CYC

CALIFORNIA YOUTH CONNECTION

CONTINUUM OF CARE REFORM (CCR)

TOOLKIT

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WHAT IS CCR AND WHAT IS YOUR ROLE?

Continuum of Care Reform (CCR) is an initiative to drastically change policy and practice in California's foster care system.

CCR aims to ensure that all youth have the chance to live in a family environment where they can get their needs met. Once CCR is fully implemented, group homes will be a thing of the past, and new Short-Term Residential Therapeutic Programs (STRTPs) will be used only as a last resort intervention to help youth get back home as soon as possible. Through these and other changes, CCR could transform the system so that all youth are better served.

CYC members have been involved in the development of CCR since the beginning, and have created this guide to help educate current and former foster youth and equip them with the tools they need to engage in CCR themselves.

IF YOU ARE A FOSTER YOUTH who is passionate about improving the system, your voice is needed! Connect with CYC to share your voice and help us make this long overdue dream—of a better system and a better life for those in it—a reality.

CONNECT WITH CYC

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WHAT YOU NEED TO KNOW

- Youth will not be kicked out of their placement on January 1, 2017.
- There will be a **Child and Family Team (CFT)** to help make the best decisions for each youth's unique needs.
- Youth voice is critical in the **CFT**
- Youth will have the supports needed to gain permanency and lifelong relationships.
- Youth will get individualized care and treatment no matter what type of placement they are in.
- Foster Families are now called **Resource Families.** Kinship caregivers are now also considered Resource Families.
- **Resource Family Approval** means new training standards.
- All Resource Families will undergo the same trainings and be held to the same standards.
- Youth will get individualized care and treatment.
- Group homes are transitioning into **Short-Term Residential Therapeutic Programs (STRTP).**
- STRTPs provide more intensive and individualized services and supports for youth.
- It is expected that youth will be placed with a Resource Family. STRTPs are used as a last resort.
- STRTPs are short term and youth will have the supports to be placed with a Resource Family.
- Fewer group homes mean more foster parents are needed.

WHERE WE HAVE BEEN

An original skit to illustrate the origins and history of CCR.

SCENE I: IDEA TO ACTION (PRE-2012)

Governor Brown (GB): "After so many years governing, I've dealt with countless issues facing California. But something still eludes me...what are we doing to take care of the 65,000 foster youth in our state, especially those living in group homes? We need to address this and I know just the man for the job! I'm going to sign Senate Bill 1013 to help him get started! Let me get him on the phone."

Calls Director Will Lightbourne, Department of Social Services

GB: "Will, I have a little project for you. And by 'little,' I mean...

...I'm going to need you to revolutionize the way our state's foster care system operates. You game?"

Director Lightbourne (DL): "No problem. I got this, Jerry."

SENATE BILL 1013

Just the beginning of California's Child Welfare Reform, SB 1013 established accountability and oversight measures to monitor county performance. The bill allows counties more flexibility by making some county programs optional. However, this bill also expanded some programs to be statewide, and expanded services for non-minor dependents and former dependents. The bill established a platform for AB 403 Continuum of Care Reform (CCR) by revising how placements operate and exploring how best to meet the needs of youth in care.

SCENE II: ASSEMBLING THE A-TEAM

DL gets off the phone and muses to himself

DL: "Hmm, how am I ever going to be able to accomplish such a huge task? If only we knew the right people to help us plan... Maybe a handful of strong advocates, a foster parent or two, some social workers, a few providers, and even a bunch of passionate foster youth.

But where could we find a group like that? I know! I'll assemble a group of smart stakeholders to get their heads together and brainstorm solutions!"

shouts out his office door

DL: "Greg, I need a steering committee ASAP!"

SCENE III: ACTION TO...MORE IDEAS?

(Workgroup Meeting #1)

Stakeholders: "Wow, there is A LOT we need to accomplish. Where do we even start?"

2 years later

(Workgroup Meeting #236)

Stakeholders: "Well, that was productive, painless, and totally noncontentious. What a piece of cake!"

SCENE IV: NICE AND SHINY WITH A BOW

(January 2015. The Department of Social Services releases THE REPORT.)

DL: "These 19 Recommendations will be the pillars of Continuum of Care Reform in California moving forward! Now, let's get this into law."

* *Assemblymember Mark Stone introduces AB 403 and starts the legislative process**

SCENE V: GETTING THE BAND BACK TOGETHER

(October 2015)

GB signs AB 403

GB: "Hear ye, hear ye! This bill, AB 403, will now be the law of the land! Fixing California's foster care system starts now!"

after seeing that AB 403 has been signed, DL makes a call to...

DL: "Hello, this is Director Lightbourne. Thanks for taking my call. I wanted to let you know that it's time to start figuring out implementation for CCR. Are you ready?"

California Youth Connection (CYC):

"We were born ready."

END

WHERE WE ARE NOW

CYC'S VISION AND TOP CCR RECOMMENDATIONS

"Foster youth will be equal partners in contributing to all policies and decisions made in their lives. All youth in foster care will have their needs met and the support to grow into healthy and vibrant adults."

YOUTH-CENTERED PRACTICE

Youth are involved in the decision-making process.

Acknowledged as member and participant of the Child and Family Team.

GROUP HOMES

The use of group homes is reduced.

Group home staff and services meet a higher standard.

CAREGIVER EVALUATIONS

Youth have the opportunity to give constructive feedback about their placements.

REDEFINING PERMANENCY

Recognizing that permanency does not always look like adoption, permanency is redefined. It is a lifelong connection with someone the youth includes in their "family."

HOLISTIC SERVICES

Services include a variety of supports and treatments, aside from medication, that fit the individual needs of the youth.

Holistic services may include art therapy, meditation, pet therapy, and other extracurricular activities.

PLACEMENT STABILITY

Supports are provided for both family and youth.

Seven day notice is not the only option.

FOSTER YOUTH & CAREGIVER COMPATIBILITY

Through a streamlined process, foster parents and youth are matched based on needs, interests, culture, family environment, and location.

TRANSITION SUPPORTS

Youth are kept informed during the process of placement changes.

Youth are provided support with closure from previous placement and introduction to new placement.

UNIVERSAL ASSESSMENTS

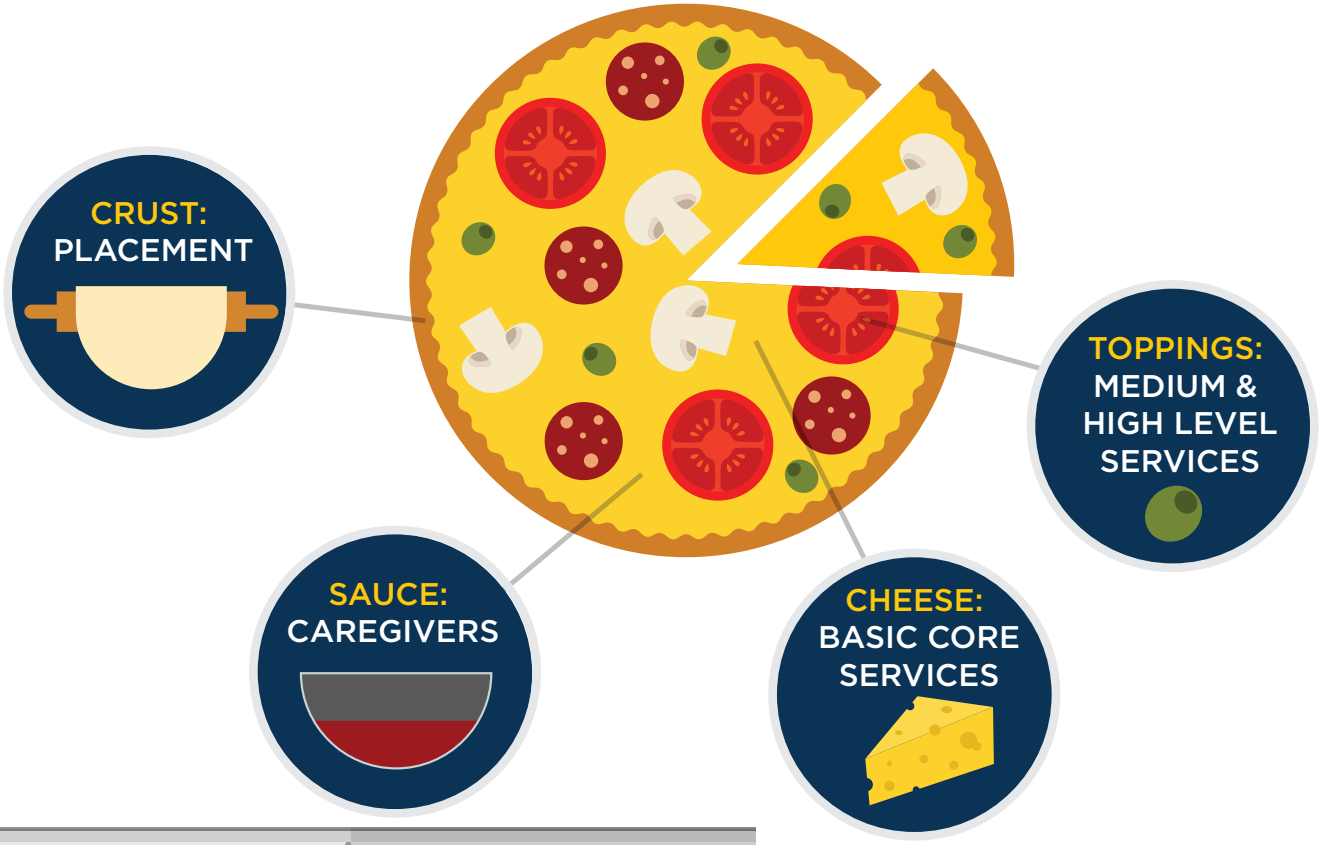
Youth perspective is included in the assessment process.

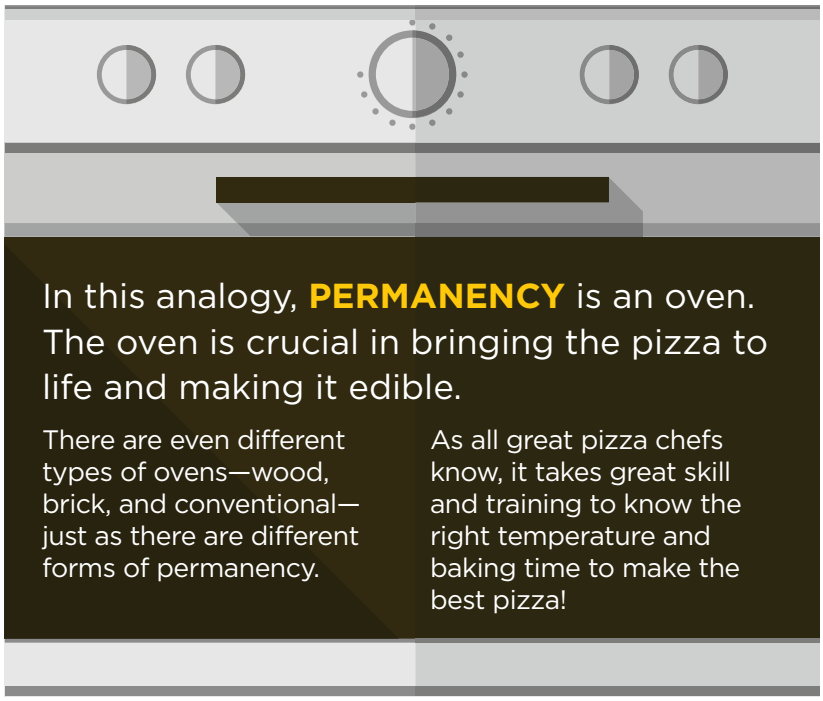
All placing agencies are held to the same standard of services provided to youth.

COMPONENT A:
CORE SERVICES PIZZA

CCR VALUE: 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.

KIND OF LIKE: A BUILD YOUR OWN PIZZA!!





In this analogy, **PERMANENCY** is an oven. The oven is crucial in bringing the pizza to life and making it edible.

There are even different types of ovens—wood, brick, and conventional—just as there are different forms of permanency.

As all great pizza chefs know, it takes great skill and training to know the right temperature and baking time to make the best pizza!

GUIDING QUESTIONS:

1. What are some of the core service toppings you'd want on your personal pizza?

2. The amount of time it will take for your pizza to be done (permanency) may depend on the type of pizza and toppings (core services). When would you know your pizza is done?

COMPONENT B: RFA AS TOLD THROUGH INTERNET MEMES

RFA stands for Resource Family Approval! This is the system that California will use to license all foster parents and other caregivers.

A major component of RFA is that all caregivers will receive upfront training. This includes adoptive and kinship. Thanks, Oprah!

That's correct, Gandalf. Once certified under RFA, caregivers will be known as resource families forevermore.

RFA goes statewide in 2017! Currently eight counties have a head start on this. The rest are coming...

Yes! Under CCR, all caregivers will undergo this process by statewide mandate starting in 2017.

Yes, yes it is.

GUIDING QUESTIONS

1. Can you think of a few different types of families? What do all families need to provide to youth in their care?

2. Why is it important for foster youth to live in a family setting? How can we recruit enough foster parents to make that a reality for all youth?

COMPONENT C:

SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAM

Before foster youth begin their journey to wellness some youth may need to stop by a Short-Term Residential Therapeutic Program (STRTP) to gather the resources they need to be well within a family setting. STRTPs are replacing the group home system and the name says it all. These are intended to be:

Short-Term—not a multi-year placement

Residential—placement

Therapeutic—in order to heal and get well

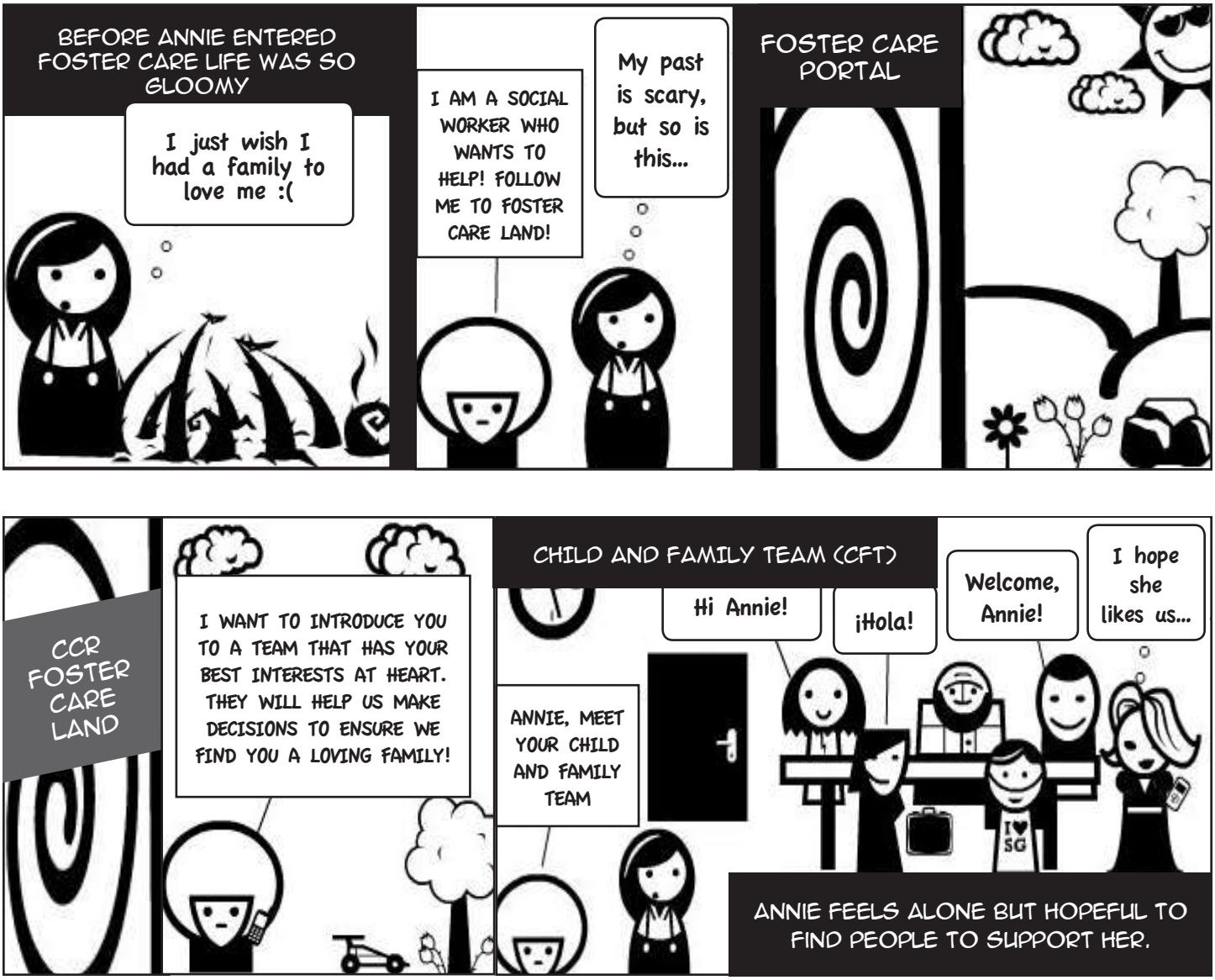
Program—a specific process to support youth

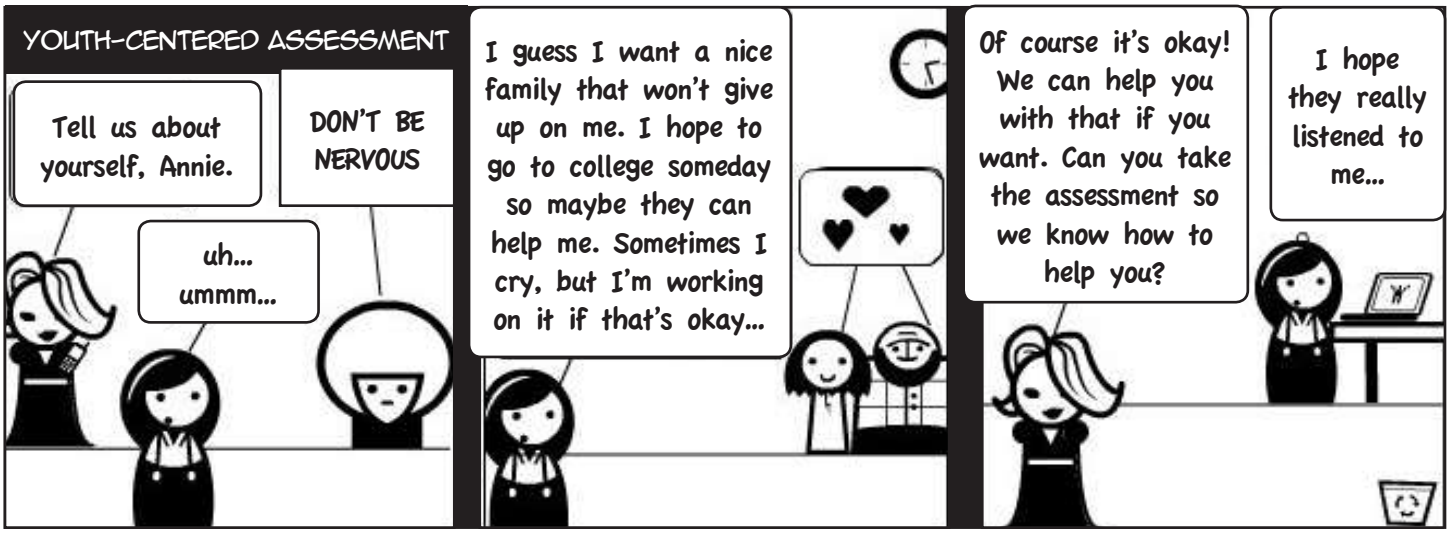
GUIDING QUESTIONS

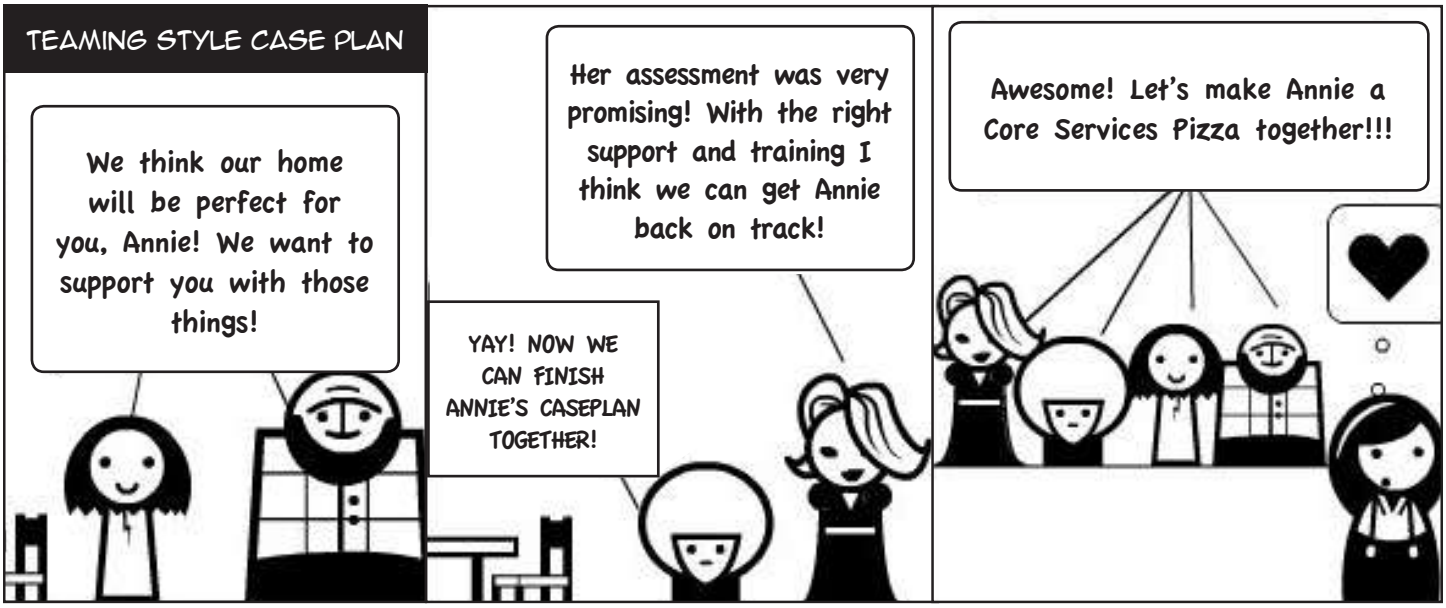
1. Which supplies (supports and services) would go into your personal wellness pack?

2. What does being physically, mentally, and emotionally well mean to you?

FLASH FORWARD TO 2018, WHEN CCR IS FULLY IMPLEMENTED







GUIDING QUESTIONS

1. Who would you want in your Child & Family Team (CFT)?

2. Can you think of an obstacle that a team might help you overcome?

WHAT THE REGS SAY IS DIFFERENT UNDER CCR

SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAMS (STRTP)

Instead of Group Homes with levels of care, Short-Term Residential Therapeutic (STRTP) Programs will provide individualized treatment services.

- Must obtain and maintain national accreditation.
- Must demonstrate the capacity to meet the treatment level needs of children/youth and Non-Minor Dependents (NMDs).
- Must make available core services including mental health services to transition children/youth and NMDs quickly back to a home-based family setting.
- Must be certified by the county mental health department and directly deliver or arrange for the EPSDT specialty mental health services that children/youth and NMDs in their care need.
- A standardized assessment process will promote better coordination of services.
- A new rate structure will reflect the changes to STRTPs.
- There will be improved transparency with new plans of operation, training plans, and program statements reflecting changes in practices and services.
- A coordinated monitoring and oversight system will be developed between the Department of Social Services and the Department of Health Care Services.

FOSTER FAMILY AGENCIES (FFA)

FFAs will provide more services and a variety of placement options.

- The California Department of Social Services will establish new licensure and rate systems.
- Plan of Operation and Program Statement requirements including core services, accreditation, RFA standards, will include supervision, evaluation, and training plan to meet the needs of children/youth.
- Core Services and support that are trauma-informed and culturally relevant, including specialty mental health services, must be made available to children, youth, and nonminor dependents either directly or secured through formal agreements with other agencies.
- At the request of a county, FFAs may provide supports and services to county-approved families, including relatives.
- All FFAs must be accredited by a national accrediting body.
- FFAs must have mental health certification by the State Department of Health Care Services or by a county mental health plan or must provide access to mental health services.
- Training plan must also be consistent with the training provided to resource families.

Adapted from All County Letter (ACL) NO. 16-79, dated September 22, 2016

- Must collaborate with the Child and Family Team (CFT).
- Must meet Resource Family Approval (RFA) standards and requirements.
- Oversight and accountability indicators through the national accrediting body, consumer satisfaction survey, cross-departmental state oversight, and publicly available provider performance measures.

CORE SERVICES

There is now a statewide standard for base core services.

According to SEC. 85. Section 11463, added to the Welfare and Institutions Code, the following Core Services are to be made available to children and nonminor dependents either directly or secured through formal agreements with other agencies, which are trauma-informed and culturally relevant and include:

(A) Specialty mental health services "for children who meet medical necessity criteria for specialty mental health services under the Medi-Cal Early and Periodic Screening, Diagnosis, and Treatment program."

(B) Transition Services "for children, youth, and families upon initial entry and placement changes and for families who assume permanency through reunification, adoption, or guardianship."

(C) Education, Physical, Behavioral, Mental Health, Extracurricular Supports such as "educational and physical, behavioral, and mental health supports, including extracurricular activities and social supports."

(D) Transition to Adulthood Services: "to support transition-age youth and nonminor dependents in achieving a successful adulthood."

(E) Permanency Support Services "to achieve permanency, including supporting efforts to reunify or achieve adoption or guardianship and efforts to maintain or establish relationships with parents, siblings, extended family members, tribes, or others important to the child or youth, as appropriate."

(F) Indian Child Services: core services A-E above will be provided to eligible children.

Adapted from All County Information Notice No. I-50-16 dated July 8, 2016

CHILD AND FAMILY TEAM (CFT)

There are statewide guidelines for Child and Family Teams, a group of individuals that includes the child or youth, family members, professionals, natural community supports, and other individuals identified by the family who are invested in the child, youth, and family's success.

- CFT shares responsibility to assess, plan, intervene, monitor and refine services over time.
- County placing agencies must convene a CFT meeting as defined to identify supports and services needed to achieve permanency, enable a child to live in the least restrictive family setting, and promote normal childhood experiences.

- In addition to mandated participation of involved public agency representatives, the composition of the team is driven by family members' preferences. Successful CFTs include persons with natural supportive relationships with the family, so that the family's support system will continue to exist after formal services are completed.
- The CFT's role is to include family members in defining and reaching identified goals for the child.
- The individuals on the team work together to identify each family member's strengths and needs, based on relevant life domains, to develop a child, youth, and family-centered case plan. The plan articulates specific strategies for achieving the child, youth, and/or family's goals based on addressing identified needs, public safety, including following related court orders, and building on or developing functional strengths.
- The CFT typically conducts and coordinates its work through a CFT meeting.
- The CFT process reflects a belief that families have the capacity to address their problems and achieve success if given the opportunity and supports to do so. Engagement with families is fundamental to the CFT process.
- Working with children, youth, and families as partners results in plans that are developed collaboratively and in a shared decision-making process. The family members hold significant power of choice when strategies are defined.
- The CFT process reflects the culture and preferences of children, youth, and families, building on their unique values and capacities, and eliciting the participation of everyone on the team.
- Team members should help children, youth, and families recognize their strengths, and encourage them and support them to develop solutions that match their preferences. The team must respect and support the power of learning from mistakes when strategies do not work as intended so that the plan can be revised to improve outcomes.
- For children or youth in placement who are receiving Intensive Care Coordination (ICC), Intensive Home-Based Services (IHBS) or Therapeutic Foster Care (TFC), a CFT meeting must occur at least every 90 days.
- For children and youth who are not receiving Specialty Mental Health Services, the placing agency will convene a CFT meeting no less than once every six months. Best practice dictates that meetings should be held as frequently as needed to address emerging issues, provide integrated and coordinated interventions, and refine the plan as needed and, therefore, frequency of meetings and timeframes should be decided by CFT members.

Adapted from All County Letter (ACL) NO. 16-84, dated October 7, 2016

ABOUT CYC

MISSION

The mission of California Youth Connection, a youth-led organization, is to develop leaders who empower each other and their communities to transform the foster care system through legislative and policy change.

VISION

Our vision is that all foster youth will be equal partners in contributing to all policies and decisions made in their lives. All youth in foster care will have their needs met and the support to grow into healthy and vibrant adults.

For more information about CYC, visit www.calyouthconn.org.

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