A Major Release of the N-FOCUS system is being implemented December 9, 2018. This document provides information explaining new functionality, enhancements and problem resolutions made effective with this release. This document is divided into four main sections:

**General Interest and Mainframe Topics:** All N-FOCUS users should read this section.

**Electronic Application:** N-FOCUS users responsible for case activity received through the Web based Electronic Application should read this section.

**Developmental Disabilities Programs:** N-FOCUS users who work directly with DD programs and those who work with the related Medicaid cases should read this section.

**Note:** This section will only appear when there are tips, enhancements or fixes specific to Development Disabilities Programs.

**Expert System:** All N-FOCUS users with responsibility for case entry for AABD, ADC Payment, SNAP, CC, FW, IL, MED, and Retro MED should read this section.

**Note:** When new functionality is added to N-FOCUS that crosses multiple topics (ie General Interest and Mainframe, Alerts, Correspondence, Expert System etc) the functionality will be described in one primary location. This location will usually be the General Interest and Mainframe section or the Expert System section. Alerts, Work Tasks and Correspondence that are part of the new functionality will be documented in both the primary location that describes the entire process and in the Alerts, Work Tasks and Correspondence sections.

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General Interest and Mainframe

Main Menu (Change)

The Main Menu, Services group contains a new icon with this release.

Service Referral Billing Icon – Click this icon to navigate to the Search Service Referral – Billing window.

Note: This icon will be used primarily by CFS Protection & Safety at this time.

Service Referral and Visitation Plan Tie (Changes)

Updates have been made to the Service Referral (Green Phone) and Service Authorization Process, based upon outcomes from the Service Referral and Service Authorization Future State Project, led by the Center of Operational Excellence (COE).

These updates include:

- Added Statuses to the Service Referral
- Ability to tie Visitation Plans to a Service Referral
- Physical printing will no longer be necessary, as signatures will no longer be required
- Service Referrals will be able to be saved electronically from print preview, as a printable PDF, and/or emailed

Service Referrals created after the December 9, 2018 Release will appear as shown on the following screen prints.

- The status and date of the most recent status will now be displayed
- The Misc Service checkbox has been removed, as write-ins will no longer be available
- There is the new checkbox to indicate flex fund or collateral only Service Referrals
• A new section for Visitation Plan ties is now available
• The Program Case and Service Authorization Icons have been added as navigation shortcuts to those windows
• The section for Reviewed By has also been removed from this window.
• The Household Name section has been moved to the bottom of the Service Referral

To create a Service Referral, when on the CFS Detail Program Case window, follow these steps:

1. Click the Service Referral icon.

The List Service Referral window will open.

2. Click the New icon.

A new Detail Service Referral window will open in Draft status.

3. Enter information into the “Completed By” field first, then the other fields will be enabled.
4. Enter the Name of the person in the household for which the Service Referral is being completed.
5. Enter the Service.

Note: The Service is selected by using the black Out Select arrow. The Search Service Type pop up will display, defaulting to search for only services for the Children and Family Services program.

6. Enter the search criteria or click on the search button to display all services for CFS.
The List Service Type window will display.

7. Select the service to be added to the Service Referral.
8. Click on the blue Return arrow.

9. Select the Provider for this service, by using the black Out Select arrow.

The Search Approved Provider window will appear.

10. Type the name of the Provider in the search criteria and click on the “Search” button.
If the Provider has an active Service Approval for that service, the List Approved Providers window will display with providers that meet the search criteria.

11. Select the Provider and click on the blue Return arrow.

If the Provider being searched for does not have an active Service Approval for that service, an error message will display after clicking on the “Search” button. This error message states, “Provider Not Approved”. Either the spelling of search criteria could be incorrect, or the provider may not have a contract for the service being referred. If you believes that the Provider is contacted for the service and should have an active Service Approval, the Contract Monitor Resource Developer can be contacted for follow-up.

***Important info regarding the “Flex Fund/Collateral” checkbox:

If this Service Referral is being completed for a Flex Fund or for Collateral information, the worker will click on the Flex Fund/Collateral checkbox. This checkbox functions as an indicator and changes the rules on the window, by allowing any Provider to be selected for the Service Referral, regardless of whether there is an active Service Approval for that Provider or not.
When a Provider is selected, and Flex Fund/Collateral checkbox is not checked, the Unit Type for that service will be auto-selected, based upon the Service Approval. If there is more than one Unit Type for a Service Approval, than the first one will be auto-selected on the referral. In this case, the user may need to correct the Unit Type on the Service Referral, if the auto-selected Unit Type was the right Type for the Service Referral.

12. Once the Service Begin Date, End Date, Units and Frequency have been added (and Type, if not already auto-selected), the Service Referral can be Saved.

**Note:** The Service Referral must be saved before a Visitation Plan can be tied.

After saving the Service Referral, the ability to tie a Visitation Plan is enabled.
Tie the Visitation Plan

To tie the Visitation Plan, follow these steps:

1. Select the Household Name to pull in the SDM FSNA Presenting Strength/Needs to the Service Referral (this function remains unchanged).
2. To tie one or more visitation plans to a Service referral, the click the black Out Select arrow in the Visitation Plan section.

The List Visitation Plan window will open.

3. Select the Visitation Plan to tie to the referral.
4. Click on the blue Return arrow.

A confirmation message will appear stating “This Visitation Plan will be tied to the Service Referral. Do you want to continue?”

5. Select the appropriate response to complete the action.
   a. Click No - the Visitation Plan will not be tied
   b. Click Yes - to confirm, and a success message will display, “Visitation Plan tied successfully”.

Note: To tie another Visitation Plan to the Service Referral, the process above is repeated.

Additional Updates

When a Visitation Plan is tied to a Service Referral, the Service Referral Icon on the Detail Visitation Plan window will be enabled. On the Detail Visitation Plan window, the enabled Service Referral Icon will open the List Service Referral window and will list the Service Referral(s) to which the Visitation Plan is tied.
When a Visitation Plan is tied to the Service Referral, the Visitation Plan Icon and “Untie” button are enabled. The user can click on the Visitation Plan icon to view a list of the Visitation Plans that are tied to the Service Referral.

If a Visitation Plan is tied to the Service Referral in error, the user can click on the “Untie” button. This will open the List Visitation Plan window showing the Visitation Plans currently tied to the Service Referral. The user can select the Visitation Plan to untie and click on the blue arrow.

After clicking on the blue Return arrow to untie, a confirmation message will appear stating “This Visitation Plan will be untied to the Service Referral. Do you want to continue?” If the user clicks on “No”, the Visitation Plan will not be untied. By clicking on “Yes” to confirm, a success message will display, “Visitation Plan untied successfully”.

When the worker has completed the Service Referral, the worker will select “Update Status” from the Actions menu.
The worker will have the status options of updating to “Final” or “Collateral”. When a worker is completing a Service Referral to use as collateral information only and no authorization is needed, select “Collateral”. Then select “Final” status if an authorization is needed for payment to the provider.

A confirmation message will appear after the status is selected. Click “OK” to confirm.

- When in “Final” status, no changes can be made to the Service Referral.
  - If corrections are needed, select “Update Status” from the Actions menu.
  - This will update the status to “Revisions”.
  - Then the necessary corrections can be made
- After corrections have been made, select “Update Status” from the Actions menu.
  - This will update the status back to “Final”.

- When the Billing Team has created a Service Authorization for the Service Referral, the status will be updated by the Billing Team to “Closed”.
• Service Referrals in “Final” and “Closed” Status will have copy enabled. The following items will copy forward:
  
  o Completed By
  o Name
  o Service
  o Checked/unchecked Flex Fund/Collateral
  o Provider
  o Any tied Visitation Plans

• The Status Date of the most recently established status for the Service Referral will be viewable on the Detail Service Referral window and the List Service Referral window.

***IMPORTANT NOTE: Don’t forget to update a completed Service Referral to “FINAL” status.

Only Service Referrals with “Final” status will be shown in the Service Referral- Billing list for the billing team to create Service Authorizations. With this updated process, the Service Referral no longer needs to be emailed to the Billing Team for an authorization to be created, unless there are other circumstances that the Billing Team needs to be made aware of. The Service Referral will still need to be emailed to the Provider.

Physical Printing of the Service Referral will no longer be needed, as signatures are no longer necessary. To Create a Service Referral (previously called “Print”), click Actions> Create Service Referral.

If there is one or more Visitation Plans tied you have the option to create the Service Referral with or without the Visitation Plans, by clicking “Yes” or “No” when the message is displayed. If there are no Visitation Plans tied, the message will not be displayed when creating the Service Referral.
Once the Service Referral is created, a message will display stating “Correspondence created successfully. The Service Referral Correspondence can be viewed and/or printed from the Correspondence Window.”

The Correspondence Icon is on the Detail Service Referral window or it can also be accessed on the CFS Detail Program Case window.

After clicking on the Correspondence Icon, the Search for Correspondence window will open. Click on “Search” to view the list of correspondences created for the program case.

Select the Service Referral from the list of correspondences and go to Actions and Print Preview.
When the preview of the correspondence is displayed, elect “Save As” from the File menu on the window. You can save the correspondence on your computer or any shared drive/folder. The document (printable PDF) can then be added as an attachment to an email, when sending the Service Referral to the Provider, per the current field process.

**Service Referral – Billing and Service Referral Tie to Service Authorization (New)**

On the Main Menu, a new icon and menu item under Services has been added. The purpose of providing a queue/list window where the CFS Billing Team can view Service Referrals in Final status, which are needing a Service Authorization created, updated or renewed.

**Note:** Only users with the ability to create or update Service Authorizations will have this icon enabled.

1. Select the Services Referral Billing icon.

The Search Service Referral-Billing window will open. The window defaults to search for Service Referrals in Final status.

2. Select the Billing Team to begin the search.
• Billing Team 1 covers CFS Service Areas: Western, Southeast and Central.
• Billing Team 2 covers Eastern & Northern Service Areas.
  o Based upon the office the primary assigned worker is located, and what county that office is located, the referral will be assigned to one of the 2 billing teams.

The search defaults for All. Date Ranges is based upon the Service Begin dates can also be used, with a selection of week, month or specified date ranges not to exceed a one month timeframe.

3. Click Search.

The List Service Referral window will display the Service Referrals matching the criteria selected.

• This list will have a limit of 1000 records
• When the limit is reached, an error message will appear, but after clicking “OK”, the list will display the 1000 records.

The Service Referrals, that need Service Authorizations completed, are defaulted to sort ascending order by Service Begin Date.

****IMPORTANT**** Immediately following the December 2, 2018 Release, only Service Referrals in Final status with Service Begin Dates of December 10, 2018 or later will be included in the List Service Referrals for Service Referral Billing. Any Service Referrals with Service Begin Dates prior to December 10, 2018, will need to be sent to the Billing Team by email.

4. Select the Service Referral to open.
The Detail Service Referral window will display for the selected Service Referral. The Program Case Icon will open the Program Case where the Service Authorization needs to be created.

When creating the Service Authorization, you will be able to tie the Service Referral for which the Service Authorization is being completed.

5. To tie the Service Referral to the Service Authorization, click the black select arrow.

The List Service Referral for the program case the Service Authorization is being created for will display showing all of the Service Referrals for that program case.

6. Select the Service Referral to be tied and click on the blue Return arrow.
A confirmation message will display regarding the Service Referral to be tied to the Service Authorization.

7. Click OK and the Service Referral will be tied to the Service Authorization.

Viewing the Service Referrals Tied

When a Service Authorization has one or more Service Referrals tied, the “Untie” button and Service Referral (Green Phone) Icon will be enabled.

To view the Service Referrals tied to the Service Authorization, follow these steps:

- Click the Service Referral Icon.

When a Service Referral is tied to a Service Authorization, the Service Authorization Icon on the Detail Service Referral window will be enabled. When on the Detail Service Referral window, the enabled Service Authorization Icon will open the Detail Service Authorization window to which the Service Referral is tied.

Note: Multiple Service Referrals can be tied to a single Service Authorization, but each Service Referral can only be tied to one Service Authorization. If a Service Referral is tied in error, the “Untie” function can be used to correct the error.

Untie a Service Referral

To Untie a Service Referral, follow these steps:

- Click the “Untie” button.

The Service Referral(s) currently tied to the Service Authorization will display.

- Select the Service Referral to untie.
- Select the blue return arrow.
A confirmation message will display regarding the Service Referral to be untied from the Service Authorization.

- Click OK and the Service Referral will be untied from the Service Authorization.

Change Status to Closed

Once the Service Authorization is created, the Service Referral can be updated to Closed and cleared from the queue.

To change the status to Closed, follow these steps:

1. Enter the appropriate search criteria from the Search Service Referral – Billing Window.

The List Service Referral window will display.

2. Select the Service Referral to update.
3. Select Actions>Mark as Closed.

The Service Referral Status will be updated to Closed. The List Service Referral window will close and the user will be back on the Search Service Referral – Billing window.
Correct a Closed Status Back to Final

If you mark a Service Referral as Closed in error, the Service Referral can be changed back to Final status by completing the following steps.

1. From the List Service Referral window, select the Service Referral that should be corrected.
2. Select Action>Mark as Final.

The Service Referral will be updated to Final status, the List Service Referral window will close and the Search Service Referral – Billing window will display.

Note: The List Service Referral window for Billing does not automatically refresh and won’t list Service Referrals updated to Final status, during the time the user is on the List Service Referral window. The user must manually refresh by closing the window and then once back on the Search Service Referral – Billing window, clicking on the Search button again.
Alerts

Alert 608 - Best Interest Hearing Due Alert (New)

This alert will go to IMFC Workers 30 days before it is due or 150 days from the VSSA signed date.

The alert will indicate when the youth’s Best Interest Hearing is due. This alert is due within 180 days of the VSSA (Voluntary Signed Services Agreement) being signed. The Due Date is calculated by using the VSSA date in the B2I detail window in expert.

**Alert Text:**

B2I Best Interest Hearing is Due for B2I Youth (first name, last name) by (mm-dd-yyyy)

Alert 609 - B2I Permanency Review Alert (New)

This alert will go to IMFC Workers to inform them that the Initial Permanency Hearing must be completed for a Bridge to Independence Youth.

The alert will display 12 months from the last day of the calendar month of the Best Interest Hearing date.

**Alert Text:** An initial permanency review hearing is due for (First Name) by (mm/dd/yy).

Alert 610 – B2I Ongoing Permanency Review Alert

This alert will go to IMFC workers to inform them that an Ongoing Permanency Review Hearing must be completed for Bridge to Independence Youth.

The due by date in the alert is 12 months from the last day of the calendar month of the Initial Permanency Review date.

**Alert Text:**

A new permanency review is due for B2I Youth (First, Name) by (mm-dd-yy).

Auth Created/Renewed Alert (New)

This alert will go to Primary Assigned CFSS Worker.

As a part of the Service Referral and Authorization Update Future State Project, this alert was created to inform the CFSS worker assigned to the CFS program case, that a Service Authorization was created, updated or renewed.

**Alert Text:**

Authorization (Auth Number) for (Client Name) for (Service Short Name) was created, updated or renewed.
Protective Service Alert Missing Youth Notification to NCJIS (New)

When a Protective Service Alert (PSA) is issued from NFOCUS and has been approved by Central Office Staff it will now be sent to the Crime Commission and be available for viewing on NDEN.

On 12/09/2018 the NDEN site will display all active PSA alerts for current missing state ward youth or children. Once a youth or child is located the protective service alert will be eliminated from the NCJIS system.

Protective Service Alerts are closed when the missing youth placement is closed.

Additional screen print on the following page related to this Missing Youth Notification alert.
Narrative

Detail Narrative Window (Change)

A new field, Recorded Time will be added to the Detail Narrative window. This field will display the time the narrative was created.

Correspondence

List Correspondence Window (Change)

On the List Correspondence window, the Update Comment action will only be available for Expert System Notices of Eligibility with a status of Created.
Sibling Placement Notification Letter and Waiver (New)

LB1078 requires a sibling placement notification be sent to all siblings when a child is in the care and custody of DHS. This bill also requires a waiver form be provided to adult siblings and parents of siblings of children in the care of DHS to be able to opt out of receiving the sibling placement notification. This correspondence will allow CFS Specialist to comply with this requirement.

The window is displayed by selecting Sibling Placement Notification and Waiver from the New Correspondence window.

The Sibling Placement Notification and Waiver is available in English and Spanish.

- The Children Involved group box will be populated with the children in Foster Care from the selected Program Case.
- Select the child or children for whom the letter is regarding.
  - This is a multi-select group box.
- The names of the related siblings will display in the Siblings to Notify group box.
- Save and Close to complete.

IMFC Opening Packet

This correspondence is used to create the IM-18FC and CFS-40 forms for each selected child. These forms are used when completing the Opening Packets, after children have been made a ward.

This correspondence is created by clicking on the Correspondence Icon, when on the CFS Detail Program Case window.
Then, on the Search for Correspondence window, click “New”. Next, select the IMFC Opening Packet from the Type field, click “OK” and the IMFC Opening Packet window will open.

Steps to Complete the IMFC Opening Packet:

1. Select the Out Select arrow to search for the worker who is completing the packet.
   - The Completed By filed will display the selected worker’s name.
   - This is a mandatory field.

2. Select the out select arrow to search for the worker for whom this packet is being completed on behalf of.

   **Note:** The On Behalf Of field is not mandatory.

3. Select Action>Add Children to add names to the Children group box.

   - The Children in Program Case pop-up window will display.
   - Select the children that will be included in the Opening Packet.
   - Click OK
   - The IMFC Opening Packet window will display with the actions buttons activated.
4. Complete the information in the Detail Buttons as appropriate.

- A pop-up window will display requesting information that can be included in the IMFC Opening Packet. Each window has at least one required field (underlined field) that must be completed for each child that is added to the correspondence. Some fields will autofill, based upon what is available in NFOCUS for that child.
- For the Child Information, Child Employment and Child Support windows, only one child can be selected at a time to complete the fields on the window.
  - The other windows allow multiple selection of children for data entering.
- When finishing one child’s information, click on “Save and Next” and then select the next child.
  - A “Y” will display next to the child’s name under “complete” on the windows when the minimum required fields have been answered.
- When selecting more than one child at a time, the information for each selected child will be identical.

**Note:**  -When all the information necessary has been entered on a detail window, be sure to click on “Save and Close”. The “Close” action will close the window **without** saving.
Child Information

These fields will autofill if the information exists for the child:

- Date of Birth
- Name of School
- Current Grade
- Date of Removal
- Will the child return in 90 days or less

**Note:** Be sure the school information is updated.
Child Employment

Note: Only children age 16 and older will be included in the list of children on this window.

Child Support
Parent Situation

Other Income

Each Type of Income selected must have an amount listed in the corresponding field.
Financial Accts/Info

On this window, answer the required question for each child first, then click on “Save & Next”. After saving, click on “Add” to create any records of Financial Accounts/Resources, as needed.

After clicking on “Add” the Financial Accounts/Resources Record window will open. You can add Resource Types for one or multiple children at a time. If adding multiple children at a time, be sure that the information being added is identical for each child selected. After saving and adding, records can be Updated, Deleted or Viewed by selecting one record at a time.
**Helpful Tip:** After selecting a Resource Type, use the “Tab” button on the keyboard to move from one field to the next. Some fields only apply to certain financial resource types.

**Health/Life Insurance**

To add the Parent Relationship click the Add button on the Parent Information box. **There must be at least one parent relationship entered for each child to create the packet.**
The Parent Information window will display.

Complete the information as appropriate for each Child and Parent relationship. When adding the Parent, if the person is found using the black arrow (person search) the address will auto-fill, if the information is already on NFOCUS.

**Note:** Select a Parent record row to enable the Update, Delete and View action buttons.

5. When all information has been added, click on the “Save & Close” icon. If all the minimum required information has been entered, a confirmation message will display.
o After clicking “OK”, the message and the IMFC Opening Packet window will close.

6. To view the document for saving or printing, cancel out of the Create Correspondence window and click on “Search” to view the list of correspondences created for the program case. One IMFC Opening Packet correspondence will be created for each child.

   o Next select the IMFC Opening Packet from the list of correspondences and either right click or go to Actions and Print Preview.

   o When the preview of the correspondence is displayed. The user will then select “Save As” from the File menu on the window. The user can then save the correspondence on their computer or any shared drive/folder. The document (printable PDF) can
then be added as an attachment to an email, when sending all the forms and
information necessary for the IMFC Opening Packet to the IMFC team, per the
current field process.

**Note:** The 2nd page (back of the CFS-40) was left intentionally blank to delineate between
the two forms that are created during this process. Signatures are no longer
needed, as the Completed By and date completed are passed to the forms from
NFOCUS.

Examples of the IMFC Packet Forms from NFOCUS: CFS-40 and IM-18FC are on the
following pages.
**Nebraska Department of Health and Human Services**

**OPENING PACKET BACKGROUND INFORMATION**

<table>
<thead>
<tr>
<th>Child's Name:</th>
<th>MORTY GAGEL</th>
<th>Social Security Number:</th>
<th>XXX-XX-0009</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date of Birth:</td>
<td>07-10-2017</td>
<td>MC #:</td>
<td>00000003</td>
</tr>
<tr>
<td>Child's Citizenship:</td>
<td>[X] US Citizen</td>
<td>[ ] Legal Resident (attach document)</td>
<td>[ ] Undocumented</td>
</tr>
<tr>
<td>Child's Legal Status:</td>
<td>[X] HHS Ward</td>
<td>[ ] HHS Ward, who remains in home</td>
<td></td>
</tr>
</tbody>
</table>

If the child was not living with a parent/relative at the time of removal, did the child reside with a relative within the last six months prior to the removal? [ ] YES [X] NO

Will the child return home in 90 days or less? [X] YES [ ] NO [ ] UNKNOWN

Date of Removal: 06-29-2018

With whom was the child residing at the time of removal?

<table>
<thead>
<tr>
<th>Check all that apply below:</th>
<th>Name and Address</th>
<th>Income Source</th>
<th><strong>Approx. Gross Monthly Income</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>[X] Mother</td>
<td>BRIANNA B GABEL 1904 FARNAM STREET STE 200 OMAHA, NE 68102</td>
<td>1. UNEMPLOYED</td>
<td></td>
</tr>
<tr>
<td>[X] Legal Father</td>
<td>JERRY GAGEL 1100 S 10 ST LINCOLN, NE 68508</td>
<td>1. GAZORP GAZORP CORP INTERNATIONAL SPACE PROGRAM</td>
<td>1. $3000</td>
</tr>
<tr>
<td>[ ] Putative Father</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>[ ] Stepfather</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>[X] Other</td>
<td>RICK SANCHEZ</td>
<td>1. UNKNOWN</td>
<td>1. N/A</td>
</tr>
</tbody>
</table>

Include relationship: MATERNAL GRANDFATHER - LIVE IN

CFS: Attach the following items to this completed checklist and send to IM/FC Worker:

- [ ] Copy of Court Petition, affidavits, police report (48 hour hold), if any of the documents are applicable
- [ ] Birth Certificate, CFS must obtain only if unavailable in N-FOCUS and child is born outside of Nebraska
- [ ] Court Orders - Date of first order making child a Ward of first removal order
- [ ] IM-18-FC, completed to the best of your ability, signed, and dated
- [ ] Private health insurance card, if applicable. Send as attachment, a copy of the front and back of card

Completed By: BELLE O BALL
On Behalf of:  
Date: 12-16-2018

**Approximate gross income in month of court ordered removal**
**Division of Children and Family Services**
*Income and Resources Data*

<table>
<thead>
<tr>
<th>Child's Name</th>
<th>MORTY GAGEL</th>
<th>Child's Social Security Number</th>
<th>XXX-XX-0000</th>
</tr>
</thead>
<tbody>
<tr>
<td>Is child currently employed?</td>
<td>[X] YES</td>
<td>[ ] NO</td>
<td></td>
</tr>
<tr>
<td>Gross Earnings $</td>
<td></td>
<td>How Often</td>
<td></td>
</tr>
<tr>
<td>Employer</td>
<td></td>
<td>Employer Address</td>
<td></td>
</tr>
</tbody>
</table>

Please complete the following information for the child listed above:

<table>
<thead>
<tr>
<th>Does child have other income</th>
<th>[X] YES</th>
<th>[ ] NO</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Veterans Benefits</td>
<td>$30</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Child Support</td>
<td>$60</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Social Security</td>
<td>$90</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supplemental Security Income</td>
<td>$60</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Indian Land Lease</td>
<td>$90</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>$30</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Specify: SPECIAL TRUST FROM HIS GREAT GRANDMOTHER ELIZABETH

<table>
<thead>
<tr>
<th>Does child have financial resources</th>
<th>[X] YES</th>
<th>[ ] NO</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Checking Accounts</td>
<td>$1,500.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number</td>
<td>15616156</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Location</td>
<td>FIRST NATIONAL BANK OF OM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Savings Account</td>
<td>$1,500.00</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Number</td>
<td>859104894</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Location</td>
<td>FIRST NEBRASKA BANK OF ME</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Stocks (common or preferred) $900.00

List by name and number of stocks:
- GOOGLE / 1
- YAHOO / 1
- SALESFORCE / 1

<table>
<thead>
<tr>
<th>Bonds</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>List each bond and date of purchase:</td>
<td></td>
</tr>
<tr>
<td>US SAVINGS BOND / 01-01-2008</td>
<td></td>
</tr>
<tr>
<td>US SAVINGS BOND / 01-03-2009</td>
<td></td>
</tr>
<tr>
<td>Certificates of Deposit $1,500.00</td>
<td></td>
</tr>
<tr>
<td>Date Issued</td>
<td>12-15-2016</td>
</tr>
<tr>
<td>Where Held</td>
<td>GREAT WESTERN BANK OF THE</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Vehicle Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Make/Model</td>
<td></td>
</tr>
<tr>
<td>Trust Accounts $1,500.00</td>
<td></td>
</tr>
<tr>
<td>Guardianship Account $1,500.00</td>
<td></td>
</tr>
<tr>
<td>Other $1,500.00</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Other resources name</th>
<th>ADDITIONAL TRUST ACCOUNT</th>
</tr>
</thead>
</table>

Does child have private health / life insurance? [X] YES [ ] NO

Private Health Insurance for the child:
- Name of Company: THAT PLACE THAT SELLS HEALTH INSURANCE MAYBE ACA?
- Policy Number: 4156156
- Policy Owner: SUPOSEDLY THE MOTHER
- Life Insurance owned by the Child
- Name of Company: THE ONE THAT SELLS LIFE INSURANCE I THINK IT'S CALL
- Policy Number: 1596156
- Face Value $1500

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IMFC Opening Packet - IM  Page 1 of 2  01189419  IM-10FC REV 8/19 (52023)
To Be Completed For Wards Only.

Parent's Current Situation (will be used to determine whether parental deprivation exists for Title IV-E eligibility. Indicate current situation for child's parents).

<table>
<thead>
<tr>
<th>Mother</th>
<th>Father</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

1. Deceased
2. Absent from Home
   a. Single Parent not living with Other Parent
   b. Single Parent living with unrelated adult
   c. Divorced
   d. Termination of Parental Rights
      - By Court
      - Parent Relinquished
   e. Married and Living with Spouse
3. Incapacitated Physically or Mentally
4. Unemployed
5. Unknown

Child Support
Have Child Support payments been ordered for this child [X] YES [ ] NO

<table>
<thead>
<tr>
<th>Court Order #</th>
<th>85196995</th>
<th>Amount Ordered</th>
<th>$1500</th>
</tr>
</thead>
<tbody>
<tr>
<td>County of Court</td>
<td>CHERRY</td>
<td>Amount Received</td>
<td>$1500</td>
</tr>
<tr>
<td>State of Court</td>
<td>NEBRASKA</td>
<td>Frequency</td>
<td>MONTHLY</td>
</tr>
</tbody>
</table>

Child's School Situation

<table>
<thead>
<tr>
<th>Name of School</th>
<th>ATTENDING DAY CARE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grade</td>
<td></td>
</tr>
<tr>
<td>Will he/she graduate before his/her 19th birthday?</td>
<td></td>
</tr>
<tr>
<td>Place of Birth</td>
<td>SOMEWHERE ON A RESERVATION DESSERT NEAR SCOTTSDALE</td>
</tr>
</tbody>
</table>

Completed by BELLE O BALL
Date Completed 12-16-2018
On Behalf of

It may be necessary for us to contact you further to secure your cooperation in verifying this information. This information is held within the strictest confidence. Before verification is made, we will obtain a signed release. Thank you.
Proof of Foster Care (New)

The Family First Prevention Service Act requires all youth leaving foster care receive a proof of foster care letter. This window displays when Proof of Foster Care is selected from the Create Correspondence window.

The window will display with fields populated, however, the worker has the ability to change the information if needed.

**Note:** If there are multiple former Wards that need to be sent this correspondence, this correspondence will need to be created multiple times. You cannot select multiple children at one time.

The Proof of Foster Care correspondence can be created in an Active CFS Case or a Closed CFS Case and sent to any current or former ward.

To create the Proof of Foster Care letter, complete the following steps:

1. From the Detail Program Case window, select the Correspondence icon.
2. Select Proof of Foster Care from the Create Correspondence window.
3. Click OK.

The Select Worker Name window will display.

4. Click the OK button if the correct worker name is displayed. To select a different worker, select the out select button.

The Proof of Foster Care window will display.
5. Select the Out Select Arrow to populate the Ward Name.

The Proof of Foster Care – Select Ward Name pop up will display.

6. Select the appropriate name and click OK.

The Proof of Foster Care window will display with the Ward Name and Address information entered.

7. Select the Legal Status button.

The Legal History pop up will display.
8. Select the appropriate Status line and click OK.

The Proof of Foster Care window will display.

9. Select the Medicaid History button.

The Medicaid History pop up will display.

10. Select the appropriate row and click OK.

Note: It is not required that you select information from the Legal Status and Medicaid History buttons. Any information you select through these windows will print on the letter.

11. Click the Save and Close icon to complete the correspondence.

The Print Options pop up will display.

12. Select Print Now or Print Later and click OK.

Note: To view the completed correspondence, Search from the Search Correspondence window.
Correspondences with Saving of Printable PDF Enabled (Changes)

After printing, the following correspondences can be saved electronically from print preview, as a printable PDF; CFS Court Report, Bridge to Independence Court Report, Education Court Report, Addendum for the Court Report and SDM Case Plan.

Expert System

B21 Automatic Fund Code Determination (Change)

IMFC workers assigned to the Bridge to Independence (B2I) program 46 cases will now be able to use the Expert System to enter mandatory information required to ensure Young Adults in the B2I program are IV-E eligible. Additionally, budgeting for CFS and B2I program cases can be done separately to lessen the inconvenience of budgeting cases where both CFS and B2I budgets exist.

To Budget the B21 Program case, follow these steps:

1. From the B2I Detail Task, double click the B2I Cases row.

The Add B2I Detail window will display.
2. Complete the following required fields as appropriate, other fields on the window are entered as appropriate:

a. **Number of Family Members** – Enter the number of the family members who are in the home.

b. **Number of Family Members Employed** – Enter the number of family members who are employed.

c. **Earned and Unearned Income** - These fields can remain blank until the Best Interest Hearing is entered.

d. **Verification Source** – Select the appropriate option from the drop down field when known.
   - Keep in mind that once the Best Interest Hearing is entered then income information must be completed

e. **Previously Adjudicated 3(a)** - This question must be answered “Yes” with a date in the **Previously Adjudicated Date** field for a youth to be eligible for B2I.

f. **Best Interest Hearing held within 180 days of VSSA** - Complete the VSSA signed question and enter the **Best Interest Hearing Date** when appropriate.
   - The Best Interest Hearing Date must be entered for the hearing questions to enable.
   - This information should be entered within 180 days of the VSSA date for the youth to have IVE funding.
   - The youth is not IVE eligible until the hearing is entered.
i. If the worker enters ‘No’ then a YAV’s youth is not eligible for B2I and the youth is NEVER eligible for IVE funding and no other information will be collected for this youth.

ii. If the worker enters ‘Yes’ the other fields will be enabled.

g. **Initial Permanency Hearing held within 12 months of Best Interest Hearing** - The Initial Permanency hearing date must be entered within 12 months of the Best Interest Hearing Date.
   - If the date is entered after more than 12 months of the Best Interest Hearing, the youth is not IVE eligible during the months past the 12th month.
     i. The youth becomes IVE eligible the month the hearing is entered.

h. **Reasonable Efforts to accomplish Independent Living Plan** – Answer this question whenever the initial hearing is entered and at all subsequent Review Hearings.
   - This question must be answered ‘Yes’ for the youth to receive IV-E funding.

i. **Approved Living Arrangement** - Answer this question whenever the initial hearing is entered and at all subsequent Review Hearings.
   - This question must be answered ‘Yes’ for the youth to receive IV-E funding.

   i. **Review Permanency Hearing Button** – Select the Review Permanency Hearing button when appropriate at a future date. Select the appropriate row.
   
   ii. **Click Add.**

   - The Add B2I Review Permanency Hearing pop up window will display.

   i. If the Review Hearing date is more than 12 months then the youth is not IVE eligible during the months past the 12th month.
   ii. The youth becomes IVE eligible the month the hearing is entered.
Children and Family Services

Detail Condition Window (Change)

CFS workers must report accurate information on Court Reports about conditions that a parent or child might have. Conditions are recorded in the Detail Condition window accessed from the CFS Program Person Information.

There are 11 Categories that will now allow a user to type add an “Other Condition”. This text box is only for a condition that is not listed in the Condition Type drop downs. These
conditions will appear on the court report when printed. The categories that allow a user to type in a condition are as follows:

- Bones/Joints
- Brain Nervous
- Cancer and Tumors
- Ears/Nose/Throat and Skin
- Heart and blood
- Emotional and Mental Health
- Immune System
- Intellectual/Developmental
- Kidney/Liver
- Respiratory
- Visual/Hearing

To enter a condition, follow these steps:

1. On the Detail Condition window chose one of the 11 categories from the Category drop down list.
2. Select the other conditions from the Type drop down list.

**Result:** The Other Condition text field becomes enabled.

3. Type in the new condition.
4. Change the Begin Date if necessary.
5. Select the Out Select Arrow to include a physician in the Diagnosed By field if appropriate.
6. Click the Add button.

**Result:** The Condition will be added to the Condition Type group box.
Transitional Living Plan (Change)

The Transitional Living Plan is replacing the Independent Living Plan.

A Transitional Living Plan (TLP) can be created for any child between the ages of 14 and 23. The child does not need a role of participant in a program case in order to create the TLP.

The TLP button only enables if the child meets the requirements for a Transitional Living Plan.

If the TLP button enables and the person is over age 23, old Transitional Living Plans can be viewed. If the person is in a closed case, under the age of 23, but was a State Ward after the age of 14, the TLP button will enable.

Detail Transitional Living Plan (Change)

With this release, the Detail Transitional Living Plan window will have a different display depending on the Begin Date of the TLP.

**TLP created prior to 12/9/2018** - there is no change to the window’s appearance or functionality

**TLP created 12/9/18 or later** – the following changes have been made to the appearance and functionality

The organization of some of the fields has changed as well as the following action buttons have been added:

**Action Button:**

- **Youth Needs Questions** – Selecting this button will open the TLP Youth Needs window
• **Youth Need Summary** – Selecting this button will open the TLP Youth Need Summary window
• **NYTD Provided Service** – Selecting this button will open the Transitional Living Provided Services window

### TLP Youth Needs Window (New)

To comply with State and Federal law, the questions on this window need to be answered. The answers will then display in the Transitional Living Plan.

Answer each question with a Yes or No and enter Narrative as needed. Some of the questions require narrative before you will be able to Save your answer.

**Note:** Questions 1, 7, 8, 10 and 11 require narrative. Questions 2, 3, 4 and 5 require narrative when answer is No. Question 1, 2, 3, 4, 5 and 6 require a corresponding Goal to be added before finalizing the Transitional Living Plan.
TLP Youth Need Summary Window (New)

The answers entered in the TLP Youth Needs window display on the TLP Youth Need Summary Window.

To view a specific question, highlight the question in the window and select the Goto Detail button, or double click the question. You will be returned to the TLP Youth Needs window.

Create a Transitional Living Plan NYTD Provided Service

The NYTD Provided Service button replaced the Provided Service button which will display on any Transitional Living Plan created prior to the 12/9/2018 release.

This window is used as a data collection window. The information provided on this window is reported to NYTD (National Youth in Transition Database). NYTD Provided Service is reported by month. Creating the NYTD Provided Service is done from the Detail Transitional Living Plan window.

1. Select from the drop down list, the month the service(s) were provided.
2. Highlight the service(s) provided.

**Note:** This is a multi-select list.

3. Go to Actions, select "Mark Yes", or right click and select “Mark Yes”.

**Note:** You can also right-click the item to “Mark Yes” or “Mark No”.

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Page 48
4. Select the Save or Save and Close icon.

Legal Status Edit Removed for YAV's Youth (Change)

A worker is now able to end date a youth who has a program 46 (B2I) case as long as the IMFC worker has set the Case Status to Close in the current month or the next month.

Example: The IMFC worker has set the Program 46 case to Close on 03/01/2019. A CFS worker or B2I worker who was attempting to change the Youths status from YAV's to non-ward on a date of 02/15/2019 could do so.

CFS workers and B2I workers cannot close program 46 cases and must still contact the assigned IMFC worker to do so. Additionally, closing the YAV’s status will also close the new B2I detail in expert system.
Expert System View for B2I YAV’s youth when the Legal Status is changed to Non-Ward. Keep in mind the B2I detail will be show a Red X until the first day of the closed case month. (See screen print below).

![Screen Print]

**Allegation Finding Date (Change)**

With this release, the Findings Date for Allegations will no longer be allowed to be backdated. Only entering the Current Date will be allowed.

**Supervisors Reopen SDM Assessment (Change)**

A CFSS Supervisor will be able to reopen any Safety Assessment not just the previous. This functionality is not allowed when there is an SDM Reunification Assessment with an SDM Safety Plan tied to it which was created later than the SDM Safety Assessment which is trying to be reopened.

![Screen Print]

**Provider Matching Printing (Changes)**

The Provider Matching Printing has been corrected to now only include the matched facilities/foster homes, based upon the results from the Provider Matching completed.
Supervisors Reopen SDM Assessment (Change)

With this release, CFS Supervisors will be able to reopen and alter any SDM Assessments in a list window for the household. This includes the following:

- Safety Assessment
- Safety Plan
- Risk Assessment
- Prevention Assessment
- FSNA Assessment
- Reunification Assessment
- Risk Re-Assessment

Sibling Placement Notification Waiver (New)

If an adult sibling or child sibling’s parent/guardian elects to waive notice of future placement changes, the waiver may be documented under the Relative/Kin pushbutton.

In the ‘Relative’ box, select the sibling who no longer wishes to receive notices. Then in the ‘Related Children’ select the siblings. The date should be the date from the signed waiver form. The ‘Contact Type’ should be either ‘Letter’ or left blank and the ‘Response Type’ should be ‘Waived Sibling Placement Notification’.

Taking this action will prevent the sibling from appearing in the ‘Send To’ box of the ‘Change in Placement/Change in Worker’ and ‘Sibling Placement Notification Letter and Waiver’ correspondences.

If the sibling changes their mind and decides they would like to again receive sibling placement notices, go back to the ‘Relative/Kin’ pushbutton and select a response type of ‘Withdrawn Sibling Placement Notification Waiver’. The sibling will now appear in the ‘Send To’ boxes of the
‘Change in Placement/Change in Worker’ and ‘Sibling Placement Notification Letter and Waiver’ correspondences.

These two new response types do not print on the ‘Notice to the Court’.

**Sibling Report Narrative Added to the Court Report (New)**

LB 1078 requires workers to file a sibling placement report to be filed with the court report. In order to meet this requirement, we have add a new ‘Child Narrative’ named ‘Sibling Placement Report’ to the court report. The new narrative will print after the ‘Placement’ narrative.

The ‘Sibling Placement Report’ should include the following elements.

- The Department’s reasonable efforts to locate the child’s siblings
- All joint sibling placements made and if the placement continues to be consistent with the safety and well-being of the children
- If a joint sibling placement is not possible, the report shall include the reasons why a joint sibling placement is and continues to be contrary to the safety or well-being of any of the children
- The Department’s continuing reasonable efforts to place a child with a sibling in the same foster care or adoptive placement
- The Department’s continuing reasonable efforts to facilitate sibling visitation.

**Intake – Identified Child (Fix)**

If the intake type is ‘Dependent Child’ and later is changed to ‘Child Abuse/Neglect’, the children with a role of ‘Identified Child’ will have their role automatically changed to ‘Child’.