April 28, 2016

ALL COUNTY LETTER NO. 16-32

TO: ALL COUNTY WELFARE DIRECTORS
ALL COUNTY CHIEF PROBATION OFFICERS
ALL FOSTER FAMILY AGENCY DIRECTORS
ALL COUNTY ADOPTION AGENCIES
ALL PRIVATE ADOPTION AGENCIES
ALL ADOPTION REGIONAL AND FIELD OFFICES
ALL JUDICIAL COUNCIL STAFF
ALL TITLE IV-E AGREEMENT TRIBES

SUBJECT: DOCUMENTATION OF PREGNANCY AND PARENTING IN THE CHILD WELFARE SERVICES/CASE MANAGEMENT SYSTEM FOR MINOR AND NON-MINOR DEPENDENTS

REFERENCE: PUBLIC LAW (P.L.) 113-183; SENATE BILL (SB) 528 (CHAPTER 338, STATUTES OF 2013) AND SENATE BILL (SB) 794 (CHAPTER 425, STATUTES OF 2015); WELFARE AND INSTITUTIONS CODE (W&IC) SECTION 16501.45; ALL COUNTY LETTER (ACL) 14-38; ALL COUNTY INFORMATION NOTICE (ACIN) I-60-15

The purpose of this ACL is to provide counties with information and guidance regarding the new federal requirements for documenting pregnancy and parenting information for youth and Non-Minor Dependents (NMDs) in foster care. On September 29, 2014, The Preventing Sex Trafficking and Strengthening Families Act (P.L. 113-183) enacted federal legislation that makes changes to the required elements which must be included in the federal reporting of data related to commercially sexually exploited and pregnant or parenting foster youth. The provisions of this Act were signed into state law on October 1, 2015, through SB 794 (Chapter 425, Statutes of 2015). The SB 794 allows California to implement these provisions and remain in compliance with the federal Title IV-E state plan.

The SB 794 amended W&IC section 16501.45 to ensure compliance with the new federal reporting requirements by requiring the California Department of Social Services
(CDSS) to make changes to the Child Welfare Services/Case Management System (CWS/CMS) to accommodate the collection of data regarding the youth and NMDs in foster care that are pregnant or parenting. Properly documenting this information in CWS/CMS will provide for more accurate data collection regarding pregnant or parenting youth and NMDs, and allows social workers to identify youth that need access to valuable prenatal care and services. By collecting this information in a sensitive manner that ensures privacy for the youth/NMD, the child welfare system will be better able to offer much needed services and supports.

Data Collection Policies and Procedures

In order to provide optimal protection of the youth’s right to privacy of their reproductive health information, county child welfare and probation agencies should develop and practice protocols for appropriate data collection, entry and dissemination. The SB 528 (Chapter 338, Statutes of 2013) added new language to W&IC section 16001.9(a), effective January 1, 2014, which states minors and non-minors at 12 years-of-age or older have the right to age-appropriate, medically accurate information about reproductive health care, the prevention of unplanned pregnancy, and the prevention and treatment of sexually transmitted infections.

Pursuant to W&IC section 16501.1(g)(4), social workers and probation officers are required to inform youth and NMDs in out-of-home placement of their personal rights, at least once every six months, at the time of a regularly scheduled social worker or probation officer contact with the youth or NMD. (See ACL 14-38 for more information) Additionally, appropriate case planning requires social workers and probation officers to obtain current health information during their visits with youth and the youth’s families. Under the new requirements of SB 794, data regarding pregnancy must also be collected and reported. Pregnancy is a health condition which may be reported by the youth, their caregiver or physician. Due to the confidential nature of this information, conversations with youth about pregnancy-related topics should be handled with sensitivity and care taken to eliminate coercion regarding the disclosure of pregnancy status.

Data Entry of Parenting Information

The CWS/CMS release 7.4 is scheduled to be implemented on May 21, 2016, and will include the creation of new fields for entry of parenting data for youth and NMDs. Data entry instructions will be provided prior to its release. During the interim, Special Project Codes have been created to enter and collect this data. Please note that these Special Project Codes will be end-dated on May 21, 2016, after 7.4 is released. For information regarding the documentation of parenting youth and NMDs using Special Project Codes, please refer to ACIN I-60-15.
Data Entry of Pregnancy Information

There are two ways to capture pregnancy information in CWS/CMS. Pregnancy information may be entered under the Observed Condition tab or under the Diagnosed Condition tab. The correct way to enter this data depends on the youth’s circumstances.

Entering Pregnancy Information as an Observed Condition

When a social worker first learns that a youth or NMD is pregnant, the information should be entered into CWS/CMS via the Observed Condition tab. This will ensure that the information is not automatically populated on the Health and Education Passport (HEP) and will keep the information private from caregivers and others such as school personnel, counselors, mentors or Foster Youth Services providers that receive copies of a youths’ HEP. This information may not be relevant to the provision of some types of services and supports and therefore need not be included in the HEP. Additionally, whenever possible, youth and NMDs should be consulted prior to the disclosure of any pregnancy-related information.

In the Health Notebook:

1. Click on the **Observed Condition** page tab.
2. To add an Observed Condition, click the “+” in the Observed Condition grid to create a new row, and complete all known and mandatory fields.
3. Under Condition, select **Physical Health** from the **Category** dropdown list and **Pregnant** from the **Health Problem** dropdown list.
4. Add any known contact information regarding pregnancy related health care provider in the **Description** box under the **Health Problem** dropdown list.
5. Note: Any condition with the Alert box selected will populate in the Health and Education Passport (HEP).
In the description box, social workers and probation officers may enter information about the doctor or health provider providing prenatal care to the foster youth or other pertinent information about the pregnancy, if that information is known.

**Entering Pregnancy Information as a Diagnosed Condition:**

Pregnancy information can also be entered into CWS/CMS under the Diagnosed Condition tab, although this manner of entering the information will result in the information being displayed in the HEP. Entering the pregnancy as a diagnosed condition is necessary when the youth has been hospitalized as a result of the pregnancy. If a youth or NMD has been hospitalized for a health issue related to the pregnancy, such as a pregnancy complication or due to giving birth to a child, the pregnancy must be recorded as a diagnosed condition in order to allow for entering the hospitalization information. Pursuant to W&IC section 16010 (a), any hospitalization must be recorded in a manner in which the information would be entered into the youth or NMD's HEP.

If a youth or NMD is hospitalized for a pregnancy related issue, please follow the instructions listed below that show how to properly capture this information. Whenever possible, youth and NMDs should be consulted prior to the disclosure of any pregnancy-related information, including that of pregnancy related hospitalizations.

**In the Health Notebook:**

1. Click on the **Diagnosed Condition** page tab.
2. To add a Diagnosed Condition, click the “+” in the Diagnosed Condition grid to create a new row, and complete all known and mandatory fields.
   a. Under Condition, select **Physical Health** from the **Category** dropdown list and **Pregnant** from the **Health Problem** dropdown list.
   b. Add a Health Problem Description.
3. Click on the **Hospitalization** page tab.
4. To add a Hospitalization, click the “+” in the Hospitalizations grid to create a new row.
   a. You will be prompted to **Select Client Condition**. Select the applicable Client Condition (Pregnant) from the Client Condition list. Click “Ok”.
5. Complete all known and mandatory fields.
   a. In the Hospitalization Comments, include information about the reason for the hospitalization. Examples may include severe morning sickness, premature labor, high blood pressure, or facts of the birth including, but not limited to, if the youth gave birth via a caesarean section, any birthing complications and
information about the baby (e.g. name, weight, length, date of birth, apgars, etc.), etc.
Dissemination of Information

Aggregate data regarding parenting youth and NMDs is posted publicly on the CDSS website. Aggregate data regarding youth in foster care who are pregnant or parenting will be reported annually through The Adoption and Foster Care Analysis and Reporting System. County child welfare and probation agencies should document parenting and pregnancy-related health information using the CWS/CMS system. However, this information should be redacted or excluded from court reports, HEPs and any other reports that are disseminated outside the agency in order to ensure the confidentiality and privacy of the youth are protected.

If you have any questions about this ACL, please contact the Foster Care Support Services Bureau, at (916) 651-7465.

Sincerely,

Original Document Signed By:

GREGORY E. ROSE
Deputy Director
Children and Family Services Division