

CALIFORNIA'S CHILD WELFARE
CONTINUUM OF CARE REFORM (CCR)
OVERVIEW FOR CONTRA COSTA COUNTY

THE CONTINUUM OF CARE REFORM

CCR is mandated by AB 403 and is a comprehensive framework that supports children, youth and families across placement settings in achieving permanency.

CCR includes:

- Increased engagement with children, youth and families
- Increased capacity for home-based family care
- Elimination of current group home care model
- Creation of Short Term Residential Treatment Program model
- Changes in rates, training, accreditation, mental health services and accountability & performance

THE PARADIGM SHIFT

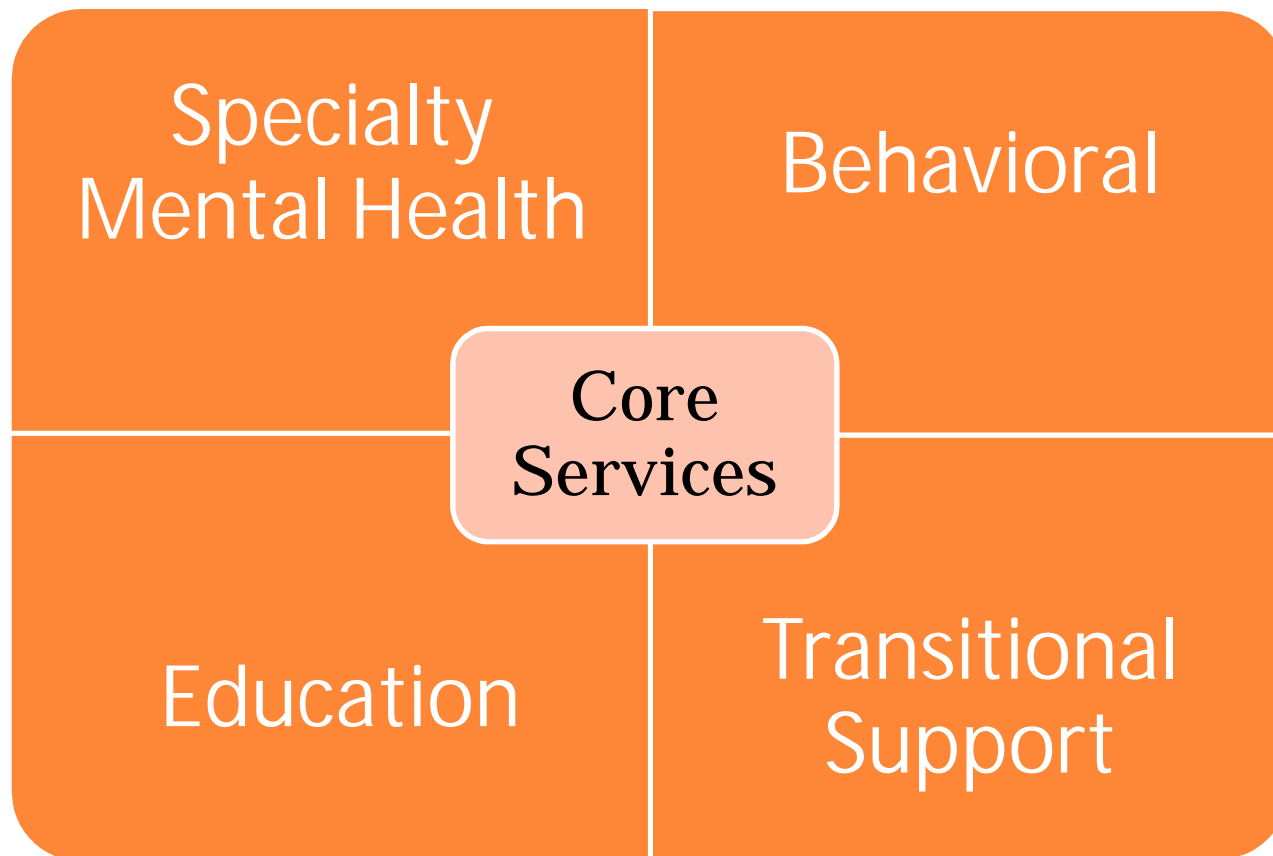
Group Home  Short Term Residential Treatment Program (STRTP)

Children who cannot be safely placed in a family setting can receive short-term, residential care with specific care plans and intensive therapeutic interventions and services to support their transition to a family.



CORE SERVICES

Short Term Residential Treatment Programs (STRTP) and Foster Family Agencies (FFA) must make available core services such as:



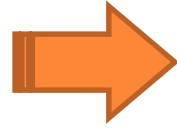
INCREASED ENGAGEMENT

- Child & Family Team(CFT)
 - Up-front and continuing assessment that includes youth, family members, and their formal and informal support network collaborating regarding support, services, and placement needs of the youth and family

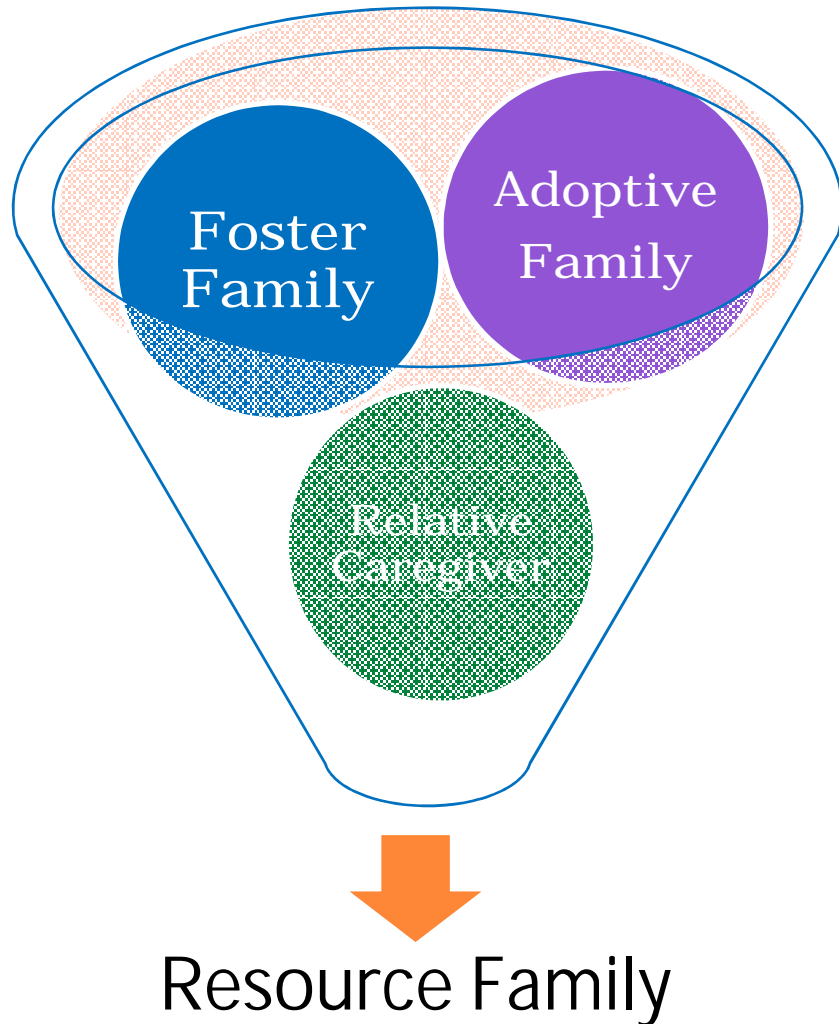


CCR also includes a shift from:

Foster Families/Relatives



Resource Families



Resource Family Approval (RFA):

- A new single, unified process for approving all caregivers, including: Kin, Non Related Extended Family Members (NREFM), licensed foster families, and FFA foster families
- Increased training requirements for caregivers

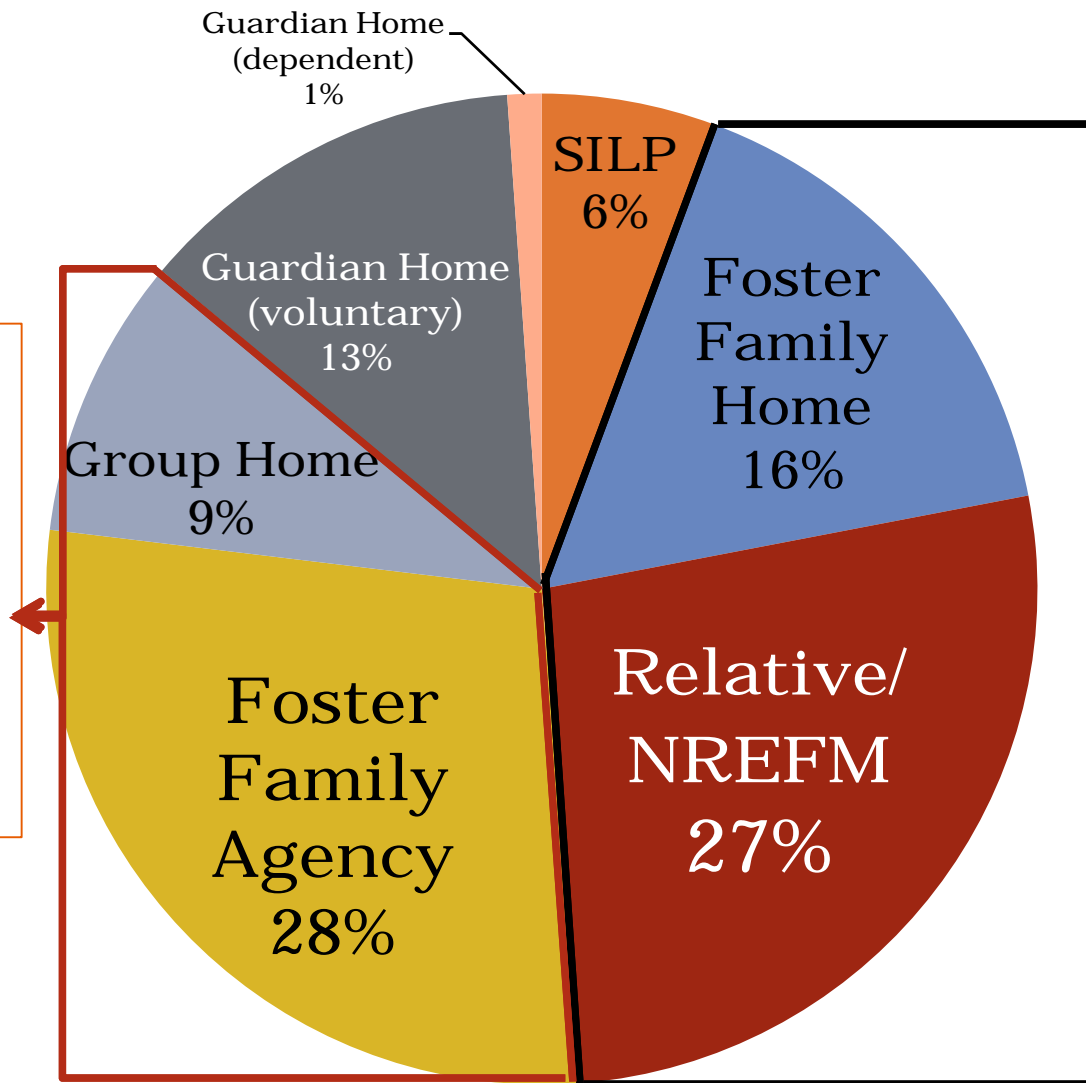


CONTRA COSTA COUNTY PLACEMENT RESOURCE DATA

- Contra Costa County has 107 dependent children in Group Home placements (approximately 10%) placed throughout 50 different group homes
- Probation has approximately 45 wards placed in 14 different group homes
- Currently there are approximately 260 licensed homes and 250 approved relative homes
 - CCC will need additional Resource Family Homes able and willing to take children stepping down from Group Homes (STRTPs)



CCC CHILDREN & FAMILY SERVICES PLACEMENTS



Group Homes and FFA's will require National Accreditation and Group Homes will convert to STRTPs

43% of placements will convert (over 2 years) to Resource Family Homes

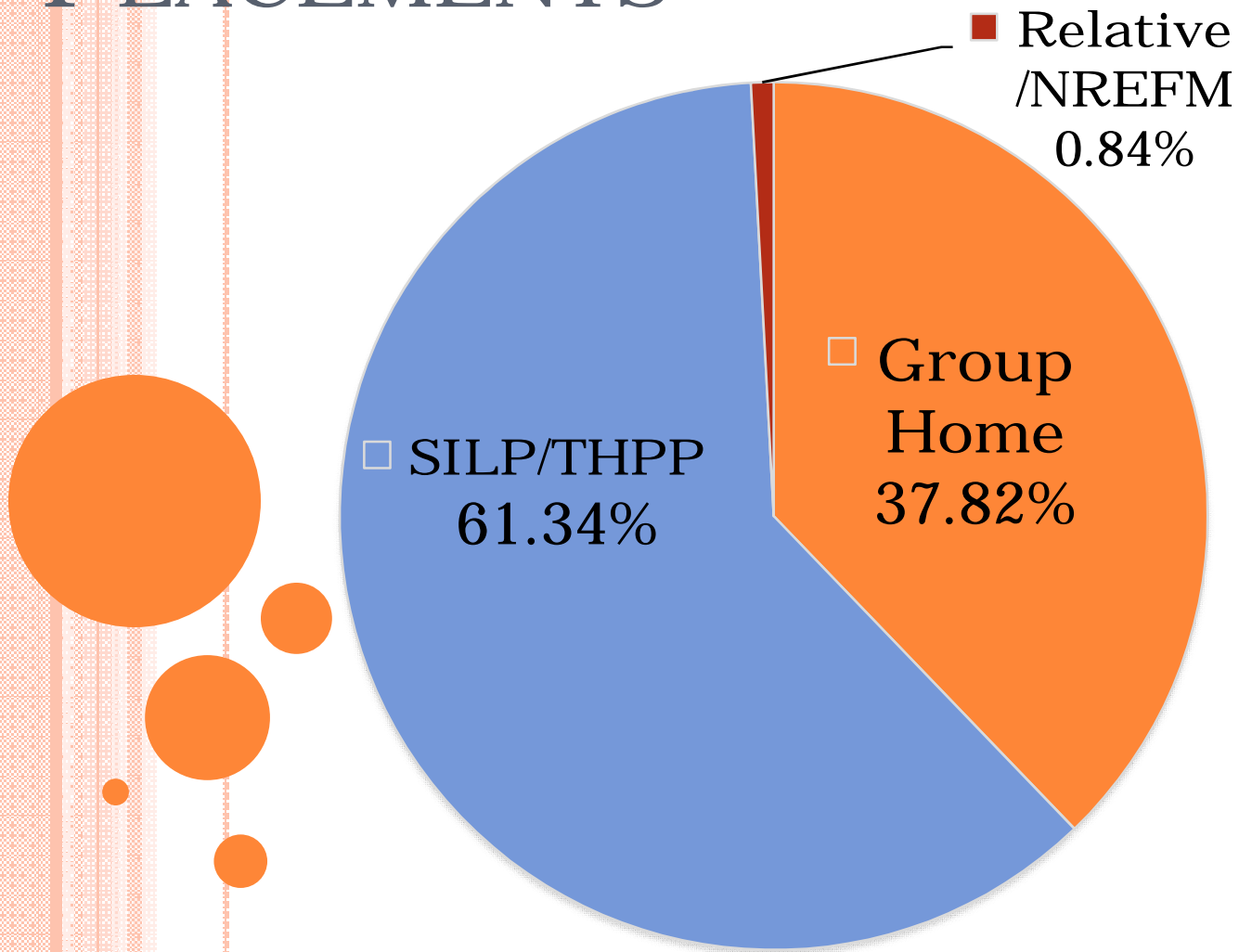


PLACEMENT IMPACT – CFS CHILDREN

- Based on current statistics:
 - 44 children will need to transition from Group Home placements to STRTPs
 - Needs include Mental Health, Trauma and Substance Abuse
 - 6 children would remain in Regional Centers
 - 57 children will need to transition from a Group Home placement to a lower level of Home Based Care
 - CCC will need home based caregivers that are willing to take dependents with higher needs levels



CONTRA COSTA PROBATION PLACEMENTS



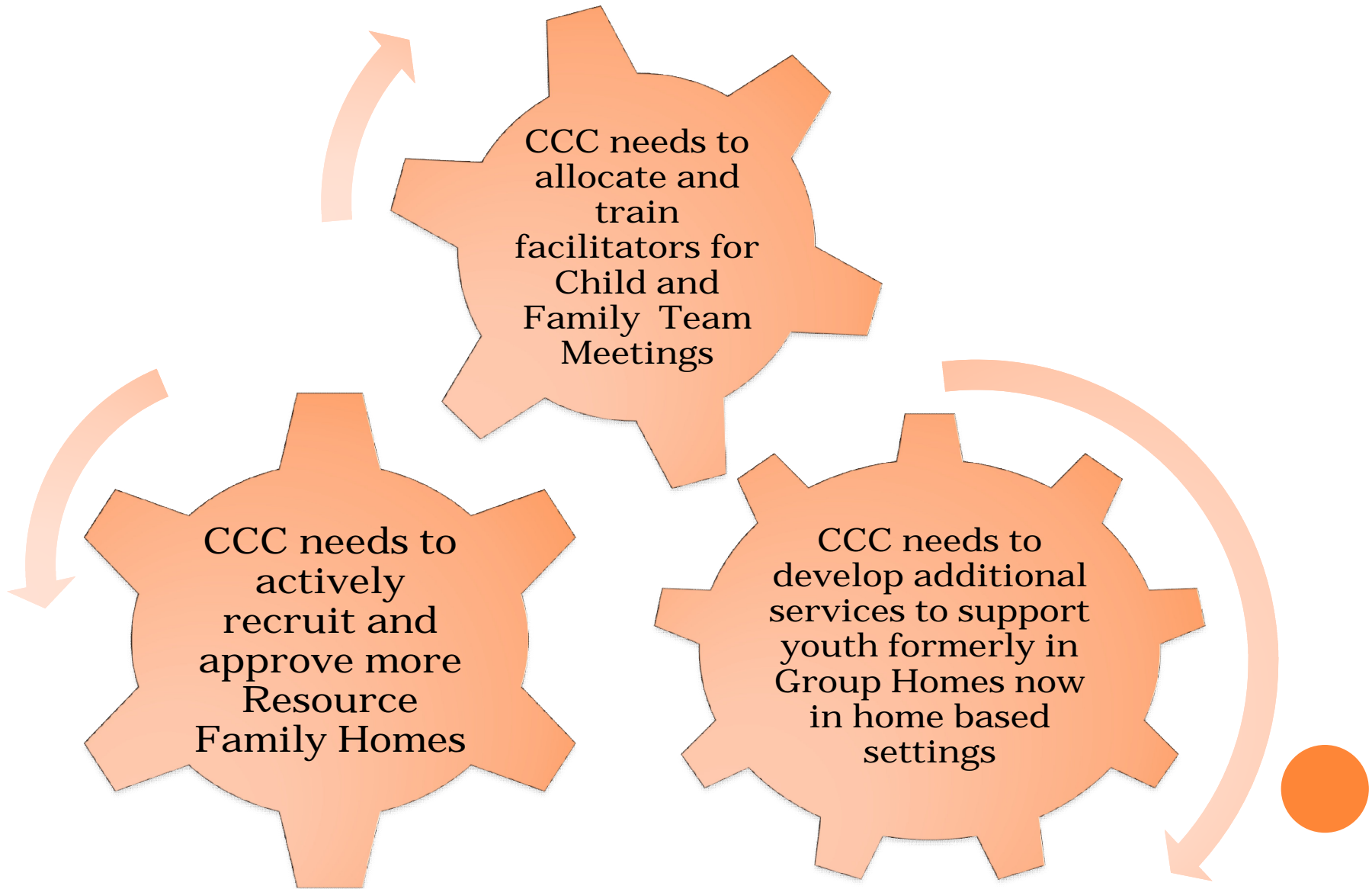
PLACEMENT IMPACT – PROBATION YOUTH

Based on current statistics:

- 35 youth will need to transition from Group Home placements to STRTPs
- 1 - 2 youth will need to transition from Group Home placement to a Resource Family



IMPLICATIONS FOR CONTRA COSTA COUNTY



CHALLENGES AHEAD

- Recruiting Foster Families
 - Increase community awareness of need for caregivers and the specific needs of our youth
- Increased training and support service needed for caregivers
 - Greater number of high needs youth who will be transitioning to home based care
- Payment Rates
 - Restructured rates need to sufficiently account for higher, more intensive levels of services that will require an increase in the Foster Care budget
- Some Group Homes may not be able to make the conversion to STRTP
 - This will result in fewer placements for challenging youth and reliance on home based care



MENTAL HEALTH SERVICES CHALLENGES

- Additional resources needed to monitor and facilitate the implementation of Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) Specialty Mental Health Services by FFA's and Foster homes, as well as provide Mental Health Consultation and Training.
- Increased need for Utilization Review, authorization, and monitoring of service delivery and documentation
- Increased need of Outpatient and Crisis services that will require greater resources and Staffing

THE WORK

EHSD has...

Created a Steering Committee consisting of the CFS Director, Children's Behavioral Health Manager, Probation Manager, Parent Partner, and Youth Partner

Begun reviewing all youth in Group Home Care to assess the service and support needs to move to a Resource Family Placement

Submitted CCC's Resource Family Approval Implementation plan to CDSS

Created a CCR Leadership Team consisting of EHSD Agency Director, Behavioral Health Director, and Chief Probation Officer and Chief Assistant CAO

Initiated Work Groups comprised of staff from CWS, BH, and Probation to focus on the implementation strategies for:

- Child & Family Teams
- Resource Family Approval
- Group Home/Foster Family Agencies/ Behavioral Health
- Training
- Communication
- Data

LOOKING AHEAD

- “The goal for all children in foster care is normalcy in development while establishing permanent life-long family relationships. Therefore, children should not remain in a group living environment for long periods of time”
- “All children deserve to live with a committed, nurturing, and permanent family that prepares youth for a successful transition into adulthood.”

