Date

/ Date
CSW Name and Signature

/ Date
SCSW Name and Signature

TO BE COMPLETED BY CSW	
Live Scan results received on:	Date
Clear Live Scan?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Clear CACI?	<input type="checkbox"/> Yes <input type="checkbox"/> No
CACI delayed for 60 days	<input type="checkbox"/> Yes <input type="checkbox"/> No
Clear CWS/CMS?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Adult Mentor approved on:	Date

Distribution:

- Original signed copy: DCFS Case File
- Photocopies: NMD Parent
- Adult Mentor
- NMDs attorney
- Scanned copy: FCSS/Automated 280