

Family Impact Network CIHS
Practice Guide

The CIHS practice guide is intended as a resource and supplement to your CIHS contract with Family Impact Network. This is only meant as a guide, please ensure you are reviewing your current CIHS contract as well.

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Capacity Reporting:

The Agiloft Capacity Tool contains information on each agency's capacity that will determine availability and inform FIN and DCYF of network capacity. FIN uses the tool to determine referral assignment. Providers update capacity in Agiloft for each individual practitioner by max caseload, service type and county. Using this tool is a requirement for reporting to FIN and must be updated in real time.

Providers will need to update capacity when there are changes to max caseload, services provided, or counties served. Providers can contact Jamie Chestnutt (jamie@familyimpactnetwork.org) or Gustavo Serrano (gustavo@familyimpactnetwork.org) for technical assistance.

Referral Acceptance Process:

Accepting referrals: Providers must communicate to FIN the assigned practitioner when accepting the referral.

Assigning referrals within your agency: Combined In-Home service referrals need to be assigned to practitioner within 75 miles of the referred family home or meeting place.

Mileage exceptions: Exceptions to the mileage over 75 miles one-way rule can be requested based on practitioner suitability of the referred family's needs. Exceptions must be requested through FIN only and approved by DCYF before accepting the referral and beginning any services. Per DCYF, blanket mileage approvals will not be granted.

Service confirmation: The intent of the service confirmation with the referring social worker is to learn broader family needs, risk factors, service limitations, and comprehensive understanding of family service needs identified by DCYF social worker and the supervisor.

This requires direct communication with the assigned social worker, a voicemail or an email to a social worker are not a successful service confirmation.

The Service Confirmation must be completed within three business days of referral acceptance. If the Social Worker is not responding to the provider's attempts at completing the Service Confirmation, after 2 business days, provider will need to reach out to the Social Worker, Supervisor and FIN Resource Team prior to closing the referral.

Family Engagement:

If a provider has had no successful contact with a family after daily contact attempts for seven days, the provider will resolve the referral and notify FIN and the social worker with the reason for resolving. Social workers are expected to address engagement barriers prior to submitting a new referral to FIN.

If the provider is unable to make contact with a family for 14 days, at any point after services have begun, the provider will resolve the referral and inform the social worker and FIN.

Service Delivery:

FPS parenting strategies: Parenting strategies are a primary component of FPS, and the provider is expected to use all the skills they have in supporting the family. For example, a provider can work on bonding and attachment without following the PFR curriculum. While providers are not expected to incorporate the EBP into FPS, behavior coaching across parenting strategies is a reasonable expectation. Parenting strategies are focused on helping and teaching parents and caregivers to learn and use the skills they specifically need to safely parent their children.

Concurrent services: Family members in the same household cannot receive concurrent services unless. Exceptions required for individual family circumstances can be sent to the FIN Resource Team at referrals@familyimpactnetwork.org and FIN will request approval from the Regional Lead.

Service Extensions:

FPS: As of 10/1/24 – An extended duration of FPS is allowable up to 6 months. Child Welfare Policy 4052 allows FPS to be delivered up to 6 months in duration, when needed.

If it is identified that an extension of FPS is needed, the provider must attend the Transitional Planning Meeting with the DCYF Social Service Specialist.

The Transitional Plan Meeting Form ([DCYF 15-315](#)) must be completed by the provider and reviewed, signed off by the caseworker. The form must be submitted with your 5th month billing.

After the form and meeting are completed, a new referral is not required. The extension will allow the provider to bill up to 6 months or until the \$4,395.00 FPS allowance has been exhausted.

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EBPs: EBP referrals expire when all sessions have been billed. If the provider will be billing **the last step in the fifth month**, the provider sends email to FIN Program Manager, Referrals@familyimpactnetwork.org with the following information:

- a. Family Name and Case ID
- b. Number of billable steps left
- c. Relevant information around goals and reasons for the extension request

After this information is received, FIN will review the information received and request approval from the Regional Lead.

Reports:

Monthly reports: Practitioners should utilize as many fields of the monthly report as are appropriate to that month of service; the overall emphasis, including “Today’s Focus,” should be the parent’s engagement with the service and/or curriculum and progress toward service goals.

Reports should document who is present during service: this may include demonstrating how model fidelity is achieved. For example, ensuring children are present at the session if it’s tied to the fidelity of the service.

Weekly Case Updates: Weekly case updates for all In-Home and Classroom services shall occur weekly between the assigned DCYF Social Service Specialist and the Service Provider providing the service. These updates can occur in person, by phone, or by secure e-mail.

The Service Provider is responsible for providing the update to the assigned worker. Case updates shall include but are not limited to:

- (1) Gains the family made towards service goals; and
- (2) Any barriers prohibiting progress towards goals.

FAST: The FAST assessment is comprised of necessary inclusions such as sections for the family’s strengths, cultural support, and cognitive/developmental functioning. FAST focuses on building upon the family’s strengths rather than solely focusing on needs, which creates a more comprehensive and holistic assessment of what the family is experiencing. The FAST includes a section for providers and supervisors to document the family’s cultural

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support and how it relates to their strengths. Also included in the FAST is a section to rate parent's cognitive functioning and a child's developmental stages.

Contractors must ensure all current practitioners are certified and using FAST Assessment by August 1st, 2026. Providers will be required to begin utilizing the FAST assessment upon certification.

Once providers have completed the full day FAST training, an annual booster training and certification will be required.

FAST Training Payment: Each staff member currently trained in CANS-F as of January 1st, 2026, who completes the FAST training by June 30th, 2026, will be compensated for a total of five hours at the following rate. Certificates must be submitted FIN Billing at Billing@familyimpactnetwork.org by July 15th, 2026, to ensure compensation.

FPS Practitioners/Supervisors at an hourly rate of \$91.58; or
EBP Practitioners/Supervisors at an hourly rate of \$76.32.

Providers will be compensated for the full day FAST Certification training. Providers will need to submit completed certificates to FIN Billing at billing@familyimpactnetwork.org by July 15th, 2026, for reimbursement.

Billing for Services:

All Combined In-Home Service billing documents need to be submitted to billing@familyimpactnetwork.org within 60 days of services. Billings submitted after 60 days of services may require additional approval, which could cause a delay in processing.

Case Related Activities for FPS services: Case Related Activities should account for 40% or less of billable time over the life of the case. FIN will notify provider if the CRA is higher than 40% in the first few months of the services. Case related activities are those that will impact the family but do not actually require the family's direct involvement.

HOVI:

Process to contact HOVI Support: If your agency utilizes HOVI and needs customer support, please send an email to Cooper Brown at cooperbrown9e@gmail.com and Matt Brown at matt.brown@hovihealth.com.

Out of State Services:

FPS/FFT/PCIT: In order to provide services outside of Washington State, the contractor needs to obtain proper DOH prior to providing services.

EBP's: Out of state services can be provided. FIN's contractors are allowed to provide services in the following counties:

- Idaho:
 - Boundary County ○ Bonner County
 - Kootenai County ○ Benewah County
 - Latah County ○ Nez Perce County
- Oregon:
 - Wallowa County ○ Wasco County
 - Sherman County ○ Gilliam County
 - Morrow County ○ Umatilla County

Telehealth Services:

Telehealth services can be requested for the following reasons:

- Reasonable accommodation for client(s) with a disability.
- Clients are unable to participate in in-person visits, and the DCYF Social Service Specialist, Contractor/Provider and client all agree to using telehealth.
- The closest available service provider is more than 75 miles away from where the family resides.
- There is no provider in close proximity who speaks the family's language, but one exists elsewhere that is available virtually.

How Caseworkers will refer for CIHS via telehealth:

- Before a CIHS is offered via telehealth, the Social Service Specialist, Contractor/Provider, and client all need to agree to using telehealth.
- The Social Service Specialist will discuss utilizing telehealth with FIN prior to submitting a referral where telehealth is indicated.
- They will specify the request for full or partial telehealth in the Service Goals section of the Service Referral.
- FIN will reach out to you with the referral information and let you know the family needs telehealth services.

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Telehealth Training Requirements

- Prior to providing telehealth services, one of the below trainings must be taken and documentation of completed training submitted to the FIN Compliance Team.
- The Medical Healthcare Professional Telemedicine Training hosted by the Northwest Regional Telehealth Resource Center's Canvas training platform. Access the training [here](#); or
- The Telehealth Collaborative and UW's Behavioral Health Institute collaborated to create the TeleBehavioral Health 101 Training. Access the online self-guided TeleBehavioral Health 101 training [here](#).

Telehealth Pivots: The contractor/provider is allowed to pivot to a telehealth format for any of the following reasons without pre-approval from the DCYF Social Service Specialist:

- Isolation period required by the family's exposure or infection to COVID-19, Influenzas, RSV or other respiratory virus.
- Other circumstances that would impede access to a family's residence.
- Severe inclement weather that impedes access to a family's residence by snow, flooding, rockslides, or road closures.

Complaints

Family Impact Network (FIN) maintains a complaint resolution system to ensure concerns related to FIN-contracted services are addressed in a fair, timely, and transparent manner, in accordance with FIN's Network Administrator contract with the Washington State Department of Children, Youth, and Families (DCYF). FIN accepts complaints from any source, including DCYF staff, clients, caregivers, providers, and community partners. All complaints are logged and maintained as part of FIN's official records.

When a complaint involves a contracted provider, FIN will notify the provider's designated point of contact and explain the complaint resolution process and expectations. FIN will work directly with the provider to gather information on behalf of the provider's agency, if needed. In alignment with contract clause Terms and Conditions, Section 26 (Complaints), providers are responsible for coordinating the collection of information from their staff, subcontractors, and internal records and submitting requested materials within the specified timeframe. If any requested information cannot be obtained despite reasonable efforts, the provider must submit a signed statement documenting those efforts and identifying the missing information to ensure transparency and allow the review to proceed.

Providers will be notified of complaints within two (2) business days of receipt, or within twenty-four (24) hours if there is a potential risk to child safety. Complaints are generally resolved within thirty (30) calendar days unless an approved extension is granted.

Investigations are conducted impartially and may result in findings of valid, invalid, or invalid due to lack of evidence, with outcomes documented and reported to DCYF. FIN may require

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corrective actions, quality improvement plans, or, when warranted, suspend or revoke an individual's clearance to provide services.

In alignment with contract clauses Terms and Conditions, Section 19 (Investigations of Contractor or Related Personnel) and Section 20 (Removal of Individuals from Performing Services), FIN may suspend or revoke an individual's approval to provide services in the network if the individual does not meet qualifications or does not perform services in alignment with contractual requirements. This includes, but is not limited to, training, licensure, child safety standards, professional ethics, or financial stewardship. Revoking approval may be considered if the individual has a pattern of complaints or other contract requirement violations. Providers will be notified of any suspension or revocation decisions and are responsible for ensuring the affected individual does not provide services during the period of suspension or following revocation.

Individuals whose clearance has been revoked cannot provide direct client services under this contract, but could hold other non-client-facing or administrative roles, as appropriate and determined by the provider. Providers are responsible for ensuring that any individual whose clearance is suspended or revoked does not provide services during the applicable period.

FIN documents all outcomes, reports required information to DCYF, and strictly prohibits retaliation against individuals who raise concerns in good faith.