DSS Policy and Procedure Guide Division 03: Child Welfare Chapter 05: Placement Item 033: Intensive Services Foster Care Suggested changes send to: DSS PSOA Mailbox Issued: November 2, 2018 References: Law section [WIC 18360.10, WIC 18360.10(b), WIC 18360.10(c)], Codes Display Text [WIC 18360.15(a)], Law section [WIC Section New

Index:

17731(c)]

<u>Screening</u> / <u>Assessment and Case Planning</u> / <u>ISFC Core Services and Supports</u> / <u>Educational Supports</u> / <u>Medical Evaluation and Treatment</u> / <u>Behavioral and Mental Health Supports</u> / <u>Extracurricular and Social Supports</u> / <u>Transition to Adulthood</u> / <u>Permanency Supports</u> / <u>Indian Child Services</u> / <u>ISFC Resource</u> Parent Training Requirements

Preamble

Child Welfare Policy and Procedure Guides are meant to be used as tools to relay best practice and staff expectations. It is understood that specific case scenarios may not always align themselves with the stated practices and that at all times what is of paramount importance is the Safety and Well-being of the children we are charged to protect.

Policy

The Department of Social Services (DSS) will provide Intensive Services Foster Care (ISFC) to those children and youth identified through the Level of Care (LOC) Matrix <u>Levels of Care Rate</u> <u>Determination Matrix</u> with high needs, special health care or medical placements. Intensive services are intended to be time-limited based on the static criteria or the need for placement in ISFC.

Procedure

The goal of the ISFC program is to ensure that youth in foster care can receive the services they need in a home-based family care setting to avoid or exit a short-term residential therapeutic program (STRTP), group home (GH), or out-of-state GH care. There are several ways in which a child/youth may be identified as needing an ISFC placement.

Fresno County uses Team Decision Making Meetings (TDM), a highly structured Child and Family Team (CFT) meeting that focuses on placement needs to provide the parents and birth family members a venue for discussing and planning placement options. Information is gathered on the needs of the child and a determination for ISFC placement can be assessed. If ISFC is needed immediately and the current placement or relative/mentor is capable and willing to have the child in their care, they will be connected with the ISFC Social Worker (SW) to start the coordination of training and support services.

In addition, in Fresno County there is a Child Focus Team made up of a Public Health Nurse (PHN), Mental Health Clinician, Child Welfare SW, Independent Living Program (ILP) SW, and an Educational Liaison SW that reviews every case to identify service needs for children/youth and non-minor dependents. This team reviews the needs of every child/youth as they enter into out-of-home care to identify any high-level needs and/or static criteria of the child/youth. The Child Focus Team will also assess and provide a case alert that ISFC, including emergency ISFC, may be needed. If at that time emergency ISFC is not needed, then the Case Managing SW will work with an ISFC SW and a Resource Family Services (RFS) SW to identify and coordinate the appropriate ISFC placement.

Finally, for ongoing placement needs and changes, the Case Managing SW will submit a 6252 request for placement to RFS via the CWS FPR mailbox. A TDM/CFT meeting will be held to share information regarding the child/youth's needs and determine what level of care and type of placement can best meet the child's needs. The ISFC SW and the Case Managing SW will collaborate with the family's CFT to identify if a specific child/youth is in need of ISFC. The RFS SW, ISFC SW and the Case Managing SW will then collaborate to identify the ISFC home that meets the child/youth's needs. A transitional plan will be made to assist the child/youth and parents with the new placement.

RFS staff will enter placement and create placement paperwork. The ISFC SW will complete SOC 158a. The SOC 158a will be placed in the RFS OA inbox for logging/tracking purposes. The RFS OA will route the SOC 158a to EW.

In each case, the Case Managing SW will complete the Level of Care packet upon the child entering out-of-home care and when there is a triggering event. The LOC Matrix determines the placement level needed to meet the unique needs of the child/youth. The Level of Care packet must be approved by the Case Managing SW and their Social Work Supervisor (SWS) for placement recommendations up to Level 4 on the LOC. If an ISFC placement is recommended on the LOC, the Case Managing Social Work Supervisor (SWS) and Program Manager (PM) must approve the placement. Once approved the packet including any supporting documentation will be sent to the CWS ISFC e-mail inbox. The ISFC SWS reviews the packet for accuracy and completeness and then forwards the packet to the RFS Program Manager for final review and approval.

Screening

For youth that have yet to be determined as needing ISFC, the ISFC SW's will provide consultation and support to Case Managing SW's with children/youth that present the static criteria and who appear to require intensive treatment and behavioral supports. This also includes children/youth with specialized health care needs. The ISFC SW will attend CFT meetings that are convened in order to determine if a child/youth meets ISFC as determined by the LOC Rate Determination Protocol.

The ISFC SW will review all information gathered for the LOC Protocol. This information includes, but is not limited to:

• CANS (Child and Adolescent Needs and Strengths)

- Wraparound services documentation
- Therapeutic Behavioral Services (TBS) documentation
- Appraisal, Needs and Services Plan
- Interviews with the birth parents/significant adults in the child/youth/young adult's life
- Initial and Ongoing Safety/Risk Assessments; and
- Initial and Ongoing Health Screening Assessments

Upon a determination that a child/youth requires ISFC placement, an ISFC SW will be assigned secondary assignment in CWS/CMS. Fresno County will strive for the ISFC SW who provided consultation and support during the screening process to be the secondary case manager.

Assessment and Case Planning

After the child/youth is accepted and placed into ISFC, the ISFC SW will collaborate with the child/youth, the birth family, resource parents, and Case Managing SW in order to create a detailed and collaborative Needs and Services Plan, which will serve as the child/youth's Treatment Plan. The Needs and Services Plan will function as a tracking system to monitor progress on behavior and treatment goals. The ISFC SW will also review and update the child or youth's Needs and Services plan to ensure that it accurately captures the treatment and behavioral supports needed to meet the child or youth's needs.

The ISFC SW will screen children/youth for the appropriateness of Wraparound and TBS services. For children/youth that appear appropriate for these services, the ISFC SW will assist the Case Managing SW with presenting the case to the Interagency Resource Placement Committee (IRPC). The ISFC SW will attend all CFT meetings for the ISFC youth. The ISFC will review the Needs and Services Plan in all CFT meetings in order to monitor progress and provide support and collaboration.

ISFC Core Services and Supports

Fresno County DSS will provide trauma informed, culturally relevant supports and resources to ISFC children/youth/young adults. These Core Services and Supports are:

- Specialty Mental Health Services (SHMS)
- Transition Supports
- Education and Physical, Behavioral, Mental Health, Extracurricular and Social Supports
- Transition to Adulthood
- Permanency Supports
- Indian Child Services

SHMS

SHMS include individual and family therapy, case management and medication support. TBS and Wraparound services are also available to youth who are eligible. All children/youth are referred for a mental health assessment within the first week of coming into care. The assessing clinician determines present symptoms and medical necessity for treatment. The assessing clinician also completes the CANS for the child/youth.

Children/youth are referred to individual and/or family counseling as part of the assessment. The ongoing clinician will in turn make referrals for TBS as appropriate. In the event that the clinician recommends Wraparound services, the ISFC SW will coordinate the presentation of the child/youth's case to the IRPC. The ISFC SW will link the child/youth and the resource family to Wraparound upon the recommendation of the IRPC.

The contracted agencies that provide SMHS for Fresno DSS as well as the Department of Behavioral Health, Children's Mental Health Division also provide medication support for dependent children/youth. Children/youth are assessed and monitored by child psychiatrists, per their treatment recommendation needs.

Transition Supports

For children and youth who either no longer require ISFC, have reunified, or achieved a permanent plan of adoption or legal guardianship, the ISFC SW will assist the Case Managing SW with coordinating transitional services. Transitional services include but are not limited to:

- Needs and Services Planning
- Record/transfer consent to release information
- Transitional visits and resources
- Family finding referral and linkage in order to broaden and strengthen the family's supportive networks.

The ISFC SW will update the Needs and Services Plan accordingly.

Education and Physical, Behavioral, Mental Health, Extracurricular and Social Supports

Educational Supports

Fresno County dependents receive additional educational supports from the Child Focus Team. The Child Focus Team has three Educational Liaison SW's that monitor, link and advocate for our children/youth's educational needs. The Educational Liaison SW's also attend Student Study Teams (SST), Individualized Education Plan (IEP), and 504 meetings for our youth to advocate and ensure that their educational needs are being met. The Child Focus Team also has a Regional Center liaison who monitors, links, and advocates for developmentally disabled youth. The child/youth's Case Managing

SW and ISFC SW will access and coordinate services from the Child Focus Team in accordance with the child/youth's Needs and Services Plan.

Medical Evaluation and Treatment

ISFC Resource Families will be provided/obtain all needed medical and dental care for their foster youth/young adults. Upon entry into care, an initial medical exam, including a Tuberculosis (TB) test, and a dental exam are scheduled within 30 days of placement. Thereafter, youth/young adults have annual physical exams and dental checkups every six months. Children under the age of two years receive regular well baby check-ups according to the CHDP Periodicity Table. Resource Families are given information on Medi-Cal providers in their community who participate in the CHDP and/or Medi-Cal Programs. Case Managing SW's monitor medical and dental care during monthly contact visits and collect required verifying documentation on an ongoing basis. This information is maintained in the youth/young adult's Health and Education Passport and in the youth/young adult's file.

Fresno County also has a unit of Public Health Nurses (PHN's) that provide consultation, linkage, and advocacy for children/youth with physical and health challenges. ISFC children/youth will have full access to the services of our PHN's. The Case Managing SW and ISFC SW will access and coordinate PHN's services according to the child/youth's Needs and Services.

Behavioral and Mental Health Supports

As previously stated, ISFC children/youth have access to TBS and Wraparound services. These services provide additional case management supports by the child/youth's respective TBS and/or Wraparound teams. The Case Managing SW and ISFC SW will participate in TBS and Wraparound teaming meetings to ensure that these services seamlessly coordinate with all the required elements of the child/youth's Needs and Services plan.

Extracurricular and Social Supports

Fresno County provides children/youth with music lessons, art lessons, sport camps, and activities such as Boy or Girl Scouts with Foster Parent Recruitment, Retention and Support (FPRRS) monies. Case Managing SW and ISFC SW's are able to access these monies so that ISFC children/youth are able to enjoy and participate in a variety of activities suited to their social needs and inclinations.

Transition to Adulthood

Fresno County's Independent Living Program (ILP) provides primary support to youth who are transitioning to adulthood. ILP SW's are trained on how to support and reinforce the application of life skills and introduce responsibilities that are age-appropriate and developmentally appropriate. ISFC youth/young adults have full access to ILP services and supports. The Case Managing SW, ISFC SW, and ILP SW's will coordinate services as appropriate to the needs and wishes of the ISFC youth/young adult. The ILP Transitional Independent Living Plan and Agreement will serve as an attachment to the Needs and Services Plan of the ISFC youth/young adult.

Permanency Supports

Fresno County actively identifies and includes relatives for placement as well as permanency options and supports. For children/youth with little relative supports, the Family Finding unit will conduct a comprehensive search utilizing people search engines. The Family Finding unit also reaches out to family members that are located and provides support in the sometimes difficult re-establishing of familial relationships. These services will be provided to ISFC children/youth/young adults and are accessed via a referral from either the Case Managing or ISFC SW.

Fresno County's Resource Family Approval (RFA) program also provides education and support to Resource Families regarding the legal guardianship and adoption permanent plans. RFA staff will be brought into the CFT to provide these supports as needed.

Indian Child Services

Indian children receive case management services from an Indian Child Welfare Act (ICWA) unit and SW. ICWA unit staff are highly and specially trained in ICWA and have formed and established strong partnerships with our local tribes. All efforts are made to ensure that, if at all possible, the child/youth remains with members of his/her tribe. All efforts are also made to ensure that the child/youth is connected to his/her tribal culture and heritage. ICWA representatives from a child/youth's tribe are fully included in all teaming meetings as well as the court process.

For Indian children/youth that do not have an active ICWA representative involved in their case, the ICWA unit consults with the ICWA workgroup. The ICWA workgroup meets monthly and is comprised of all ICWA staff, representatives from local tribes, and representatives from agencies that provide tribal services such as Tribal TANF and the American Indian Health Project. The ICWA workgroup provides support and linkage to local tribal cultural events and activities as well as to culturally appropriate services in the community.

ISFC Resource Parent Training Requirements

ISFC resource parents are required to complete 40 hours of pre-placement training. Fresno County uses the National Trauma Informed Caregiver Training curriculum for all resource families. It is a 12-hour training that provides knowledge and understanding of how trauma, abuse, and neglect effect the development of children. It also provides direct skills to the caregiver to use in caring for children day to day. Fresno County will also use the Foster Parent College and the California Quality Parenting Initiative online training as needed to ensure training is available for ISFC emergency placements on specific topics to meet the needs of a child placed in that ISFC home. Additionally, Fresno County will provide specialized caregiver training contract for all resource families to support them in meeting the needs of the children/non-minors in their homes.

The ISFC SW will link ISFC resource parents to training resources and track that each resource parent completes the required 24 hours of ongoing training within 12 months of the placement of an eligible child/youth. The ISFC SW will also track that the ISFC resource parent completes the required 12 hours

of ongoing training per year for each year thereafter. For ISFC resource families caring for children with special health care needs, the ISFC SW will provide support and track that the ISFC resource family completes training pursuant to WIC Section 17731(c).

Respite

A respite plan can be put in place as a support to ISFC resource parents. Resource parents are entitled to two nights of respite each month for the child receiving ISFC support in their home. The ISFC resource parent will need to notify the ISFC SW of the request for respite. The ISFC SW will ensure that the respite provider is RFA approved or added to the resource parent's application to ensure appropriate background checks have been completed. The ISFC SW will also complete a home check prior to respite occurring as needed. The ISFC SW will notify the ongoing SW of the planned respite and input the date and locations in the case alerts. The ISFC SW will verify the dates respite occurred and was completed and submit a 65 for reimbursement to the respite provider.