

State of California—Health and Human Services Agency



GAVIN NEWSOM  
GOVERNOR



September 23, 2025

ALL COUNTY LETTER (ACL) NO. 25-52  
BEHAVIORAL HEALTH INFORMATION NOTICE (BHIN) NO. 25-031

TO:

- ALL COUNTY WELFARE DIRECTORS
- ALL CHIEF PROBATION OFFICERS
- ALL COUNTY MENTAL HEALTH DIRECTORS
- ALL FOSTER CARE MANAGERS
- ALL FEDERALLY RECOGNIZED TRIBES
- ALL TRIBES WITH A CALIFORNIA TITLE IV-E AGREEMENT
- COUNTY BEHAVIORAL HEALTH PROGRAM DIRECTORS
- COUNTY BEHAVIORAL HEALTH DIRECTORS
- ASSOCIATION OF CALIFORNIA
- COUNTY DRUG & ALCOHOL ADMINISTRATORS
- COUNTY WELFARE DIRECTORS' ASSOCIATION
- OFCALIFORNIA
- CHIEF PROBATION OFFICERS OF CALIFORNIA
- CALIFORNIA STATE ASSOCIATION OF COUNTIES
- CALIFORNIA COUNCIL OF COMMUNITY BEHAVIORAL HEALTH AGENCIES
- COALITION OF ALCOHOL AND DRUG ASSOCIATIONS
- CALIFORNIA ASSOCIATION OF ALCOHOL & DRUG PROGRAM EXECUTIVES, INC.
- CALIFORNIA ALLIANCE OF CHILD AND FAMILY SERVICES

SUBJECT:

- ADDITIONAL GUIDANCE ON FAMILY FIRST PREVENTION SERVICE ACT (FFPSA) AND REQUIREMENTS FOR THE QUALIFIED INDIVIDUAL (QI)

REFERENCE: [FAMILY FIRST PREVENTION SERVICES ACT](#), [FEDERAL BIPARTISAN BUDGET ACT OF 2018](#) (PUBLIC LAW 115-123); [INDIAN CHILD WELFARE ACT OF 1978 \(25 U.S.C. § 1901, ET SEQ.\)](#); [HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT OF 1996 \(HIPAA\)](#); [TITLE 45 C.F.R. SECTION 164.512](#); [42 U.S. Code § 1320d-6](#); [42 U.S.C. §§ 671\(a\)\(8\)](#); [42 U.S.C. §§ 5106a\(b\)\(2\)\(B\)\(viii\)](#); [42 U.S.C. § 675A\(C\)\(2\)](#); [45 CFR §§ 160 & 164](#); [45 CFR § 164.512](#) ASSEMBLY BILL (AB) 153 (CHAPTER 86, STATUTES OF 2021); [CIV. CODE § 56 ET SEQ.](#); [CODE OF CIVIL PROCEDURE SECTION 372](#); [PROBATE CODE SECTIONS 810-813](#); [CAL. RULES OF COURT, RULE 5.618](#); [WELFARE AND INSTITUTIONS CODE \(W&I CODE\) SECTION 361.22](#); [W&I CODE SECTION 727.12](#); [W&I CODE SECTION 827](#); [W&I CODE SECTION 4096](#); [W&I CODE SECTION 16501](#); [W&I CODE SECTION 10850.1](#); [CAL. RULES OF COURT, RULE 5.618](#); [BEHAVIORAL HEALTH INFORMATION NOTICE \(BHIN\) 20-069](#); [ALL COUNTY INFORMATION NOTICE \(ACIN\) I-73-21 BHIN 21-055](#); [ACIN I-21-18/MENTAL HEALTH SUBSTANCE USE DISORDER SERVICES INFORMATION NOTICE \(MHSUDS IN\) 18-022](#); [ALL COUNTY LETTER \(ACL\) 21-113/BHIN 21-060](#); [BHIN 21-062](#); and [BHIN 23-068](#).

## **PURPOSE:**

The purpose of this California Department of Social Services (CDSS) All County Letter (ACL) and Department of Health Care Services (DHCS) Behavioral Health Information Notice (BHIN) is to provide county child welfare agencies, juvenile probation departments, all Tribes, including Tribes with a California Title IV-E Agreement in California, and county behavioral health departments with additional guidance regarding: Qualified Individual (QI); QI Referral, Assessment and Report; Updating the Child and Adolescent Needs and Strengths (CANS); Privacy and Confidentiality for QI assessment activities and the QI Assessment Report; Revised QI Referral template and QI Assessment Report template; Tribally Designated QI; QI Training and Certification Process; and Monitoring and Oversight County Designated and Certified QIs. This ACL/BHIN provides additional guidance to [ACL 21-113/BHIN 21-060](#), and is intended to clarify<sup>1</sup> the requirements for a QI Assessment Report for each Short-Term Residential Therapeutic Program (STRTP) or Community Treatment Facility (CTF) level of care placement. Upon Tribal consultation and engagement, guidance is forthcoming regarding Tribes with a

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<sup>1</sup> This ACL/BHIN and [ACL 21-113/BHIN 21-060](#) are intended to apply together; however, if there are any provisions that conflict, this ACL/BHIN shall control.

California IV-E Agreement and other federally recognized Tribes.

### Key Terms

The following are key terms related to the Family First Prevention Services Act (FFPSA) for the purposes of this ACL/BHIN:

- QI – means “qualified individual” as defined in [ACL 21-113/BHIN 21-060](#), must be a licensed mental health professional (LMHP), or be a registered, waived, or a trained professional who is working under the clinical supervision of an LMHP. In the case of an Indian child, as defined in [WIC Section 224.1](#), a person may be designated by the child’s tribe as the QI.
- QI Certification - is an annual process designed to ensure county placing agencies’ designated QIs meet all minimum requirements identified in [ACL 21-113/BHIN 21-060](#), including training requirements, and affiliation objectivity requirements with regard to placement setting or county placing agency.
- QI Referral – A county placing agency must submit a referral to a QI for each STRTP or CTF placement including a change or disruption in placement to or from an STRTP or a CTF. The QI Referral is required by law and there are specific criteria that require the use of the QI Referral as described below and in [ACL 21-113/BHIN 21-060](#).
- QI Assessment Report - The QI Assessment Report is required under [Welfare and Institutions Code \(W&I Code\) section 4096\(g\)\(4\)](#) and includes a summary of the QI Assessment<sup>2</sup> findings, determinations and recommendations based on an evaluation of the youth's strengths and needs. The QI Assessment Report includes the QI’s recommendation for the appropriate level of care.
- County Placing Agency – The county child welfare or juvenile probation agency responsible for the care and placement of a youth. Also referred to as the Title IV-E agency.
- County Placing Agency Caseworker – The social worker or probation officer assigned to the youth’s case.
- Tribal Placing Agency - Tribes with a Title IV-E Intergovernmental Agreement with the State of California.
- Placement Disruption – A transfer away from an existing placement setting,

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<sup>2</sup> The minimum requirements for the QI assessment and activities are described in [W&I Code Section 4096\(g\)\(3\)](#). Further guidance on the QI assessment, activities, and the report are provided in [ACL 21-113/BHIN 21-060](#).

absence from the placement setting for over 14 days, or other experiences related to the youth's placement setting that have the potential to negatively impact the youth, including trauma, safety, and interpersonal factors.

- Placement Setting – An STRTP or a CTF.
- Youth - Children, youth, and nonminor dependents (NMDs).

#### QI Referral, Assessment, and Report when a placement disruption occurs

A QI referral is required for each STRTP or CTF placement. This includes situations when a youth experiences a placement disruption and a subsequent STRTP or CTF placement is being considered by the Child and Family Team (CFT). The requirements for a QI Referral are found in [ACL 21-113/BHIN 21-060](#). The federal Department of Health and Human Services, Administration for Children and Families' (ACF) guidance clarifies that the language "each placement"<sup>3</sup> includes events such as a youth's change of address that has an impact on their care and treatment. However, a change in facility license number or address does not automatically require an additional QI referral. In these circumstances, an additional QI referral is only required if the youth's condition has changed because of the changed license number or address.

When a youth experiences a placement disruption, the county placing agency shall confer with the CFT, and in the case of an Indian child, consult with the child's Tribe, who is also a member of the CFT, and make a QI referral.

The following are examples of placement disruptions:

- a) A change in facility organization that negatively impacts the youth (distress experienced by the youth).
- b) An environment that negatively impacts the youth or causes incompatibility between youth within the facility (safety, trauma, interpersonal factors, etc.).
- c) An STRTP or CTF program change where the new STRTP/CTF is not a good fit with the youth's identified needs.
- d) The youth is away from the placement for more than 14 days and returns within the first 30 days of placement.
- e) The youth is away from the placement for less than 14 days and is then placed in a different STRTP or CTF within the first 30 days of the previous placement.
- f) The youth is relocated to another STRTP or CTF.

When a QI assessment is already in progress, a subsequent QI referral should be assigned to the **same QI** ensuring the youth is not over assessed and there is no duplication in recommended services.

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<sup>3</sup> [ACYF-CB-PI-1807](#) Public Law 115-123, the Family First Prevention Services Act: Implementation of Title IV-E Plan Requirements.

As required under [W&I Code Section 4096\(g\)](#) and [ACL 21-113/BHIN 21-060](#), upon receipt of the QI Referral, the QI shall confer with the CFT, and in the case of an Indian child, consult with the Tribe, and include a determination of the social and cultural standards of the Tribe, assess the youth's strengths and needs, and identify the youth-specific short- and long-term behavioral health goals and treatment needs. The QI shall review the medical record, including any prior QI assessments, progress notes, and CFT notes, and the youth's placement and service history; and make a clinical decision, as follows:

(a) If the QI's review of the medical record, indicates that a comprehensive assessment is clinically indicated, then the QI will perform the assessment and update the QI Assessment Report, including a level of care determination, recommended services, and both short- and long-term goals.<sup>4</sup>

Or

(b) If the QI's review of the medical record, indicates to the QI that a medical record review is sufficient to complete the QI Assessment Report and a comprehensive assessment is not medically necessary, the QI shall *not* perform a comprehensive assessment, but shall instead provide an addendum to add relevant clinical information to the most current assessment, as clinically indicated.<sup>5</sup>

### Updating CANS

All domains for the CANS are required for QI Assessment completion. If a CANS has been completed within the last two months of the referral for a QI assessment, the QI shall determine whether to perform a subsequent CANS or utilize the existing CANS results. If a CANS was completed more than two months before the QI referral, the QI shall perform a new CANS to update the CANS results.

### Privacy and Confidentiality for the QI Assessment Activities and the QI Assessment Report

The QI Assessment Report is a confidential juvenile case record. Juvenile case records, including any QI Assessment Report, are subject to the full protection of numerous federal and State laws, including [W&I Code Section 827](#), which protects juvenile case

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<sup>4</sup> For Medi-Cal members, and to claim [Medi-Cal funding](#), the QI assessment shall be completed in accordance with the requirements of the assessment component of the Mental Health Services category of SMHS (QI course of action "a").

<sup>5</sup> For Medi-Cal members, and to claim [Medi-Cal reimbursement](#), the QI's review of the medical record shall be completed in accordance with the requirements of the assessment component of Intensive Care Coordination (ICC) (QI course of action "b").

records as confidential information and prohibits the release of this confidential information to anyone other than those persons expressly allowed access.<sup>6</sup>

The QI is a member of the multidisciplinary team pursuant to [W&I Code Section 4096\(g\)\(8\)](#). Consistent with [W&I Code Sections 827](#), [W&I Code Section 10850.1](#), and [Civ. Code, § 56.10](#), members of the multidisciplinary team, which includes the QI may inspect the case file documents and information. The county placing agency shall obtain a signed release of information (ROI) and provide it to the QI so that the QI has access to relevant medical record information.<sup>7</sup> If the county placing agency is not able to obtain a signed ROI, the county placing agency shall request a court order to release medical records.

Federal regulations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) authorize a covered entity to disclose protected health information (PHI) without the consent of the individual when that disclosure is required by law ([45 C.F.R. § 164.512\(a\)](#)). [W&I Code Section 4096\(g\)\(6\)](#) explicitly requires the QI to share the QI Assessment and Report, which contains PHI, with the county placing agency and STRTP where the youth is or will be placed.

The county placing agency caseworker must attach the QI Assessment Report to their report to the court. (W&I Code [Section 361.22, subdivision.\(c\)\(1\)](#) and W&I Code [Section 727.12, subdivision.\(c\)\(1\)](#).) The county placing agency caseworker shall serve a copy of the report with required attachments to all parties to the proceeding. Per ([Cal.Rules.Ct., Rule 5.618\(c\) and \(d\)\(2\)](#).) the parties include:

- (1) The youth's parents and their attorneys of record, if parental rights have not been terminated, or the parent is receiving family reunification services;
- (2) The youth's legal guardians, if applicable, and their attorneys of record, if the legal guardian is receiving family reunification services;
- (3) The attorney of record for the youth, or their [Child Abuse Prevention and Treatment Act \(CAPTA\)](#) guardian ad litem as defined by rule 5.662, and the youth if ten years of age or older;
- (4) A youth's guardian ad litem if one has been appointed under [Code of Civil Procedure section 372](#) and [Probate Code sections 810-813](#);
- (5) The youth's Tribe and any Indian custodian, in the case of an Indian youth, and their attorneys of record;
- (6) The social worker or probation officer;
- (7) The district attorney, if the youth is a ward of the juvenile court;
- (8) The county counsel, if the youth is a dependent of the juvenile court; and
- (9) The youth's Court Appointed Special Advocate volunteer, if applicable.

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<sup>6</sup> See also, [42 U.S.C. §§ 671\(a\)\(8\) & 5106a\(b\)\(2\)\(B\)\(viii\)](#); [45 CFR §§ 160 & 164](#) [HIPAA Privacy Rule]; [Civ.Code § 56 et seq.](#) [CMIA]; [WIC § 10850](#); [CDSS Child Welfare Services Manual 31-502.451](#).

<sup>7</sup> DHCS and CDSS are developing a universal ROI pursuant to subdivision (g)(2)(B) of [W&I Code Section 4096](#).



As part of the juvenile case file, the QI Assessment Report “may not be disseminated further to any person or agency, other than a person or agency authorized to receive documents, without approval of the juvenile court.” [\(W&I Code Section 827\(a\)\(4\)\)](#).

The court must consider the QI Assessment Report and other evidence submitted by the county placing agency caseworker, make determinations and findings, approve or disapprove the placement, and provide a basis for its determinations. (California Welfare and Institution Code (W&I Code) section [361.22\(e\)](#) & [727.12\(e\)](#); [42 U.S.C. § 675a\(c\)\(2\)](#).)

Nothing in this ACL/BHIN shall be construed to limit a youth’s right to assert any applicable right to privacy or confidentiality, including the ability to seek legal advice and representation regarding QI Assessment Reports. Nothing in this ACL/BHIN shall be construed to limit the court’s authority to place further limitations on the dissemination of the QI Assessment Report to other parties to the case, consistent with the best interest of the youth.<sup>8</sup>

#### Updated QI Referral and QI Assessment Report Templates

The updated required QI Referral template (Enclosure A) and QI Assessment Report template (Enclosure B) are attached to this ACL/BHIN.

#### Tribally Designated QI

Pursuant to state law, in the case of an Indian child, the child’s Tribe(s) may designate a QI who meets all the requirements set forth in Welfare Institution Code (W&I Code) [W&I Code section 16501\(l\) section 16501\(l\)](#) and [ACL 21-113/BHIN 21-060](#). Further guidance will be issued regarding Tribes designating the QI pursuant to [W&I Code Section 16501\(l\)\(1\)](#) in a forthcoming ACL/BHIN.

#### QI Certification Process

CDSS and DHCS; the State designee (UC Davis); and county Behavioral Health Plans (BHPs) (or county placing agencies with approved QI waiver programs)<sup>9</sup> shall complete the following to certify QI candidates and monitor ongoing compliance of QIs:

1. For initial certifications, County BHPs (or county placing agencies with approved QI Waiver programs) shall:
  - a. Review the licensed, registered, or Licensed Professional Waiver (LPW) status of the QI candidates to verify that the relevant professional license held by the QI candidate is active and meets the minimum requirements specified

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<sup>8</sup> County departments performing the QI role and county placing agencies should confer with their respective legal counsel regarding their compliance with federal and State law.

<sup>9</sup> Further guidance is forthcoming.

- in [ACL 21-113/BHIN 21-060](#).
- b. Verify that the QI candidate is CANS certified as specified in [ACL 18-81/MHSUDS IN 17-052](#) or any superseding ACL/BHIN.
  - c. Ensure that QI candidates register for the initial QI training required by CDSS and DHCS.<sup>10</sup>
  - d. Verify that the QI candidates have completed the initial QI training.
  - e. Verify that QI candidates that perform QI activities<sup>11</sup> for an Indian child have specialized knowledge of, training on, or experience with, tribes and the federal [Indian Child Welfare Act of 1978 \(25 U.S.C. §1901, et seq.\)](#)

All QIs are required to take the following initial trainings, which are available on the [FFPSA Part IV Qualified Individual website](#).

- Prerequisite Webinar: The Qualified Individual – Understanding the California Children and Youth System of Care [pre-recorded]
- The Qualified Individual Fundamentals

If there are no Qualified Individual Fundamentals training courses scheduled within the timeframe by which a QI needs to start conducting QI assessments, the QI can complete the Qualified Individual: Getting Started recorded webinar, available on the [FFPSA Part IV Qualified Individual trainings](#) website, prior to initiating any QI assessments. The QI must register for and complete the next scheduled QI Fundamentals training within 6 months of completing the Qualified Individual: Getting Started recorded webinar (or 6 months from the date of this letter for QIs who completed the Qualified Individual: Getting Started recorded webinar prior to the date of this letter).<sup>12</sup>

2. For ongoing re-certifications, County BHPs (or county placing agencies with an approved QI Waiver programs) shall:
  - a. Review the licensed, registered or LPW status to ensure that the QI continues to meet the minimum requirements specified in [ACL 21-113/BHIN 21-060](#).
  - b. Ensure that QI candidates register for annual QI training required by CDSS and DHCS, via the State designee (UC Davis)<sup>13</sup>.
  - c. Verify that QIs have completed the annual QI training.
  - d. Verify that QI candidates that perform QI activities for an Indian child have received specialized training<sup>14</sup> on Tribes, and the federal [Indian Child Welfare Act of 1978 \(25 U.S.C. §1901, et seq.\)](#)

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<sup>10</sup> County placing agencies operating under a QI Waiver must ensure the QI waiver application is approved by the State before registering the QI candidate for the required QI trainings.

<sup>11</sup> [FFPSA Part IV Qualified Individual trainings](#).

<sup>12</sup> CDSS and DHCS previously provided guidance for QI training requirements in ACL 21-113/BHIN 21-060).

<sup>13</sup> [FFPSA Part IV Qualified Individual trainings](#).

<sup>14</sup> [FFPSA Part IV Qualified Individual trainings](#).



QIs are required to complete a minimum of 8 hours of training annually. The 8-hour requirement is subject to change and may be updated, or specific courses may be required by CDSS and DHCS based on new or ongoing training needs. CDSS and DHCS in collaboration with UC Davis, will provide a list of trainings on the [FFPSA Part IV Qualified Individual trainings webpage](#) that meet the annual QI training requirements. The annual trainings are required to be completed each calendar year following the calendar year in which the QI completed the QI Fundamentals training (e.g., if the QI completed the QI Fundamentals training in calendar year 2025, the QI must complete the required annual training in calendar year 2026, and each calendar year thereafter).

3. QI candidates shall:
  - a. Provide the following to the State designee (UC Davis) as components of the QI training registration:
    - 1) Name and contact information,
    - 2) Employer name and contact information,
    - 3) Affiliation with a county BHP or county placing agency, and whether the county placing agency is operating under a waiver approved by the State.<sup>15</sup>
    - 4) Attestation that they meet minimum requirements to serve as a QI, as specified in [ACL 21-113/BHIN 21-060](#).
    - 5) Verification that their employer has designated them as a QI candidate.
    - 6) Attestation that they will perform the QI assessment activities with objectivity, avoiding biases during the assessment and interpretation of results.
    - 7) Attestation that they are not connected to or affiliated with any facility or placement setting in which youth are placed, unless operating under a waiver approved by the CDSS.
    - 8) Attestation that they will not have responsibility as a caseworker, or in the chain of command of a caseworker, for any youth for whom they conduct a QI assessment.
  - b. Complete initial trainings and annual trainings as required and provide evidence of completion to County BHPs or placing agencies, as applicable.
4. The State designee (UC Davis) shall:
  - a. Review all submitted information from County BHPs or placing agencies and QI candidates to certify completion of all requirements.
  - b. Issue a certificate of completion and provide a true and correct copy to designated QI candidates, their employers, and affiliated BHPs or county placing agencies.

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<sup>15</sup> Upon Tribal consultation and engagement, guidance is forthcoming regarding Tribes with a California IV-E Agreement and other federally recognized Tribes.

Ongoing QI Monitoring

If at any time the QI does not meet minimum qualifications, the BHP (or the county placing agency with an approved QI Waiver program) shall suspend the QI. When a QI has been suspended, they shall not perform QI assessments. The BHP (or the county placing agency with an approved QI Waiver program) shall provide written notice of the QI's suspension to CDSS, DHCS, and the State designee (UC Davis). At such time as the BHP (or the county placing agency with an approved QI Waiver) determines that the individual meets the minimum requirements, the individual may resume the role as a QI. The BHP (or the county placing agency with an approved QI Waiver) shall provide written notice to CDSS, DHCS, and the State designee (UC Davis), when the individual's suspension has been lifted and they have resumed the role as a QI.

If you have any questions concerning this letter, please contact the CDSS FFPSA inbox at [FFPSA@dss.ca.gov](mailto:FFPSA@dss.ca.gov) or the DHCS FFPSA inbox at [FFPSA@dhcs.ca.gov](mailto:FFPSA@dhcs.ca.gov).

Sincerely,

***Original Document Signed By***

ANGIE SCHWARTZ  
Deputy Director, Children and Family Services Division  
California Department of Social Services

PAULA WILHELM  
Deputy Director, Behavioral Health  
Department of Health Care Services

Attachments  
Referral for QI Assessment (Enclosure A)  
QI Assessment Report (Enclosure B)