

Knowledge Base Article

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Overview

This article describes how to complete the following in Ohio SACWIS:

 Create an Emancipated Youth (EY Plan) for a post-emancipated youth who is between their 18th and 21st birthdays and is no longer in agency custody but has requested services and/or supports from the agency. This plan is only available on an Emancipated Youth Case. In order to create an Emancipated Youth Case, please record an Intake with the Intake Category of Post Emancipation an Intake type of Young Adult Services.

Please see **Creating an Independent Living Plan (IL Plan)** Knowledge Base Article for details on how to enter this type of plan for youth 14 years old or older who are in agency custody.

Please see **Creating a Final Transition Plan (FT Plan)** Knowledge Base Article for details on how to enter this type of plan for youth who are within 90 days of **Emancipating** from agency custody.

Please see **Recording Credit Reports** Knowledge Base Article for details on how to enter **Credit Reports** requested by the agency from the three main credit reporting agencies for youth age 14 or older and in agency custody.

Navigating to the Emancipated Youth Plan

- 1. From the Ohio SACWIS Home screen, click the Case tab.
- 2. Click the **Workload** tab.
- 3. Select the appropriate **Case ID** link.

Home	Intake	Case	Provider	Financial	Administration
Workload Court C	alendar Placement Req	uests			
Case Workload					
Caseworker:	3	Sort By: Case Name As	scending 🗸 Filter		
E Test Worker (23 cases) B Sacwis, Susie	[123456] - Open 11/21/2022	- Adoption			

On the Case Overview screen, Click Independent Living.



Home	Intake	Case	Provider	Financial	Administration
Workload Court Ca	lendar Placement Reque	sts			
<>					
<u>Case Overview</u> <u>Activity Log</u> <u>Attorney Communication</u>	CASE NAME / ID: Sacwis, Susie / 123456		Young Adult Services Open (08/30/2023)		
Intake List Forms/Notices Case Services	ADDRESS: Test Adress Test, Oh 12345		CONTACT:		
Legal Actions Legal Custody/Status Housing Service Record Initial Removal	AGENCY: Test County Children Serv PRIMARY WORKER: <u>Assign Primary Worker</u>	ices Board	SUPERVISOR(S):		
Placement/ICCA Independent Living	Case Actions				
Bridges Application / VPA Bridges Assessment	View Case Information 0 Linked	Cases Program Categorie	s Case Status History		

The **Independent Living Filter Criteria** screen appears displaying the **Independent Living Records** grid. The grid displays all Independent Living, Final Transition, and Emancipated Youth Plans for any Active or Inactive Case Member on the current case.

HILDING LIDE	6					
Forms/Notices	4	Independent Living			Credit Reports	
Case Services	Independent Living Filter C	ritoria				
Legal Actions	independent Living Filter C	interia				
Legal Custody/Status	Youth Name:		~	Plan Type:	~	
Housing Service Record						
Initial Removal						
Placement/ICCA	Plan Developed Date:		-			
Independent Living						
Bridges Application / VPA		From Date	To Date			
Bridges Assessment						
Bridges Ongoing Eligibility						
Bridges Plan	Sort Results By:	Plan Type (Descending)	~	Show Plans for Inactive	Members	
Bridges Review						
Family Team Meeting						
Case Conference Note						
Human Trafficking	Constant Constant					
ICPC/ICAMA	Filter Clear Form					
Case Closure						
Agency Case Transfer						
	Independent Living Record	s				
	Youth Name	Plan Type	Plan Developed Date	Plan Closed Date	Agency	
	view Sacwis, Susie	Final Transition Plan	08/29/2023	8 22	County Children Services Board	b
	Plan Type: *		✓ Youth Name: *		✓ Add	Plan

Note: If the Case Category is Adoption, the system will only display the Independent Living, Final Transition, and Emancipated Youth Plans for the Adoption Case Participants (excluding A/I Members).

Note: IL and EY Plans will only be editable from the case in which they were created. FT Plans will be editable from any case where the Youth is an **Active**



Case Member.

In the Independent Living Records section:

- 1. In the **Plan Type** field, select **Emancipated Youth** from the dropdown list. (Required)
- 2. In the **Youth Name** field, select the appropriate name from the dropdown list. (Required)
- 3. Click the Add Plan button.

Indep	endent Living Record	ls						
	Youth Name	Plan Type	Plan Developed Date	Plan Closed Date	Agency			
<u>view</u>	Sacwis, Susie	Final Transition Plan	08/29/2023		Athens County Children Servi	ices Board		â
Plan Ty	De: *	Emancipated Youth Plan	✓ Youth Name: *	Sac	vis, Susie 🗸 🗸	Add I	Plan	

Note: Emancipated Youth Plan will only be an available option in the Plan Type dropdown for **Emancipated Youth** cases. This will be the only option in the dropdown for **Emancipated Youth** cases.

Note: The **Youth Name** dropdown will only display available youth. Youth can only be on one **Active** or **Pending IL Plan.** Youth can only be on one non-end-dated **Final Transition Plan.** Youth can only be on one non-end-dated **Emancipated Youth Plan.**

The **Emancipated Youth Plan** screen appears displaying several tabs. The system defaults to the **Emancipated Youth** tab as shown below.



Youth Name: Sacwis, Susie	DOB: 07/03/2004	Gender: Female
Emancipated Youth Topics Contact Directory Signa	atures	
Emancipated Youth Plan		
Plan Developed Date: * Plan	n Closed Date:]
What service(s) is the Youth requesting to achieve self-sufficiency?	* (expand full screen)	✓ ABC
		4000
Describe the Youth's strengths and needs: * (expand full screen)		
		 ✓ ABC 4000
	Apply Save Cancel	

Note: A youth cannot have overlapping Emancipated Youth Plans.

Completing the Emancipated Youth Tab

- 1. Enter the Plan Developed Date. (Required)
- 2. Enter narrative to answer the question: What service(s) is the Youth requesting to achieve self-sufficiency? (Required)
- 3. Enter narrative to **Describe the Youth's strengths and needs**. (Required)
- 4. Click the **Apply** button.



Youth Name: Sacwis, Susie	DOB: 07/03/2004	Gender: Female
Emancipated Youth Topics Contact Directory	Signatures	
Emancipated Youth Plan		
Plan Developed Date: *	Plan Closed Date:	
What service(s) is the Youth requesting to achieve self-sufficie	ncy?* (expand full screen)	✓ABC
		4000
Describe the Youth's strengths and needs: * (expand full screen	een)	✓ABC
		4000
		h

Save

Cancel

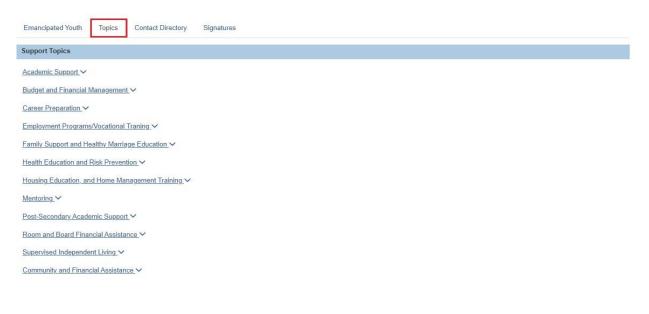
Completing the Topics Tab

To add topics for the youth's emancipation plan, complete the following steps.

Apply

1. Click the **Topics** tab.

The Support Topics screen appears displaying hyperlinks for various topics of support.





2. Click on the Support Topic the emancipated youth requested assistance with to expand it.

Emancipated Youth Topics Contact Directory Signatures	
Support Topics	
Academic Support ^	
Link Service	
Describe: (expand full screen)	
	✓ABC
	2000
	<i>h</i>

Note: You can click on the topic again to collapse it.

3. To link a service for that topic, click the **Link Service** button.

The screen displays **Case Services** information from the Case for the Person ID associated to the Emancipated Youth Plan.

4. To add a Case Service, click **Add Case Services** button.

	Case Services	RTIS Services
Case Services Filter Criteria		
From Effective Date:		To Effective Date:
Case Member:		Status:
Service Category:	· · · · · · · · · · · · · · · · · · ·	Service Type:
Service Goal:	•	Service:
End-dated services :	Exclude Include	Linked Status
Sort Results By:	~~~~ `	Current Case Episode View Historical
Filter Clear Form		
Case Services		
Service:	Add Case Services	
Result(s) 0 / Page 0 of 0		
OK Cancel		

The Service Information screen appears.

- 5. Select the Effective Date.
- 6. Make a selection from the **Service Category** drop-down menu.
- 7. Make a selection from the **Service Type** drop-down menu.
- 8. Select the **Case Member Name** from the drop-down menu.



9. Click Add Status/Provider

Agency: Risk Contributors:	Test County Children Services None	Board			
Effective Date: *	08/23/2023	Estimat	ted Service End Date:		
Service Category: *	Education & Training	 Service 	e Type: * After	School Services	
Member Service Status Hist	ory				

The Status Details screen appears.

- 10. Make a selection from the Status drop-down menu.
- 11. Select the Status Begin Date.
- 12. Click the Link Provider button.

Status Details				
Case Member Name:	Sacwis, Susie			
Service Category:	Education & Training	Service Type:	After School Services	
Status: *	Provided V			
Status Begin Date: *	08/23/2023	Status End Date:		
End Reason:	~	Secondary End Reason:	 The following end information will only be saved if an (end date is entered
Participation Frequency				
	Expected Participation Frequency	How	Long Start Date	End Date
Add Frequency				
Provider Information				
	Provider		Provider Address	
Link Provider				

The Search For Provider Match screen appears.

If you know the **Provider ID**, you may insert it on this screen. You may search for the Provider by **Name, School District** and by **County**.

13. To search by County, Add the appropriate **County** by selecting the county and clicking the **Add** button. This moves the county into Selected Counties.



rice Category:		Service Type:	
Education & Training	~	After School Services	
roh Date: 23/2023		With Available Vacancies	Child has a kinship relationship with provider
Available Counties: 🚯		ected Counties:	
Q Add	F	emove Q	
Q Add Blue County	F		
Q Add Blue County Green County	F	emove Q	
Q Add Blue County Green County Red County	F	emove Q	
Q Add Blue County Green County Red County Pink County	F	emove Q	
Q Add Blue County Green County Red County	F	emove Q	

14. Click **Search** at the bottom on the screen.

The Search Results screen appears.

15. Select the appropriate **Provider**.

	Results Results in Map Collapse Services Ex	pand Services			
esult(s)	1 to 11 of 11 / Page 1 of 1				Results per page: 15 G
	Provider Name / ID		Provider Status	Current Primary Address	
<u>iew</u>	Test, Provider 456789	NONODJES	ACTIVE		
	View Services				
	Test County Children Services Board: select Family Counseling				

The Status Details screen appears.

The **Provider** you selected is now with in the **Provider Information** grid.

16. Click the **Save** button at the bottom on the screen.



atus Details						
ase Member Name:	Sacwis, Susie					
ervice Category:	Counseling		Service Type:	Family Coun	seling	
			Service Type.	r anny cour	isen ig	
tatus: *	Scheduled 🗸 🕚					
atus Begin Date: *	08/01/2023		Status End Date:		**	
				 The following 	ng end information will only be sav	ed if an end date is entered
nd Reason:		~	Secondary End Reason:			~
articipation Frequency						
		_				
	Expected Participation Frequency		He	ow Long	Start Date	End Date
Add Frequency						
rovider Information						
				100000000000000000000000000000000000000		
	Provider			Provider /	Address	
view Test, Provider / 45	6789					
view Test, Provider / 45	6789					
view Test, Provider / 45	6789					
Link Provider	6789					
Link Provider						
Link Provider	6789 Service Goal				Effective Date	
Link Provider					Effective Date	
Link Provider					Effective Date	
Link Provider					Effective Date	
Link Provider					Effective Date	
Link Provider ervice Goal History Add Service Goal					Effective Date	
Link Provider ervice Goal History Add Service Goal					Effective Date	
Link Provider ervice Goal History Add Service Goal					Effective Date	
Link Provider ervice Goal History Add Service Goal					Effective Date	
Link Provider ervice Goal History Add Service Goal Comments:	Service Goal				Effective Date	
Link Provider ervice Goal History Add Service Goal Comments:					Effective Date	
Link Provider iervice Goal History Add Service Goal Comments:	Service Goal				Effective Date	
Link Provider ervice Goal History Add Service Goal Comments:	Service Goal				Effective Date	
Link Provider ervice Goal History Add Service Goal Comments: Spell Check Clear 4 Created in Error	Service Goal				Effective Date	
Link Provider ervice Goal History Add Service Goal Comments: Spell Check Clear 4	Service Goal				Effective Date	

The Service Information screen appears.

The Service is saved within the Member Service Status History grid.

17. Click the **Save** button.

gency: isk Contributors:	Test County Children Servic					
sk contributors.	TYONE					
ffective Date: *	08/23/2023		Estimated Service End Date:			
ervice Category: *	Counseling	~	Service Type: *	Family Counseling	~	
Member Service Status History						
Current Status O All Statuses						
Case Member	r Status	Provider	Service Description	Provider Address	Status Begin Date/End Date	Created in Erro
edit Sacwis, Susie / 123456	Scheduled	Test, Provider	Family Counseling		08/23/2023	
Case Member Name: *	Sacwis, Susie		× Add Status			
			Add Status	/ Provider		

The Case Services screen appears.



- 18. Check the checkmark box.
- 19. Click the **Ok** button.

Case Services				
Service:	Add Case Services			
Result(s) 1 to 1 of 1 / Page 1 of 1				
Case Member Name(s)	Service Category / Type	Service Classification	Effective Dates	
Sacwis, Susie	Independent Living & Transitional Living/Job seeking and job placement support	Caregiver/Caretaker	08/30/2023 -	Not Linked
Case Member / Caregiver / Caretaker Histo	ry			
OK Cancel				

The **Support Topics** screen appears displaying the saved **Service**.

- 20. In the **Describe** field, enter a description of the service. (Optional)
- 21. Repeat the above steps for each **Support Topic** that you want to include in this Emancipated Youth Plan.
- 22. If you don't want the service listed, click Unlink.
- 23. Click the Apply button.

Emancipated Youth Topics Co	ntact Directory Signatures			
Support Topics				
Academic Support Case Member Name(s) edit Sacwis, Susie Case Member / Caregiver History	Service Catego		Service Classification Caregiver/Caretaker	Effective Dates 08/30/2023 - unlink
Link Service Describe: (expand full screen)				 ✓ ABC 2000
Budget and Financial Management ✓ Career Preparation ✓ Employment Programs/Vocational Tranit Family Support and Healthy Marriage Ed	ducation Y			
Health Education and Risk Prevention >	Appl	y Save Cancel		



Completing the Contact Directory Tab

To add **Youth Contacts** to an IL Plan, Final Transition Plan (FT Plan), Emancipated Youth Plan (EY Plan), or National Youth in Transition Database (NYTD), complete the following steps. When this information is added or changed from any of these areas, the change will be reflected in any of the other areas that are created. For example, if a youth has an IL Plan, FT Plan, and NYTD, if a Youth Contact is added on the IL Plan, the new contact will display on the FT Plan and NYTD. This information can be edited on any Active or Pending IL Plan, non-end-dated FT or EY Plan, or at any time through NYTD (even when the case is closed) as long as an account had been generated for the youth.

1. Click the **Contact Directory** tab from any of the above-mentioned work items.

The Youth Contacts screen appears.

Emancipat	ted Youth Topics Contact D	irectory Signatures				
Contacts	S					
<u>edit</u>	Test, Adult Unknown Address Primary Contact: Permanent Adult Connection					ACTIVE
	mbers/Associated Persons/Family & ency Team Members:		~	Add	-or- C	reate New Contact

If a youth does not have a **Permanent Adult Connection** identified, the below warning will display.

Contacts			
▲ This youth has no Permanent Adult Connection			
Case Members/Associated Persons/Family & Permanency Team Members:	~	Add -or-	Create New Contact

- 2. If the contact is a Case Member or Associated Person on the case, select the name of the contact from the **Case Members/Associated Persons** drop-down list.
 - Or if the contact person you wish to add is not listed in the drop-down, skip to **Step 11**.
- 3. Click the **Add** button.

The person is added to the **Youth Contacts** grid in the Active status.





Note: Youth Contacts will now have an Active or Inactive status. This is to assist in maintaining a history of a youth's contacts while still reflecting which contacts are current. This will also update in all the existing work items mentioned above. By clicking on the **Active** toggle, that Youth Contact will become **Inactive**. When inactivating a Youth Contact, a message will pop up to verify that you want to deactivate the contact.

sacwis-uat.jfs.ohio.gov says		
Are you sure you want to Deactivate this Conta	ct? Click OK t	to continue.
	014	
	OK	Cancel

4. Click the Edit link beside the newly added contact.



The **Contact Details** screen appears displaying details for that contact from their Person record.

- 5. If this adult has a permanent connection to the youth, click the checkbox beside **This contact is a permanent adult connection**. (Optional)
- 6. Select this person's relationship to the youth from the **Relationship to Youth** dropdown list. (Required)
- 7. Select from the drop-down menu **If you want to make this person an active Family** & Permanency Team Member. (Required)



Hint: Hover your mouse pointer over the Information icon ¹ for the definition of a permanent adult connection.

Contact Details		
Contact Name: * Test,	Adult	Clear Person
Relationship to Youth: *	Grandfather	~
	This contact is a Permanent Adult Connection 6	
	Vouth Support Person 0	
Contact Address:	123 Test Rd. Test Oh 12345	
Contact Type:	Cell: (123) 456-7890	
	Home:	
Do you want to make this person an active Family & Permanency Team Member? *	Yes	~
Other Contact Information: ((expand full screen)	

- 8. Enter narrative in the Other Contact Information text box, if applicable. (Optional)
- 9. When complete, click the **Save** button to return to the **Youth Contacts** screen.
- 10. Repeat these steps to add another contact, if applicable.

Note: If a Signature has not been added for this contact, you can click the **Delete** button to delete the contact.

11. If the contact you wish to add is not listed in the **Case Members/Associated Persons** drop-down list, click the Create New Contact button.



Contacts		
▲ This youth has no Permanent Adult Connection		
Case Members/Associated Persons/Family & Permanency Team Members:	~	Add -or- Create New Contact



The **Contact Details** screen appears.

12. In the **Contact Name** field, click the **Search Person** button to search/select the Person OR enter the name of the person in the text box if there is not enough information to enter a new Person record. (Required)

Note: Through the Search Person, a contact can be selected that is known to Ohio SACWIS or a new person can be created.

Contact Details	
Contact Name: *	Search Person -or-
Relationship to Youth: *	
	□ This contact is a Permanent Adult Connection
	Vouth Support Person

Note: Through the Search Person, a contact can be selected that is known to Ohio SACWIS or a new person can be created.

Contact Details		
Contact Name: *	Search Person -or-	
Relationship to Youth: *	✓	
	This contact is a Permanent Adult Connection	
	□ Youth Support Person	
Contact Address:		
	Search Address	
Contact Type:	✓ Contact:	
Other Contact Information: (expa		
	✓ABC	
	2000	

If you Search and select a person, the **Contact Details** screen displays details for the selected person:



Contact Name: * Test, Adult		Clear Person
Relationship to Youth: *	Grandfather	~
	This contact is a Permanent Adult Connection 8	
	Vouth Support Person 🙂	
Contact Address:	123 Test Rd. Test Oh 12345	
Contact Type:	Cell: (123) 456-7890	
	Home:	
Do you want to make this person an active Family & Permanency Team Member? *	Yes	▼
Other Contact Information: (expand full screen)	
	<u></u>	≁ AE
		200
		1

Note: If the selected person is not the correct contact, you can click the **Clear Person** button to unlink the person from this contact record and display the **Search Person** button again.

Cancel

- 13. Select this person's relationship to the youth from the **Relationship to Youth** drop- down list. (Required)
- 14. If this adult has a permanent connection to the youth, click the checkbox beside **This contact is a Permanent Adult Connection**. (Optional)
- 15. Select from the drop-down menu **If you want to make this person an active Family & Permanency Team Member**. (Required)

Hint: Hover your mouse pointer over the Information icon ¹ for the definition of a permanent adult connection.

Note: When a Person is selected, their contact information (address and phone number) will not be editable through the **Contact Directory.** Click on the **Person Name/ ID** hyperlink to edit their information.

Important: At least **one** of the following is **Required** to save this Contact record. These fields are described in the Steps16-19 below.

- Contact Address field, and/or
- Contact Type / Contact fields, and/or
- Other Contact Information field.
- 16. The **Contact Address** field displays the **Search Address** button if you did not Search/select a person above. Click the **Search Address** button if you wish to Search and select the person's **Contact Address**. (Optional)

If you Search and select an address, the **Contact Address** field displays the address details and a **Remove Address** button:

Contact Address:	123 Test Rd Test, Oh 12345			
	Remove Address			
Contact Type:		~	Contact:	

Note: If the selected address is not the correct address, you can click the **Remove Address** button to unlink the address from this contact record and display the **Search Address** button again.

- 17. Enter fields for **Contact Type**, **Contact**, and **Ext** display if you did not Search/select a person above. Complete these fields as described below. (Optional)
 - a. Select the appropriate **Contact Type** from the drop-down list if you are entering a phone number, email address, social media handle/account, etc.
 - b. In the Contact field, enter the phone number, email address, etc.
 - c. If you selected Phone Number as the Contact Type, enter the phone extension in the **Ext** field, if applicable.
- 18. Enter contact information in the **Other Contact Information** text box, if applicable. (Optional)
- 19. Click the **Save** button at the bottom of the screen.



Contact Address:	123 Test Rd Test, Oh 12345 Remove Address		
Contact Type:		✓ Contact:	
Other Contact Information: (<u>expan</u>	d full screen)		 ✓ ABC 2000

The Youth Contacts screen appears displaying the new contact in the grid.



- 20. Repeat the steps in this sub-section for each contact you wish to add.
- 21. When complete, click the **Apply** button at the bottom of the screen.

Important: After the **Independent Living** tab has been completed, at least one **Goal** has been added, and at least one **Contact** has been added, the IL Plan can be marked as **Active**. To do so, complete the steps in the **Marking the Independent Living Plan as Active** section in this Knowledge Base Article. Or, complete the remaining tabs as discussed in each sub-section.

Completing the Emancipated Youth Plan Signatures Tab

1. To add signatures for the Emancipated Youth Plan, click the **Signatures** tab.

The **Signatures Captured** screen appears. The screen is pre-populated with the Youth's name, the IL Worker assigned to the case, and the IL Worker's Supervisor.



Sacwis, Susie - Youth	Date Signed:	
/orker - Assigned Worker	Date Signed:	â
Worker - Supervisor	Date Signed:	â

2. To add an agency representative's signature, click **Add Agency Representative** button.

The **Available Agency Representatives** screen appears. This screen displays the list of Assigned Workers and Unassigned IL Workers for the associated agency. This list does not include persons who have already been selected.

3. Click the checkbox beside each person you wish to select OR click the checkbox in the grid header to select **All** persons in the list.

Available Agency Representatives	
 Test, Caseworker Test, Caseworker 2 Test, Caseworker 3 	
	Save Cancel

4. Click the **Save** button.

The **Signatures Captured** screen appears displaying the selected person(s).

Sacwis, Susie - Youth	Date Signed: 08/24/2023	
Worker - Supervisor	Date Signed:	
Worker - Assigned Worker	Date Signed:	
dd Agency Representative		



- 5. In the **Date Signed** field beside each person, enter the date the signature was recorded. (Optional)
- 6. If you selected an incorrect person, click the **Delete** icon beside the person to delete the signature entry (shown in blue above).

Note: The Youth's signature cannot be deleted.

7. When complete, click the **Save** button.

The Independent Living Filter Criteria screen appears displaying the Independent Living Records grid.

Independent Living			Credit Reports		
Independent Living Filter	Criteria				
Youth Name:		~	Plan Type:	~	
Plan Developed Date:	From Date	To Date			
Sort Results By:	Plan Type (Descending)	~	Show Plans for Inact	tive Members	
Filter Clear Form	I				
Independent Living Recor	ds				
Youth Name	Plan Type	Plan Developed Date	e Plan Closed Date	Agency	
view Sacwis, Susie	Final Transition Plan	08/29/2023		County Children Services Board	b
edit Sacwis, Susie	Emancipated Youth Plan	08/30/2023		Athens County Children Services Board	L Ö
Plan Type: *		✓ Youth Name: *		✓ Add	Plan

If you have additional questions pertaining to this Deployment Communication, please contact the <u>Customer Care Center</u>.

