

December 4, 2019

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

EXECUTIVE SUMMARY

ALL COUNTY INFORMATION NOTICE NO. I-73-19

The purpose of this ACIN is to provide instructions to County Child Welfare, Behavioral Health, Probation Departments, and group home (GH) providers regarding how to request a sixth GH rate extension using the Attachment A, Joint Plan Update, Provider Transition Plan or a Facility Closure Plan template in order to maintain eligibility for GH placement of a foster child or nonminor dependent.



KIM JOHNSON
DIRECTOR

STATE OF CALIFORNIA—HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF SOCIAL SERVICES
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GAVIN NEWSOM
GOVERNOR

December 4, 2019

ALL COUNTY INFORMATION NOTICE NO. I-73-19

TO: ALL COUNTY WELFARE DIRECTORS
ALL GROUP HOME PROVIDERS
ALL CHIEF PROBATION OFFICERS
COUNTY WELFARE DIRECTORS ASSOCIATION OF CALIFORNIA
ALL TITLE IV-E TRIBES
ALL COUNTY MENTAL HEALTH PLAN DIRECTORS

SUBJECT: **SIXTH GROUP HOME RATE EXTENSIONS; REQUIREMENTS FOR COUNTIES TO CONTINUE GROUP HOME PLACEMENTS AND THE IMPLICATIONS FOR PLACEMENT FUNDING**

REFERENCE: [Assembly Bill \(AB\) 1811 \(Chapter 35, Statutes of 2018\)](#), [AB 404 \(Chapter 732, Statutes of 2017\)](#), [AB 403 \(Chapter 773, Statutes of 2015\)](#), [AB 1006 \(Chapter 714, Statutes of 2017\)](#), [Family Code Section 7911.1](#), [Health and Safety Code \(HSC\) Section 1502](#), [Welfare and Institutions Code \(WIC\) Section 11462.04](#), [WIC Section 11466.01](#), [WIC Section 11468.2](#), [ACL 16-28](#), [ACL 16-65](#), [ACL 18-42](#), [ACL 18-100](#), [ACL 19-53](#), [ACIN I-37-18](#), [ACIN I-75-17](#), [ACIN I-79-18](#), [ACIN I-36-19](#)

The purpose of this All-County Information Notice (ACIN) is to provide instructions to counties and group home (GH) providers regarding how to request a **sixth GH rate extension not to exceed June 30, 2020**. For counties to continue to place their foster children and nonminor dependents in GHs using Aid to Families with Dependent Children—Foster Care (AFDC-FC) placement funding beyond January 1, 2020, Child Welfare, Behavioral Health, and Probation Departments must submit a Joint Plan Update and a Child-Specific Transition Plan (Attachment A). GH providers must comply with the requirements of this ACIN to be considered for a GH rate extension beyond January 1, 2020; they must participate with the county in developing the Attachment A with child-specific plans and, depending on their status and future plans, they must submit a Provider Transition Plan or a Facility Closure Plan. **These requirements also apply to Out-of-State GH providers.**

In order to remain available for foster care placements, GHs are required to transition to a Short Term Residential Therapeutic Program (STRTP) or another AFDC-FC eligible facility type, or be granted a case-by-case rate extension by the California Department of Social Services (CDSS) pursuant to Welfare and Institutions Code [\(WIC\) Section 11462.04](#).

[AB 1811](#) authorizes CDSS to grant rate extensions to GHs, upon a county placing agency submitting a written request on behalf of a provider and providing documentation as specified in [WIC Section 11462.04\(d\)\(1\)\(B\)](#). The Fifth GH Rate Extension requests submitted by a county to CDSS had an effective start date of June 30, 2019 and will expire on December 31, 2019. CDSS may grant an additional rate extension in increments up to six months for a period not to exceed December 31, 2020.

In conjunction with the Fifth GH Rate Extensions authorized in [ACIN I-36-19](#), counties submitted system level capacity assessments (County Capacity Plans) and child specific transition plans (Attachment A) in the 2018 and 2019 calendar year. This documentation provided by the counties is intended to support county placing agencies and county behavioral health departments in jointly identifying the county need and developing needed STRTP and home-based services capacity. Additionally, it is intended to support county placing agencies and behavioral health departments in jointly developing and implementing child specific transition plans that address the barriers to home based placements using child and family team (CFT) meetings, home-based specialty mental health services, intensive family finding and engagement, and specialized permanency services, among other strategies.

The Attachment A documentation and County Capacity Plan documentation provided by the counties indicated there is a continued need for a GH rate extension in order to support continued capacity planning efforts and for continued development and implementation of child-specific transition plans for children or nonminor dependents placed in GHs operating under an extension.

In order for GH facilities to receive an extension of their rate classification level (RCL) for placements of AFDC-FC eligible children or nonminor dependents, CDSS **must** receive from the county a completed Child Specific Transition Plan (Attachment A) template and Joint Plan Update **on or before December 31, 2019**. If the Attachment A template and Joint Plan Update is not received, a GH rate extension will not be granted, **and the cost of the GH placement will be borne solely by the placing county using local funds**.

County and Mental Health Plan (MHP) Requirement of a Joint Plan Update

County placing agencies and the MHP will not be required to provide another Capacity Plan but will be required to jointly document the progress they have made since the Fifth GH Rate Extension to address the county's capacity needs in a **Joint Plan Update** which includes the following information:

- Progress update on the previously submitted joint plan that identified the needed capacity of STRTP providers and home-based Foster Family Agency (FFA) with which they have contracted or intend to contract with;
- Progress update on the joint plan to provide or make available ongoing intensive family finding and engagement services that are informed and supported by the CFT, available to all children or nonminor dependents remaining in GH placement operating under an extension;
- Progress update on the joint plan to ensure that all children or nonminor dependents remaining in a GH placement operating under an extension have been properly referred and assessed for specialty mental health services, and county MHPs shall ensure that needed services are reflected in the child-specific transition plans and are being provided in support of a timely transition to home based placement;
- Progress update on the joint plan to ensure all children or nonminor dependents identified by an Interagency Placement Committee (IPC) as requiring an STRTP level of care are receiving equivalent intensive mental health services while placed in a GH operating under an extension or a provisionally licensed STRTP lacking a direct specialty mental health services contract.

County Requirement for a Child-Specific Transition Plan (Attachment A)

The Child-Specific Transition Plan (Attachment A) shall be completed by the child welfare agency in collaboration with Behavioral Health, probation departments and the GH provider. Pursuant to [WIC section 11462.04 \(d\)\(1\)\(B\)\(iii\)](#), placement of a child or nonminor dependent in a GH operating under the rate extension is eligible for AFDC-FC payment only if a Child-Specific Transition Plan documenting the following has been provided to CDSS:

- Placement goal of the child or nonminor dependent;
- Date of the child or nonminor dependent's IPC approval;
- Description of the outcome of the IPC assessment;
- The target date of transition for the child or nonminor dependent;
- CFT driven child specific transition plan that identifies and responds to barriers to home-based placement;
- Documentation of the trauma-informed and permanency-competent specialty mental health services being provided, including wraparound, collateral, intensive

care coordination, intensive home-based services, or therapeutic behavioral services;

- For any child or nonminor dependent without an identified home-based caregiver, including those children identified for transition to an STRTP, the county placing agency and MHP must detail how they will collaborate with the GH provider to support a child or nonminor dependent's step-down to a home-based placement, including documentation on intensive family finding and engagement;
- Document efforts to expand or establish intensive services foster care, therapeutic foster care programs, and other home-based services that provide timely access to trauma informed care, in conjunction with the county behavioral health department;
- For any child identified as requiring regional center services, counties shall collaborate with regional centers and special education agencies that would aid the county child welfare agency in delivering appropriate services to foster children.

These core activities are essential to begin development of a successful transition plan, which CDSS acknowledges may take time to fully implement. Continued GH extensions will be available to support full implementation of well-developed transition plans for all children who remain in GH placements. Additionally, the identified gaps in CFT driven transition planning, ongoing family finding and engagement, and provision of needed services and supports must be addressed for all children who remain in a GH placement. For any child that does not have a well-developed transition plan that meets the requirements outlined in this ACIN, the county will have 30 days to jointly address these barriers and to document and submit to CCRPerformance@dss.ca.gov that the above joint transition planning gaps have been addressed, with a focus on IPC determinations, CFT driven transition planning, ongoing family finding and engagement, and provision of needed services and supports. In order to ensure preparation for the end of the extension timeframe, identified gaps in any of the above Attachment A requirements may result in a counties loss of Title IV-E funds. Additionally, gaps in these requirements may also result in the establishment of a Corrective Action Plan, Program Improvement Plan and/or a Memorandum of Understanding to ensure that all the above is being met for every child currently or subsequently placed in a group home operating pursuant to an extension.

Supports from CDSS

CDSS will continue to provide intensive technical assistance (TA) to all counties and providers to support providers who are in the process of applying to transition to a STRTP. Additionally, TA webinars are accessible on the Continuum of Care Reform website ([CCR STRTP website](#)) and will be updated and added to periodically to

provide assistance to counties and GHs in the transitional stages to becoming a STRTP.

CDSS has contracted with nationally recognized consultant and child welfare professional, Dr. Denise Goodman, to provide counties with TA around recruitment, retention, and support of resource families. The available TA includes coaching, training and/or consultation services for the purpose of increasing capacity and supports of home-based family care. The focus of the TA can be centered around recruitment of specialized populations or other related issues. For more information about TA, please contact Rami.Chand@dss.ca.gov.

CDSS partnered with county placing agencies to identify children residing in residential placements, with priority of those children residing in residential care facilities that are not converting to STRTPs. The Active Supportive Intervention Services for Transition (ASIST) program funding is short term and time limited for the 2019/2020 fiscal year, which provides funding to support the successful transition of children from residential placements to family-based settings. For more information on this program, please refer to All County Letter [ACL 19-53](#).

CDSS, in partnership with County Welfare Directors Association, County Probation Officers of California, and County Behavioral Health Directors Association, will continue to provide TA to counties who are unable to identify an appropriate STRTP placement due to repeated non-admissions or unplanned discharges when prior efforts for county leadership to engage providers have been unsuccessful. For more information, contact CCR@dss.ca.gov.

Extensions for Providers with Completed STRTP Application

The GH Providers with complete STRTP applications accepted and under consideration by CDSS **on or before December 31, 2019**, will be granted a rate extension if the provider participates with the county in developing the Child-Specific Transition Plan (Attachment A) and the following information is documented in the **GH Provider Transition Plan**:

- Name of the Provider;
- License number;
- Status of STRTP Application;
- Status of the application if transitioning to another licensure category (such as FFA, Wraparound provider, vendorized GH, or a Transitional Housing Program Placement (THPP));
- List of children that will be affected by the different licensure type the facility is transitioning to;
- First and last name of child;

- Placing County;
- Placing Agency;
- Placing agency worker's full name, e-mail and telephone contact information;
- Identified placement of child if not identified as needing new licensure type of placement (Home-based care giver, Community Resource Family, STRTP);
- Date child will relocate.

The GH rate extension allows the GH to continue receiving placements at their existing RCL rate but does not guarantee approval of an application to become a STRTP. When a GH receives provisional licensure as a STRTP, the STRTP provisional rate will be effective as of the date of licensure and is subject to the terms and conditions set forth in [WIC section 11466.01](#).

Providers Changing to A Different Licensure Category or Program Model

To qualify for a rate extension, a provider planning to change to another licensure category or program model (such as an FFA, Wraparound provider, vendorized GH, or Transitional Housing Program) must participate with the county in developing the Child-Specific Transition Plan (Attachment A) and fill out and submit a **GH Provider Transition Plan** that describes their plan to change to another licensure, and the status of their application for another licensing category or program model and provide specific transition plans for each foster child. All **GH Provider Transition Plans** should be submitted to CCRPerformance@dss.ca.gov **on or before December 31, 2019** in order to be eligible for a GH rate extension.

Providers Without a STRTP Application and Providers with a Denied STRTP Application

GH providers/facilities without a STRTP application or with a denied STRTP application should **not accept** any new placements of foster children, as a GH rate extension is being granted only to allow the transition of children already placed in the GH to a more appropriate placement setting.

To qualify for a rate extension, a provider which is not applying for STRTP licensure or has received a denial of STRTP application, and **intending to close its GH facilities**, must participate with the county in developing the Child-Specific Transition Plan (Attachment A) and submit a **Facility Closure Plan** using a template provided as an attachment to this letter. The primary purpose of this template is to avoid sudden facility closures leading to abrupt placement disruptions and to ensure placing counties and the facility have a common understanding about the timeline for transition of children placed in the facility, potential fiscal circumstances impacting the closure timeline, and to ensure that barriers to home based foster care or STRTP placement are being actively addressed for each child.

Providers that will remain a licensed GH and Only Accept Private Placements

Providers which plan to remain a licensed GH and only accept private placements must apply for a rate extension if they still have foster children placed in their GH and should **not accept** any new placements of foster children, as a GH rate extension is being granted only to allow the transition of children already placed in the GH to a more appropriate placement setting. To qualify for a rate extension, a GH provider which is **not** applying for STRTP licensure and is **planning to remain a licensed GH accepting only private placements**, must participate with the county in developing the Child-Specific Transition Plan (Attachment A), submit information that describes their plan of change to become a private GH within the **GH Provider Transition Plan** Template by **December 31, 2019**, and provide specific transition plans for each foster child.

Extensions are not guaranteed and will be provided at CDSS' discretion. Should a rate extension not be granted to a GH provider, that GH shall not be an eligible foster care placement and the cost of the GH placement will be borne solely by the placing county using local funds.

A GH provider that does not receive a rate extension, and therefore has its rate terminated by operation of law under [WIC Section 11462.04\(c\)](#), shall have a right to protest the rate termination as provided under [WIC Section 11468.2](#). The rate protest and appeal procedures applicable to GHs as set forth in [WIC Section 11468](#) et seq. and the [CDSS Manual of Policies and Procedures section 11-430](#) et seq. shall apply.

In order for GH facilities to continue to receive a RCL group home rate for AFDC-FC eligible children, CDSS must receive from the county a completed child-specific transition plan Attachment A template and Joint Plan Update on or before **December 31, 2019** at CCRPerformance@dss.ca.gov.

The Continuum of Care Reform Branch thanks you for your continued efforts to develop and implement child specific transition plans that address the barriers to home based placements. If you have any questions, please contact the CCR Branch at CCRPerformance@dss.ca.gov.

Sincerely,

CHERYL TREADWELL, Chief
Foster Care Audits and Rates Branch
Children and Family Services Division

SARA E. ROGERS, Chief
Continuum of Care Reform Branch
Children and Family Services Division

c: Child Welfare Directors Association