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## Continuum of Care Reform / AB 403 Summary

### **Vision**

- All children live with a committed, nurturing and permanent family
- Services and supports are tailored to meet the needs of the individual child and family being served with the ultimate goal of maintaining a stable placement with the family.
- When appropriate, transitioning the child or youth to a permanent family and/or preparing the youth for a successful transition into adulthood.
- When needed, congregate care is a short-term, high quality, intensive intervention that is just one part of a continuum of care available for children, youth and young adults.

### **Key Guiding Principles:**

- The child, youth and family's experience and voice is important in assessment, placement and service planning.
- Children should not have to change placements to get the services and supports they need.
- Different parts of the service system needs to work in concert together to improve services to children.
- Recognizing the differing needs of probation youth.

### **Key Elements of Reform**

#### **Increased Engagement:**

- Child and Family Team: Emphasizes the need for placing agencies (child welfare and probation) and providers to engage the child, youth and family, and their formal and informal supports in the assessment, placement and service planning processes.
- Up-front and Continuing Assessment: Use of a robust assessment instrument, covering standardized domains and based upon 360-degrees reviews by providers, family and youth of the youth's needs, development and progress, to determine initial and changing service needs.

#### **Increased Capacity for Home-based Family Care:**

- Increased Capacity and Support of Resource Families (foster families): Beginning 2017, all counties, Foster Family Agencies and Short-Term Residential Treatment Centers will approve resource families to provide care to children and young adults in foster care whether temporary or permanent.
  - All resource families, including relative caregivers will receive training prior to approval.

- Training requirements have been updated to include such topics as trauma-informed care, child and adolescent development including sexual orientation, gender identity and expression, accessing local services, serving commercially sexually-exploited children, etc.
- Increased Retention, Recruitment, Training And Support Of Resource Families: increased funding for counties to develop and implement strategies for retaining and recruiting quality relative and non-relative resource families.
- Foster Family Agencies: Re-envision foster family agencies (FFAs) to:
  - Make available a core services and supports that are trauma-informed and culturally relevant, including specialty mental health services for eligible children.
  - At county request, make supports and services available to children placed in county approved resource families (related and unrelated).
- Background Checks for Tribally-approved Homes by tribal agencies

#### **Limited Use of Congregate Care:**

- Group Homes → Short Term Residential Treatment Center: Re-envision group homes as short-term residential treatment centers (STRTCs) as an intervention limited to children and youth assessed as needing 24 hour intensive supervision and treatment for their own or others safety.
  - STRTCs make available a core services and supports that are trauma-informed and culturally relevant, including specialty mental health services for eligible children. Service plans are individualized in collaboration with a child and family team and designed to transition children back to their own or another permanent family.
- All STRTCs and FFAs: Accreditation and Mental Health
  - Must be accredited by a national accrediting body.
  - Must be able to deliver or arrange for specialty mental health services to eligible children either as a certified program, a certified organizational provider or through arrangements with the county mental health plan or certified providers.
- Transition of County Shelters: GH → Temporary Shelter Care Facilities: Short-stay only for assessment to placement. The need for TSF's to be reexamined in 2021.

#### **Overarching Elements:**

- New Provider Rate Structure: One rate for STRTCs, tiered structure for FFAs.
- Multi-year, Phased-In Implementation: These changes will be phased in over several years beginning 2017, providing extensions and provisional licenses and rates to allow time for accreditation and mental health certification.
- Accountability and Provider Performance: Publically available provider performance data and a system of cross-departmental oversight (CDSS/DHCS).
- STRTCs and FFA may be public or private.