

September 30, 2021

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

EXECUTIVE SUMMARY

ALL COUNTY LETTER NO. 21-114

This All County Letter is intended to provide guidance to county child welfare and probation agencies regarding California's implementation of the Federal Family First Prevention Services Act (FFPSA) through AB 153 (Chapter 86, Statutes of 2021). This letter includes guidance on the following areas: Court review and reporting requirements and case plan documentation requirements for placements made by a child welfare agency or probation department into a Short-Term Residential Therapeutic Program (STRTP).



KIM JOHNSON
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
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GAVIN NEWSOM
GOVERNOR

September 30, 2021

ALL COUNTY LETTER NO. 21-114

TO: COUNTY WELFARE DIRECTORS ASSOCIATION (CWDA)
CHIEF PROBATION OFFICERS OF CALIFORNIA (CPOC)
ALL COUNTY CHILD WELFARE DIRECTORS
ALL COUNTY CHILD WELFARE PROGRAM DIRECTORS
ALL COUNTY BOARD OF SUPERVISORS
ALL COUNTY TREASURERS
ALL SHORT TERM RESIDENTIAL THERAPEUTIC PROGRAM DIRECTORS

SUBJECT: COURT REVIEW AND CASE PLAN REQUIREMENTS FOR PLACEMENTS IN SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAMS UNDER CALIFORNIA'S IMPLEMENTATION OF THE FAMILY FIRST PREVENTION SERVICES ACT (FFPSA) VIA ASSEMBLY BILL 153, CHAPTER 86, STATUTES OF 2021.

REFERENCE: [FAMILY FIRST PREVENTION SERVICES ACT PL 115-123](#); [ACYF-CB-IM-18-02](#); [ACYF-CB-PI-18-07](#); [ASSEMBLY BILL 403](#); [ASSEMBLY BILL 153](#); [ASSEMBLY BILL 1006](#); [ACIN I-73-21](#) ; [ACL No.16-84](#); [ACL No.18-23](#); [ACIN No.1-71-18](#); [ACL No.11-67](#); [ACL No.18-09/MHSUDS IN 18-007](#); [ACL No.19- 87](#); [ACL No.11- 67](#); [ACL No.18-100](#); [JUDICIAL COUNCIL OF CA](#); [THE CALIFORNIA RULES OF COURT](#); [WIC SECTION 16501.1](#) ; [WIC SECTION 706.6](#) ; [WIC SECTION 361.22](#); [WIC SECTION 366.2](#); [WIC SECTION 727.12](#) ; [WIC SECTION 358.2](#);

The purpose of this All County Letter (ACL) is to provide guidance to county child welfare departments and probation departments on the implementation of the court review and reporting and case plan requirements from the Federal Family First Prevention Services Act (FFPSA) in Assembly Bill (AB) 153, Chapter 86, Statutes of 2021).

BACKGROUND

Families First Prevention Services Act Part IV

The Bipartisan Budget Act of 2018, [Public Law \(P.L.\) 115- 123](#) was signed into federal law on February 9, 2018. P.L. 115-123. Part IV of FFPSA imposes new requirements designed to reduce the reliance on congregate care placements and restructures the claiming of Federal Financial Participation (FFP) under Title IV-E for foster care maintenance payments on behalf of federally eligible children, including minors and nonminor dependents (NMD), placed in such settings by child welfare agencies and probation departments. The use of “child” and “children” throughout this letter includes all children in child welfare, minors under probation, and NMDs under either agency.

Given California’s implementation of the Continuum of Care Reform ([Assembly Bill 403](#)), and the transition from Group Homes to Short-Term Residential Therapeutic Programs (STRTP), California was already in compliance with many of the requirements in the federal law. However, additional changes were needed to ensure that otherwise federally eligible children placed in residential facilities, including STRTPs, will continue to be eligible for Title IV-E funding.

To achieve full compliance with FFPSA by October 1, 2021, California enacted AB 153 on July 15, 2021. AB 153 focuses on incorporating the requirements for a placement setting referred to in FFPSA Part IV as a qualified residential treatment program (QRTP) into the requirements for STRTPs to maintain eligibility for Title IV-E FFP. AB 153 establishes new requirements for the placement of children into STRTPs. These requirements include additional detailed case plan documentation, as reflected in amendments to [Welfare and Institutions Code \(WIC\) Section 706.6](#) and WIC Section 16501.1 and new court review requirements, as reflected in the addition of WIC Section 361.22 and WIC Section 727.12. Children being considered for placement or placed in an STRTP on and after October 1, 2021, must be assessed by a Qualified Individual (QI).

This All County Letter provides guidance on the new statutory requirements of AB 153 regarding the case plan documentation and court review requirements. These new requirements apply to children placed into STRTPs on and after October 1, 2021.

These statutory requirements must be implemented by October 1, 2021 to ensure that otherwise federally eligible children placed in STRTPs on and after that date will be eligible for title IV-E funding during their STRTP placement.

CASE PLAN DOCUMENTATION

Effective October 1, 2021, AB 153 requires additional documentation in the child welfare and/or probation case plan to demonstrate permanency planning that includes the child and family. The case plan requirements for probation placements into STRTPs can be found in [WIC Section 706.6](#) and requirements for child welfare placements into STRTPs can be found in [WIC Section 16501.1](#).

CASE PLAN DEFINITION

The case plan as defined in [WIC Section 16501.1\(a\)\(2\)](#) is a central unifying planning document intended to ensure “that the child receives protection and safe and proper care and case management, and that services are provided to the child and parents or other caretakers, as appropriate, in order to improve conditions in the parent's home, to facilitate the safe return of the child to a safe home or the permanent placement of the child, and to address the needs of the child while in foster care.” Prior existing guidance related to case plan requirements are reflected in [ACL 11-67](#) and new requirements established pursuant to AB 153 are described below.

CASE PLAN REQUIREMENTS

[AB 153](#) amends [WIC Section 16501.1](#) and [WIC Section 706.6](#) to require that on and after October 1, 2021, within calendar 30 days of a child's placement into an STRTP, the case plan must document the following information with regard to Child and Family Team (CFT) efforts and process, as outlined in [ACIN I-73-21](#):

- The reasonable or good faith effort by the social worker or probation officer to identify and include all required individuals in the CFT;
- The contact information for members of the CFT, as well as contact information for relatives and nonrelative extended family members not part of the CFT;
- Evidence that meetings of the CFT, including the meetings related to the QI determination, are held at a time and place convenient for the family;
- If reunification is the goal, evidence that the parent from whom the child was removed provided input on the members of the CFT;
- Evidence that the assessment conducted by the QI was conducted in conjunction with the CFT;
- The placement preferences of the child and the CFT, whether the placement preferences of the child and CFT were the same as those recommended by the QI, and if not, why the preferences of the child and CFT were not recommended by the QI.

Additional Required FFPSA-Related Case Plan Documentation

Following the court review pursuant to WIC 361.22 and 727.12, the social worker or probation officer must also document in the case plan whether the court approved or disapproved the placement in an STRTP.

When the placement of the child exceeds 12 consecutive months, or 18 nonconsecutive months, or for children under 13 years of age, six consecutive or nonconsecutive months, the social worker or probation office must document in the case plan:

- (1) The relevant supplemental report and/or social study information required to be submitted to the court for the specified hearings, as required per statute;
- (2) Signed approval of the county child welfare director or deputy director for the continued placement in the STRTP.

Prior to discharge from an STRTP, the social worker or probation officer must document in the case plan:

- A description of the type of in-home or institution-based services to encourage the safety, stability, and appropriateness of the next placement, including the recommendations of the CFT and a plan for the provision of discharge planning and family-based aftercare support, to be developed in collaboration with the STRTP

FULFILLMENT OF CASE PLAN REQUIREMENTS

To meet the case plan documentation requirements, counties must use one of the following three options:

A. *Child and Family Team (CFT) Meeting Summary and Action Plan*

To integrate the documentation of the case plan requirements with current practice, county placing agencies may opt to use the Child and Family Team (CFT) Meeting Summary and Action Plan, as supported in [WIC Section 358.2](#), found in Attachment 1.

For further guidance on completion of the Child and Family Team (CFT) Meeting Summary and Action Plan, please refer to the **instructions** included in Attachment 1.

B. Or, STRTP Placement Case Plan Attachment

The STRTP Placement Case Plan Attachment, found in Attachment 2 of this letter can also be used to satisfy the case plan requirements. The use of this form will provide the necessary documentation to ensure compliance with FFPSA and AB 153.

For further guidance on completion of the STRTP Placement Case Plan Attachment, please refer to the **instructions** included in Attachment 2.

C. Or, Integrate STRTP Placement Case Plan Attachment with County Forms

The county child welfare or probation agency may also elect to use the information solicited in Attachment 2 (ST RTP Placement Case Plan Attachment) as a guide to create their own or update their existing county forms/case plan to ensure that all components in Attachment 2 are contained in the updated case plan. If the placing agency elects to continue use of their forms, they must do the following to ensure that children remain eligible for Title IV-E:

1. Ensure all of the questions within Attachment 2 are included exactly as written in the county form.
2. Ensure that all answers to the questions include a narrative description of activities, efforts, and any other evidence for the required fields on the county form.

The explanations provided as a part of fulfilling these case plan documentation requirements may not be fulfilled by “yes” or “no” responses, but instead, documentation must be a narrative description of activities, efforts, and any other evidence for the required fields on the form.

The case plan requirements must be documented within 30 days of placement into an STRTP, except for the additional required documentation identified earlier in this letter. If a county opts to integrate the questions from Attachment 2 (ST RTP Placement Case Plan Attachment) into existing county forms, the requirements and timelines for case plan documentation continue to apply. This case plan documentation information must be reviewed and updated for each subsequent placement into an STRTP. Please see the *Uploading CFT Action Plan and/or STRTP Placement Case Plan Attachment Instructions*, Attachment 3, for directions on uploading the case plan documentation.

COURT REPORTING, HEARINGS, AND REVIEW REQUIREMENTS

COURT REQUIREMENTS OVERVIEW

Effective October 1, 2021, [AB 153](#) requires additional court oversight for STRTP placements, including court hearings within 45 calendar days, and in no event later than 60 calendar days, from the start of each new STRTP placement, and ongoing status review and permanency requirements, as outlined in [ACIN I-73-21](#). WIC Section 361.22 and WIC Section 727.12 mandate that, for each new placement and/or subsequent placement change to another STRTP on and after October 1, 2021, there must be a new court hearing to approve the STRTP placement based on an assessment by an objective QI, regardless of whether a hearing has been completed in the preceding 90 days. These statutes describe the requirements for requesting a hearing, giving notice of a hearing, court reports, and court findings and orders.

COURT REPORTING REQUIREMENTS

For the court hearing for a child placed into an STRTP, including a change in placement to another STRTP, on and after October 1, 2021, the social worker or probation officer must prepare a report that includes the following:

1. The most recent QI Assessment Report, including the determination as to the services and care needs of the child and any documentation prepared by the QI pursuant to WIC Section 4096(g)(1).
2. The case plan documentation required under WIC Section 16501.1(d)(2)(C) utilizing one of the documentation methods described earlier in this guidance.
3. A statement regarding whether the child or any other party to the proceeding objects to the placement of the child in an STRTP.
4. In the case of an Indian child, the case worker or probation officer must also include a statement regarding the active efforts made prior to placement in an STRTP to maintain or reunite an Indian child with their family and whether the child's tribe had an opportunity to confer regarding the departure from ICWA placement preferences.

If the worker preparing the court report is different from the social worker or probation officer who receives the QI Assessment Report, the county will need to develop a process to coordinate the provision of the QI assessment in order for it to be submitted as an attachment to the court report.

The social worker must serve a copy of the report to all parties to the proceeding no later than seven calendar days before the hearing. In the case of an Indian child, the child's tribe has the right to examine the court report as they would any other court

document and has the right to receive a copy of the report if the tribe is a party to the case. Current state and federal laws regarding confidentiality should be adhered to when providing the QI assessment within the court report.

As stated above, for each new placement and/or placement change to another STRTP, there must be a new court hearing to approve the STRTP placement based on an assessment by an objective QI.

COURT HEARING REQUIREMENTS

Within five calendar days of each placement of a child or nonminor dependent into an STRTP, the social worker or probation officer, as applicable, must request that the court schedule a hearing under WIC Section 361.22 or WIC Section 727.12, as applicable, to review the placement. The request for hearing must be served on all parties to the proceeding, the court appointed special advocate, if applicable, and, in the case of an Indian child, the child's tribe. Additionally, in a hearing involving a minor in foster care supervised by the probation department, the minor's parents should be served with a copy of the request for hearing.

No later than 5 days after receiving a request for hearing from the social worker or probation officer, the juvenile court is required to set a hearing, which is to occur within 45 days of the placement being made. In no event shall the court grant a continuance that would cause the hearing to occur more than 60 calendar days after the start of the placement. The court may review the placement of a child in an STRTP at a regularly scheduled hearing if that hearing is held within 60 calendar days of the placement and the required information has been presented to the court. If the court does not approve the placement timely, i.e., within the 60-day timeframe, the title IV-E agency may only claim title IV-E foster care maintenance payments for the first 60 days of the placement in the STRTP, per Program Instruction [ACYF-CB-PI-18-07](#).

At each court hearing, the juvenile court must:

- Consider the assessment, determination and documentation made by the QI.
- Determine whether the needs of the child can be met through placement in a foster family and/or family-based setting home or, if not, whether placement of the child in an STRTP provides the most effective and appropriate level of care for the in the least restrictive environment
- Determine whether the STRTP level of care is consistent with the short- and long-term mental and behavioral health and permanency goals for the child.
- In the case of an Indian child, determine whether there is good cause to depart from the placement preferences set forth under WIC 361.31;
- Approve or disapprove the placement.

A shortage or lack of foster family homes shall not be an acceptable reason for determining that the needs of the child cannot be met in a family-based setting.

As discussed below, Judicial Council is establishing court rules and forms for the court review for a child placed in an STRTP, including procedures by which the court may review the placement without setting a hearing.

DISAPPROVED PLACEMENTS

If, at the court hearing under WIC Section 361.22 or WIC Section 727.12, the court does not approve the placement in an STRTP, the court must order the social worker or probation officer to transition the child to a placement setting that is consistent with the court determinations. This transition must take place within 30 calendar days of the disapproval.

If the court disapproves the placement or otherwise determines that a placement into an STRTP is not appropriate, a county placing agency may utilize FFP for foster care maintenance payments on behalf of a child while the child remains in the STRTP only for the period necessary for transition the child, but for no longer than 30 days from the date that it is determined that a placements is no longer recommended or approved.

No FFP may be used for a foster care maintenance payment related to placement in the STRTP after the 30 days have passed. However, county placing agencies may continue to claim FFP for administrative costs until the transition to a new placement occurs. These costs must be specific to the administration of the Title IV-E program and are prohibited for funding the rate for care and supervision of the child.

STATUS REVIEW HEARING REQUIREMENTS

After the initial placement is approved, there are additional requirements for subsequent court status review of STRTP placements to determine the continued necessity for and appropriateness of placement. On and after October 1, 2021, in addition to same evidence and documentation required for any status review hearing, the supplemental court report in child welfare cases, or the social study in juvenile probation cases, submitted for a status review hearing for a child placed in an STRTP must include evidence of the following:

- Ongoing assessment of the child's strengths and needs which continues to support the determination that the child's needs cannot be met in a family-based setting.
- That the placement in an STRTP continues to be the most effective, appropriate, least restrictive setting.
- That the placement is consistent with the short and long-term mental and behavioral health goals and permanency plan for the child.

- Documentation of the child's specific treatment or service needs continue to be addressed in the STRTP and the estimated length of time the child is expected to need the treatment or services. For a Medi-Cal beneficiary, the determination of services/expected length of time of services funded by Medi-Cal shall be based on medical necessity and other state/federal Medi-Cal requirements, and shall be reflected in documentation.
- The intensive and ongoing efforts by the child welfare agency or probation department, consistent with the permanency plan, to prepare the child to return home, or to be placed with a fit and willing relative, adoptive parent, legal guardian, resource family or tribally approved home, or other appropriate family-based setting, or in the case of an NMD, a supervised independent living setting.

JUDICIAL COUNCIL OF CALIFORNIA

The Judicial Council of California must amend or adopt new rules of court and must develop or amend the appropriate forms to implement WIC Section 361.22 and WIC Section 727.12 by October 1, 2021, including developing procedure to enable the court to review the placement without a hearing. [Amended or new rules and forms](#) can be found on <https://www.courts.ca.gov/rules.htm>. County child welfare agencies and probation departments should modify local practices and timelines as needed to comply with new court deadlines and subsequent rules of court issued.

If you have any questions or need additional guidance regarding the information in this letter, contact the System of Care Branch at (916) 651-1101 or at ffpsa@dss.ca.gov.

Sincerely,

Original Document Signed By

Angie Schwartz, Deputy Director
Children and Family Services Division

Child and Family Team Meeting (CFTM) Summary and Action Plan*To be shared with all members of the CFT and attached to the case plan once complete.**Please use Attachment A of this document when additional space is needed.*

Date:	Youth&Family Name(s):
Caseworker:	Meeting Facilitator:
ICWA: <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Inquiring	Child's Tribal Affiliation:

List All CFT Members (child/nonminor dependent, family members and supports, caregivers, tribal representative, educational rights holder, and others) - Check box if present at meeting:

Name	Relationship to Child/Family	Preferred Method of Contact (Phone or Email)	Present
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

Interpreter: ☐ Yes ☐ No If yes, list person or provider: _____

Meeting Location (check all that apply): ☐ In Person ☐ Video/teleconference ☐

Purpose of Meeting:

- ☐ Initial CFTM ☐ Follow Up Meeting ☐ 3 Month Review ☐ 6 Month Review
☒ Other (placement preservation, safety planning, Qualified Individual (QI) Assessment, etc.):

Group Agreements:

- ☐ We agree to keep the information shared in this meeting confidential.
☐ Recognize Tribal Sovereignty and ICWA (for Indian children).

- _____ • _____
 • _____ • _____

Child and Adolescent Needs and Strengths (CANS): Date of Assessment: _____

- Identified Strengths: _____
- Actionable Needs: _____
- Did CFT members agree on ratings of the strengths and needs? ☐ Yes ☐ No
Please describe any disagreements: _____
- If the CANS was not discussed, provide reason: _____

What is working well (additional strengths, existing supports, and action items completed)?

Did CFT make a placement recommendation? If yes, check box and include in action plan: ☐

- ☐ ICWA and the Tribe's placement preferences considered, as applicable.
- ☐ Impact to school and education? Identify which CFT member will notify and consult with the Foster Care Liaison regarding placement moves. Provide timeframe for completion and details, including transportation, the impact to education, and how this is being addressed.

- ☐ Out-of-County Placement? Please identify who will complete Presumptive Transfer documentation and the date by which this will be completed. _____
- ☐ Placement Preservation Plan and/or Transition Plan (or see attached)? _____

Permanency Plan Decisions, including Specialized Permanency and Tribal consultation:

Did the members of the CFT reach agreement on the plan? ☐ Yes ☐ No

If no, please identify what was not agreed upon: _____

Action Plan:

If any previous Action Plan was developed, provide an update on outstanding action steps.

Who	Action Steps (include reason)	By When

Date of Next CFT Meeting:_____ **Location:**_____

Date of Next Court Hearing:_____

Complete items 1-8 of this section for children and NMDs placed in a Short-Term Residential Therapeutic Program (STRTP) (WELF. & INST. CODE, § 361.22, 727.12, 706.6, 16501.1):

1. Please explain how the social worker/ probation officer made reasonable and good faith efforts to identify and include all required members in the CFT.

--

2. If reunification is the permanency goal, provide information on how the parent(s) from whom the child was removed provided input on who should be members of the CFT.

--

3. Please describe how the location and time of the CFTM was determined. Was the meeting held at a time and place convenient for the family (please elaborate)?

--

4. Please describe how the determination by the QI was conducted in conjunction with the CFT.¹
-
5. Please list the placement preferences of the child/nonminor dependent, the family and the CFT.
-
6. Are the placement preferences of the child/NMD, the family, and the CFT the same or different from the QI recommendations? If they differ, please summarize the rationale provided by the QI.¹
-

AFTERCARE SERVICES (QI and CFT recommendations)

7. Prior to a child/NMD's discharge from an STRTP, please provide a description of the type of home and community-based services that will encourage the safety, stability, and appropriateness of the next placement. Include description of home-based services recommended by the QI and the CFT, when applicable.²
-
8. Please provide the plan for the provision of aftercare support services to the youth and family. (The placing agency should develop this plan in collaboration with the STRTP.)²
-

¹ Complete after the assessment by the Qualified Individual [applies to questions four (4) and six (6) above].

² Complete when planning for discharge and aftercare [applies to questions seven (7) and eight (8) above].

ATTACHMENT A – Child and Family Team Meeting (CFTM) Summary and Action Plan

Please use this attachment for additional space. Make copies as needed for additional space.

CHILD AND FAMILY TEAM MEETING (CFTM) SUMMARY AND ACTION PLAN Guidelines

Please refer to the guidelines below for information and best practices relevant to Child and Family Team Meetings.

CHILD AND FAMILY TEAM (CFT) DEFINITION AND PURPOSE

Over the past several decades, the definition of the CFT has evolved from the process of bringing together professionals to provide services to an identified child or NMD and family (i.e. multidisciplinary teams), to one that includes child and families as equal partners and decision makers within the team. Effective team-based practices encourage inclusion of children and families in participation at every level of program development, implementation, evaluation, and service delivery.

Team meetings should have a clearly defined purpose and goal for each meeting. This should be discussed with team members prior to the meeting to ensure participants are able to prepare, ask questions, and provide input ahead of the meeting as necessary. The meeting's purpose should also be discussed at the beginning of each meeting to make sure participants are familiar with the reason for the meeting and are able to share additional topics to discuss or goals they would like to accomplish during the meeting.

CFT GROUP AGREEMENTS

Group Agreements help the team develop basic, consensual ground rules for the meeting process. It is important to revisit the agreements over time to ensure they are working and assisting in productive meetings. One key agreement is for each member to agree to maintain confidentiality within the team. This must be discussed at the start of every meeting. The child welfare social officer or probation officer must complete a release of information with all CFT members, in order to share private information during the meeting. Another important agreement in the case of an Indian child is to recognize tribal sovereignty and the ICWA. Group agreements ensure that the meeting is being held in compliance with state and federal guidance. Other group agreements should be developed together as a team in order to promote the inclusion of others' voices.

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

CDSS has selected the CANS as the tool to be used within the CFT process to guide case planning and placement decisions for child welfare. The CANS is a multi-purpose tool developed to assess well-being, identify a range of social and behavioral healthcare needs, support care coordination and collaborative decision-making, and monitor outcomes of individuals, providers, and systems. Please note, juvenile probation is not required to complete the CANS. However, the CANS should be shared with juvenile probation if a probation-involved child/NMD has a CANS completed by either behavioral health or child welfare, as this can be used to guide probation's decision making with the child as well. The CANS is utilized to identify prioritized views of the strengths and needs of the family, including the reconciliation of perspectives within the team when differences occur. This shared understanding can be used to guide development of an integrated service plan for the family.

The CFT members are actively involved in the CANS process and should have the opportunity to confirm that the information included in the CANS accurately reflects the child/ NMD, and families' experiences and perspectives.

INDIAN CHILD WELFARE ACT (ICWA) AND/OR TRIBE'S PLACEMENT PREFERENCES

The caseworker must include the child's tribe as a member of the CFT when a child/NMD has been identified as an Indian child in order to comply with the ICWA and maintain the connections between the child/NMD and their community, tribe, and culture. Additionally, provisions of the ICWA mandate that tribal preference in placement be followed unless the court finds good cause to deviate. WIC 4096 (g)(3)(D) requires the QI to consult with the Indian child's tribal representative when completing the required assessments. Similarly, the development of the short- and long-term goals of the child and the selection of the mental and behavioral health interventions and treatment must consider the prevailing social and cultural conditions and the Indian child's way of life. Therefore, the caseworker must consult the tribe/ICWA representative for input on the case plan prior to submission to the court.

IMPACT TO SCHOOL AND EDUCATION

A foster child's placement change may affect their school placement. By law, the child/NMD can be maintained at their school of origin even when a placement change occurs. The educational rights holder is the person legally responsible for determining school placement and their presence at CFT meetings is critical when making decisions about placement changes. Often, educational rights holders are the parents, guardians, or caregivers of the child/NMD, who may already be attending the CFT meetings. These individuals are integral to the discussion of educational placement.

If the placement decision will potentially impact school placement, the educational rights holder must be invited to discuss school stability, and whether they consent to a change of schools. The Foster Youth liaison for the child/NMD's school should also be consulted. If transportation will be needed to and from the school of origin, the CFT members should determine who will be responsible for providing or setting up that transportation plan. Please also include where the child/NMD will be attending school, what type of school placement the child/NMD will be in (full-time in person, independent study, continuation school, charter school, etc.), and why this type of school was chosen.

A child/NMD's court-appointed educational rights holder, if someone other than the parent, guardian, or caregiver, should be invited to the CFT meeting in cases during which the CFT will:

- Develop and implement a placement preservation strategy;
- Discuss the possibility of a placement change and/or;
- Discuss if remaining in the school of origin is in the child/NMD's best interest.

PLACEMENT PRESERVATION PLAN AND/OR TRANSITION PLAN

As progress for the child and family moves forward, plans include discussion of the resources needed for purposeful transition out of formal services. This may include a potential mix of formal and natural supports in the community (and, if appropriate, to services and supports in the adult systems). The focus on transition is continual during the CFT process, and the CFT must consider transition at each meeting, even during the initial engagement activities. The family should be able to manage a planning and intervention process on their own, should new challenges arise. Services are not closed until the transition plan has been implemented and all necessary connections for the future have been made.

PERMANENCY PLAN/DECISIONS, INCLUDING SPECIALIZED PERMANENCY

The team should develop a shared understanding about safety, permanency, and well-being issues to be addressed within the CFT.

As defined in [ACL 18-100](#), specialized permanency services are "services to assist a child or nonminor dependent whose case plan is for permanent placement or supportive transition to adulthood in achieving a permanent family through reunification, adoption, legal guardianship, or other lifelong connection to caring adults, including at least one adult who will provide a permanent, parent-like relationship for the child or nonminor dependent." Specialized permanency services are to be designed for and with the child/NMD to address their unique histories of trauma, separation, and loss. Specialized permanency services may include, but are not limited to, all of the following:

- Medically necessary mental health services;
- Other services designed to address the dependent child/NMD's history of trauma, grief, loss, stigma, and rejection that reduce the likelihood of the child/NMD achieving a permanent family;
- Permanency support services, as appropriate to achieve, stabilize, and sustain the dependent child/NMD in a permanent family; and
- Services designed to prepare the identified permanent family to meet the child/NMD's needs, set appropriate expectations before and after permanency is achieved, and stabilize the placement.

CHILD AND FAMILY TEAM MEETING (CFTM) SUMMARY AND ACTION PLAN INSTRUCTIONS

Please refer to instructions below to complete each section in the CFT Meeting Summary and Action Plan. This form may be used for children/NMDs placed in a Short-Term Residential Therapeutic Program to satisfy the case plan documentation requirements of Welfare and Institutions Code 706.6(d)(3)(B) and 16501.1 (d)(2)(C). Should additional space be needed, please utilize Attachment A on page five (5) of the form and make copies as needed for additional space. Depending on local county practice, this may be completed by the social worker, probation officer, CFTM facilitator, or another county case worker. If utilizing this form to satisfy the requirements of WIC 706.6(d)(3)(B) and 16501.1 (d)(2)(C), this document must be completed and uploaded and attached to the child welfare or probation case plan.

LIST ALL CFT MEMBERS AND CONTACT INFORMATION:

Please list all the team members that are in attendance at the CFT Meeting (CFTM), including, but not limited to, the child/youth, nonminor dependent (NMD), family, nonrelative extended family members (NREFMs), caregivers, and tribal representatives.

Please list names and contact information (phone and email, if applicable) for members of the CFT. This shall include the caregiver(s), behavioral health staff, foster family agency social worker, caseworker, or short-term residential therapeutic program (STRTP) /another provider representative, educational rights holder when applicable. Other individuals that may be included are:

- Professionals: youth or parent partners; youth's attorney; public health providers; Court Appointed Special Advocates; school personnel
- Youth and family support network: extended family friends, neighbors, coaches, clergy, co-workers, or others who the family has identified as a potential source of support.

Additionally, please also list names and contact information for relatives and nonrelative extended family members not part of the child and family team, as required per WIC Sections 706.6 (d)(3)(B)(ii) and 16501.1(d)(2)(C)(ii). Please remind youth of their rights, as seen in the [Foster Youth Rights Handbook](#), and WIC 16501.1 (g) and WIC 16001.9.

PURPOSE OF MEETING:

Please check the box that is most applicable to the purpose of the CFTM being held. Add additional description for the CFTM when the "Other" box is checked.

GROUP AGREEMENTS

Please check the box to agree to keep all information confidential, recognize tribal sovereignty and ICWA in the case of Indian children, and include any additional group agreements in the space provided below.

CHILD AND ADOLESCENT NEEDS AND STRENGTHS (CANS)

After discussion with the CFT, please indicate the identified strengths of the child/NMD, parents, and caregiver(s), when applicable. Under "Actionable Needs", please include a description of any items rated a two or three by the. Please note any rating disagreements within the team. If the CANS was not discussed during the CFTM, please elaborate on the lack of discussion.

If information is included within other documents, such as the CANS form or meeting notes within county CFT Meeting Summary Form, please attach these documents to avoid duplication of information.

WHAT IS WORKING WELL? (STRENGTHS, EXISTING SUPPORTS, ACTION ITEMS)

Please use this section to discuss what is currently working well with the child, youth, NMD, and family. Examples include existing support systems, accomplishments, goals, improvements, and family strengths.

WAS A RECOMMENDATION ABOUT PLACEMENT MADE?

Please elaborate on the placement recommendation made by the CFT when applicable. Check the applicable boxes below, providing additional information as necessary.

OUT-OF-COUNTY PLACEMENT

If there will be an out-of-county placement that will result in presumptive transfer (as defined in Welfare and Institutions Code 14717.1 (c)), please list who will complete the relevant documentation and the timeline for completion.

Indian Child Welfare Act (ICWA) and/or Tribe's Placement Preferences

Please check the box to indicate whether ICWA and tribal placement preferences apply.

Impact to School and Education

Please check the box if the placement will impact school and education. Also, in the space provided, identify which member of the CFT will be designated to notify and consult with the Foster Care Liaison/Educational Rights Holder regarding placement moves.

Placement Preservation Plan and/or Transition Plan

Please check the box if the child/NMD has a placement preservation plan and/or transition plan in place. If yes, use the space provided to provide additional information on the placement preservation and/or transition plan for the child.

PERMANENCY PLAN/DECISIONS, INCLUDING SPECIALIZED PERMANENCY

Explain court orders and placement decision requirements that include concurrent planning and the full range of specialized permanency service elements; do the same for child/NMD regarding community safety and accountability, including expectations from court orders and sanctions for children involved in juvenile probation. Please identify both the current permanency plan and the concurrent plan(s), how they were determined, and how the simultaneous permanency planning and concurrent planning efforts are being employed.

DID THE MEMBERS OF THE CFT REACH AGREEMENT ON THE PLAN?

Include information on whether or not the team was able to come to an agreement on the outcome of the meeting. This agreement can vary depending on the purpose of the meeting. Make note if there were disagreements among team members, and if there are any outstanding items to assist in reaching a consensus.

ACTION PLAN

Fill in the included chart with information regarding the next steps, tasks, and actions to be taken by various team members following the meeting. Please include information on who will be completing the task, which task they are completing, and when this task must be completed. This also includes tasks for the social worker or probation officer. If a previous Action Plan was developed, provide an update on outstanding action steps.

Who	Action Steps (include reason for having action step)	By When
Which team member(s) is/are required to complete this task?	What task, or action, is the team member completing? Be specific and include community-based organization information when applicable.	When does this task need to be completed by?

*Please complete the sections below **only for children/NMDs placed in a Short-Term Residential Therapeutic Program**, as required by Welfare and Institutions Code Sections 706.6 and 16501.1:*

REASONABLE AND GOOD FAITH EFFORTS

Explain reasonable and good faith efforts by the social worker or probation officer to identify and include all required individuals in the child and family team. This should include team members identified by the child/NMD.

Reasonable and good faith efforts, in the context of securing family participation in CFT meetings, will vary depending on the circumstances. Considerations that may play into what is reasonable include, but are not limited to, the amount of time permitted to plan the CFT meeting, the distance between various family members and the location of the CFT meeting, whether the family members have access to reliable transportation, whether the family members have disabilities that may need accommodation, whether virtual participation is available for the family members and, if so, whether the family has internet and/or telephone access, etc.

In the case of an Indian child, consistent with WIC 361.31 and 224.1, active efforts shall be provided in a manner consistent with the prevailing social and cultural standards and way of life of the Indian child's tribe and shall be conducted in partnership with the Indian child and the Indian child's parents, extended family members, Indian custodians, and tribe.

REUNIFICATION AS THE PERMANENCY CASE PLAN GOAL

If reunification is the permanency goal, provide evidence that the parent from whom the child was removed provided input on the members of the child and family team. This may include, but is not limited to the following activities:

- Support and encourage family members to invite the participation of individuals who are part of their own network of informal support, such as a teacher, pastor, or another member of the community part of the family's support network.
- Work with the family to identify other system partners to participate in the CFTM.
- Have ongoing dialogue and share all updates with the family regarding CFTMs.
- Inquire regularly whether the family wishes to add any other members to CFT. If the family declines to invite anyone for the initial CFTM, make sure to ask the family prior to each CFTM if they wish to provide any input on members.
- Identify and support community connections for the family who share the culture of the family.

CFT MEETINGS HELD AT A CONVENIENT TIME & PLACE FOR FAMILY

Provide evidence that meetings of the child and family team, including the meetings related to the QI determination, were held at a time and place convenient for the family. This may include, but is not limited to, the following activities:

- Conduct the CFT at a family home, a residential care facility such as an STRTP, or another convenient location in the community.
- Conduct the CFT meeting via video conferencing so all members can participate from their residence or another convenient location.
- Hold the CFT at the most convenient day and time for family members, for example on a non-working day for family members.
- Adjust the meeting frequency and duration to meet the individualized needs of the family.

- Provide the family with multiple time slots and/or options for CFTMs and ensure that the decided upon time works for the family.
- Confirm whether the family has adequate means of transportation to reach the CFTM. If they do not, make efforts to arrange appropriate public or private transportation for the family, schedule the CFT at a location within walking distance for the family, or reschedule the CFT until such a time that the family has transportation to attend the CFTM.

QUALIFIED INDIVIDUAL (QI) COLLABORATION WITH CFT*

Provide evidence that the determination conducted by the QI was conducted in conjunction with the CFT. This may include, but is not limited to, the following activities:

- The QI in collaboration with the CFT assesses the strengths and identifies the short- and long-term mental health and behavioral health goals and determines whether those needs can be met by family members or another home based-setting that have been identified by the placing agency or CFT.
- A CFT is held to review the QI's recommended treatment and referrals needed.
- The CFT and QI collaborate with the IPC and make necessary referrals.
- In the case of an Indian child, the QI consults with the Indian child's tribe in completing the assessment and determining the short- and long-term mental health and behavioral goals, and the recommended interventions consistent with the prevailing social and cultural conditions and way of life of the Indian child's tribe.

*Please complete this section following the assessment and recommendation of a Qualified Individual. Further guidance pertaining to the Qualified Individual is forthcoming.

CHILD, FAMILY, AND CFT PLACEMENT PREFERENCES

List the placement preference of the child/NMD, family, and the CFT. This may include preference for joint sibling placement and visitation.

PLACEMENT PREFERENCES ALIGNMENT WITH QI RECOMMENDATION**

Please list whether the placement preferences of the child/NMD, the family, and CFT were the same or different from those recommended by the QI. If they are not the same, please include information as to why the preferences of the child/NMD and CFT were not recommended by the QI.

**Please complete this section following the assessment and recommendation of a Qualified Individual.

IN-HOME SERVICES AND AFTERCARE SUPPORT

Provide a description of the type of in-home or institution-based services to encourage the safety, stability, and appropriateness of the next placement, including the recommendations of the CFT. Additionally, provide a plan for the provision of discharge planning and family-based aftercare support, to be developed in collaboration with the STRTP. This is required per Welfare and Institutions Code 16501.1 (d)(2)(F)(i and ii) and 706.6 (d)(3)(E)(i and ii).

Include any associated aftercare tasks and/or actions to the Action Plan section of this form, discussed above.

Please complete these sections when planning for discharge and aftercare services with an STRTP.

Further guidance pertaining to aftercare is forthcoming.

COURT APPROVAL OR DISSAPPROVAL

Following the court review, pursuant to WIC 361.22 and WIC 727.12, please document in Attachment A on page five (5) the court's approval or disapproval of placement.

STRTP PLACEMENT CASE PLAN ATTACHMENT (WELF. & INST. CODE, § 361.22, 727.12, 706.6, 16501.1)

To be attached to the case plan when complete. Please use Attachment A of this document for additional space.

Name of Child	Date	Case Number

Complete 1 – 9 below for children/NMDs placed in STRTPs. Please use Attachment A. if additional space is needed:

1. Reasonable and Good Faith Efforts

Please explain how the social worker or probation officer made reasonable and good faith efforts to identify and include all required individuals in the child and family team.

2. CFT Contact Information

List all CFT Members (child/nonminor dependent, family members and supports, caregivers, tribal representative, educational rights holder, and others) and nonrelative extended family members not part of the child and family team:

Name	Relationship to Child/Family	Preferred Method of Contact (Phone or Email)	Present
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

3. Reunification

If reunification is the permanency goal, provide information on how the parent(s) from whom the child was removed provided input on who should be members of the CFT.

4. Location and Time

Please describe how the location and time of the CFT meeting was determined. Was the meeting held at a time and place convenient for the family (please elaborate)?

5. Qualified Individual Determination

Please describe how the determination by the QI was conducted in conjunction with the CFT.¹

6. Child, Family, and CFT Placement Preferences

Please list the placement preferences of the child/nonminor dependent, the family and the CFT.

7. Qualified Individual Placement Preferences

Are the placement preferences of the child/NMD, the family and the CFT the same or different from the QI recommendations? If they differ, please summarize the rationale provided by the QI.¹

8. Home-based services

Prior to a child/NMD's discharge from an STRTP, please provide a description of the type of home and community-based services that will encourage the safety, stability, and appropriateness of the next placement. Include description of home-based services recommended by the QI and the CFT, when applicable.²

9. Aftercare Services

Please provide the plan for the provision of aftercare support services to the youth and family. (The placing agency should develop this plan in collaboration with the STRTP.)²

Explain in the field below:

¹ Complete after the assessment by the Qualified Individual [applies to questions five (5) and seven (7) above].

² Complete when planning for discharge and aftercare [applies to questions eight (8) and nine (9) above].

ATTACHMENT A – STRTP PLACEMENT CASE PLAN ATTACHMENT (WELF. & INST. CODE, § 706.6, 16501.1)

Please use this attachment for additional space. Make copies as needed for additional space.

STRTP PLACEMENT CASE PLAN ATTACHMENT INSTRUCTIONS

*Please refer to instructions below to complete each section in the STRTP Placement Case Plan Attachment. This form may be used **for children/NMDs placed in a Short-Term Residential Therapeutic Program** to satisfy the case plan documentation requirements of Welfare and Institutions Code 706.6(d)(3)(B) and 16501.1 (d)(2)(C). Should additional space be needed, please utilize Attachment A on page three (3) of the form and make copies as needed for additional space. Depending on local county practice, this may be completed by the social worker, probation officer, CFTM facilitator, or another county case worker. If utilizing this form to satisfy the case plan requirements of Welfare and Institutions Code 706.6(d)(3)(B) and 16501.1 (d)(2)(C), this document must be completed and uploaded and attached to the child welfare or probation case plan:*

1. Reasonable and Good Faith Efforts

Explain reasonable and good faith efforts by the social worker or probation officer to identify and include all required individuals in the child and family team. This should include team members identified by the child/NMD.

Reasonable and good faith efforts, in the context of securing family participation in CFT meetings, will vary depending on the circumstances. Considerations that may play into what is reasonable include, but are not limited to, the amount of time permitted to plan the CFT meeting, the distance between various family members and the location of the CFT meeting, whether the family members have access to reliable transportation, whether the family members have disabilities that may need accommodation, whether virtual participation is available for the family members and, if so, whether the family has internet and/or telephone access, etc.

In the case of an Indian child, consistent with WIC 361.31 and 224.1, active efforts shall be provided in a manner consistent with the prevailing social and cultural standards and way of life of the Indian child's tribe and shall be conducted in partnership with the Indian child and the Indian child's parents, extended family members, Indian custodians, and tribe.

2. CFT Contact Information

Please list all the team members that are in attendance at the CFT Meeting (CFTM), including, but not limited to, the child/youth, nonminor dependent (NMD), family, nonrelative extended family members (NREFMs), caregivers, and tribal representatives.

Please list names and contact information (phone and email, if applicable) for members of the CFT. This shall include the caregiver(s), behavioral health staff, foster family agency social worker, caseworker, or short-term residential therapeutic program (STRTP) /another provider representative, educational rights holder, when applicable. Other individuals that may be included are:

- Professionals: youth or parent partners; youth's attorney; public health providers; Court Appointed Special Advocates; school personnel
- Youth and family support network: extended family friends, neighbors, coaches, clergy, co-workers, or others who the family has identified as a potential source of support.

Additionally, please also list names and contact information for relatives and nonrelative extended family members not part of the child and family team, as required per WIC Sections 706.6 (d)(3)(B)(ii) and 16501.1(d)(2)(C)(ii).

3. Reunification

If reunification is the permanency goal, provide evidence that the parent from whom the child was removed provided input on the members of the child and family team. This may include, but is not limited to the following activities:

- Support and encourage family members to invite the participation of individuals who are part of their own network of informal support, such as a teacher, pastor, or another member of the community part of the family's support network.
- Work with the family to identify other system partners to participate in the CFTM.
- Have ongoing dialogue and share all updates with the family regarding CFTMs.
- Inquire regularly whether the family wishes to add any other members to CFT. If the family declines to invite anyone for the initial CFTM, make sure to ask the family prior to each CFTM if they wish to provide any input on members.
- Identify and support community connections for the family who share the culture of the family.

4. Location and Time

Provide evidence that meetings of the child and family team, including the meetings related to the QI determination, were held at a time and place convenient for the family. This may include, but is not limited to, the following activities:

- Conduct the CFT at a family home, a residential care facility such as an STRTP, or another convenient location in the community.
- Conduct the CFT meeting via video conferencing so all members can participate from their residence or another convenient location.
- Hold the CFT at the most convenient day and time for family members, for example on a non-working day for family members.
- Adjust the meeting frequency and duration to meet the individualized needs of the family.
- Provide the family with multiple time slots and/or options for CFTMs and ensure that the decided upon time works for the family.
- Confirm whether the family has adequate means of transportation to reach the CFTM. If they do not, make efforts to arrange appropriate public or private transportation for the family, schedule the CFT at a location within walking distance for the family, or reschedule the CFT until such a time that the family has transportation to attend the CFTM.

5. Qualified Individual Determination

Provide evidence that the determination conducted by the QI was conducted in conjunction with the CFT. This may include, but is not limited to, the following activities:

- The QI in collaboration with the CFT assesses the strengths and identifies the short- and long-term mental health and behavioral health goals and determines whether those needs can be met by family members or another home based-setting that have been identified by the placing agency or CFT.
- A CFT is held to review the QI's recommended treatment and referrals needed.
- The CFT and QI collaborate with the IPC and make necessary referrals.
- In the case of an Indian child, the QI consults with the Indian child's tribe in completing the assessment and determining the short- and long-term mental health and behavioral goals, and the recommended interventions consistent with the prevailing social and cultural conditions and way of life of the Indian child's tribe.

Please complete this section following the assessment and recommendation of a Qualified Individual. Further guidance pertaining to the Qualified Individual is forthcoming.

6. Child, Family, and CFT Placement Preferences

List the placement preference of the child/NMD and the CFT. This may include preference for joint sibling placement and visitation.

7. Qualified Individual Placement Preferences

Please list whether the placement preferences of the child/NMD and CFT were the same or different from those recommended by the QI. If they are not the same, please include information as to why the preferences of the child/NMD and CFT were not recommended by the QI.

Please complete this section following the assessment and recommendation of a Qualified Individual.

8 and 9. Home-based and Aftercare Services

Provide a description of the type of in-home or institution-based services to encourage the safety, stability, and appropriateness of the next placement, including the recommendations of the QI and CFT. Additionally, provide a plan for the provision of discharge planning and family-based aftercare support, to be developed in collaboration with the STRTP. This is required per Welfare and Institutions Code 16501.1 (d)(2)(F)(i and ii) and 706.6 (d)(3)(E)(i and ii).

Please complete questions 8 and 9 when planning for discharge and aftercare services with an STRTP.

Further guidance pertaining to aftercare is forthcoming.

10. Court Approval or Disapproval

Following the court review, pursuant to WIC 361.22 and WIC 727.12, please document in Attachment A on page three (3) the court's approval or disapproval of the placement.

Attachment 3

Uploading CFT Action Plan and/or STRTP Placement Case Plan Attachment Instructions CWS/CMS

Client Services - [Case [B, Bobby]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

ID | Svc Comp | Assignment | Trans Req | ICPC-100A | ICPC-100B | Doc Tracking | Spec Proj | Closure Summary

Identification

Case Info

Case Name: B, Bobby

Case Number: 1242-6018-0592-8000018

Start Date: 06/19/2004 End Date: Projected End Date: 12/19/2004

County: Sacramento State: California

Country: United States

Case Status

	Status	Effective Date	End Date
1	Court Involvement	06/19/2004	

Status

☒ Court Involvement ☐ Voluntary

Effective Date: 06/19/2004 End Date:

Associated Referral Information

Referral Name: B, Bobby

Referral ID: 0955-7070-8695-2000018

Received Date: 06/19/2004

Intervention

	Reason
1	Physical Abuse

Primary Agency Responsible: County Welfare Department

Case Alerts

Click on Green Button (Square) – Case Management Section

Ready | Case [B, Bobby]

Attachment 3

Client Services - [Case [B, Bobby]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

Click on Create New Document - Case

ID	Syc Comp	Assignment	Trans Req	ICPC-100A	ICPC-100B	Doc Tracking	Spec Proj	Closu
Identification								
Case Info								
Case Name								
B, Bobby								
Case Number								
Case Status								
+	Status	Effective Date	End					
1	Court Involvement	06/19/2004						

Attachment 3

Generate New Documents

Document Category

☒ State of California ☐ CDSS

☐ County

Documents to Generate

- 90-Day Transition Plan
- Case Notes
- ICPC Progress Report
- Transitional Independent Living Plan
- Transitional Independent Living Plan - Sp

OK

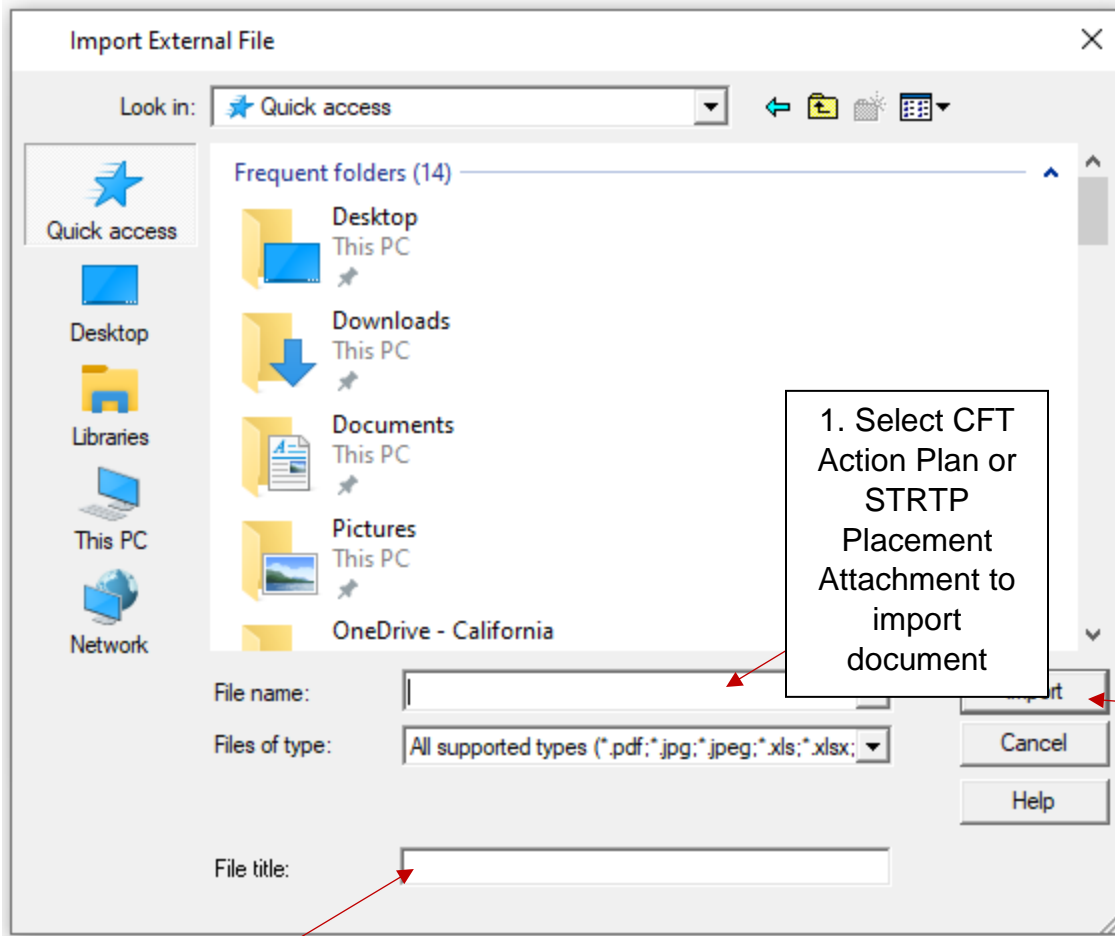
Cancel

Import

Help

Click on Import

Attachment 3



1. Select CFT
Action Plan or
STRTP
Placement
Attachment to
import
document

2. Insert your desired
"File Title" (as directed
by your county directive)

3. Click Import to save
document

Attachment 3

Client Services - [Case [B, Bobby]]

File Edit Search Action Associated Attach/Detach Window Help Toolz

Icons: [Folder with document] [Folder] [Color swatches] [Folder with document] [Document with list] [Document with list] [Person at door] [Hand with red ribbon] [Folder with document]

Buttons: + + + + +

ID | Syc Comp | Assignment | Trans Req | ICPC-100A | ICPC-100B | Doc Tracking | Spec Proj | Close

Identification

Case Info

Case Name
B, Bobby

Case Number

Case Status

+	Status	Effective Date	End
1	Court Involvement	06/19/2004	

To locate imported CFT Action Plan or STRTP Placement Case Plan Attachment: Click on Create Open Existing Document - Case

Attachment 3

Open Notebook [X]

Select Item to Open
Document - Case [v] [Load]

For this Case

	Local	ID	Name	Start Date	End Date	Serv. Comp.	Closure
1	<input checked="" type="checkbox"/>	1242-6018-0592-8000018	B, Bobby	06/19/2004		Family Reunification	

Open this Document - Case

	Title (Type)	File Name	Ext	Size	Date/Time
1	CFT Action Plan 8.17.2021 (Imported)	CFT A_00.docx	docx		2021-08-11-13.13.1

[OK] [Cancel] [New] [Remove] [Sort...] [Help]

Select desired document (e.g. CFT Action Plan and/or STRTP Placement Case Plan Attachment), click OK.