

APPENDIX L

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F. RANDOM MOMENT SAMPLING PLAN

(to be used with Bulletins 3140-06-03, 3140-12-02 & 3140-12-01)

An estimate is desired of the proportion of time in a certain period (e.g., three months) that a class of workers is engaged in some defined activity. A Random Moment Time Study (RMTS) is an effective and efficient way of accomplishing this.

The random moment sampling procedure consists of selecting at random a series of "n" times (or moments) within the specified time frame, and at each of these moments observing the activity of a randomly selected worker. The number of times "r" that the workers are observed to be engaged in the defined activity of interest is counted, and that count divided by "n" is taken as an estimate of the proportion of time that the sampled class of workers were engaged in the defined activity during the specified period.

Properly conducted, the RMTS procedure will measure unbiasedly the proportion of time spent in activities of long or short duration, and which occur frequently, irregularly, or rarely in the period. The accuracy of the resulting proportion estimate, $p = r/n$, can be determined in advance by statistical theorems associated with the well-known binomial distribution.

In particular, suppose it is desired that the error in the proportion estimate be less than a given value, say d , with at least 95 percent confidence. Then, letting P represent the true population proportion, the accuracy requirement may be written:

$$\text{Probability } \{ | p - P | < d \} > .95$$

Under the binomial model the expected value of p is P , and the variance of the estimator p is $P(1-P)/n$. The values of n that we will be considering will be large enough so that the normal approximation to the binomial distribution will be completely satisfactory. The formula from the November 1981 OPAL Guidelines to be used to determine the sample size is as follows:

$$n = \frac{P(1-P)}{\left[\frac{SE}{Z} \right]^2}$$

Where: n = sample size
(This is to be increased by the over-sample factor of at least 10%)

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P = maximum anticipated rate of occurrence of the activities being observed

SE = desired sample precision

Z = confidence level factor (1.96 for 95%)

We have 95 percent confidence that the error in the proportion estimate is less than .02 and it can be shown that the largest n is required when p is .5, in which case $n \Rightarrow 2,400$.

The sampling method adopted here will utilize a simple random sample, with replacement, representing the complete universe of all eligible workers and all possible sample moments in the core working hours defined in the sample plan. As such, all possible combinations of workers and sample moments have an equal likelihood of being selected. Once selected, each worker and sample moment is "replaced," permitting the worker moment an equal chance of being re-drawn.

Design features

There are several considerations that go into the design of a random moment time study:

- o The time period sampled must be representative of the period to which we wish to infer, spanning the entire period. E.g., sampling must be continuous during the quarter and sample results for a quarter must be applied to financial data for the same period.
- o The daily time frame for sampling should be broad enough to cover the great majority of staff work hours, even if this

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means over-sampling because staff will not be on duty for many sample moments.

- o Sample moments are balanced or random within the time frame.
- o Staff members should be sampled in random order.
- o The sample size must be inflated to allow for off duty or non-work activity, but every effort should be made to keep the number of erroneously missed observations to a minimum.
- o 2000 valid observations are required.
- o A new RMTS observation form, instructions and bulletin(3140-12-02 are being implemented beginning with the July 1,2011-September 30, 2011 quarter for County Children and Youth Agencies (CCYA) with a maximum sample size of 4000 (a 100% over-sample). In subsequent quarters the sample size might be reduced, but would not drop below 3000.
- o RMTS observation form, instructions and bulletin (3140-06-03) were implemented beginning with the July 1,2006-September 30, 2006 quarter for Juvenile Probation Officer (JPO) with a maximum sample size of 3500 (a 75% over-sample). In subsequent quarters the sample size might be reduced, but would not drop below 2700.

Sampling Mechanisms

The random sample is selected by a random number generator within the time study application. The sample is based upon work schedule. That is, if 50% of staff work 9AM to 5PM, approximately 50% of the observations will take place between 9AM and 5PM.

The Sample Size

The total sample size should be large enough to result in a at least 2000 valid observations after allowing for loss due to moments falling on off-duty hours for the sampled worker and other missing observations. There are two RMTS applications being conducted.

The first random sample calls for a minimum sample of 2400 and a maximum sample of 4000 for CCYA. These standards allow for sample attrition between 17 percent (assuming the minimum sample

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of 2400) and 50 percent (assuming the maximum sample of 4000). These calculations are based on assuming 2000 valid observations: $2400-2000=400$; $400/2400=16.6\%$ or $4000-2000=2000$ $2000/4000=50.0\%$

Similarly, the second random sample calls for a minimum sample of 2400 and a maximum sample of 3500 for JPO. These standards allow for sample attrition between 17 percent (assuming the minimum sample of 2400) and 43 percent (assuming a maximum sample of 3500) for JPO. These calculations are based upon assuming 2000 valid observations: $2400-2000=400$; $400/2400=16.6\%$ OR $3500-2000=1500$; $1500/3500= 42.8\%$

Time Frame

Both the CCYA and JPO time study applications will be ongoing and will include all regular work days of the year, excluding scheduled holidays. The daily time frame will be 7AM to 12 Midnight for the CCYA RMTS and 7AM to 8PM for the JPO RMTS.

Staff roster

Employee (county and contracted) staff rosters for each CCYA and JPO RMTS application are updated quarterly based on the most current information. Before each quarter, additions, deletions and changes to staff rosters are identified and this information is used to separately edit the CCYA and JPO employee rosters before the random sample is generated.

Sampling Procedure

A sample period is selected (e.g., a calendar quarter), and all minutes between 7AM and midnight for the CCYA RMTS application and 7AM and 8PM for the JPO RMTS application of each workday in the period constitute the random moment sample of eligible moments. As a result, employees in each RMTS application have an equal chance of selection under the method. Eligible moments are specifically determined for each quarter after removing holidays from the sample period. Then one moment is randomly selected from this pool, and is assigned to an eligible worker who is also selected at random for participation. This pairing of sample moments and sample workers continues until the desired sample size is obtained.

For each application (CCYA and JPO) each moment pair is assigned an "observation identification number" for control purposes. The resulting moment/I.D.-number triads are forwarded to the CCYA or JPO RMTS Coordinators and Observers for timely conduct and reporting of the observations.



CHILDREN, YOUTH AND FAMILIES BULLETIN

COMMONWEALTH OF PENNSYLVANIA * DEPARTMENT OF PUBLIC WELFARE

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SUBJECT:

Random Moment Time Study
Policy and Procedures - County
Children and Youth Agencies

BY:

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Deputy Secretary for Children, Youth and Families

SCOPE:

COUNTY COMMISSIONERS AND EXECUTIVES
COUNTY CHILDREN AND YOUTH AGENCY ADMINISTRATORS
COUNTY CHILDREN AND YOUTH AGENCY FISCAL OFFICERS

PURPOSE:

The purpose of this bulletin is to transmit changes to the current Random Moment Time Study (RMTS) procedures for administrative claiming of the Title IV-E Program and Title XIX Medicaid reimbursement of Pennsylvania child welfare expenditures due to the enactment of the Fostering Connections to Success and Increasing Adoptions Act of 2008. These changes will enhance sampling procedures and definitions to comply with federal requirements and to minimize potential audit exceptions.

BACKGROUND/DISCUSSION:

The Office of Children, Youth and Families (OCYF) has issued prior bulletins and special transmittals providing counties with instructions for claiming Federal Financial Participation (FFP) for the Title IV-E Program, Title XIX Medicaid reimbursement, Title IV-A EA and additional federal Title IV-E funds. This bulletin replaces Children, Youth and Families (CYF) Bulletin #3140-06-04.

The key provisions of the Fostering Connections to Success and Increasing Adoptions Act of 2008 that have an impact on the RMTS process are: (1) the law amends the existing definition of a child care institution in section 472(c)(2) of the Social Security Act (SSA) to include a supervised setting in which an individual who has attained 18 years of age is living independently; and (2) the law adds section 471(a)(28) to the Social Security Act to provide kinship guardianship assistance payments under Title IV-E for children who meet specific requirements. This program is known and will continue to be known in Pennsylvania as Permanent Legal Custodianship (PLC).

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:

Regional Children and Youth Directors

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Previous guidance released regarding RMTS was a reflection of direction by the ACF Region III as a result of a review of the Commonwealth's administrative pre-placement claims. This information is still relevant and should continue to be implemented. One of the primary changes was the use of the federal definition of foster care in lieu of the phrase out of home placement throughout the RMTS process. The federal definition of foster care means a child that is receiving twenty-four (24) hour substitute care in a placement away from their parents or guardians and for whom the county has placement and care responsibility. This includes: foster family homes, foster homes of relatives, kinship foster homes, group homes, emergency shelters, residential facilities, child-care institutions (public facilities with less than 25 beds or private facilities with any number of beds and a supervised setting in which an individual who has attained 18 years of age is living independently), and pre-adoptive homes. Foster care does not include a child in one of the following placements: detention (or facilities that are primarily for the detention of children who are adjudicated delinquent), secure treatment facilities, psychiatric facilities, hospitals, and forestry camps.

The RMTS is a tool which allows counties to account for the activities of staff when claiming administrative costs from the federal government under various federal programs to support child welfare services. These programs require that activities performed and clients served conform to the laws and regulations which make the federal funds available. The RMTS allows counties to characterize and allocate activities carried out by its services staff without keeping minute-by-minute records of activities during the day.

The RMTS approach, when combined with subsequent statistical analysis, satisfies public accountability requirements in an extremely efficient manner. However, the adequacy of the system in drawing down federal funds which are available to finance child welfare programs **is critically dependent on the willingness and ability of each staff person to accurately characterize the work that is performed at those times when activity recording is requested.**

The definitions which describe what activities the federal government will fund do not always correspond well with the terms and concepts by which staff describes their work. Nor do the federal definitions necessarily coincide exactly with categories and definitions which the Department requires for its own accounting purposes. Consequently, it is important that staff have a clear understanding of the concepts and definitions used in the RMTS process.

Attachment A contains a description of allowable administrative activities for which federal funds may be claimed. It also contains the programs and code definitions used in the RMTS process. Attachment B contains the Random Moment Observation Sampling form to be used. Attachment C contains the RMTS Employee Roster form.

RMTS POLICY:

Each County Children and Youth Agency (CCYA) must participate in the quarterly RMTS process and use the results to prepare and submit its Title IV-E and Medicaid claims to the Department. The statutory base for this participation is 62 P.S. §704.2, which requires the state and the county to obtain other funds (federal, and private) before using state and county funds for child welfare services.

RMTS PROCEDURES:

The RMTS process described below identifies the activities CCYAs must use to implement the RMTS in their county.

Purpose

The RMTS is used to document the activities of staff performing directly related program functions benefiting one or more federal and/or state funded programs. The information collected will be used for distributing the cost of administrative activities among various programs and services. The RMTS is not a device for evaluating individual performance.

The RMTS is a tool which allows CCYAs to account for the use of staff resources when claiming funds from the federal government under Title IV-E of the SSA and other federal programs to support child welfare programs. These programs require that activities performed and clients served conform to the law which makes these funds available.

The instructions describe the general approach and procedures used in the RMTS and they characterize activity whenever activity recording is requested.

General Approach

RMTS employs a Random Moment Observer System to select and record employee time. Periodically, each child welfare staff person that carries a caseload will be approached by a designated random moment observer who will ask the worker to characterize their activity at that moment according to the RMTS program, code, and administrative activity definitions, which the observer will have in hand. A list of these programs, codes and administrative activity definitions are detailed in Attachment A. The worker will indicate the program and code for the activity which most appropriately reflects the worker's action at that moment; record the program and code on the RMTS Observation Sampling form (Attachment B); sign and return the completed form to the RMTS Coordinator. Statewide moments will be aggregated and the resulting factors will be returned to the CCYA for use in preparing the Title IV-E and Medicaid administrative claims. Procedures that CCYAs must use are described below.

Procedures

1. **Timeline** – A new RMTS will be completed for each calendar quarter. The procedures for each quarter are the same. As listed below, Table 1 shows the procedures, due dates, and responsible agency.

**Table 1
RMTS Timelines**

Procedure	Date Due/ Completed	CCYA	RMTS Administrator
RMTS roster information to counties	February 15, May 15, August 15, and November 15.		X
Roster/updates for following quarter due to RMTS Administrator	February 28, May 30, August 31, and November 30.	X	
Sample generation	2 weeks before the start of the quarter.		X
Observation forms sent to counties	1 week before the start of the quarter.		X
Observation forms due to RMTS Administrator	Counties should send observation forms weekly. Last observation forms due 7 days after the end of the reporting quarter.	X	
Data input	On-going. Final forms data entered within 2 weeks after the quarter ends.		X
Resulting factors to counties	Three weeks after the end of the quarter.		X
Invoices prepared and submitted	45 days after calendar quarter ends.	X	

2. **Organization of the CCYA RMTS** – The RMTS process at the CCYA level has several components which are described below.

- **RMTS Administrator** – Each county will receive and send Employee Roster information and Observation Sampling Forms to the RMTS Administrator. The RMTS Administrator compiles, tabulates and distributes the results of the process to the counties.
- **County RMTS Coordinator and Alternate** - Each county must designate an RMTS Coordinator to administer the RMTS. At least one alternate must be identified to complete the RMTS process in the Coordinator's absence. Each county determines how many additional alternates will be needed based on the location of the sample population, the size of the sample, available staff time, or other pertinent factors. Any changes in the contact information for a county RMTS Coordinator should be immediately provided to the RMTS Administrator (who maintains an active roster of county RMTS Coordinators).

The responsibilities of the RMTS Coordinator include, but are not limited to the following:

- Acts as the liaison for communications with the county staff and RMTS Administrator;
 - Coordinates with the RMTS observer(s) who receives, distributes, monitors, collects, and returns RMTS Observation forms. This specifically refers to the distribution and collection of randomly assigned forms and the submission of completed forms to the RMTS Administrator on a weekly basis;
 - Coordinates with the RMTS Administrator that 100 percent of the selected individuals at the moment of observation have been personally contacted to assure sampling accuracy, form completion, and quality control. The coordinator must be knowledgeable regarding programs and activities to further ensure accurate coding of the sample moments. All forms will be reviewed by the RMTS Administrator to assure completeness and accuracy of the program, code, and activity selection;
 - Assures the employee rosters are accurately updated on a quarterly basis.
- **RMTS Observer(s) and Alternate(s)** - Each county must designate a RMTS Observer and an Alternate RMTS Observer within each local office who is responsible for the actual administration of all sample moments. As with the RMTS Coordinator, at least one Alternate must be selected to assure continuation of the RMTS process in the RMTS Observer's absence. Each county office determines how many additional Alternates will be needed based on the location of the sample population, the size of the sample, available staff time, or other pertinent factors. In some counties, the RMTS Coordinator and the RMTS Observer may be the same person. Again, each county must determine the most practical approach to RMTS administration in their particular location.

The responsibilities of the RMTS Observer include, but are not limited to the following:

- Acts as liaison for communications with the county RMTS Coordinator;
- Receives, distributes, monitors, collects, and returns RMTS Observation Forms to the county RMTS Coordinator on a weekly basis. This specifically refers to the distribution and collection of randomly assigned forms with regard to sampled workers;
- Ensures sampling accuracy, observation completion, and prompt responses;
- Ensures that the RMTS Observation forms are completed and returned;

- Maintains ongoing knowledge of program selections and coding accuracy;
- Ensures that auditable documentation exists to support the program and activity coding for each moment.

3. Employee Roster - This is a listing of all of the employees (county and contracted) that will be participating in the RMTS, their work location, and their work hours. Procedures for completion and submission of the roster and changes to the roster are listed below.

- Attachment C is an Employee Roster form which is used to document the staff that will be participating in the CCYA RMTS for the quarter. Staff to be included on the roster must meet the following condition.
 - They are involved in case management activities and/or maintain an active caseload at any phase of a child's involvement with the CCYA (investigation through case closure).

Note: A caseload refers to the individuals (children/families) assigned to a worker for which the worker is responsible for providing case management/supervision services. Case management includes but is not limited to investigation and assessment activities, home visits and testifying in court.

- Normally, supervisory and support staff will not participate in the RMTS. These staff should not be included in the RMTS roster unless they carry an active caseload. A supervisor is not considered to be carrying an active caseload if they occasionally assist with subordinates' cases when workers are absent due to vacation, illness, medical leave such as maternity leave, military leave, etc.
- Each county must provide the RMTS Administrator with employee information to include in the RMTS system. Counties can group the employee information according to their work unit or proximity of the employees to one another, for ease of administering the moments. For example, staff located in a remote office, working together in a functional work unit, or supervised by the same manager may be grouped together. The groups are simply designed to make it easier to distribute the observation forms and collect sample responses. There is no limit to the number of groups that a county may establish.
- RMTS Coordinators should use a separate form for each group reported and assign a name to each group. The group name can be based on the location (e.g. northwest, central) or function (e.g. intensive supervision, aftercare) of the workers included, or simply by a numerical designation, or the last name of the group's supervisor.

Counties will need to provide work schedule information for each employee participating in the RMTS process. The work schedule will be the workers' normal core work hours. It is understood that some staff do not work the same schedule each week, or from day to day. In these cases, counties should provide the core work hours which are most common for that particular worker. If a worker is sampled outside of their scheduled work hours, they will select Code 14d- Not Scheduled to Work.

- To update employee information, each participating county will receive the Employee roster utilized during the previous quarter by February 15, May 15, August 15, and November 15. The Employee roster will consist of a listing of employees by location who are currently included in the RMTS along with their assigned work schedule. Employee rosters are to be updated for the next sampling period by striking out and adding requested information for all employee changes affecting your agency. Counties will be emailed a copy of this report. The RMTS Coordinators should be sure to make changes visible (i.e. make changes in red font, bold or highlight) when emailing the updated employee rosters back to the RMTS Administrator.
 - Changes include removing employees who no longer meet the criteria for inclusion in the RMTS, adding new employees who meet the criteria for inclusion, and/or changing identifying information for the employee (e.g. name, location, cluster, work schedule).
 - RMTS Coordinators should also note on the Employee Roster Updates any staff that will be out for an extended approved leave (e.g. maternity leave, extended medical leave, etc.) during the next sampling period (quarter). RMTS Coordinators should include a description of the type of extended leave and the date that they are expected to return to duty in the comments section.
- RMTS Coordinators should also submit a holiday schedule for their county. For the upcoming calendar year, they should identify any holidays or other dates the county will be closed. This information may be provided on a blank form or spreadsheet and transmitted along with the initial roster information at the start of the year. The process for including holidays for the RMTS system will be as follows:
 - If over 50 percent of the counties report the same holiday in the schedule, then these days will be excluded from the RMTS system. Sample moments will not be generated on these days.
 - If less than 50 percent of the counties report the same holiday in the schedule, then these days will be included in the sample. This may result in a county receiving sample moments on this holiday. These moments should be coded as 14d – Not Scheduled to Work.

- The rosters may be completed electronically and emailed to the RMTS Administrator. Alternatively, CCYAs may print the forms, complete the information and fax the completed forms to the RMTS Administrator. The rosters must be submitted no later than the last day of the second month of the RMTS Sampling Quarter – February, May, August, and November. Include the name and telephone number of the person submitting the updated RMTS employee rosters.

4. RMTS Observation Form - The Random Moment Observation Sampling Form (Attachment B) is the document used to collect the activity completed by the selected positions at the designated times. These forms will be issued to the counties prior to the beginning of the calendar quarter. Observation forms will contain the staff person's name, the date and the time of the sample moment. The form lists all programs, codes and activities. **The staff person being sampled should identify what they are doing and why at the time of their sample moment and then check the corresponding program, code and activity.** If the staff person's activity at their sampled moment is related to a specific client, the client's name and case number must be noted on the form. For those counties that do not utilize case numbers; the child's name, docket number or allegation number must be noted on the form. If working with more than one child during the sample moment, only one child's name should be listed on the form. In those situations when a child or family name is not provided or obtained, the name line should reflect "unknown or N/A." The child's name and case number is used in the event of an audit to validate the activity, program, code and existence of a client. All case information will remain confidential. Procedures related to the completion and submission of the RMTS Observation forms are listed below.

- Each RMTS Coordinator must determine how to schedule the distribution of the RMTS Observation forms. However, it is suggested that the forms be placed in chronological order and divided into weeks to allow for easy monitoring of the distribution and receipt of completed forms.
- Each observation must occur at the moment specified. Each RMTS Coordinator is advised not to give prior notice to any individual of the moment they are scheduled to complete a form. The individual is approached and asked to complete the observation form. The form is self-explanatory. It requires that three boxes be checked indicating whether the individual is working on a specific case, what program or service is being worked on and what activity and code is being completed. The form must be signed and dated by the person completing the form and returned to the RMTS Coordinator. The person completing the form should ensure that there is documentation within the case file to support the activity that was occurring at the time of the sampled moment (case notes, dictation, safety assessments, family service plans, court orders/petitions, etc.).

- When a worker cannot be located or reached at the specific moment, the RMTS Coordinator is instructed to leave the form at the employee's assigned work space. The completed form is to be retrieved as soon as possible following their return. This procedure is also used when the individual is in an emergency situation or cannot be interrupted at the designated moment. It is best practice not to leave forms on the worker's desk for more than 24 hours.
 - When a worker is on approved/paid leave such as annual leave, sick leave or any other scheduled leave at the moment designated for sampling, the RMTS Observer should check "Code 14c, Leave (Sick, Medical, Vacation, etc.)." **All sample moments must have auditable documentation to support the program and activity coding.**
 - When a worker is not scheduled to work at the moment designated for sampling because of working a flex-time schedule, the RMTS Observer should check box "Code 14d, Not Scheduled to Work."
 - When a position becomes vacant during the quarter and is not filled by another employee then it should be coded as "Code 14e, Invalid Response". If the position is subsequently filled, the new employee would complete the observation form for the moment assigned to the previous employee and insert the correct identifying information.
 - All program and activity coding must be supported with auditable documentation. Documentation may consist of: petitions, court orders, case/file notes, safety and risk assessments, referral forms, safety/case plans, logs, work schedules, internal agency survey instruments or tools.
5. **RMTS Observation Form Review** - The RMTS Coordinator must review all observation forms to ensure they are completed correctly. **Only one item** must be selected in each Section. Also, the coordinator must review the program and activity codes selected for logical combinations. If there is a question on the completion of the form, the RMTS Observer must discuss the question with the person completing it. **ONLY THE INDIVIDUAL COMPLETING THE FORM CAN REVISE THE FORM IF A MISTAKE IS IDENTIFIED.** Also, any changes to the originally recorded choices should be noted by first drawing a line through the incorrect choice, initialing the incorrect choice and checking the box representing the correct choice. Never use White-out and do not write over the original information in an attempt to alter the document.

6. Submission of RMTS Observation Forms - Once the RMTS Observation forms are completed by the sampled staff and reviewed by the RMTS Observer(s), the completed forms are sent to the county RMTS Coordinator on a weekly basis who, in turn, will forward the completed forms on a weekly basis to the RMTS Administrator for final tabulation. The submittal of completed observation forms is done on a weekly basis. The final batched observation forms must be received by the RMTS Administrator no later than seven days after the end of the reporting quarter. Final results cannot be tabulated until all RMTS Observation forms from all counties have been received.

The RMTS Observation Sampling forms should be mailed to the address of the RMTS Administrator.

7. Invoicing - CCYAs will use the results from the RMTS process to prepare and submit their quarterly claim for Title IV-E and Medicaid Administrative costs using the current OCYF Bulletin which details Title IV-E Invoicing Procedures. This bulletin describes the Title IV-E invoicing process and contains all of the forms and instructions to prepare and submit Title IV-E and Medicaid administrative claims.

8. Quality Assurance (QA) Process for Title IV-E Claiming - Counties are required to ensure that any moment-in-time surveyed as part of the RMTS is accurate as to the program and activity code being recorded, the existence of auditable documentation required to support the activity being performed at the moment-in-time, and the resultant claim made for Title IV-E funds. RMTS observation forms and supportable documentation are subject to the record retention requirements specified in Title 55, Pa. Code, §3140.48 **Any ACF disallowance incurred as a result of county noncompliance with either Title IV-E placement maintenance or Title IV-E administrative claim requirements will be the responsibility of the county.** Act 148 funds may be used only to pay for the state share of eligible services for which the Title IV-E payment was disallowed.

9. OCYF Quality Assurance (QA) Process for Title IV-E Claiming - OCYF will implement a pre and post analysis of moments. OCYF will validate a percentage of the random moment observation forms each quarter before the claims are submitted to ACF; and OCYF will work more closely with county RMTS Coordinators by providing ongoing technical assistance, emphasizing accurate completion of the observation forms, existence of auditable documentation required to support the activity being performed at the moment-in-time sampling and monitoring county agencies observation forms and RMTS processes.

Random Moment Time Study Programs, Codes, and Allowable Administrative Activities

The Social Security Act, at Section 474(a)(3), permits States with approved Title IV-E Plans to be reimbursed at a 50 percent matching rate for the costs of administrative activities as found necessary by the Secretary for the proper and efficient administration of the State Plan per 45 CFR 1356.60 (c), entitled "Federal matching funds for other State and local administrative expenditures for foster care and adoption assistance under Title IV-E" interprets section 474 (a)(3)(B) of the Act. All of the sections of that regulatory section apply to the administrative expenditures of the Foster Care, Adoption Assistance and Permanent Legal Custodianship Programs.

Drawing from the sources listed above, this attachment was developed to assist counties in their understanding of the programs and administrative activities that can generate Federal Financial Participation (FFP). A thorough understanding of these programs and administrative activities is critical in the accurate completion of the RMTS by staff.

Child Welfare - General Definition

Child Welfare describes the broad range of preventive and protective services designed to prevent child abuse, dependency and neglect. The activities related to Child Welfare include all activities designed to preserve and strengthen the child's own family and activities to develop permanency for the child when reunification with the parents is no longer possible. Child Welfare activities include arranging for and providing protective services, preventive services and all forms of substitute or alternative care. Arranging day care as a protective service, protective and alternative care services for Native Americans and Interstate Compact on the Placement of Children (ICPC) are also included. Not included within the boundaries of child welfare activities are day care for non-protective purposes or court-ordered custody evaluations for children who are not known to the County Children and Youth Agency (CCYA).

Approach to Categorizing Activity

For each unit of activity being recorded, the participant must select a program and activity code which most closely describes their activity at the designated observation moment from the definitions listed below. To further define the unit of activity, under the Pre-Placement, Foster Care, Permanent Legal Custodianship, Adoption, and Independent Living codes, the federal allowable administrative activities are listed for the participant to select as well.

Program Definitions

There are ten program options for a participant to select from in defining their unit of activity. By selecting a program, the participant is identifying the appropriate program to which the activity cost should be allocated. The programs of Other Administration, Title IV-E Eligibility Determination, Pre-Placement, Foster Care, Permanent Legal Custodianship, Adoption and Training are allowable for FFP. Independent Living and Medical Assistance programs would cover the administrative costs associated with the activity unit recorded. The activities captured under the Other Social/Placement Services category are not allowable for FFP.

Other Administration

This program should be selected when a worker is performing any activity that meets the Child Welfare General Definition and the worker is engaged in any activity to gain or collect child support from an absent parent for a Title IV-E child. This program also should be selected when a worker is engaged in activity which advances the child welfare goals of the agency but the activity is not directed to a specific child or family. For example, code #5 (non client-specific administration) should be selected when a worker is recruiting new agency foster homes.

This program should be selected also when performing an activity of General Administration. Activities that are not directly related to any program should fall into this code.

Title IV-E Eligibility Determination

This program should be selected when a worker is performing any activity that contributes to making the determination/redetermination of whether a child is eligible for the following programs: Title IV-E Placement Maintenance, Title IV-E Adoption Assistance and Title IV-E Permanent Legal Custodianship. For example, caseworkers who are assisting fiscal staff with collecting and gathering the family's financial information to be used for the Title IV-E determination/redetermination would select this code.

Medical Assistance

This program should be selected when a worker is performing specific activities leading to the determination/redetermination of whether or not a child is eligible for Medicaid. This program also should be used for any non-invoiced activity to help Medicaid-eligible

children in placement, their families and foster families gain access to medical services and/or attain or maintain a favorable physical or mental health condition by assisting them in identifying and understanding their health needs, or in securing, and using treatment and health maintenance services. For example, caseworkers who are assisting fiscal staff with collecting and gathering information from the family to be used for the Medicaid determination/redetermination would select this code.

Pre-Placement

This program should be selected when performing an activity for a child who is at "imminent risk" of removal from their home and foster care is the planned placement for the child as evidenced by the responsible agency either pursuing the child's removal from the home or making reasonable efforts to prevent such removal. If the agency is providing in-home services meant to preserve the family unit and to prevent placement of the child(ren), and the child(ren) would be placed absent those preventative services, then the child(ren) should be considered at "imminent risk" of removal. A child cannot be considered a candidate for pre-placement into foster care when the responsible agency has no formal involvement with the child or the child has been described as "at risk" due to circumstances such as social/interpersonal problems or a dysfunctional home environment. Imminent risk determinations for pre-placement are related to the current situation of the child and therefore a child may change from a pre-placement candidate to a non-candidate. If a child is determined to be in pre-placement candidacy status for a period longer than six months there must be documentation justifying why the child continues to be considered at imminent risk of placement into foster care absent preventative services. Assuming all of the pre-placement requirements are met, this program may also be selected for a child in the county's care and responsibility who is placed on a trial home visit.

There must be at least one of the following forms of documentation in the child's file in order to select this program code:

- A defined case plan (Family Service Plan (FSP), Rules of Probation) which clearly indicates that the child is at imminent risk of removal from the home and absent effective preventive services foster care is the planned placement for the child;
- A completed IV-E eligibility determination; or
- Evidence of court proceedings in relation to the imminent removal of the child from the home, in the form of a petition to the court, a court order, or a transcript of the court proceedings which indicates that absent effective preventive services, foster care is the planned placement for the child.

A defined case plan is developed with and signed by the child and parent(s). In situations when the case plan is not signed by all parties, documentation of the refusal to sign or participate must be noted on the case plan in order for it to be in effect. Additionally, the family service plan and court document(s) must be child-specific.

The documentation used to support candidacy must be in effect at the sampled moment-in-time in which the staff person is completing the Observation Sampling form. A determination or re-determination that proves the child continues to be at imminent risk of removal and placement in foster care is required at least every six months. This determination or re-determination must be current at the moment in time for the child to be considered a candidate.

Documentation sources that are dated more than six months prior to or dated after the sampled moment do not support a documentation of candidacy. All non-candidates should be categorized as Other Social/Placement Services Program and In-Home Services for Non-Candidates code/activity.

If reviewing, revising and updating a FSP and more than one child is considered a candidate as evident by documentation above, select the child that most closely relates to the activity that you are engaged in at the time of the moment.

Foster Care

This program should be selected when performing an activity for a child that is receiving twenty-four (24) hour substitute care in a placement away from their parents or guardians and for whom the county has placement and care responsibility. This includes:

- Foster Family Homes
- Foster Homes of Relatives
- Kinship Foster Homes
- Group Homes
- Emergency Shelters
- Residential Facilities (in PA this includes non-accredited [non-JCAHO] units of Residential Treatment Facilities [RTFs])
- Child-Care Institutions (public facilities with less than 25 beds or private facilities with any number of beds or a supervised setting in which an individual who has attained 18 years of age is living independently)
- Pre-Adoptive Homes (unless the child meets the adoption coding requirements outlined below)

This program should not be selected when performing an activity for a child in one of the following placements:

- Detention (or facilities that are primarily for the detention of children who are adjudicated delinquent)
- Secure Facilities/Secure Treatment Facilities
- Psychiatric Facilities/JCAHO Accredited Units of an RTF/DPW-licensed free standing psychiatric hospitals, Psychiatric Residential Treatment Facilities (PRTFs)
- General Hospitals
- Forestry Camps/YDCs
- Trial Home Visit

Adoption

This program should be selected when performing an activity directly related to the administration of the Adoption Assistance program for an adopted child or one whose adoption is in progress. The requirements for choosing this code are:

- The child's case plan permanency goal must be established as adoption, rather than just a long range goal which may not materialize;
- The child must be in placement in a specific pre-adoptive home rather than in a foster care placement where the goal is eventual adoptive placement. The pre-adoptive home must state their willingness to adopt; and
- The child must be legally free for adoption, meaning that parental rights have been terminated for both parents; or the parents are deceased or a combination of both.

Permanent Legal Custodianship (PLC)

This program should only be selected when performing an activity for a child that meets the following requirements:

- The SPLC agreement requirements have been met and signed **prior to** the legal establishment of PLC; and
- The court orders PLC and transfers custody of the child to the PLC candidate.

If the above requirements are not met, then PLC **should not be** selected on the RMTS Observation Sampling form.

Please note: SPLC differs from Adoption Assistance in many ways. PLC subsidy payments cannot begin until custody has been transferred. Adoption Assistance subsidies may begin prior to the adoption finalization.

Independent Living

This program should be selected when performing an independent living related activity for a child between the ages of 14 and 21 in placement or for a child that was formerly in foster care and receiving services to assist them in transitioning to self-sufficiency.

However, when performing activities for a child that is 18 to 21 years of age and is living independently in a supervised setting (apartment, dormitory) foster care should be selected. An independent living case plan is not required to select this program.

Training

This program should be selected when the worker is engaged in training (or preparing for training) either as a trainer or a trainee, and the subject of the training falls within the General Child Welfare Definition. This program should also be used for training courses approved by ACF that are related to foster care, permanent legal custodianship and adoption programs. These courses are provided by the Child Welfare Training Program (CWTP) staff, the Department's contractor for the Statewide Adoption and Permanency Network, Pennsylvania's Foster Parents Association, the American Bar Association's Barriers to Permanency Project and county or OCYF staff when submitted and approved by ACF. Training courses are submitted to ACF on a quarterly basis for approval. OCYF provides a list of approved courses and reimbursement rate decisions as soon as the information is available. All general administrative training should also be included in this program. Travel related to training is included under this program.

This program should not be used for all activity of a new employee who may be in 'trainee' status. Trainees should select the activity that best fits the work they were completing at the sampled moment.

Other Social/ Placement Services

This program should be selected when performing an unallowable Title IV-E administrative activity for a child, such as one of the following:

- Independent Adoption Activity
- Day Care for Non-Protective Purposes

- Court Ordered Custody Evaluations for children who are not known to the CCYA. (This code is selected when a judge orders the county to evaluate a custody situation between parents)
- Investigation of Reports of Abuse & Neglect/Assessment of GPS referrals/screenings (used for all investigation activity regardless of the child's placement)
- In-Home Services for Non-Candidates
- Other such as TANF Eligibility Determination

This program also should be selected when performing an activity for a child in the care of the agency who is placed in one of the following unallowable Title IV-E placements:

- Detention (or facilities that are primarily for the detention of children who are adjudicated delinquent)
- Secure Facilities/Secure Treatment Facilities
- Psychiatric Facilities/JCAHO Accredited units of a RTF/DPW-licensed free standing psychiatric hospitals, Psychiatric Residential Treatment Facilities (PRTFs)
- General Hospitals
- Forestry Camps/YDCs

This program should not be selected when performing an activity for a child that is receiving foster care defined as twenty-four (24) hour substitute care in a placement away from their parents or guardians and for whom the county has placement and care responsibility. This includes:

- Foster Family Homes
- Foster Homes of Relatives
- Kinship Foster Homes
- Group Homes
- Emergency Shelters
- Residential Facilities (in PA this includes non-accredited [non- JCAHO] units of RTFs)
- Child-Care Institutions (public facilities with less than 25 beds or private facilities with any number of beds or a supervised setting in which an individual who has attained 18 years of age is living independently)
- Pre-Adoptive Homes

Code Definitions

There are 14 code options for a participant to select from in defining their unit of activity. By selecting a code, the participant is identifying how the administrative activity should be categorized. If an activity meets the Child Welfare General Definition, Codes 1-12 must be used. Otherwise, Codes 13 or 14 must be selected.

Code 1 – Child Support Enforcement

This code is used when the activity meets the Child Welfare General Definition and the worker is engaged in any actions directed to gaining or collecting child support from parent(s) for a Title IV-E child. Following are examples of ***Child Support Enforcement*** activities:

- Gathering financial data from clients for support purposes;
- Making court recommendations for support, requesting such court action, completing court orders, discussing child support with attorneys or judges;
- Preparing for or attending a child support court hearing; or
- Travel/transportation associated with the above activities.

Code 2 – Title IV-E Eligibility Determination

This code is used whenever the worker is performing any activity that contributes to making the determination of whether a child is eligible for the Title IV-E Placement Maintenance, Title IV-E Adoption Assistance Program, or Title IV-E Permanent Legal Custodianship. Following are examples of activities which are considered ***Title IV-E Eligibility Determination***:

- Collecting and verifying information from family or others which is used in the Title IV-E determination/redetermination; e.g. income, parental deprivation, resources, Social Security Number (SSN), birth certificates;
- Completing and processing associated eligibility forms;
- Querying systems, records and other agency staff regarding current TANF and past AFDC status; or
- Re-determining eligibility for Title IV-E.
- Travel/transportation associated with the above activities.

Code 3 – Medicaid Eligibility Determination

This code should be used when a worker is performing specific activities leading to the determination/redetermination of whether or not a child is eligible for Medicaid.

Examples of such activities which are considered part of ***Medicaid Eligibility Determination*** are:

- Collecting information, such as verification of the child's resources, SSN, citizenship, placement type, earned and unearned income;
- Completing and processing eligibility forms and updating documents relating to Title XIX (Medicaid) eligibility;
- Reviewing and updating forms each time a child's circumstances change;
- All planning, assessments and paperwork which contribute to the above activities;
- Re-determining eligibility annually; or
- Travel/transportation associated with the above activities.

Code 4 – Medicaid Health – Related Service (Placement, Adoption or Permanent Legal Custodianship)

This code should be used for any non-invoiced activity to help Medicaid-eligible children in placement, PLC or adopted and their families and foster families to gain access to medical services and/or to attain or maintain a favorable physical or mental health condition by assisting them in identifying and understanding their health needs, or in securing and using treatment and health maintenance services. This code should only be used for children in placement, children receiving adoption assistance or children in federal PLC. This placement includes non-foster care placements such as detention, hospitals, etc. Examples of ***Medicaid Health-Related Services*** include:

- Arranging for medical, behavioral health or health services;
- Arranging for admission to hospitals or medical facilities;
- Development of health plans;
- Family planning services or referrals;
- Assessing the need for and arranging for admission to long-term care facilities;
- Home visits, meetings and other monitoring to assure that medical care is obtained;
- Collaboration/coordination activities with medical and behavioral health providers and local health departments;
- Assistance in utilizing Medicaid and Early Periodic Screening Diagnosis and Treatment (EPSDT) services;
- Assistance in implementing a health regimen; or

- Travel/transportation associated with the above activities, including transportation of the client to medical care.

Code 5 – Non-Client Specific Administration

This code is used when the worker is engaged in activity directed at advancing the child welfare goals of the agency but the activity is not directed to a specific child or family. Examples of *Non-Client Specific Administration* include:

- General recruitment of foster care homes;
- Activities involved in the completion of home studies for foster parent(s) and adoptive parent(s) not identified as a resource for a specific child(ren);
- Annual inspections and licensing/re-licensing of foster/adoptive homes;
- Criminal background/child abuse checks and FBI clearances performed for prospective foster parents, prospective adoptive parents and prospective permanent legal custodians;
- Rate setting activity;
- Interaction and negotiation with other agencies, e.g. police, schools, public health, county assistance offices, etc, on respective programs, interagency coordination, etc;
- Quality assurance and audit activities;
- In-house training of general program/case management activities and training approved by ACF at a 50% reimbursement rate;
- Public information activities and outreach; or
- General management of agency staff.

Code 6 – Pre-Placement

This code should be selected when performing an activity for a child who is at “imminent risk” of removal from their home and foster care is the planned placement for the child as evidenced by the responsible agency either pursuing the child’s removal from the home or making reasonable efforts to prevent such removal. If the agency is providing in-home services meant to preserve the family unit and to prevent placement of the child(ren), and the child(ren) would be placed absent those preventative services, then the child(ren) should be considered at “imminent risk” of removal. A child cannot be considered a candidate for pre-placement into foster care when the responsible agency has no formal involvement with the child or the child has been described as “at risk” due to circumstances such as social/interpersonal problems or a dysfunctional home environment. Imminent risk determinations for pre-placement are related to the current

situation of the child and therefore a child may change from a pre-placement candidate to a non-candidate. If a child is determined to be in pre-placement candidacy status for a period longer than six months there must be documentation justifying why the child continues to be considered at imminent risk of placement into foster care absent preventative services. Assuming all of the pre-placement requirements are met, this program may also be selected for a child in the CCYAs care and responsibility who is placed on a trial home visit.

There must be at least one of the following forms of documentation in the child's file in order to select this code:

- A defined case plan (Family Service Plan (FSP), Rules of Probation) which clearly indicates that the child is at imminent risk of removal from the home and absent effective preventive services foster care is the planned placement for the child;
- A completed IV-E eligibility determination; or
- Evidence of court proceedings in relation to the imminent removal of the child from the home, in the form of a petition to the court, a court order, or a transcript of the courts proceedings which indicates that absent effective preventive services, foster care is the planned placement for the child.

A defined case plan is developed with and signed by the child and parent(s). In situations when the case plan is not signed by all parties, documentation of the refusal to sign or participate must be noted on the case plan in order for it to be in effect. Additionally, the family service plan and court document(s) must be child-specific.

The documentation used to support candidacy must be in effect at the sampled moment-in-time in which the staff person is completing the Observation Sampling form. A determination or re-determination that proves the child continues to be at imminent risk of removal and placement in foster care is required at least every six months. This determination or re-determination must be current at the moment in time for the child to be considered a candidate.

Documentation sources that are dated more than six months prior to or dated after the sampled moment do not support a documentation of candidacy. All non-candidates should be categorized as Other Social/Placement Services Program and In-Home Services for Non-Candidates code/activity.

If reviewing, revising and updating a FSP and more than one child is considered a candidate as evident by documentation above, select the child that most closely relates to the activity that you are engaged in at the time of the moment.

Code 7 – Foster Care

This code should be selected when performing an activity for a child that is receiving twenty-four (24) hour substitute care in a placement away from their parents or guardians and for whom the county has placement and care responsibility. This includes:

- Foster Family Homes
- Foster Homes of Relatives
- Kinship Foster Homes
- Group Homes
- Emergency Shelters
- Residential Facilities (in PA this includes non-accredited [non- JCAHO,] units of Residential Treatment Facilities [RTFs])
- Child-Care Institutions (public facilities with less than 25 beds or private facilities with any number of beds or a supervised setting in which an individual who has attained 18 years of age is living independently)
- Pre-Adoptive Homes (unless the child meets the adoption coding requirements outlined below)

This code should not be selected when performing an activity for a child in one of the following placements:

- Detention (or facilities that are primarily for the detention of children who are adjudicated delinquent)
- Secure Facilities/Secure Treatment Facilities
- Psychiatric Facilities/JCAHO Accredited Units of an RTF/DPW-licensed free standing psychiatric hospitals, Psychiatric Residential Treatment Facilities (PRTFs)
- General Hospitals
- Forestry Camps/YDCs
- Trial Home Visit

Code 8 – Adoption

This code should be selected when performing an activity directly related to the administration of the Adoption Assistance program for an adopted child or one whose adoption is in progress. The requirements for choosing this code are:

- The child's case plan permanency goal must be established as adoption, rather than just a long range goal which may not materialize;
- The child must be in placement in a specific pre-adoptive home rather than in a foster care placement where the goal is eventual adoptive placement. The pre-adoptive home must state their willingness to adopt; and
- The child must be legally free for adoption, meaning that parental rights have been terminated for both parents; or the parents are deceased or a combination of both.

Code 9 – Permanent Legal Custodianship (PLC)

This code should only be selected when performing an activity for a child that meets the following requirements:

- The SPLC agreement requirements have been met and signed **prior** to the legal establishment of PLC; and
- The court orders PLC and transfers custody of the child to the PLC candidate.

If the above requirements are not met, then PLC **should not be** selected on the RMTS Observation Sampling form.

Please note: SPLC differs from Adoption Assistance in many ways. PLC subsidy payments cannot begin until custody has been transferred. Adoption Assistance subsidies may begin prior to the adoption finalization.

Code 10 – Independent Living Services

This code should be selected when performing an independent living related activity for a child between the ages of 14 and 21 in placement **or** for a child that was formerly in foster care and receiving services to assist them in transitioning to self-sufficiency.

However, when performing activities for a child that is 18 to 21 years of age and is living independently in a supervised setting (apartment, dormitory) foster care should be selected. An independent living case plan is not required to select this code.

Examples of *Independent Living Services* include:

- Job Readiness and Job Searching
- Budgeting

- Financial Management
- Educational Planning
- Housing Search
- Mentoring
- Life Skills
- Support/Permanency
- Prevention

Code 11 – Training

This code should be selected when the worker is engaged in training (or preparing for training) either as a trainer or a trainee, and the subject of the training falls within the General Child Welfare Definition. This program should also be used for training courses approved by ACF that are related to foster care, permanent legal custodianship and adoption programs. These courses are provided by the Child Welfare Training Program (CWTP) staff, the Department's contractor for the Statewide Adoption and Permanency Network, Pennsylvania's Foster Parents Association, the American Bar Association's Barriers to Permanency Project and county or OCYF staff when submitted and approved by ACF. Training courses are submitted to ACF on a quarterly basis for approval. OCYF provides a list of approved courses and reimbursement rate decisions as soon as the information is available. All general administrative training should also be included in this program. Travel related to training is included under this program.

This code should not be used for all activity of a new employee who may be in 'trainee' status. Trainees should select the activity that best fits the work they were completing at the sampled moment.

Code 12 – Direct Provision of Treatment/Counseling

This code should be used when the worker is providing direct services such as treatment and counseling to a child, the child's family, or the child's substitute care provider to ameliorate or remedy personal problems, behaviors or home conditions. Examples of activities related to ***Treatment/Counseling***:

- Individual/group counseling directly provided to children residing in their own homes, placed in foster care or other substitute care arrangement outside the home, or who are in independent living status concerning substance abuse, personal problems, truancy, home conditions or antisocial behavior;

- Individual/group counseling directly provided to parents/substitute care providers concerning home conditions, treatment and care of children in their custody;
- Participation by the worker in individual/group treatment/therapy by providers who are engaged in work with the child and their family.
- Direct administration of drug test for client(s).

Code 13 – Other Social/Placement Services

This code should be selected when performing an unallowable Title IV-E administrative activity for a child such as one of the following:

- Independent Adoption Activity
- Day Care for Non-Protective Purposes
- Court Ordered Custody Evaluations
- Investigation of Reports of Abuse & Neglect/Assessment of GPS referrals/screenings (used for all investigation activity regardless of the child's placement)
- In-Home Services for Non-Candidates
- Other such as TANF Eligibility Determination
- Travel/transportation associated with the above activities

This code also should be selected when performing an activity for a child in the care of the agency who is placed in one of the following unallowable Title IV-E placements:

- Detention (or facilities that are primarily for the detention of children who are adjudicated delinquent)
- Secure Facilities/Secure Treatment Facilities
- Psychiatric Facilities/ JCAHO Accredited units of a RTF/DPW-licensed free standing psychiatric hospitals, PRTFs
- General Hospitals
- Forestry Camps/YDCs
- Trial Home Visit
- Travel/transportation associated with the above activities

This code should not be selected when performing an activity for a child that is receiving foster care defined as twenty-four (24) hour substitute care in a placement away from his/her parents or guardians and for whom the county has placement and care responsibility. This includes:

- Foster Family Homes
- Foster Homes of Relatives
- Kinship Foster Homes
- Group Homes
- Emergency Shelters
- Residential Facilities (in PA this includes non-accredited [non- JCAHO] units of RTFs)
- Child-Care Institutions (public facilities with less than 25 beds or private facilities with any number of beds or a supervised setting in which an individual who has attained 18 years of age is living independently)
- Pre-Adoptive Homes

Code 14 – General Administration

This code should be selected when performing an activity of general administration. Activities that are not directly related to any program should fall into this code.

14a General Administration – Non-Program Specific

- Staff meetings;
- Reviewing agency office procedures;
- Physical plant management;
- Employee grievance procedures;
- Reviewing payroll time sheets;
- Equal Employment Opportunity activities;
- Training courses not related to case management and program activities, e.g. stress management; computers, copiers, office equipment and team building;
- Conferences on general employee performance; or
- Arranging for health services for non-Medicaid eligible clients.

14b Scheduled to work but on lunch or break

14c Paid leave

- Sick
- Medical
- Vacation
- Compensatory Time
- Family

- Personal
- PTO (Paid Time Off)
- Civil
- Military
- Liberal Leave

14d Not Scheduled to Work

- Holiday for the County
- Not Scheduled to Work Due to Flex-Time

14e Invalid Response (position vacant)

- Position Vacant
- Person No Longer Works for the County

Allowable Administrative Activities Definitions

There are seven allowable administrative activity options for a participant to select from in defining his or her unit of activity. By selecting an administrative activity the participant is identifying an appropriate function allowable for FFP.

Referral to Services

This administrative activity should be used when the worker is providing a child or his/her family with requested information about needed services, directing an individual to needed treatment, aid or information. Following are examples of ***Referral to Services*** activities:

- Referrals to services intended to help prevent the removal of a child from his or her own home;
- Referrals to services intended to enhance the possibility of a child's return to his/her home;
- Referrals to needed medical, behavioral health or health services;
- Provide information to enable youth to seek a high school diploma or its equivalent, vocation training or higher education;
- Referrals to family planning services;
- Referrals to job training;
- Arranging for the provision of post-adoption or permanent legal custodianship services; or
- Referrals to parenting classes.

Preparation for/ Participation in Judicial Determination

This administrative activity should be used when the worker is spending time preparing reports to the court/fair hearing panel or participating in a judicial proceeding. Following are examples of ***Preparation for/ Participation in Judicial Determination***:

- Participation in any court appearance where the local agency is seeking custody of a child;
- Participation in any court appearance related to the status of a child who is in placement;

- Participation in any court activity necessary for the adoptive placement of a child, other than independent adoptions;
- Participation in any court activity necessary to achieve permanent legal custodianship for a child;
- Participation in any court appearance related to obtaining child support for a child in placement or under the supervision of county agency;
- Participation in all fair hearings and appeals stemming from Title IV-E eligibility determinations;
- Participation in all fair hearings and appeals related to adoption assistance or subsidized permanent legal custodianships;
- Participation in all grievance procedures related to adoption assistance or subsidized permanent legal custodianships; or
- Preparation of reports to the court/fair hearing panel for any of the judicial proceeding listed above.

Placement of the Child

This administrative activity should be used when a worker spends time identifying appropriate placement resources, providing information to the placement resource, and arranging for placement of the child. Following are examples of activities related to the ***Placement of the Child***:

- Working with foster parents to prepare them to receive a child;
- Contacts with placement providers on any issues related to the care of a specific child;
- Child specific recruitment;
- Interstate Compact on Placement of Children activity related to a specific child;
- Working with adoptive parents to prepare them to receive a child;
- Placement of a child in an foster or adoptive home;
- Criminal background/child abuse checks and FBI clearances performed for:
 - Foster parents that are currently providing care for a child;
 - Prospective and current kinship foster homes;
 - All adoptive parents (regardless of whether they are identified as a resource for a specific child); or
 - Permanent legal custodians.
- Activities involved in the completion of home studies for adoptive parents and permanent legal custodians;
- Annual inspections and licensing of foster parents that are currently providing care for a child, adoptive parents and permanent legal custodians;

- Selection of an approved adoptive family appropriate for the needs of the child;
- Adoptive home studies; or
- Use of the Adoption Exchange.

Development, Review, and Revision of the Case Plan

This administrative activity should be used when a worker spends time assessing the placement needs of a child, obtaining diagnostic information, when appropriate, and developing and revising the case plan as required by departmental regulations. Following are examples of activities related to the **Case Plan**:

- Home visits with the child and the child's family to discuss and explore their needs, strengths, resources and existing support systems;
- Contact with mental health, education or other professionals involved with the child/child's family to obtain information related to the child's psychological, developmental, behavioral and educational needs and goals;
- Recruitment, identification, and assessment of eligible youth to determine their independent living needs; or
- Development of an independent living services plan for youth who are eligible for independent living services.

The development of the initial case plan that determines candidacy is an allowable Title IV-E pre-placement administrative activity no earlier than the first day of the month in which candidacy was documented. Case plan development activity before the first day of the month in which candidacy was documented should be identified as Item 13e In-Home Services for Non-Candidates, in the Other Social/Placement Services Section of the Random Moment Observation Sampling Form.

Case Review

This administrative activity should be used when a worker spends time developing and filing petitions for court review, obtaining legal representation for a child and agency, preparing case information and testimony, arranging for expert testimony when needed, participating in reviews, documenting results of reviews, arranging for and conducting administrative reviews when needed, preparing administrative panel members for reviews, providing information to panel members, family members and others and providing written notice to participants or administrative reviews. Following are examples of activities related to **Case Review**:

- Preparation of a petition to seek or retain custody of a child;
- Development of a voluntary placement agreement;
- Contact with county agency legal counsel to obtain representation for a child and/or the county agency at a judicial proceeding;
- Participation in a review of a child's progress/status in relation to the Family Service Plan; or
- Negotiation, review and management of adoption agreements, subsidized permanent legal custodianship agreements as well as post-placement management of subsidy payments.

Case Management/Supervision

This administrative activity should be used when a worker spends time arranging for the services and monitoring the implementation of family service plans for children in placement, assuring services are provided as required by plans, scheduling and conducting reviews of children in placement and revising service plans as required by reviews.

Arranging for services and assuring services are provided excludes participating in service delivery/provision or providing a service directly to the client. Following are examples of activities related to **Case Management/Supervision**:

- Case Conferences;
- Permanency planning meetings;
- Arranging for permanency planning and pre-placement activities;
- Development of goals, service plans, written service agreements and routine supervisory activities;
- Routine contacts, other monitoring and/or communication with parents (biological, foster, adoptive) regarding the child in relation to the status of the child, the case plan, goals for the child and family, and administrative procedures of the agency;
- Typing case notes/dictation;
- Implementation of case management requirements pursuant to Chapter 3130, Section 3130.31(3)(i) through (iv);
- Supervisory Case Conferences;
- Arrangement for and monitoring the provision of services identified in case plans;
- Case and administrative reviews;
- Arranging for the provision of pre-adoption services;
- Arranging for pre-placement visits;

- Arranging for any counseling necessary to prepare the child and family for the adoptive or permanent legal custodianship placement;
- Arranging for or monitoring the provision of services identified in independent living service plans; or
- Information or training in daily living skills, budgeting, locating and maintaining housing, or career planning.

Note: Case management and supervision for adoption can only be claimed prior to the adoption finalization.

Transportation/Travel

This administrative activity should be used for transportation or travel associated with all allowable programs and activities. For example, a caseworker transporting a child to a home visit and a caseworker traveling to a visit with the family at their home during a sampled moment would both be coded as transportation/travel (the child/youth does not have to be present in the vehicle). Please note that for travel related to unallowable programs/activities, the travel is coded under the specific unallowable activity.

Random Moment Observation Sampling Form
 PA RMTS – CCYA
 July – September 2011

Observation Moment

County:	
Unit:	
Employee:	
Date:	
Time:	

Section I: Case Information (Please select only one box)

<input type="checkbox"/> Working on a case <input type="checkbox"/> Not Working on a case*
Family/Child's Case Number _____
Child's Name _____
*A case means accepted for service.

Section II: CCYA Random Moment Observation

100 CCYA

Participant Signature and Date Completed**

Coordinator/Observer Signature and Date Completed**

**The person that fills out the form must sign and date the form within 24 hours of the sampled moment. If the sampled worker fills out the form, they must sign and date the form along with the Coordinator and/or the Observer on the appropriate lines.

**If the Coordinator/Observer fills out the form after interviewing the sampled worker, then only the Coordinator/Observer's signature is needed on the Coordinator/Observer Signature line.

Section III: Program
 (Please select only one box)

<input type="checkbox"/> Other Administration
<input type="checkbox"/> Title IV-E Eligibility Determination
<input type="checkbox"/> Medical Assistance
<input type="checkbox"/> Pre-Placement
<input type="checkbox"/> Foster Care
<input type="checkbox"/> Adoption
<input type="checkbox"/> Permanent Legal Custodianship
<input type="checkbox"/> Independent Living
<input type="checkbox"/> Training
<input type="checkbox"/> Other Social/Placement Services

Section IV: Codes and Activities
 (Please select only one box)

Other Administration <input type="checkbox"/> 01 Child Support Enforcement <input type="checkbox"/> 05 Non-Client Specific Administration <input checked="" type="checkbox"/> General Administration <input type="checkbox"/> 14a General Administration – Non-Program Specific <input type="checkbox"/> 14b Lunch or Break <input type="checkbox"/> 14c Leave (Sick, Medical, Vacation, etc.) <input type="checkbox"/> 14d Not Scheduled to Work <input type="checkbox"/> 14e Invalid Response (position vacant)
Title IV-E Eligibility Determination <input type="checkbox"/> 02 Title IV-E Eligibility Determination
Medical Assistance <input type="checkbox"/> 03 Medicaid Eligibility Determination <input type="checkbox"/> 04 MA Health-Related Service
Pre-Placement <input type="checkbox"/> 06a Referral to Services <input type="checkbox"/> 06b Preparation for/Participation in Judicial Determination <input type="checkbox"/> 06c Placement of the Child <input type="checkbox"/> 06d Development, Review and Revision of the Case Plan <input type="checkbox"/> 06e Case Review <input type="checkbox"/> 06f Case Management/Supervision <input type="checkbox"/> 06g Transportation/Travel <input type="checkbox"/> 12 Direct Provision Treatment/Counseling
Foster Care <input type="checkbox"/> 07a Referral to Services <input type="checkbox"/> 07b Preparation for/Participation in Judicial Determination <input type="checkbox"/> 07c Placement of the Child <input type="checkbox"/> 07d Development, Review and Revision of the Case Plan <input type="checkbox"/> 07e Case Review <input type="checkbox"/> 07f Case Management/Supervision <input type="checkbox"/> 07g Transportation/Travel <input type="checkbox"/> 12 Direct Provision Treatment/Counseling
Adoption <input type="checkbox"/> 08a Referral to Services <input type="checkbox"/> 08b Preparation for/Participation in Judicial Determination <input type="checkbox"/> 08c Placement of the Child <input type="checkbox"/> 08d Development, Review and Revision of the Case Plan <input type="checkbox"/> 08e Case Review <input type="checkbox"/> 08f Case Management/Supervision <input type="checkbox"/> 08g Transportation/Travel <input type="checkbox"/> 12 Direct Provision Treatment/Counseling
Permanent Legal Custodianship <input type="checkbox"/> 09a Referral to Services <input type="checkbox"/> 09b Preparation for/Participation in Judicial Determination <input type="checkbox"/> 09c Placement of the Child <input type="checkbox"/> 09d Development, Review and Revision of the Case Plan <input type="checkbox"/> 09e Case Review <input type="checkbox"/> 09f Case Management/Supervision <input type="checkbox"/> 09g Transportation/Travel <input type="checkbox"/> 12 Direct Provision Treatment/Counseling
Independent Living <input type="checkbox"/> 10a Referral to Services <input type="checkbox"/> 10b Preparation for/Participation in Judicial Determination <input type="checkbox"/> 10c Development, Review, and Revision of the Case Plan <input type="checkbox"/> 10d Case Review <input type="checkbox"/> 10e Case Management/Supervision <input type="checkbox"/> 10f Transportation/Travel <input type="checkbox"/> 12 Direct Provision Treatment/Counseling
Training <input type="checkbox"/> 11 Training-ACF Approved at 75% <input type="checkbox"/> 05 Non-Client Specific Administration OR 50% ACF Approved <input type="checkbox"/> 13k Other Social/Placement Services OR 0% ACF Approval <input type="checkbox"/> 14a General Administration – Non-Program Specific
Other Social/Placement Services <input type="checkbox"/> 13a Independent Adoption Study <input type="checkbox"/> 13b Day Care for Non-Protective Purposes <input type="checkbox"/> 13c Court Ordered Custody Evaluations <input type="checkbox"/> 13d Investigations of Reports of Abuse & Neglect/GPS Referrals <input type="checkbox"/> 13e In-Home Services for Non-Candidates <input type="checkbox"/> 13f Detention <input type="checkbox"/> 13g Secure Facilities/Secure Treatment Facilities <input type="checkbox"/> 13h Psychiatric Facilities/PRTF <input type="checkbox"/> 13i Hospitals <input type="checkbox"/> 13j Forestry Camps/YDCs <input type="checkbox"/> 13k Other <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling

CCYA RMTS
Employee Roster

Date:	
County Name:	
County RMTS Coordinator:	
Coordinator's Address:	
Coordinator's Phone #:	
Coordinator's E-mail:	
Cluster or Unit Name:	

CCYA RMTS Worker		Work Schedule	RMTS Observer	Comments
First Name	Last Name			

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11

Random Moment Observation Sampling Form

PA RMTS - CCYA: April-June 2018

Please select only one box per section.

Section I: Case Information

Working on a Case
 Not Working on a Case*
 Family/Child's Case Number: _____
 Child's Name: _____
***A case means accepted for service.**

Section III: Program

Section IV: Codes and Activities

Section II: CCYA Random Moment Observation 100

<input type="checkbox"/> Other Administration	Other Administration <input type="checkbox"/> 01 Child Support Enforcement General Administration <input type="checkbox"/> 14a General Administration - Non-Program Specific <input type="checkbox"/> 14b Lunch or Break <input type="checkbox"/> 14c Leave (Sick, Medical, Vacation, etc.)	<input type="checkbox"/> 05 Non-Client Specific Administration <input type="checkbox"/> 14d Not Scheduled to Work <input type="checkbox"/> 14e Invalid Response (position vacant)
<input checked="" type="checkbox"/> Preventing Sex Trafficking	Preventing Sex Trafficking (<i>investigations are to be coded as 13l: Labor Trafficking/Investigation of Allegations of Sex Trafficking</i>) <input checked="" type="checkbox"/> 15a Referral to Services <input checked="" type="checkbox"/> 15b Screening/Identification and Agency/Case Documentation <input checked="" type="checkbox"/> 15c Required Reporting to Other Agencies <input checked="" type="checkbox"/> 15d Development/Implementation of Policies/Procedures	
<input type="checkbox"/> Title IV-E Eligibility Determination	Title IV-E Eligibility Determination <input type="checkbox"/> 02 Title IV-E Eligibility Determination	
<input type="checkbox"/> Medical Assistance	Medical Assistance <input type="checkbox"/> 03 Medicaid Eligibility Determination <input type="checkbox"/> 04 MA Health-Related Service	
<input type="checkbox"/> Pre-Placement	Pre-Placement <input type="checkbox"/> 06a Referral to Services <input type="checkbox"/> 06b Preparation for / Participation in Judicial Determination <input type="checkbox"/> 06c Placement of the Child <input type="checkbox"/> 06d Development, Review, and Revision of the Case Plan	<input type="checkbox"/> 06e Case Review <input type="checkbox"/> 06f Case Management / Supervision <input type="checkbox"/> 06g Transportation/Travel <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input type="checkbox"/> Foster Care	Foster Care <input type="checkbox"/> 07a Referral to Services <input type="checkbox"/> 07b Preparation for / Participation in Judicial Determination <input type="checkbox"/> 07c Placement of the Child <input type="checkbox"/> 07d Development, Review, and Revision of the Case Plan	<input type="checkbox"/> 07e Case Review <input type="checkbox"/> 07f Case Management / Supervision <input type="checkbox"/> 07g Transportation/Travel <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input type="checkbox"/> Adoption	Adoption <input type="checkbox"/> 08a Referral to Services <input type="checkbox"/> 08b Preparation for / Participation in Judicial Determination <input type="checkbox"/> 08c Placement of the Child <input type="checkbox"/> 08d Development, Review, and Revision of the Case Plan	<input type="checkbox"/> 08e Case Review <input type="checkbox"/> 08f Case Management / Supervision <input type="checkbox"/> 08g Transportation/Travel <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input type="checkbox"/> Subsidized Permanent Legal Custodianship	Subsidized Permanent Legal Custodianship <input type="checkbox"/> 09a Referral to Services <input type="checkbox"/> 09b Preparation for / Participation in Judicial Determination <input type="checkbox"/> 09c Placement of the Child <input type="checkbox"/> 09d Development, Review, and Revision of the Case Plan	<input type="checkbox"/> 09e Case Review <input type="checkbox"/> 09f Case Management / Supervision <input type="checkbox"/> 09g Transportation/Travel <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input type="checkbox"/> Independent Living	Independent Living <input type="checkbox"/> 10a Referral to Services <input type="checkbox"/> 10b Preparation for / Participation in Judicial Determination <input type="checkbox"/> 10c Placement of the Child <input type="checkbox"/> 10d Development, Review, and Revision of the Case Plan	<input type="checkbox"/> 10e Case Review <input type="checkbox"/> 10f Case Management / Supervision <input type="checkbox"/> 10g Transportation/Travel <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input type="checkbox"/> Training	Training <input type="checkbox"/> 11 Training-ACF Approved at 75% <input type="checkbox"/> 05 Non-Client Specific Admin OR 50% ACF Approved	<input type="checkbox"/> 13k Other Social/Placement Services OR 0% ACF Approval <input type="checkbox"/> 14a General Administration - Non-Program Specific
<input type="checkbox"/> Other Social/Placement Services	Other Social/Placement Services <input type="checkbox"/> 13a Independent Adoption Activity <input type="checkbox"/> 13b Day Care for Non-Protective Purposes <input type="checkbox"/> 13c Court Ordered Custody Evaluations <input type="checkbox"/> 13d Investigation of Reports of Abuse & Neglect / GPS Referrals <input type="checkbox"/> 13e In-Home Services for Non-Candidates <input type="checkbox"/> 13f Detention	<input type="checkbox"/> 13g Secure Facilities/Secure Treatment Facilities <input type="checkbox"/> 13h Psychiatric Facilities/PRTF <input type="checkbox"/> 13i Hospitals <input type="checkbox"/> 13j Forestry Camps/YDCs <input type="checkbox"/> 13k Other <input checked="" type="checkbox"/> 13l Labor Trafficking/Investigation of Allegations of Sex Trafficking <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling

Participant Signature and Date Completed**

Observer/Coordinator Signature and Date Completed**

****The person that fills out the form must sign and date the form within 24 hours of the sampled moment. If the sampled worker fills out the form, they must sign along with the Coordinator and/or Observer on the appropriate lines. If the Coordinator/Observer fills out the form after interviewing the sampled worker, then only the Coordinator/Observer's signature is needed on the Coordinator/Observer Signature line.**

Random Moment Observation Sampling Form

PA RMTS - JPO: April-June 2018

Please select only one box per section.

Section I: Case Information

Working on a Case
 Not Working on a Case*

Family/Child's Case Number: _____

Child's Name: _____

*A case means accepted for service.

Section II: JPO Random Moment Observation 100

Section III: Program

Section IV: Codes and Activities

<input type="checkbox"/> Other Administration	Other Administration <input type="checkbox"/> 01 Child Support Enforcement General Administration <input type="checkbox"/> 14a General Administration - Non-Program Specific <input type="checkbox"/> 14b Lunch or Break <input type="checkbox"/> 14c Leave (Sick, Medical, Vacation, etc.)	<input type="checkbox"/> 05 Non-Client Specific Administration <input type="checkbox"/> 14d Not Scheduled to Work <input type="checkbox"/> 14e Invalid Response (position vacant)
<input checked="" type="checkbox"/> Preventing Sex Trafficking	Preventing Sex Trafficking (<i>investigations are to be coded as 13: Labor Trafficking/Investigation of Allegations of Sex Trafficking</i>)	
<input type="checkbox"/> Title IV-E Eligibility Determination	Title IV-E Eligibility Determination <input type="checkbox"/> 02 Title IV-E Eligibility Determination	<input checked="" type="checkbox"/> 15a Referral to Services <input checked="" type="checkbox"/> 15b Screening/Identification and Agency/Case Documentation <input checked="" type="checkbox"/> 15c Required Reporting to Other Agencies <input checked="" type="checkbox"/> 15d Development/Implementation of Policies/Procedures
<input checked="" type="checkbox"/> Medical Assistance	Medical Assistance <input checked="" type="checkbox"/> 03 Medicaid Eligibility Determination	<input checked="" type="checkbox"/> 04 MA Health-Related Service
<input type="checkbox"/> Pre-Placement	Pre-Placement <input type="checkbox"/> 06a Referral to Services <input type="checkbox"/> 06b Preparation for / Participation in Judicial Determination <input type="checkbox"/> 06c Placement of the Child <input type="checkbox"/> 06d Development, Review, and Revision of the Case Plan	<input type="checkbox"/> 06e Case Review <input type="checkbox"/> 06f Case Management / Supervision <input type="checkbox"/> 06g Transportation/Travel <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input type="checkbox"/> Foster Care	Foster Care <input type="checkbox"/> 07a Referral to Services <input type="checkbox"/> 07b Preparation for / Participation in Judicial Determination <input type="checkbox"/> 07c Placement of the Child <input type="checkbox"/> 07d Development, Review, and Revision of the Case Plan	<input type="checkbox"/> 07e Case Review <input type="checkbox"/> 07f Case Management / Supervision <input type="checkbox"/> 07g Transportation/Travel <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input checked="" type="checkbox"/> Adoption	Adoption <input checked="" type="checkbox"/> 08a Referral to Services <input checked="" type="checkbox"/> 08b Preparation for / Participation in Judicial Determination <input checked="" type="checkbox"/> 08c Placement of the Child <input checked="" type="checkbox"/> 08d Development, Review, and Revision of the Case Plan	<input checked="" type="checkbox"/> 08e Case Review <input checked="" type="checkbox"/> 08f Case Management / Supervision <input checked="" type="checkbox"/> 08g Transportation/Travel <input checked="" type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input checked="" type="checkbox"/> Subsidized Permanent Legal Custodianship	Subsidized Permanent Legal Custodianship <input checked="" type="checkbox"/> 09a Referral to Services <input checked="" type="checkbox"/> 09b Preparation for / Participation in Judicial Determination <input checked="" type="checkbox"/> 09c Placement of the Child <input checked="" type="checkbox"/> 09d Development, Review, and Revision of the Case Plan	<input checked="" type="checkbox"/> 09e Case Review <input checked="" type="checkbox"/> 09f Case Management / Supervision <input checked="" type="checkbox"/> 09g Transportation/Travel <input checked="" type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input checked="" type="checkbox"/> Independent Living	Independent Living <input checked="" type="checkbox"/> 10a Referral to Services <input checked="" type="checkbox"/> 10b Preparation for / Participation in Judicial Determination <input checked="" type="checkbox"/> 10c Placement of the Child <input checked="" type="checkbox"/> 10d Development, Review, and Revision of the Case Plan	<input checked="" type="checkbox"/> 10e Case Review <input checked="" type="checkbox"/> 10f Case Management / Supervision <input checked="" type="checkbox"/> 10g Transportation/Travel <input checked="" type="checkbox"/> 12 Direct Provision of Treatment/Counseling
<input type="checkbox"/> Training	Training <input type="checkbox"/> 11 Training-ACF Approved at 75% <input type="checkbox"/> 05 Non-Client Specific Admin OR 50% ACF Approved	<input type="checkbox"/> 13k Other Social/Placement Services OR 0% ACF Approval <input type="checkbox"/> 14a General Administration - Non-Program Specific
<input type="checkbox"/> Other Social/Placement Services	Other Social/Placement Services <input checked="" type="checkbox"/> 13a Independent Adoption Activity <input type="checkbox"/> 13b Day Care for Non-Protective Purposes <input type="checkbox"/> 13c Court Ordered Custody Evaluations <input type="checkbox"/> 13d Investigation of Reports of Allegations of Delinquency <input type="checkbox"/> 13e In-Home Services for Non-Candidates <input type="checkbox"/> 13f Detention	<input type="checkbox"/> 13g Secure Facilities/Secure Treatment Facilities <input type="checkbox"/> 13h Psychiatric Facilities/PRTF <input type="checkbox"/> 13i Hospitals <input type="checkbox"/> 13j Forestry Camps/YDCs <input type="checkbox"/> 13k Other <input checked="" type="checkbox"/> 13l Labor Trafficking/Investigation of Allegations of Sex Trafficking <input type="checkbox"/> 12 Direct Provision of Treatment/Counseling

Participant Signature and Date Completed**

Observer/Coordinator Signature and Date Completed**

**The person that fills out the form must sign and date the form within 24 hours of the sampled moment. If the sampled worker fills out the form, they must sign along with the Coordinator and/or Observer on the appropriate lines. If the Coordinator/Observer fills out the form after interviewing the sampled worker, then only the Coordinator/Observer's signature is needed on the Coordinator/Observer Signature line.