### Administrative Policies and Procedures: 19.8

<table>
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<tr>
<th>Subject:</th>
<th>Transitioning Youth to the Employment and Community First (ECF) Choices Program for Adult Services</th>
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<td>Standards:</td>
<td>COA: RPM 1, RPM 7.03, CR 1.05, CR 1.07, CFS 22.01, 22.02, 22.05, 22.07, 22.08</td>
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<tr>
<td>Application:</td>
<td>All Department of Children’s Services (DCS) Employees</td>
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### Policy Statement:
DCS refers all youth in DCS custody who are approaching adulthood and diagnosed with an intellectual and/or developmental disability (I/DD) to the Employment and Community First (ECF) for services prior to their mandated release from custody.

### Purpose:
To ensure DCS youth diagnosed with an Intellectual and/or Developmental Disability (I/DD) obtain appropriate services and/or supportive housing as determined by TennCare and its Managed Care contracted Organization prior to, and following, age-mandated release from custody.

### Procedures:

#### A. ECF Choices Identification, Referral and Tracking

1. Once a child/youth diagnosed with an intellectual and/or developmental disability (I/DD) reaches fifteen (15) years old, or upon entering DCS custody for youth fifteen (15) and older, the FSW contacts the Central Office ECF Coordinator and/or Director of Health Advocacy, with the Office of Child Health to begin the pre-screening process. The following documents are required for pre-screening:
   a) Psychological testing with a full-scale intelligence quotient of 70 or below prior to adult age;
   b) A diagnosis of Intellectual Disability; or
   c) A diagnosis of Developmental Disability, as defined by TCA 33-101(11)(A), and supporting documentation; or
   d) Documentation of significant injury or circumstance that limits the youth’s ability to complete activities of daily living.
   e) A current Individual Education Plan (IEP) with a Special Education certification as Intellectually Disabled (ID).

2. If the youth is determined to meet the initial qualifying criteria, the youth’s information is logged on the ECF Tracking Spreadsheet and the Central Office ECF Coordinator contacts the FSW to gather required documentation from...
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TFACTS and sends the youth’s file to the TennCare Managed Care Coordinator for the ECF Choices Program.

Required documentation, if applicable, includes:

- DCS Face Sheet
- Most Recent EPSD&T Screening
- Any Psychological Evaluations; including Psychosexual, Forensic Evaluations, or Center of Excellence Comprehensive Evaluations
- Psychoeducational Evaluations
- Current IEP and prior IEPs to demonstrate previous educational I/DD history
- Current placement provider treatment plan
- Current Child & Adolescent Needs & Strengths (CANS)
- Family Advocacy and Support Tool (FAST) Assessments
- Discharge summaries from previous placement providers
- Written provider summaries/reports
- Psychiatric admission and psychiatric discharge summaries from past hospitalizations
- Chronological list of placements with placement dates
- Serious Incident Reports (SIR)
- Medical records related to serious medical conditions
- Custody order(s)
- Copies of petitions containing delinquent charges
- Copies of “No Contact” order(s)
- Birth Certificate
- Social Security Card
- TennCare Card, and any other insurance cards
- Documentation of SSI eligibility or application status (SSI is required before a transition to ECF Choices can occur)

Once all documents have been received, the child’s file is sent to the TennCare Managed Care Coordinator (BlueCare Advocate) for the ECF Choices Program.

B. Supplemental Security Income application at age 17

1. The Family Service Worker (FSW) applies for Supplemental Security Income (SSI) financial benefits for disabled children not already receiving SSI benefits at age 17. The assigned Child Welfare Benefits Counselor (CWBC) provides technical support to the FSW.
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#### 2. The CWBC contacts the Social Security Administration office by telephone to schedule a new referral appointment.

#### 3. During the initial interview with the Social Security representative, the FSW and CWBC are informed of the records needed to support the SSI application.

#### 4. The FSW gathers and submits these records with the formal written application to the Social Security Administration. SSI application approval generally takes from four (4) to six (6) months.

### C. Designating a Medical Decision Maker

1. When the Child and Family Team (CFT) completes the required transition planning, pursuant to DCS Policy [16.51 Independent Living and Transition Planning](https://tcreq.tn.gov/tmtrack/ecf/index.htm), if the youth has an Intellectual and/or Developmental Disability, at that time, the team also determines if the child requires support in decision making once they turn 18.

2. For details on this process and who is required to be involved, refer to DCS Policy [19.10, Designating a Medical Decision Maker for Youth with Disabilities Aging Out of DCS Custody](https://tcreq.tn.gov/tmtrack/ecf/index.htm). If a conservatorship is being completed for the youth, the Family Case in TFACTS remains open until that conservatorship is complete.

### D. Ninety (90) Days before the youth exits custody

1. The FSW completes the online referral for the youth to the ECF Choices Program, through the TennCare website: [https://tcreq.tn.gov/tmtrack/ecf/index.htm](https://tcreq.tn.gov/tmtrack/ecf/index.htm)

2. After the referral has been submitted, a case manager (BlueCare Advocate) with the TennCare Managed Care Organization (MCO) for the ECF Choices program is assigned to collect additional documentation and to complete a Life Skills Assessment (LSA).

   **Note:** In addition to the I/DD diagnosis, adaptive functioning must be at or below the 1st percentile to qualify for ECF Choices.

3. If it is determined based on the LSA that the youth qualifies for ECF Choices, TennCare and the MCO coordinates completion of the Preadmission Application Evaluation (PAE).

4. Once the PAE is received, a level of need and an ECF slot is assigned to the youth.

5. Following being assigned an ECF Choices slot, the assigned care coordinator works with the youth and TennCare provider agencies to identify potential placements for the youth, following the youth’s 18th birthday.

6. TennCare, the contracted MCO for the ECF Choices Program, the Director of Health Advocacy, and the Central Office ECF Coordinator and team meet regularly throughout the transition process to discuss the progress of transitions and to ensure youth are transitioned on, or shortly following, their 18th birthday.

### E. Establishment Funds

1. Prior to the youth in DCS custody transitioning into the ECF Choices Program, a provider can request the Department provide establishment funds to help the youth become settled in their new placement. Establishment funds are utilized to assist the youth in paying the first month’s rent or deposits and/or are utilized...
to purchase furnishings for the youth’s new residence.

2. If a provider identifies that establishment funds are needed, the provider can make purchases from the allowed list without prior permission. Any purchases not on the below list must be approved by the ECF Choices Coordinator with DCS Central Office, prior to the purchase being made. Refer to the Process for Requesting and Use of DCS Establishment Funds Instructions for Providers or the Process for Requesting and Use of DCS Establishment Funds Instructions for DCS Staff.

Pre-Approved Expenses & Purchases:

a) Rent and first month deposit: Itemized invoices should include the exact amount required for the deposit and the first month’s rent, not to exceed $700.

b) Furniture/Home Furnishings: Invoices should be itemized and include a detailed description of the items purchased. The itemized invoice for these items must include the price of each individual item and should not exceed a total of $700.

- Bed frame
- Mattress
- Dresser
- Night Stand
- Lamp
- Bedding
- Kitchenware
- Towels
- Chair
- Television (24” or smaller)

3. Once purchases are made, the agency sends the itemized invoice(s), on agency letterhead, for the rent and/or deposit and a separate invoice for any furniture/home furnishings to the assigned FSW, the DCS Central Office ECF Choices Coordinator, and the Director of Health Advocacy.

4. Upon receiving the invoices from the ECF Choices agency, the FSW submits a Case Service Request (CSR) in TFACTS for establishment funds, including all relevant information and attaching the provided invoices. A separate case service request is required for each category: Rent/Deposits and Home Furnishings/Furniture.

5. The establishment funds must be requested by the agency and approved by the Department prior to the youth’s transition.

6. The Family Case in TFACTS remains open until the Establishment Funds CSR(s) are approved.
### F. ECF Choices Transition

1. The FSW convenes Child and Family Team Meetings as necessary to accomplish transition of the youth into the ECF Choices Program.
2. On the date of the youth’s transition into ECF Choices, the FSW notifies DCS Placement staff to terminate DCS services.
3. After successful transition is confirmed, if all establishment funds CSRs are approved, and if conservatorship is either not needed or completed, the FSW will close the youth’s case in TFACTS.
4. Throughout the transition process the FSW documents the transition work that is done, according to this policy, in the TFACTS database.

### Forms:

| None |

### Collateral documents:

- **16.51 Independent Living and Transition Planning**
- **19.10, Designating a Medical Decision Maker for Youth with Disabilities Aging Out of DCS Custody**
- **Process for Requesting and Use of DCS Establishment Funds Instructions for Providers**
- **Process for Requesting and Use of DCS Establishment Funds Instructions for DCS Staff**

### Glossary:

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<th>Term</th>
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<td>Conservator:</td>
<td>A person appointed by a Court, to which an individual’s rights have been transferred. For example, the right to make decisions about treatment or medical care may be transferred from the individual to the conservator, giving the conservator the authority to consent or refuse medical treatment on behalf of the individual.</td>
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### Intellectual Disability:

TCA 33-1-101(16)(A):

"Intellectual Disability" means for the purposes of the general functions of the Department, as set forth in 4-3-2701(b), substantial limitations in functioning:

- As shown by significantly sub-average intellectual functioning that exists concurrently with related limitations in two (2) or more of the following adaptive skill areas: communication, self-care, home living, social skills, community use, self-direction, health and safety, functional academics, leisure, and work; and
- That are manifested before eighteen (18) years of age;

### Developmental Disability

TCA 33-1-101(11)

(A) “Developmental Disability” in a person over five (5) years of age means a condition that:

- Is attributable to a mental or physical impairment or combination of mental and physical impairments;
- Manifested before twenty-two (22) years of age;
- Likely to continue indefinitely;
- Results in substantial functional limitations in three (3) or more of the following major life activities;
  - Self-care;
  - Receptive and expressive in language;
  - Learning;
  - Mobility;
  - Self-direction;
  - Capacity for independent living; or
  - Economic self-sufficiency; and
- Reflects the person’s need for a combination and sequence of special interdisciplinary or generic services, supports, or other assistance that is likely to continue indefinitely and need to be individually planned and coordinated.

(B) “Developmental Disability” in a person up to five (5) years of age means a condition of substantial developmental delay or specific congenital or acquired conditions with a high probability of resulting in developmental disability, as defined for persons over five (5) years of age if services and supports are not provided.

### Family Service Worker:

A DCS term used to identify the position previously known as the DCS case manager or home county case manager. This person is principally responsible for the case and has the primary responsibility of building, preparing, supporting, and maintaining the Child and Family Team as the child and family move to permanence.