



TEXAS
Department of Family
and Protective Services



**Child
Protective Services**

3 in 30 Resource Guide

July 2025

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Introduction

The *3 in 30 Resource Guide* provides useful information to support Child Protective Services (CPS) and Single Source Continuum Contractor (SSCC) staff in effectively performing their job duties. This information includes reference material, procedures, and guidelines that assist Department of Family and Protective Services (DFPS) and SSCC staff in effectively performing their job tasks required for children in care.

This resource guide provides important information on a range of topics for the purpose of assisting and guiding staff to:

- Make essential decisions;
- Develop strategies to address various issues;
- Perform essential procedures;
- Understand important processes; and
- Identify and apply best practices.

It is important to remember the information in this resource guide does not substitute for DFPS policy. Policy statements may sometimes be included, but only as references. Any policy appearing in this resource guide will be emphasized and include a link to the actual policy in the CPS Handbook or Texas Administrative Code rule.

DFPS policy always takes precedence over any resource guide. DFPS strives to keep both synchronized; however, delays sometimes exist. If questions arise, always follow DFPS policy in the CPS Handbook.

While information in this resource guide is not policy, except where noted, the actions and approaches described here are also not mandates. Staff should adapt their performance of critical tasks to the individual needs and circumstances of the children and families with whom they work.

Combined with clear and concise handbook policy, this resource guide should help staff provide a high level of service to children in Texas.

1. The 3 in 30

The **3 in 30** combines three separate, yet critical, tools for assessing the medical, behavioral, and developmental strengths and needs of children and youth entering DFPS conservatorship.

Texas statute requires each component, and together they chart the path of services for children and youth from the beginning of their time in care. The law defines which assessments each child entering DFPS conservatorship receives within the first 30 days of removal.

A child may receive one, two, or all three assessments depending on their age and other factors at the time of removal. These assessments include the:

- 3-Day Medical Exam;
- Child and Adolescent Needs and Strengths (CANS) Assessment; and
- Texas Health Steps Medical Checkup.

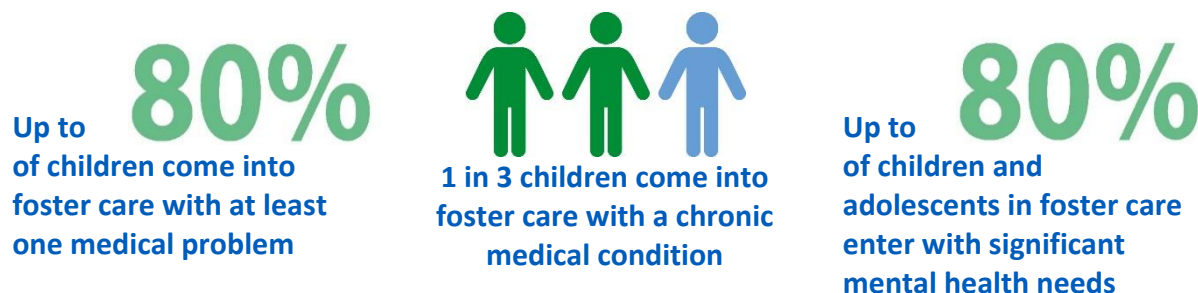
The “3 in 30” is a collaborative effort between DFPS, the Texas Health and Human Services Commission, and Superior STAR Health, the contracted Medicaid provider for youth in foster care.

The purpose of this guide is to provide procedures for “3 in 30.” Combined together, the 3-Day Medical Exam (when eligible), CANS Assessment, and Texas Health Steps Medical Checkup provide Child Protective Services (CPS) with a solid foundation for service planning relating to a child’s physical and behavioral health. Better service planning earlier in the case results in increased placement stability, more appropriate service provision for a child and family, and increased timely exits to positive permanency.

Medical and Mental Health Needs of Foster Children

According to the [American Academy of Pediatrics](#), children and youth in foster care have significant medical needs¹. Figure 1 illustrates some medical and mental health need facts regarding children and youth in foster care.

Figure 1. Fast Facts on Medical and Mental Health Needs of Foster Children



These national medical experts recommend children and youth in conservatorship see medical professionals early and often. In 2017, the Texas Legislature enacted a law adding the 3-Day Medical Exam for specific children removed and placed into care to address the needs for foster children in Texas. By combining the initial 3-Day Medical Exam, when eligible, with the Texas Health Steps Medical Checkup, and the CANS Assessment, DFPS will gain a greater understanding of the needs and strengths of children and youth in care.

¹ Health Care Issues for Children and Adolescents in Foster Care and Kinship Care Council on Foster Care, Adoption, and Kinship Care, Committee on Adolescence, and Council on Early Childhood Pediatrics Oct 2015, 136 (4) e1131-e1140; DOI: 10.1542/peds.2015-2655

2. The 3-Day Medical Exam

What is It?

In 2017, the Texas Legislature passed a law requiring select children entering conservatorship to receive a **3-Day Medical Exam**. The exam is a medical screening that assesses urgent medical and mental health problems that may not be readily apparent upon entering foster care and an opportunity for the caregiver to obtain necessary guidance and medications for a child that may not have been obtained at the time of removal, such as an asthma inhaler or eczema cream.

Timeline

The 3-Day Medical Exam must occur within **three business days** of a child's removal for qualified children. See [Family Code, Section 264.1076](#).

In general, a business day is defined as any day state offices are open, Monday through Friday 8 a.m. to 5 p.m. Keep in mind, some medical providers may have adjusted or later hours. Figure 2 provides examples of this three business day rule.

Figure 2. 3-Day Medical Exam Timeline Scenario Examples

If a Child Qualifies for the 3-Day Medical Exam and is Removed on:

- **Monday at Noon:** The exam should be completed no later than the following Thursday.
- **Friday at 5 p.m.:** The exam should be completed no later than the following Wednesday.



Note

*When indicated, the 3-Day Medical Exam is **in addition** to the Texas Health Steps Medical Checkup.*

It does not replace or substitute any other part of "3-in-30." Rather the 3-Day Medical Exam is one of three separate assessment tools used when children enter foster care.

Qualifying Criteria



The law identifies certain criteria indicating a child should receive the 3-Day medical exam. A child will require a 3-Day Medical Exam if **one or more of the criteria** listed below is met:

1. Removed as the result of sexual abuse (SXAB);
2. Removed as the results of physical abuse (PHAB);
3. Obvious physical injury;
4. Chronic medical condition;
5. Medically complex condition; or
6. Diagnosed mental illness.

Medical Care After Removal

Even if the 3-Day Medical Exam criteria is not met, a child in foster care may receive an exam by a licensed healthcare provider in the event of illness or injury at any time following removal.

If there is a concern their health or well-being and the child does not meet the criteria, consultation with a healthcare provider for a sick or establishment of care visit is appropriate. A sick visit exam, however, should not be classified as a 3-Day Medical Exam.

Emergent and Urgent Care

In general, do not take the child to an emergency room or other urgent care medical facility unless there is a health emergency requiring emergent or urgent care. Emergency visits for the 3-Day Medical Exam are costly and overly burdensome on the healthcare providers when there is not a need for emergent or

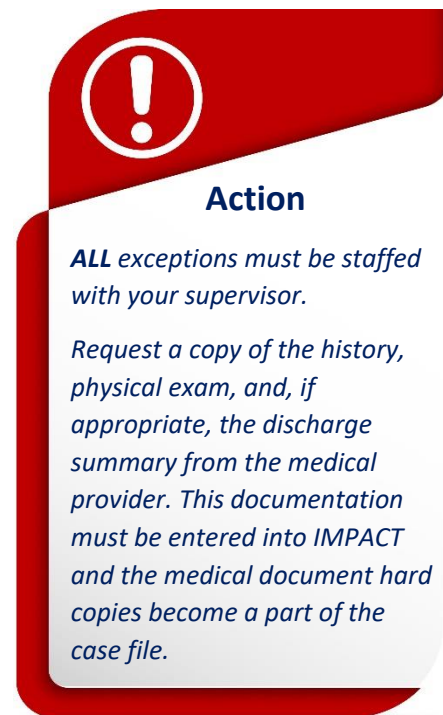
urgent health care. A physician (Doctor of Medicine [MD] or Doctor of Osteopathic Medicine [DO]) or other STAR Health provider may complete the initial 3-Day Medical Exam.

STAR Health is available as a resource to locate a provider who can see the child within three business days. To locate a provider, visit the [STAR Health webpage](#) or call STAR Health Member Services.

Exceptions

A child may qualify for a 3-Day Medical Exam, but some exceptions are possible.

Caseworkers should review the steps in Figure 3 to determine if the child qualifies for a 3-Day Medical Exam or an exception.



Procedures

Figure 3. Steps to Complete a 3-Day Medical Exam



Determine if a 3-Day Medical Exam is Required

- The caseworker conducting the removal determines if the child qualifies for a 3-Day Medical Exam. Refer to **Gathering Information to Assess Qualifying for the 3-Day Medical Exam** and **Person Characteristics** for tips on how to determine if the child meets the qualifications.
- If the removing caseworker determines the child **meets one or more** of the qualifying conditions, proceed to Step 2.
- If the child **does not have** any of the qualifying conditions, they will not receive a 3-Day Medical Exam. Instead, the child should receive the Texas Health Steps Checkup within the first 30 days of removal.

The child or youth requires a 3-Day Medical Exam completed by a healthcare provider if **one or more** of the following six criteria is identified:

1. **Removed as a Result of SXAB:** If grounds for removal in the affidavit are indicated as sexual abuse or sex trafficking, the youth receives a 3-Day Medical Exam.
Note: A Reason to Believe finding will not have been made or approved at the time of removal.
2. **Removed as the Result of PHAB:** If grounds for removal in the affidavit are indicated as physical abuse, the youth receives a 3-Day Medical Exam.
Note: A Reason to Believe finding will not have been made or approved at the time of removal.
3. **Obvious Physical Injury:** A child may have an injury at the time of removal and should receive a 3-Day medical exam. This injury does not have to be the result of abuse or neglect nor does there have to be a suspicion of physical abuse to meet this criterion. This category is used when other categories have not been met. but a physical exam is needed for a physical injury. These can include but are not limited to bruises, lacerations, burns, swelling, pain when touched, limping, obvious deformities, abrasions, broken teeth, or other injury not mentioned above.
4. **Chronic Medical Condition:** This category is used for a child who has a medical problem or illness where they may need to see a doctor a couple or more times a year or the problem makes it hard for them to do the things they want to do.

Examples of a chronic medical condition may include allergies, asthma, eczema, constipation, heart murmur, thyroid problem, growth problems, speech differences, needing Early Childhood Intervention, hearing, or vision problems, feeding problems, etc. Often these children will have medications, glasses, hearing aids. Do not include temporary conditions.

5. **Medically Complex Condition:** A child who has a medically complex condition has more than one chronic medical problem that affects a wide range of body systems. This results in differences for how a child is able to interact with the world. They often have frequent visits to medical providers (doctors, therapists etc.) and often times need medical equipment. The medically complex condition does not need to be permanent.

Examples include pregnancy, cystic fibrosis, diabetes, genetic syndromes, but could also include a child who has asthma or Attention-Deficit/Hyperactivity Disorder (ADHD).

6. **Diagnosed Mental Illness:** A child who has a diagnosed mental illness may or may not be receiving medication or intervention. Diagnosis information can be received from parents, caregivers, the youth themselves, collateral contacts, or prior history. A diagnosis can be made by a mental health professional or a primary care physician, though documentation is not required.

A number of diagnoses fit into the category, including but not limited to ADHD, bipolar disorder, Post-Traumatic Stress Disorder, etc. These diagnoses can be made by a mental health professional or a primary care physician. (American Psychiatric Association)



**Determine
if an Exception
is Met**

The caseworker (Investigations/Family Based Safety Services [FBSS]) determines which level of medical care the child needs. Discussion between the supervisor and caseworker occurs to determine if an exception is met.

When a child meets the criteria, the 3-Day Medical Exam exceptions are:

1. **The child is currently hospitalized for a medical condition.**

For example:

- ▶ A child was admitted to a hospital due to an abusive trauma and remains admitted at the time of removal.

- ▶ A child is treated at a hospital for Failure to Thrive on the day of removal and the findings of the hospital visit are the cause of entering care.

If **YES**, the 3-Day Medical Exam is **not** needed as the child's full medical exam was already completed in the medical facility.

- ▶ Request a copy of the treatment plan, history, physical, and if appropriate the discharge summary; and
- ▶ Proceed to Step 6 for documentation using **Other**.

2. **The child is currently in an in-patient psychiatric hospital.**

For example, a parent who contacts Statewide Intake expresses they no longer wish to care for their teenage son who has extensive behavioral health issues. The child will be discharged from the psychiatric hospital within the next 48 hours, and the parent is requesting CPS take custody of the child.

You contact the parent who confirms that they no longer wish to have custody of the child and the social worker at the psychiatric hospital who confirms the child received a comprehensive physical exam upon being admitted to the psychiatric hospital eight days ago. The social worker emails you a copy of the physical exam that noted no physical health concerns.

If **YES**, the 3-Day Medical Exam **may not** be needed.

- ▶ Request a copy of the treatment plan, history, physical, and the discharge summary when appropriate;
- ▶ Determine if the child received a full medical exam while under the care of the psychiatric hospital
 - ◇ If so, and the documentation is obtained, then the 3-Day Medical Exam is **not** needed; and
- ▶ Proceed to Step 6 for documentation using **Other**.

3. **The child is transported to a hospital at the time of removal.**

For example:

- ▶ You remove a baby from the home, and the child is experiencing severe congestion and wheezing when she is breathing. The parents have not taken the child to a medical professional for treatment. You take the child to an urgent care clinic to be evaluated.

- ▶ You remove a child from school. He has an injury to his arm that has not been treated. The arm is swollen, and the child is in great pain. You believe he may have a broken arm. You take the child to the local emergency room to obtain x-rays and an evaluation of the injury.

If **YES**, take the child to emergency room or urgent care clinic for immediate medical attention. If the child must receive urgent or emergent care, take a copy of the 3-Day Medical Exam **Medical Protocol** (one page document containing the Medicaid bill code) to the emergency room or urgent care clinic and ask the medical provider to make sure all of the steps are covered. Then the trip to the emergency room or urgent care clinic will suffice for the 3-Day Medical Exam requirement.

Frequently Asked Questions (FAQ)

1. Does a newborn removed at birth need the 3-Day medical exam in addition to exams received at birth?

Staff the circumstances with the supervisor and, if needed, with the regional CPS Medical Services staff (**well-being specialist** or **nurse consultant**). An additional exam **may not** be needed if the newborn's birth was facilitated by a licensed medical provider.

2. Can a specialized medical resource substitute for the 3-Day Medical Exam?

No. For example, the following cannot substitute for the 3-Day Medical Exam:

- ▶ A pre-removal doctor exam due to a child's recent illness;
- ▶ A Sexual Assault Nurse Examiner (SANE) exam;
- ▶ A Forensic Assessment Center Network (FACN) consultation based on medical records; and
- ▶ Telemedicine.

If the answer to all the above questions is **NO** and the child meets one of the criteria in **Step 1**, the child is required to have a medical exam **within three business days**. Proceed to Step 3.

3

Arrange and Schedule the 3-Day Medical Exam

- The caseworker arranges for the 3-Day Medical Exam appointment by scheduling **or ensuring the appointment is scheduled**.
 - ▶ Once the child is removed and determined to need the 3-Day Medical Exam, the caseworker explores if there is a primary care provider for the child or the caregiver has a primary care provider they would use on an ongoing basis.
 - ▶ If there is an accessible, existing primary care provider for the child, the caseworker verifies the medical provider is a STAR Health provider and schedules the 3-Day Medical Exam appointment with that provider (see FAQ # 5 below for question suggestions).
 - ▶ If there is no existing primary care provider, the caseworker schedules or requests the caregiver schedule a 3-Day Medical Exam with a STAR Health provider and confirms the appointment is made.
 - ▶ Caseworkers should notify the placement and/or SSCC that the child qualifies for a 3-Day Medical Exam. It is the removal worker's responsibility to determine eligibility and communicate that immediately. If a placement and/or SSCC learns a child may qualify for a 3-Day Medical Exam after placement, a discussion should occur with the removal worker.

For example, you remove a child and see no obvious injury. When the placement assists in bathing the child that night, they see bruising to the torso and notifies you. Then you determine this is an obvious physical injury which meets criteria for a 3-Day Medical Exam. You ensure a 3-Day Medical Exam is complete.
- To make the appointment, the caseworker or caregiver does one of the following:
 - ▶ Schedule the 3-Day Medical Exam with a pre-arranged STAR Health provider;

Examples:

 - ◇ A shelter may have a specific medical provider affiliated with the facility.
 - ◇ A caregiver may have an existing arrangement with a particular medical provider.

- ▶ Schedule the appointment with a known STAR Health clinic or provider;

Examples:

- ◇ A Foster Care Center of Excellence clinic; or
- ◇ A preferred clinic/medical provider for the county; or
- ▶ Schedule the appointment with a STAR Health provider.
 - ◇ Call **STAR Health Member Services at 1-866-912-6283** during normal business hours and request assistance locating a provider and/or scheduling an appointment. The **STAR Health online doctor finder resource** is also available.
 - ◇ The STAR Health Member Services line also has nurses available 24/7 who can help locate providers, but cannot schedule appointments. When calling STAR Health, it is helpful to specify whether you are calling to speak to **Member Services** or the **Nurse Line**.

4

Prepare for the 3-Day Medical Exam

- The caseworker ensures transportation to the 3-Day Medical Exam appointment is arranged.
- The caseworker or adult attending/transporting the child to the appointment (the caregiver) must bring to the medical provider the fully signed and authorized **Medical Consent Form 2085-B** and information about the child, such as the reason for removal.
 - ▶ **Affidavits:** The information may be the removal affidavit, if appropriate and filed with the court, or may be other information that explains what trauma or history the child may have experienced. If using a filed affidavit, it is provided directly to the medical provider.

While it is ideal to provide the affidavit directly to the medical provider, there may be times that providing the affidavit may not be appropriate. An affidavit is confidential and may contain sensitive information about a parent or caregiver's physical or mental health. Use your best judgement and discuss concerns with your supervisor, as needed.

If you find you are unable to provide a copy of the filed affidavit to share critical information relating to the child with the medical provider, you may be able to pull excerpts from the affidavit or provide relevant new content to the medical provider about the allegations of abuse or neglect, trauma history and significant information. Regardless, a medical provider needs to know the DFPS concerns about a child's experiences.

If the affidavit has **not** been filed with the court, you should provide appropriate information that will be included in the filed affidavit directly to the medical professional.
- The caseworker can write a short narrative containing child specific information for the medical provider instead of using the removal affidavit, but must always provide the **Medical Consent Form 2085-B**. (see FAQ #11 below).
- If the caseworker is not the adult attending/transporting the child to the 3-Day Medical Exam appointment, the caseworker, supervisor, or coverage caseworker must be available by phone to speak with the medical provider, as needed.

5

Complete the 3-Day Medical Exam

The caseworker ensures the 3-Day Medical Exam appointment is completed.

HHSC Medicaid, STAR Health, and Texas medical experts have agreed upon a specific **Medical Protocol** for this exam, including the following components:

- **Vital Signs:** Including height, weight, and temperature;
- **Medical History:** Including known history; current concerns such as those related to abuse and neglect, medications, allergies, and screening for health conditions related to risks reported/documented by DFPS; physical and intellectual disabilities; vision, hearing, and communication deficits; mental illness, suicidality, aggression, or emotional distress; and pregnancy, sexually transmitted infections, and/or substance use;
- **Physical Exam:** A complete exam, including all body surfaces with respect to the child or youth's level of distress;
 - ▶ Tests, including any laboratory or other tests, will be done at medical professional's discretion;
- **Treatment:** Medically necessary medications, equipment, patient education, consults/referrals, and/or transfer to higher level of care; and
- **Follow-Up Expectations:** The medical provider will make recommendations and provide written communication of follow-up expectations including medications, medically necessary equipment, or referrals.

*Note: New abuse or neglect history obtained by the medical provider or physical findings indicating possible abuse or neglect not already known to CPS must be reported to the CPS caseworker **and** the Child Abuse Hotline at 1-800-252-5400 as required by Texas law.*

Vaccinations

Children and youth are prohibited from receiving vaccinations at the 3-Day Medical Exam. A child may not receive vaccinations unless there is an emergent need for a tetanus vaccination. For a vaccination other than a tetanus shot, the medical provider must obtain parental consent in writing and directly from the parent. The caseworker can assist the medical professional in contacting the parent for consent, but may not obtain consent from the parent on behalf of the medical professional.

6

Follow Up

- After the medical exam, the caseworker is responsible for:
 - ▶ Ensuring follow-up care is completed; and
 - ▶ Follow-up plans and medical recommendations should be clearly documented in the **Medical/Mental Assessment** tab in IMPACT (see Step 7 below for details).
- The adult attending/transporting the child to the 3-Day Medical Exam appointment receives completed documentation from the medical provider that lists:
 - ▶ Diagnoses, treatment, patient instructions and recommendations for follow-up; **or**
 - ▶ The Medical Dental Visit Form 2403 completed by the medical provider.
- If the caseworker did not attend the exam, the caseworker must coordinate with the caregiver to ensure:
 - ▶ The adult attending/transporting or the residential contractor sends the medical documentation via fax or email to the assigned caseworker within 24 hours;
 - ▶ The adult attending/transporting immediately calls the assigned caseworker if medical findings are urgent; and
 - ▶ The caregiver or adult attending/transporting the child contacts the assigned caseworker immediately if they have difficulty with follow-up requirements.

Examples include:

 - ◇ Concerns about facilitating follow-up logistics (transportation, attendance);
 - ◇ Concerns about obtaining medical equipment or prescriptions;
 - ◇ Expected or unexpected conflicts with follow-up appointments; and
 - ◇ Placement Level of Care concerns based on 3-Day Medical Exam findings (meaning the exam revealed the child's needs are higher than what the residential care provider can provide);
- The caseworker ensures the:
 - ▶ Adult attending/transporting the child and/or the caregivers are aware of these requirements, and that the recommended follow-up is completed; and
 - ▶ Child's caregiver understands both the Texas Health Steps Medical Checkup (all children) and CANS Assessment (children ages 3 to 17) must be scheduled to occur within 30 days of removal. If helpful, provide the caregiver with the **STAR Health Quick Guide for Caregivers**.



Document

Within 24 hours of receiving notice the 3-Day Medical Exam is complete, the caseworker enters documentation of 3-Day Medical Exam into the child's **SUB Stage** in IMPACT. Refer to **Appendix A** for assistance.

Examples of documentation include:

- Medical visit summary;
- History and physical;
- Diagnoses list;
- Treatment summary;
- Prescription list;
- Follow-up care instructions;
- Recommendations/referrals; and
- Follow-up appointment information.

Gathering Information to Assess Qualifying for the 3-Day Medical Exam

Caseworkers must gather information through the life of the investigation or FBSS case to aid in determining if a 3-Day Medical Exam is required. The caseworker can ask the questions in Figure 4 at any time during interactions with families. This is not intended to be an exhaustive list and should not be used as a template for interviews. It is simply a guide to suggest potential ways of determining eligibility.

Figure 4. Helpful Questions for 3-Day Medical Exam Determinations

Parents and Caregivers:

- Who is your child's doctor?
- What medications are they prescribed? Ask them to provide the bottles, packages, pharmacy receipts, or documentation from the doctor.
- When was their last visit?
- What does your child's doctor say about their health/condition/medical needs?
- Does your child have any medical equipment?
- How often does your child go to the doctor?
- Do they have any specialists?
- Have they ever been given a diagnosis?
- Has your child ever been hospitalized? For what/when/where?

Children and Youth:

- Do you take any medicine? What kind and for what?
- What kind of things do you go to the doctor for?
- Who is your doctor?
- Have you ever been in the hospital?
- Has anyone ever told you that you "have" something medically you must take care of?
- Do you have any injuries I need know about?

Relatives and Kinship:

- Does the child have anything that requires special medical care?
- Have you ever taken the child to the doctor or a hospital? For what and where?
- What medicine does the child take?
- Do you know of any diagnosis the child has?
- What have the parents told you about the child's health?
- Have you noticed anything with the child that you think they should see a doctor for?

Medical and Behavioral Health Providers:

- Does the child have a diagnosis?
- What are you treating the child for?
- Have you prescribed any medication? What/when?
- Do you consider the child to be medically complex?
- Does the child have a chronic medical condition?
- Does the child have a mental health diagnosis?

Schools:

- Does the child have an Individual Education Plan or 504 with an attached diagnosis?
- Does the child take any medicines at school?
- Are you aware of any diagnosis?
- Has the child ever been out for hospitalization? When and for what?
- Does the child receive any specialized services at school? For what?
- Does the child have any medical equipment they need (whether they have it or not)?

Person Characteristics

The person characteristics listed in Figure 5 require a 3-Day Medical Exam. The child does not need to have more than one characteristic to get a 3-Day Medical Exam.

Figure 5. Person Characteristics Requiring a 3-Day Medical Exam

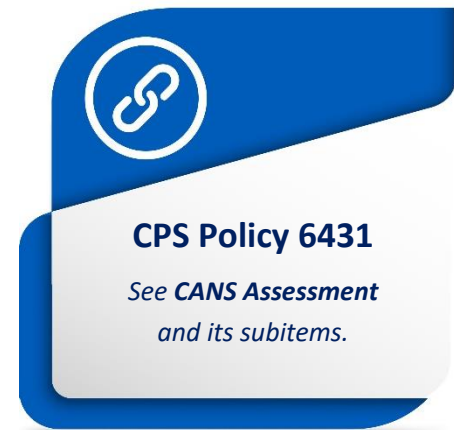
These Person Characteristics Require a 3-Day Medical Exam:	
<ul style="list-style-type: none">• ADHD• Autism• Bipolar• Child Sexual Aggression• Conduct Disorder• Depression• Developmental Delay• Developmental Disability• Downs Syndrome• Eating Disorder• Enuresis/Encopresis• Failure to Thrive• Hearing Impaired• HIV Positive/AIDS• Infant Alcohol Effect• Infant Drug Exposure• Inhalant Use• Intellectual and Developmental Disability	<ul style="list-style-type: none">• Medicaid Waiver MDCP/CLASS• Medically Fragile• Mobility Impaired• Mood Disorder• Oppositional Defiant Disorder• Physically Disabled• Post-Traumatic Stress Disorder• Pregnancy-Current• Psychotic Disorders• Self-Abuse• Sexual Behavior Problem• Sexually Transmitted Disease• Speech Disabled• Spina Bifida• Substance Use• Traumatic Brain Injury• Visually Impaired

3. The CANS 3.0 Assessment

What is It?

The **CANS Assessment** is a developmentally appropriate, comprehensive, trauma-informed behavioral health assessment that includes a suicide screening. The information gathered informs service planning, permanency planning, and placement decisions to meet each child's individual needs.

See [CPS Policy 6431](#).



Timeline

All youth ages 3 to 17 must receive the CANS assessment within the first 30 days of a child entering DFPS care to meet the requirement of using the results to complete the Child Plan of Service Plan (CPOS) the first 45 days. Eligible children are required to have a CANS assessment annually while they remain in conservatorship. The caseworker arranges for the CANS assessment by scheduling or ensuring the appointment is scheduled.

Under the Texas Child-Centered Care (T3C) System, young adults ages 18 to 21 in extended foster care are added to the population eligible to receive a CANS Assessment.

To determine the process for a child, youth, or young adult receiving a CANS Assessment, refer to Figure 6 below.

Figure 6. CANS Process Policies

If:	Then:
The child, youth, or young adult is/will receive services under a T3C Service Package.	Follow <u>CPS Policy 6431.1.</u>
The child, youth, or young adult is/will not receive services under a T3C Service Package.	Follow <u>CPS Policy 6431.2.</u>

For more information about T3C and T3C Service Packages, see [CPS Policy 4300](#) and the [Texas Child-Centered Care System and Placement Resource Guide](#).

How to Read the CANS

The CANS Assessment report contains:

- The assessment rating scores;
- Clinical impression;
- Therapist recommendations for prioritization; and
- Service recommendations.



Note

The conservatorship caseworker must consider each of these components when developing the service plan.

Rating Scores

The assessor administering the CANS will score each item on a scale of 0 to 3 in the eCANS portal.

In reviewing the assessment rating scores, note the following:

- **Needs Score:** A 2 or 3 indicates a need for action and must be considered for inclusion in the CPOS; and
- **Strengths Score:** A 0 or 1 identifies a centerpiece strength and must also be considered for strengths building activities in the CPOS.

Narrative Fields

The CANS report includes the three narrative fields described in Table 1 below. The caseworker should prioritize the information in these fields when developing CPOS.

Table 1. CANS Report Narrative Fields

Narrative Field	Description	Follow Up Actions
Clinical Impressions	<ul style="list-style-type: none"> Contains the assessor's initial impression of the child based on the information gathered; Summarizes the information that guided the assessor's scoring as well as other information gathered but not captured in the CANS Assessment; and Includes any information which the assessor felt was important for the caseworker to know. 	<p>If a need for further testing or assessments is identified, based on the CANS recommendations or other information, the caseworker must:</p> <ul style="list-style-type: none"> Include those follow-up needs in the CPOS; and Coordinate services with the caregiver and STAR Health.
Priorities for Planning	<ul style="list-style-type: none"> Contains additional comments from the clinician; and May include assistance in understanding the items of priority or other significant impressions of the child from the assessment. 	<p>The caseworker must consider these clinical comments when developing a comprehensive CPOS.</p>
Service Recommendations	<ul style="list-style-type: none"> Contains the recommendations generated, based on the scores the clinician chose for each needs and strengths item; and Includes general service recommendations not specific to a provider or region. 	<ul style="list-style-type: none"> The Treatment Team should consider: <ul style="list-style-type: none"> ▶ The most appropriate type of healthcare service or provider to meet that child's needs; and ▶ Whether it is accessible in that child's community. For support in making that determination, the caseworker may contact STAR Health at 1-866-912-6283.

Comprehensive CANS information, resources, and FAQ are available on the [CANS Safety Net page](#) or email questions to the [CANS mailbox](#).

The Health Passport

When the assessment is complete, a daily file transmits the CANS Assessment information to the Health Passport. The CANS results report is accessible in Health Passport. If the CANS report is not visible in Health Passport in a timely manner after a completed CANS Assessment, contact the [CANS mailbox](#) for assistance in obtaining the report.

The [Health Passport](#) is an electronic health record that contains a history of healthcare information for each child in STAR Health, including medical visits, prescriptions, labs, immunizations, and assessments including the CANS and FSNA. Caseworkers must have an active Health Passport account to view or print the completed CANS results. The Health Passport account will require reactivation if not used within a 90-day period.

For assistance in activating a Health Passport account, please see the [Medical Services Resource Guide](#).

Information Sharing

The CANS is a communication tool used to gather information to assist in making decisions about the best course of action to address a youth's needs and achieve a family's goals. Caseworkers may share the CANS assessment with the child's care team members as needed and upon request (i.e., CASA, health/mental health providers, placements, legal representatives, etc.). Legal parties have the same access to CANS information as they do with any other assessment.

Recommendations from the CANS should be included in the child's court report which will be filed.

4. The Texas Health Steps Medical Checkup

What is It?

Known in federal law as the Early and Periodic Screening, Diagnosis, and Treatment program, Texas Health Steps is the child health component of Medicaid, providing periodic preventive healthcare services for children birth through age 20 who are enrolled in Medicaid.

A Texas Health Steps Medical Checkup is an age appropriate, complete physical for the child and includes the following services listed in Figure 7.

Figure 7. Components of the Texas Health Steps Medical Checkup

Texas Health Steps Medical Checkups Include:

- Comprehensive health and developmental history;
- Comprehensive unclothed physical exam;
- Appropriate immunizations (according to the Advisory Committee on Immunization Practices);
- Laboratory tests (including lead toxicity screening); and
- Health Education (anticipatory guidance including child development, healthy lifestyles, and accident and disease prevention).

During the Texas Health Steps Medical Checkup, the doctor will look at a child from head to toe to see if the child is growing and developing like other children their age and to find and treat medical problems early. Texas Health Steps providers may indicate an initial or annual Texas Health Steps Medical Checkup was provided by referring to the checkup as a well-child exam, a routine child health exam, or preventive care exam on medical documentation.

What is Not a Texas Health Steps Medical Checkup

A sick child exam or follow-up appointment are not the same as getting a Texas Health Steps Medical Checkup. A Texas Health Steps Medical Checkup counts as a physical, but a physical does not necessarily count as a Texas Health Steps Medical Checkup.

Initial Texas Health Steps Medical Checkup

All children must receive a [Texas Health Steps Medical Checkup](#) within 30 days of entering DFPS conservatorship and thereafter on the [Texas Health Steps Medical Checkups Periodicity Schedule](#). See [Medical Checkups](#) below.

If a child recently had a physical exam or medical checkup before coming into DFPS conservatorship, a Texas Health Steps Medical Checkup is still required within the first 30 days.

If a provider says the child does not need a medical checkup because the child is not due for a checkup, the caseworker must contact [STAR Health Member Services at 1-866-912-6283](#) for assistance in scheduling the appointment. STAR Health is required to make an appointment available for children in foster care within two weeks of a request.

Periodicity Schedule Exception

Even if a child is not due for a checkup according to the periodicity schedule, the initial Texas Health Steps Medical Checkup is still required within the first 30 days after removal. The checkup is covered by Medicaid and reimbursable for medical providers as an [Exception to Periodicity](#).

The Texas Medicaid Provider Procedures Manual explains that a Texas Health Steps Medical Checkup will be a covered benefit for children entering DFPS conservatorship, even if they recently had a visit with their medical provider.

Subsequent Texas Health Steps Medical Checkups

STAR Health must help ensure a child receives the following timely medical checkups by a credentialed STAR Health medical provider, as listed in Figure 8.



Note

A new Texas Health Steps Medical Checkup is not required each time a child changes placement.

Figure 8. Texas Health Steps Timely Medical Checkups

Texas Health Steps Timely Medical Checkup Requirements	
<ul style="list-style-type: none">• An Initial Texas Health Steps Medical Checkup within 30 days of entering DFPS conservatorship (see CPS Policy 11212); and• Medical checkups annually as outlined in the Texas Health Steps Periodicity Schedule, unless required more frequently by the child's medical provider.	

For youth age 3 to 20, Texas Health Steps Medical Checkups must be scheduled one year after the previous checkup and no later than the child's next birthday for children three years and older.

Children who are younger than 36 months of age receive medical checkups more frequently, as outlined in the Texas Health Steps Periodicity Schedule. The Texas Health Steps checkups timeline for children under age 3 is listed in Figure 9.

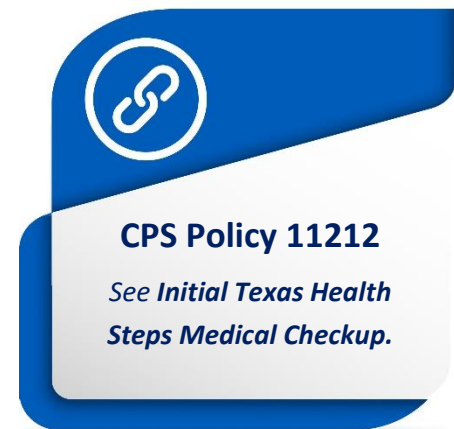


Figure 9. Texas Health Steps Checkup Timeline for Children Younger Than Three Years Old

Texas Health Steps Checkup Frequency for Children Under Age 3	
<ul style="list-style-type: none">• Three to five days;• Two months;• Four months;• Six months;	<ul style="list-style-type: none">• 12 months;• 15 months;• 18 months; and• 30 months.

Medical Providers

Texas Health Steps Medical Checkups must be completed by a STAR Health Texas Health Steps provider.

If a child comes into care with a primary care provider, caseworkers must confirm this provider is:

- Able to complete the Texas Health Steps Medical Checkups; and
- A credentialed STAR Health medical provider.

If **not**, the child will need to see a different provider for their Texas Health Steps Medical Checkups. Caseworkers should contact **STAR Health Member Services at 1-866-912-6283** with any questions related identification of or willingness for a primary care provider's ability to do the Texas Health Steps Medical Checkup within network.

If a child sees a doctor who is not enrolled in Medicaid as an in-network STAR Health medical provider, the doctor will not pay be paid for the Texas Health Steps Medical Checkup.

What to Take to a Medical Visit

When accompanying a child on a visit for a medical checkup, the caseworker takes the following listed in Figure 10 to the appointment.

Figure 10. Child's Documents and Records Needed for Medical Checkups

Required Documents and Records Needed for Medical Checkups

- Medicaid ID Number;
- STAR Health ID card, if appropriate;
- Form 2085-B Designation of Medical Consenter (if the child is new to care);
- Pertinent medical records; and
- Immunization record.

5.3 in 30 and Service Planning

The Child's Plan of Service

The tools included in “3 in 30” provide CPS with a thorough understanding of what a child needs and how to best help them – as soon as they come into care.

Timely and comprehensive information is the key to quality, trauma-informed service planning that represents a child as an individual. Combined together, the 3-Day Medical Exam, CANS Assessment, and the Texas Health Steps Medical Checkup provide the CPS caseworker with a solid foundation for service planning related to the child's developmental, physical, and behavioral health. This information should be available prior to the due date for the initial CPOS.



Note

Better service planning earlier in the case results in increased placement stability, more appropriate services for the child and family, and more timely exits to positive permanency.

3 in 30 Information

Information gathered through “3 in 30” tools are critical to providing care and services.

- The **3-Day Medical Exam** screens for urgent medical and mental health problems that may not be readily apparent upon entering foster care.
- The **CANS Assessment** identifies behavioral health and trauma-related needs of a child. When a caregiver has and understands the comprehensive assessment, they can approach the child's care in a more informed manner that could lead to less placement disruptions.
- The **Texas Health Steps Medical Checkup** aids in ensuring the child is developing as they should.



Action

When developing a service plan, ensure any ongoing needs identified in the 3-Day Medical Exam and the Texas Health Steps Medical Checkup are met. Read the CANS and reflect the child's identified strengths and needs within the CPOS.

Figure 11 describes the needs identified from the “3 in 30” assessment tools.

Figure 11. Identified Needs from the 3 in 30 Assessments

The 3-Day Medical Exam May Identify:

- Daily prescription needs;
- Daily insulin;
- Specialized feeding supplies; and
- Acute issues such as an infection requiring antibiotics.

The CANS Will Help Identify:

- Traumatic stress symptoms affecting behavior;
- Sleep issues;
- Self-harm behaviors and history;
- Risk behaviors such as runaway history;
- Comprehensive trauma history;
- Existing family and community supports;
- The youth’s interests and talents; and
- Strengths of the youth and caregivers that support plans to address concerns.

Components of the Texas Health Steps Medical Checkup

Appointments Include:

- Comprehensive health and developmental history;
- Comprehensive unclothed physical exam;
- Updated immunizations (according to the Advisory Committee on Immunization Practices);
- Laboratory tests (including lead toxicity screening); and
- Health education (anticipatory guidance including child development, healthy lifestyles, and accident and disease prevention).

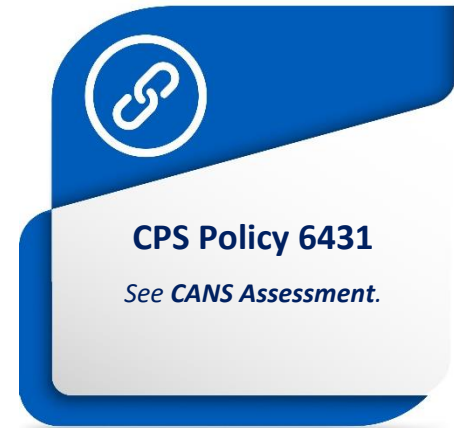
For additional support in developing the CPOS, email the [3 in 30 Mailbox](#).

6. Special Circumstances

Placement Changes in the First 30 Days

If a child returns home before a scheduled CANS Assessment or Texas Health Steps Medical Checkup is completed and DFPS is dismissed from the case, the caseworker should contact the provider(s) or contact **STAR Health Member Services at 1-866-912-6283** to cancel the appointment.

See [CPS Policy 6431](#) for more information.



When a Child is Excluded from STAR Health

With a few exceptions, most children and youth in foster care receive their healthcare services, including 3 in 30 assessments, through the Medicaid STAR Health Program. The following categories of children in DFPS conservatorship not eligible for STAR Health are listed in Figure 12.

Figure 12. Children in DFPS Conservatorship Not Eligible for STAR Health

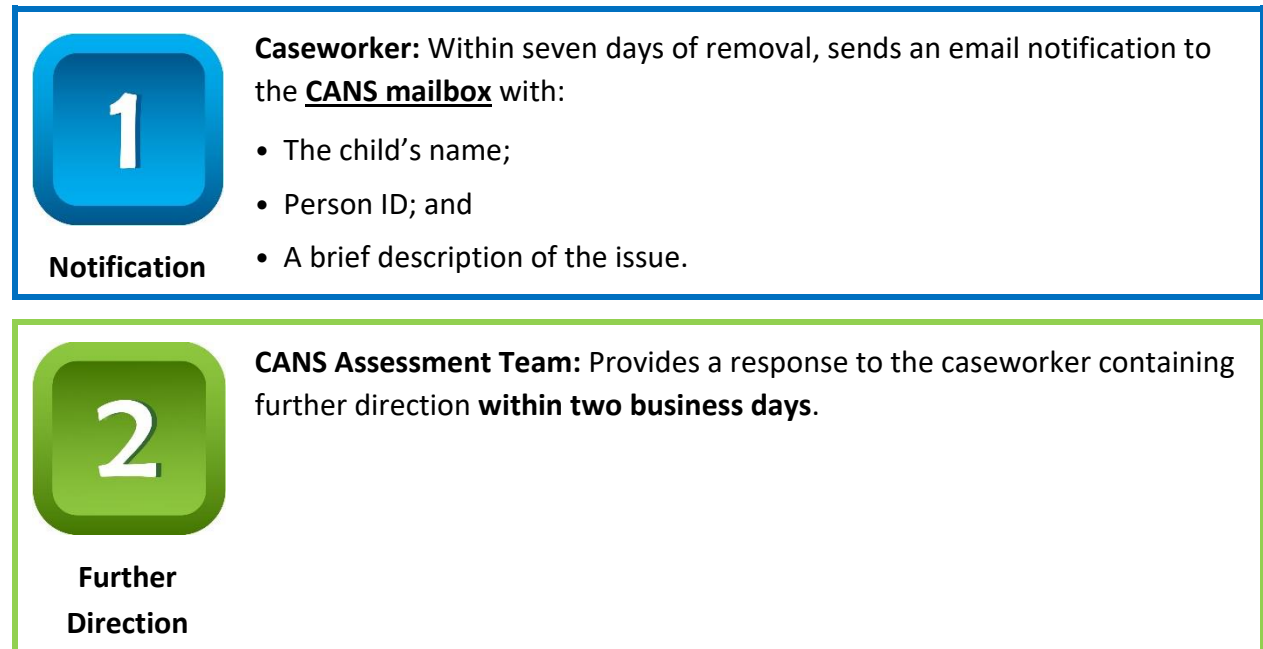
These Categories of Children are Not Eligible for STAR Health:

- **Youth adjudicated to the Texas Juvenile Justice Department (TJJD):** They receive healthcare through the TJJD system;
- **Children in Medicaid paid facilities such as nursing homes or State Supported Living Centers:** They receive Medicaid coverage through Traditional (fee-for-service) Medicaid;
- **A child placed out of state:** They transition to that state's Medicaid or receive services from a medical provider who accepts Texas Medicaid.
- **Children placed in Texas from another state under the Interstate Compact for the Placement of Children agreement;**
- **Children declared manifestly dangerous and committed to an institution by a court order;**
- **Children or youth who receive adoption assistance or permanency care assistance:** They receive Medicaid coverage through the STAR Program.

STAR Health Excluded Children Needing a CANS Assessment

If a child or youth in DFPS conservatorship is excluded from STAR Health and needs a CANS Assessment, follow these steps detailed in Figure 13.

Figure 13. Steps to Request a CANS Assessment for Children Excluded from STAR Health



For additional support regarding special circumstances, email the [3 in 30 Mailbox](#).

7. Frequently Asked Questions

1. Does a newborn removed at birth need the 3-Day Medical Exam in addition to exams received at birth?

Staff the circumstances with the supervisor and, if needed, with the CPS regional Medical Services staff ([well-being specialist](#) or [nurse consultant](#)). An additional exam **may not be needed** if the newborn's birth was facilitated by a licensed medical provider.

2. Can a specialized medical resource substitute for the 3-Day Medical Exam?

No. For example, the following **cannot** substitute for the 3-Day Medical Exam:

- A pre-removal doctor exam due to a child's recent illness;
- SANE;
- A FACN consultation based on medical records; and
- Telemedicine.

3. I have a child who meets criteria for the 3-Day Medical Exam, but the exam is not required because the child is currently hospitalized, so other paperwork will suffice. What can I expect when I request a copy of the discharge paperwork if a child is in a hospital setting?

A discharge summary is available from all inpatient stays (hospitalizations). Emergency centers generate a discharge note. Discharge summaries may be lengthy and will not be complete until the child leaves. Hospitals may provide discharge instructions or an abbreviated summary or expedite completion upon request.

Psychiatric hospitals require a history and physical examination (basic examination) be completed which may or may not include diagnostic blood testing and imaging. This information serves as a baseline assessment to initiate medication therapy and monitor physiological changes. The psychiatrist will generate a discharge summary (the summary of care and treatment). Discharge orders for post hospitalization care are also provided.

4. **Who can actually do the 3-Day Medical Exam?**

A credentialed STAR Health medical provider who is one of the following:

- Physician or physician group (MD or DO);
- Physician assistant;
- Clinical nurse specialist;
- Nurse practitioner;
- Certified nurse-midwife;
- Federally Qualified Health Center;
- Rural Health Clinic; and
- Health-care provider or facility (community-based hospital and clinic) with physician supervision.

5. **How can I determine if there is a current primary care provider who can complete the 3-Day Medical Exam and ongoing care?**

If the child is **not placed** near the removal location, it is unlikely their primary care doctor can provide the 3-Day Medical Exam.

If the child is **placed** near the removal location, the caseworker can ask:

- **Is the child on Medicaid?** If yes, then the caseworker may ask the parent for the primary care doctor's name or check for the name on the youth's most recent Medicaid card.
- **Does the child have a regular doctor?** If so, contact **STAR Health Member Services at 1-866-912-6283** (request a nurse outside of business hours) to determine if that doctor is a STAR Health provider and is able to do a 3-Day Medical Exam.

6. **How do I address Medicaid eligibility issues (the child does not have a Medicaid card and the pharmacy or medical provider wants a Medical ID number or similar issue)?**

The fully signed and authorized [**Medical Consent Form 2085-B**](#) provides proof the child is covered by Medicaid due to the removal and must be accepted by STAR Health contractors (medical providers, pharmacists, etc.).

If any issues arise, contact **STAR Health Member Services at 1-866-912-6283**. For issues unresolved by STAR Health, contact the [**CPS regional well-being specialist**](#).

7. What if the caseworker or caregiver cannot find a medical provider who can see the child within three business days from removal?

Contact [STAR Health Member Services at 1-866-912-6283](tel:1-866-912-6283) or contact the [CPS regional well-being specialist](#) for assistance.

8. What if the youth is older and refuses to cooperate with some or all of the exam?

The medical provider must do the best he/she can and document the youth's refusal. The caseworker should obtain copies of this documentation.

9. What if a bill is received for the exam?

Immediately contact the medical provider to ensure they have the child's correct information, including Medicaid number. [STAR Health Member Services at 1-866-912-6283](tel:1-866-912-6283) (request a nurse outside of business hours). Follow-up with the CPS regional well-being specialist, as needed.

10. How do I document the child had a scheduled appointment, but did not attend?

Information about missed appointments may be documented within the contact narrative. They should not be documented on the Medical/Mental Health tab (described in Step 6 of [Appendix B. Documenting the 3-Day Medical Exam Tip Sheet](#)) unless the appointment has taken place, since data entry in that location is used for monitoring completion of the 3-Day Medical Exam.

11. I cannot use the removal affidavit. What information should I provide in the summary for the medical provider?

Medical providers need to know information about the child's removal circumstances and trauma history. Helpful information is listed in Figure 14.

Figure 14. Helpful Information About the Child for Medical Providers Performing the 3-Day Medical Exam

Medical Providers Need to Know:

- **Medical history or information**, including known or suspected diagnoses and medications;
- **Trauma history or allegation information**, such as:
 - ▶ Physical abuse (location);
 - ▶ Sexual abuse, exposure, or exploitation;
 - ▶ Sexual abuse with trafficking (consider seeking child abuse specialist) ;
 - ▶ In utero drug exposure;
 - ▶ Neglectful supervision or abandonment;
 - ▶ Medical neglect or other untreated medical condition;
 - ▶ Failure to thrive; and
 - ▶ Exposure to drugs or paraphernalia; and
- **Caregiver and family information**, such as:
 - ▶ Caregivers actively impaired;
 - ▶ Violence between caregivers;
 - ▶ Lack of food or nourishment;
 - ▶ Other hazardous environments (types);
 - ▶ Other traumatic event or environment;
 - ▶ Sibling abuse or death; and
 - ▶ Parent arrest.

For questions or assistance, email the [3 in 30 Mailbox](#) or contact the [CPS regional well-being specialists](#) or [CPS regional nurse consultants](#).

8. How Do I?

Contact a CPS Well-Being Specialist or Regional Nurse Consultant?

For questions or assistance, contact:

- [CPS regional well-being specialists](#); or
- [CPS regional nurse consultants](#).

Contact STAR Health?

- [STAR Health webpage](#)
- Call **STAR Health Member Services** at **1-866-912-6283** during normal business hours, and request assistance locating a provider and/or scheduling an appointment.

The STAR Health Member Services also offers a 24/7 nurses line. Nurses can help locate providers, but cannot schedule appointments. When calling STAR Health, it is helpful to specify whether you are calling to speak to **Member Services** or the **Nurse Line**.



Find the Completed CANS Report?

The final CANS Summary Report is located in the child's [Health Passport](#) Record under the Assessment tab. If a completed CANS is not viewable in Health Passport, contact the [CANS mailbox](#) for assistance.

Become CANS Certified or Trained?

Every conservatorship supervisor and caseworker must complete the online [CANS Training](#). If you have not received a coupon code with instructions on how to complete the training, please the [CANS mailbox](#).

9. Resources

Helpful resources are listed in Table 2.

Table 2. Resources for Completing the 3 in 30

Resource	Link
3 in 30 Mailbox	DFPSStarHealth3In30@dfps.texas.gov
CANS Mailbox	CANS@dfps.texas.gov
CANS SafetyNet page	https://intranet.dfps.texas.gov/cps/well-being/medical_services/cans.asp
CANS webpage	https://www.dfps.texas.gov/Child_Protection/Medical_Services/CANS_Assessment.asp
CPS Medical Services webpage	https://www.dfps.texas.gov/Child_Protection/Medical_Services/
CPS Medical Services Safety Net page	https://intranet.dfps.texas.gov/CPS/Well-Being/Medical_Services/default.asp
Health Passport login	https://provider.superiorhealthplan.com/

List of Acronyms

Acronym	Full Name
ADHD	Attention-Deficit/Hyperactivity Disorder
CANS	Child and Adolescent Needs and Strengths
CPOS	Child Plan of Service
CPS	Child Protective Services
DFPS	Department of Family and Protective Services
DO	Doctor of Osteopathic Medicine
FACN	Forensic Assessment Center Network
FAQ	Frequently Asked Questions
FBSS	Family Based Safety Services
MD	Doctor of Medicine
PHAB	Physical Abuse
PTSD	Post-Traumatic Stress Disorder
SANE	Sexual Assault Nurse Examiner
SSCC	Single Source Continuum Contractor
SXAB	Sexual Abuse
T3C	Texas Child-Centered Care
TJJD	Texas Juvenile Justice Department

Appendix A.

Documenting the 3-Day Medical Exam Tip Sheet

If a child meets the 3-Day Medical Exam criteria, the caseworker documents the information in IMPACT by following the steps in Figure 15.

Figure 15. Steps to Document the 3-Day Medical Exam in IMPACT



Navigate

- Navigate to the **Medical** tab in the child's **SUB Stage** on the **Case Summary** page.
- Click on the **Medical/Mental Assessment** tab.



Select

Select the **Add** button. The dropdown field will display reasons. Select **3-Day Medical Exam**.

Visit information

* Reason:

‡ Date Occurred: 3-day Medical Exam

‡ Scheduled Date: CANS

‡ Purpose: Texas Health Steps
Court Ordered Drug Research Study

‡ Findings: Dental
Determination of Intellectual Disability (DID)
Injury
Physical/Sexual Abuse Assessment
Primary Care Physician (PCP) Visit other than Texas Health Steps

▶ Address/Phone: Psychological Evaluation
Psychotropic Medication Appointment
Substance Use Assessment

▶ Address/Phone Detail Other



Document

Enter the date the 3-Day Medical Exam occurred. List any findings in the **Findings** box.

Professional Information

‡ Name:

‡ Other:

Visit information

* Reason:

‡ Date Occurred:

‡ Scheduled Date: ☐ Results Pending

‡ Purpose:

‡ Findings:



Save

Save your work.