

**A. IMPORTANT SERVICE ELEMENTS**

1. For services requiring Prior Authorization (PA), if the PA is denied the Contractor must assist the Child and Family Team (CFT) with recommendations of alternative services that are congruent with the child's/family's needs.
2. Service Plans must include goals and objectives that prepare the child and family for the child's return to home or to a less restrictive community setting, as quickly as possible.
3. Every child receiving treatment services in an out of home setting must be served through a CFT, and the Residential Service Provider. The CRT and Residential Service Plans must be in alignment.
4. Family involvement and partnership, including the provider's attempts to engage the family, must be clearly documented in the clinical record.
5. Residential service provider staff must be trained and supervised to ensure treatment interventions and Service Plans are being implemented effectively. All staff directly involved with the child's care must receive regularly scheduled clinical supervision, as well as event-driven supervision when necessary, to ensure the provision of sound clinical treatment.
6. Residential service providers must work collaboratively with the CFT to identify and address the changing needs of the child and family. Treatment interventions and services are modified as needed.
7. All behavioral health staff that provide out of home treatment services must complete required training and Board of Behavioral Health Licensing (BBHL).

**B. KEY ELEMENTS TO REMEMBER ABOUT THIS BEST PRACTICE**

1. Family involvement includes a wide diversity of primary caregivers from biological and adoptive families, to self-created units of people residing together who should be involved in all processes and decision making for their children.
2. The stages of parental involvement include engagement, participation, empowerment, discharge and aftercare/supportive services.
3. The primary goal of family-centered work is to strengthen the child/family relationship, whether they live together or not.
4. Cultural guides can be utilized to tailor accommodations according to the child's/family's cultural norms. Sensitivity to the family's culture and language must be a primary concern.

**C. BENEFITS OF USING THE CHILDREN'S OUT OF HOME PRACTICE TOOL**

1. Better integration of the Arizona Vision, 12 Principles for Children's Service Delivery, and CFT process into residential service programs.
2. Decreased use of out of home treatment services statewide and shorter lengths of stay in out of home treatment settings.
3. Increased involvement of the child's family in all aspects of the child's out of home treatment.