The Tiered Foster Care Rate Structure Implementation Overview

> The Chief Probation Officers of California Foster Care Conference Tuesday, April 1, 2025



SOCIAL SERVICES

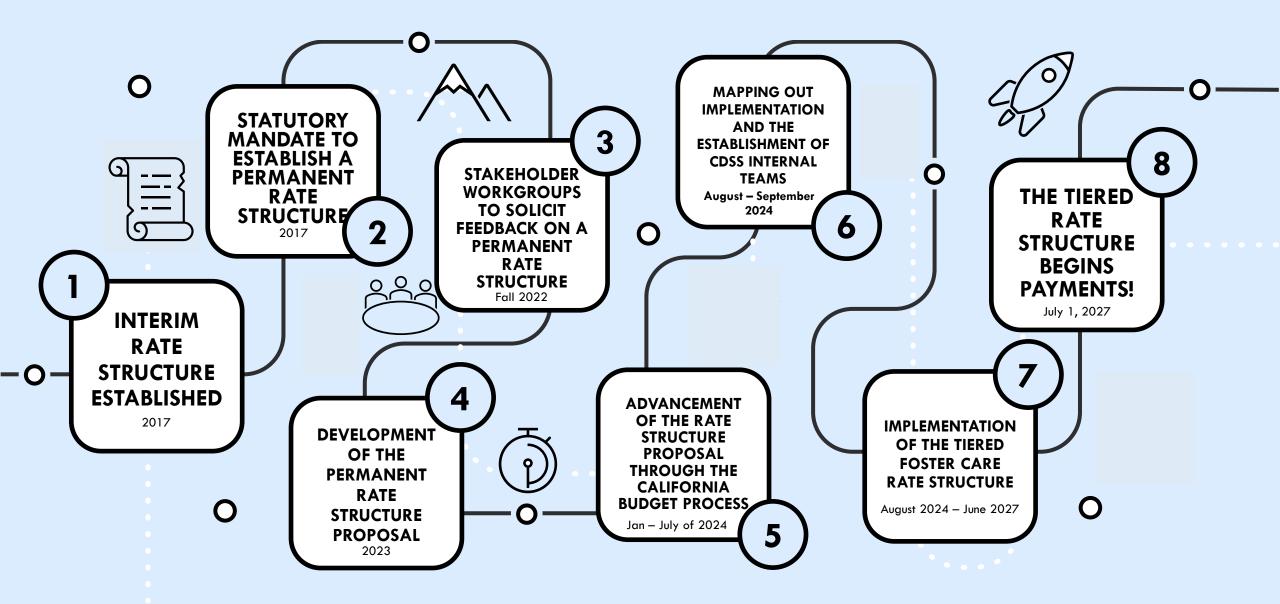
Agenda

Overview of the Tiered Foster Care Rate Structure

Implementation Timeline Overview

How Probation Can Start Preparing

THE TIERED FOSTER CARE RATE STRUCTURE



The Tiered Foster Care Rate Structure Innovation 1 – The Tiers are Based on the Child's Assessed Level of Need

Tier 1 74% of children and youth				
Ages 0-5	Ages 6+			
Latent Class 1 and 2	Latent Class 1, 2, and 3			
Tier 2 19% of children and youth				
Ages 0-5	Ages 6+			
Latent Class 3	Latent Class 4 and 5			
Tier 3	Tier 3+			
4.5% of children	2.5% of children			
Ages 0-5	Ages 6+			
Latent Class 4	Latent Class 6a and 6b			

The Tiered Foster Care Rate Structure Innovation 2 – Two New Categories of Funding Strengths Building and Immediate Needs

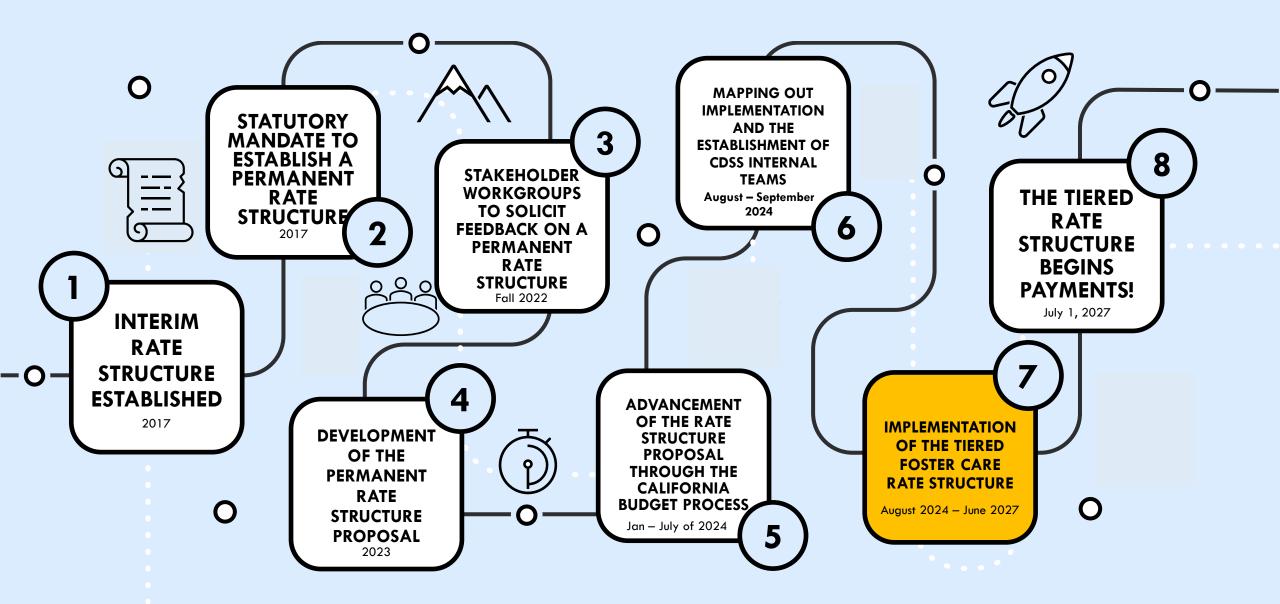
Tier 1 74% of children and youth Care and Supervision Strengths Building and Maintenance			
Tier 2 19% of children and youth Care and Supervision Strength Building and Maintenance			
Immediate Needs			
Tier 3 (ages 0-5) 4.5% of children	Tier 3+ (ages 6 and older) 2.5% of children and youth		
Care and Supervision	Care and Supervision		
Strength Building and Maintenance	Strength Building and Maintenance		
Immediate Needs	Immediate Needs		

The Tiered Foster Care Rate Structure Innovation 3 – The Funding Follows the Child The Rates Are No Longer Connected to the Placement Type

- There are three tiers that a child or youth can be placed in.
- The funding affiliated with that child or youth's assigned tier is not connected to any specific placement type.
 - Meaning youth with the highest levels of needs, in Tier 3+, can receive
 - the Tier 3+ rate in a home-based setting.

Tier 1 74% of children and youth				
Care and Supervision				
Strengths Building and Maintenance				
Tier 2 19% of children and youth				
Care and Supervision				
Strength Building and Maintenance				
Immediate Needs				
Tier 3 (ages 0-5) 4.5% of children	Tier 3+ (ages 6 and older) 2.5% of children and youth			
Care and Supervision	Care and Supervision			
Strength Building and Maintenance	Strength Building and Maintenance			
Immediate Needs Immediate Needs				

THE TIERED FOSTER CARE RATE STRUCTURE



The Five Categories of Implementation

CFT and CANS Fidelity
 Care and Supervision
 The Strengths Building Program
 The Immediate Needs Program
 CalSAWS and CWS-CARES Automation

1. The Planning Phase August of 2024 – June of 2025

The Three Phases of Implementation

2. The Preparation Phase July of 2025 – June of 2026

3. The Early Implementation Phase July of 2026 – June 30, 2027



1. The Child and Family Team (CFT) and Child and Adolescent Needs and Strengths (CANS) Fidelity Implementation Plan

ACL 25-10: UPDATED REQUIREMENTS FOR IP-CANS AND CFTS

Released February 18, 2025, this letter updates placing agency requirements to complete the IP-CANS and provide CFT meetings to children and youth, including:

IP-CANS Completion

 All placing agencies required to ensure completion of IP-CANS, including juvenile probation

CFT Cadence & Timing

 Timing & frequency requirements for CFT meetings updated to align with IP-CANS requirements

Updated requirements are, in part, intended to support greater consistency and improve fidelity to the IP-CANS and CFT processes.

Updated requirements are effective July 1, 2025.

ACL 25-10: UPDATED REQUIREMENTS FOR IP-CANS AND CFTS

Updated Requirements Include:

- Specifies 12 conditions requiring completion of a new or updated IP-CANS
 Case closure, for example
- Requires IP-CANS completers to attend CDSS-sponsored training.

CARES-Live

- Requires completed initial IP-CANS be entered into CARES-Live within 10 calendar days of its completion or by the end of the month, whichever is sooner.
- Updated IP-CANS may be entered into CARES-Live without regard to end of month – but still within 10 calendar days.

Placing agencies that have agreements with their MHP or providers to complete IP-CANS must ensure they receive copies immediately upon completion to meet data entry requirements.

DRAFT FIDELITY ACL

Background includes info on CFT, CANS, the Tiered Rate Structure, and Cultural Considerations

Based on Stakeholder Input

Pushing Release to

Partner and Tribal Engagement is included - CQI & Fidelity Workgroup

Fidelity Plan consists of 4 Key Flements:

1. System-Level Fidelity Tool

2. Case-Level Fidelity Tools

3. CFT & IP-CANS Data Reports

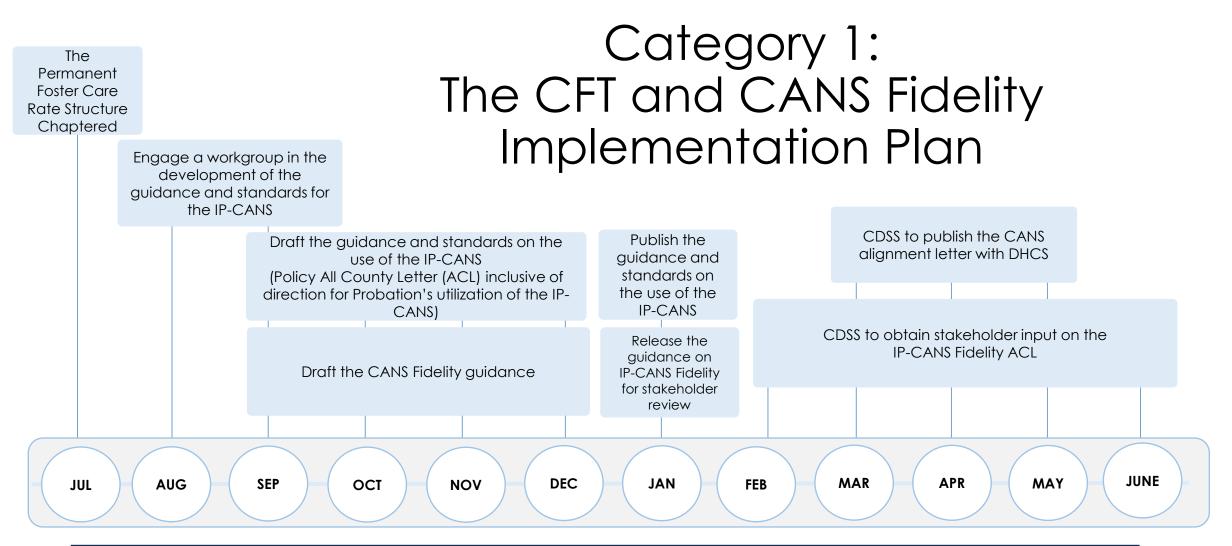
4. Training, Coaching, and Technical Assistance

Importance of Documentation -Data not documented cannot be used to assess or inform practices.

Monitoring and Oversight -

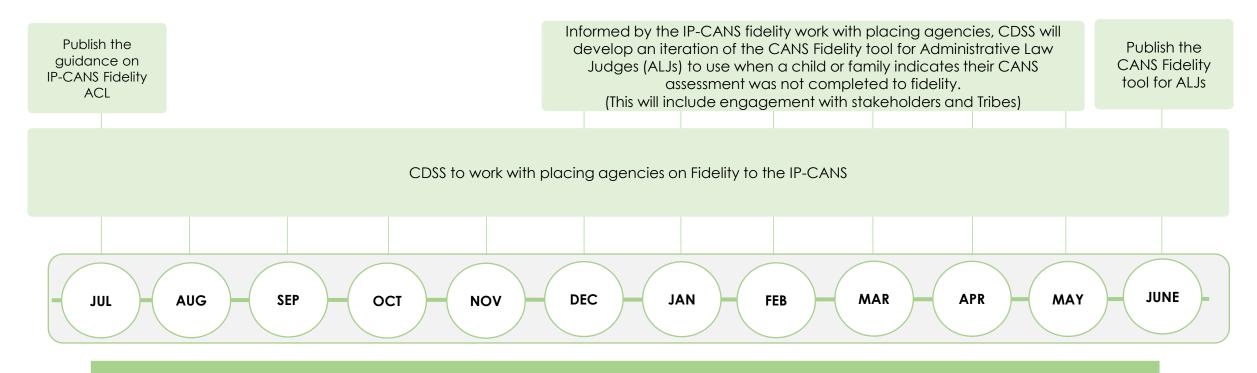
CDSS will partner with placing agencies to review CFT/CANS practices & policies, evaluate fidelity data and information, and provide technical assistance and support.

Technical Assistance and Support - Placing agencies will develop plans for CFT and IP-CANS for implementation and practice fidelity improvement. Technical assistance, additional training, and/or coaching will be provided by CDSS and training partners.





Category 1: The CFT and CANS Fidelity Implementation Plan

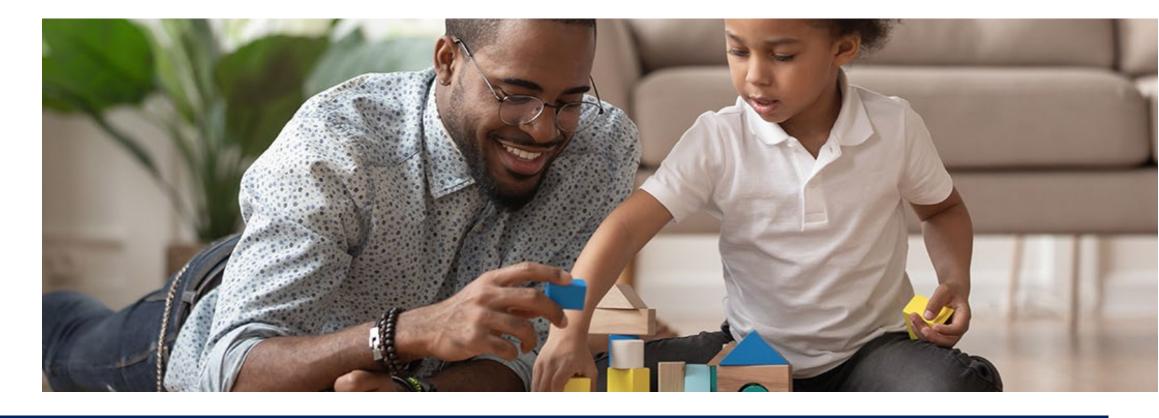


July 2025 – June 2026 The Preparation Phase

Category 1: The CFT and CANS Fidelity Implementation Plan

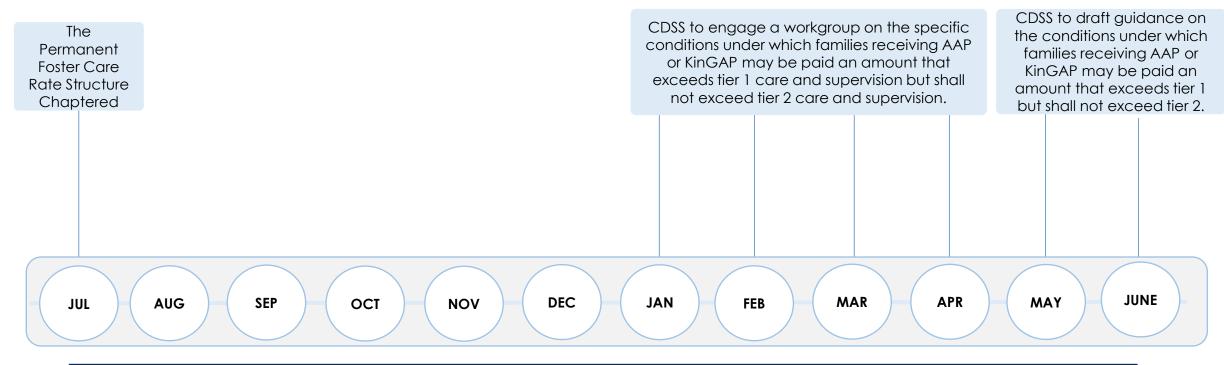


July 2026 – June 2027 The Early Implementation Phase



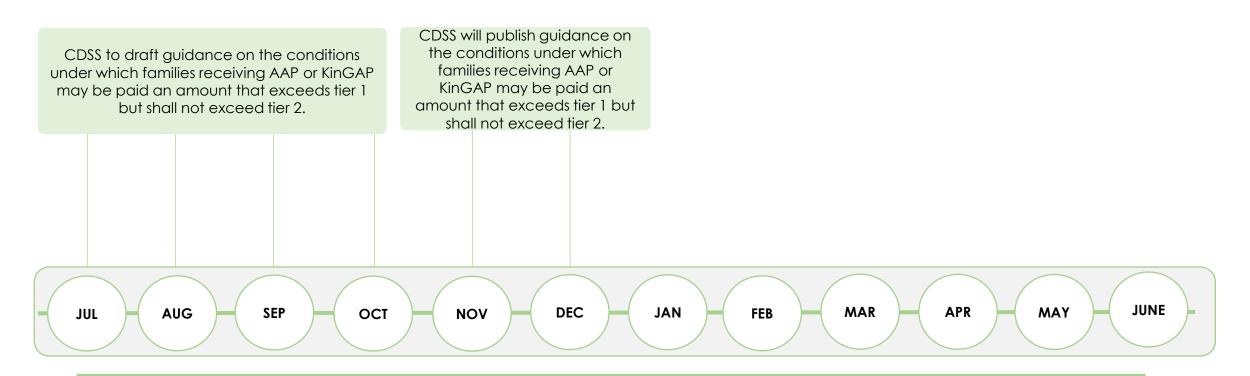
2. The Care and Supervision Implementation Plan

Category 2: Care and Supervision



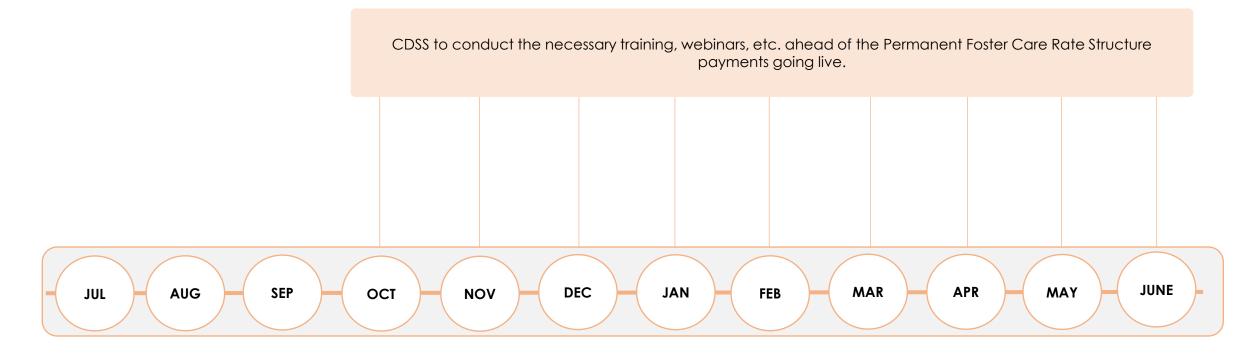
July 2024 – June 2025 The Planning Phase

Category 2: Care and Supervision



July 2025 – June 2026 The Preparation Phase

Category 2: Care and Supervision



July 2026 – June 2027 The Early Implementation Phase



3. The Strengths Building Program Implementation Plan

A Self Determination Model

Background

Self-Determination theory was created by Ryan and Deci (2000)¹. The theory starts with two assumptions:

1. Human beings strive for growth, and

2. Internal sources of motivation are essential in order to achieve growth, people need to feel competent, autonomous, and connected with others.

Self-Determination Theory

Human beings have three basic needs:

Competence

People need to gain mastery and control of their own lives & their environment. Essential to wellness

Autonomy

People need to feel in control of their own life, behaviours and goals. This is about choice.

Relatedness

People need to experience a sense of belonging and connection with other people. Feeling cared for by others & to care for others.

Based on the work of Richard Ryan and Edward Deci.

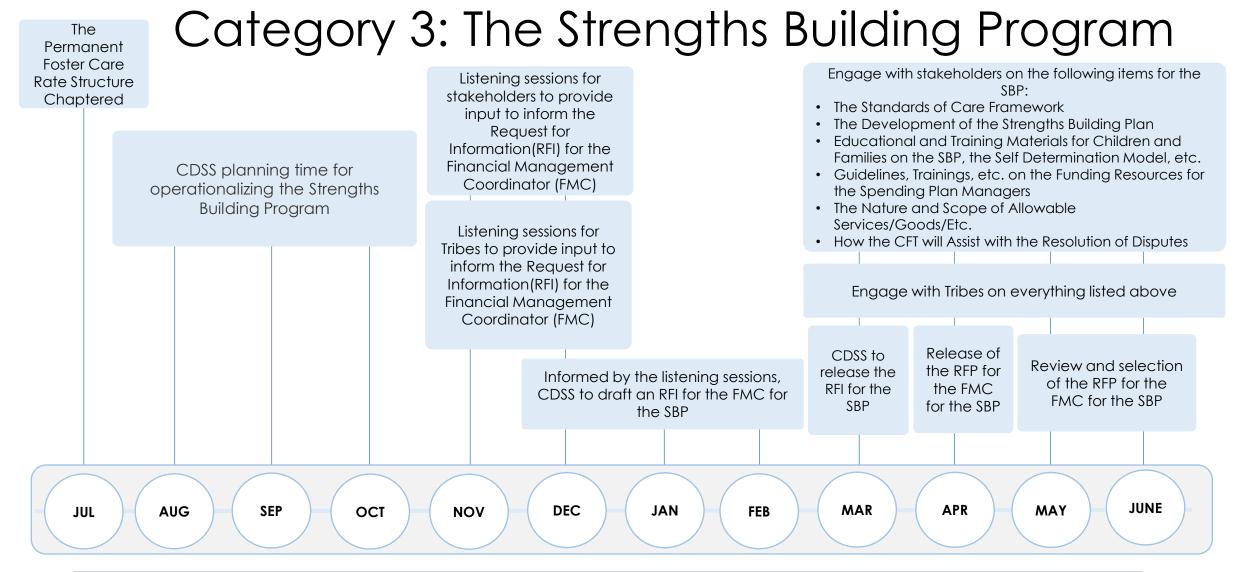
^{1.} Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. American Psychologist, 55, 68-78.

The Strengths Building Funding

1.	The child or youth is assigned into a respective tier based on their Child and Adolescent Needs and Strengths (CANS) score.	Tier 1Tier 2	Tier 3 Tier 3+
2.	A child or youth's individual budget is set based upon the amount allotted for that tier.	Tier 1 - \$500 Tier 2 - \$700	Tier 3 - \$900 Tier 3+ - \$900
3.	The child, caregiver, etc. develop a strengths building spending plan based upon the CANS assessment, the child's interests, etc.	MONTHLY	autor Ble Co
4.	The CFT supports the family in selecting goods, services, activities and supports consistent with the strength building objectives identified by the CANS.		
5.	The child and family work with their Financial Management Coordinator (a CDSS contractor) to pay for and, if needed, otherwise procure the goods, services, activities and supports for the child consistent with the spending plan.		

Implementing the Strengths Building Program

- Upcoming:
 - Draft and release the Request for Information (RFI) for the Financial Management Coordinator (FMC) for the SBP.
 - Review and select the FMC for the SBP.
 - Draft and prepare the contract.
 - Execute the contract.
 - Draft the necessary guidance.
 - Implement the necessary guidance.



July 2024 – June 2025 The Planning Phase

Category 3: The Strengths Building Program

CDSS to draft the following: • The Standards of Care Framework • Guidance on the Development of the Strengths Building Plan • Educational and Training Materials for Children and Families on the SBP, the Self Determination Model, etc. • Guidelines, Trainings, etc. on the Funding Resources for the Spending Plan Managers • Guidance on the Nature and Scope of Allowable Services/Goods/Etc. • Guidance on how the CFT will Assist with the Resolution of Disputes Review and selection of the RFP for the FMC for the SBP Draft and prepare the contract for the FMC for the SBP

> July 2025 – June 2026 The Preparation Phase

JAN

FEB

DEC

AUG

JUL

SEP

OCT

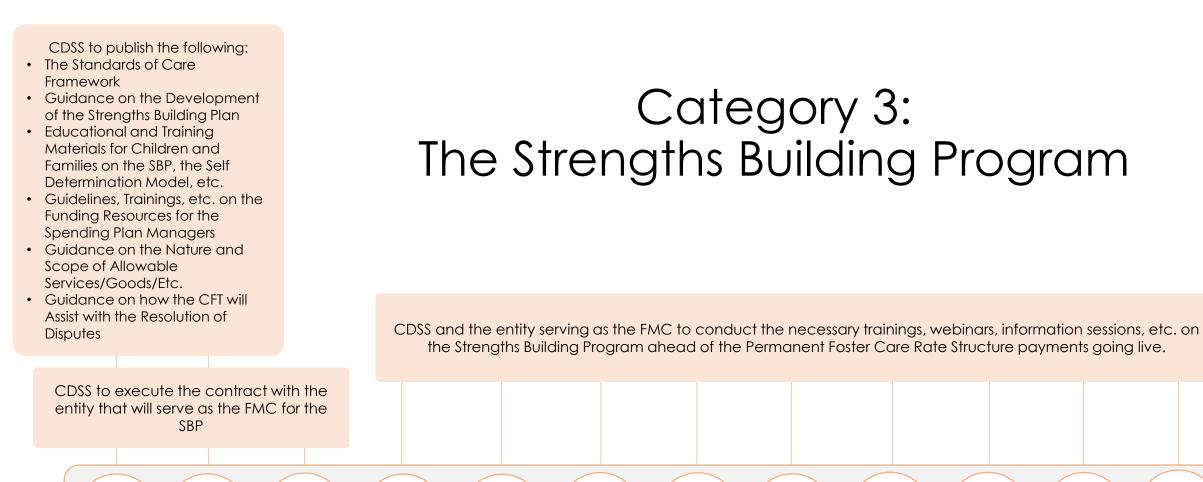
NOV

JUNE

MAY

APR

MAR



AUG

JUL

SEP

OCT

NOV

July 2026 – June 2027 The Early Implementation Phase

JAN

FEB

DEC

JUNE

MAY

APR

MAR



4. The Immediate Needs Implementation Plan

Vision

- All children and youth with identified needs will have those needs met across all placement types.
- Providers will be able to serve children with immediate needs in all settings, including relative placements.
- The Immediate Needs funding is supporting a responsive continuum and ensuring mutual accountability.



The Immediate Needs Funding

Establishing an Immediate Needs Program 1.The CDSS will establish Model Standards for each tier and will provide contracts requirements.

- 2. County agencies will submit a county plan demonstrating full compliance with the Model Standards for each tier. Counties also have the option to develop a regional plan in partnership with counties in their region. Contracted providers of the county also must provide documentation demonstrating full compliance.
- 3. The CDSS will review and approve the county plans for each tier.
- 4. The county will then implement their network utilizing FFAs, Short Term Residential Therapeutic Programs, Mental Health Plans, and/or Community Based Organizations for the delivery of services.









The Immediate Needs Funding

Implementing the Immediate Needs Program

- . Upon approval, the county placing agency will only use Immediate Needs Providers certified by the department using contracts that are consistent with the model contracts developed by the department.
- 2. The Immediate Needs Provider will develop child-specific Immediate Needs Plans for each child, demonstrating how the funding will meet the child's immediate needs and include those plans in the child's case plan.
- 3. If a placing agency chooses to enter into an agreement with CDSS to administer the Program or if a placing agency does not adequately administer the program or meet the immediate needs of children, CDSS can receive future payments of the placing agency's Placing Agency Allocation and use the Placing Agency Allocation to award contracts for the purpose of implementing and maintaining the Immediate Needs Program.







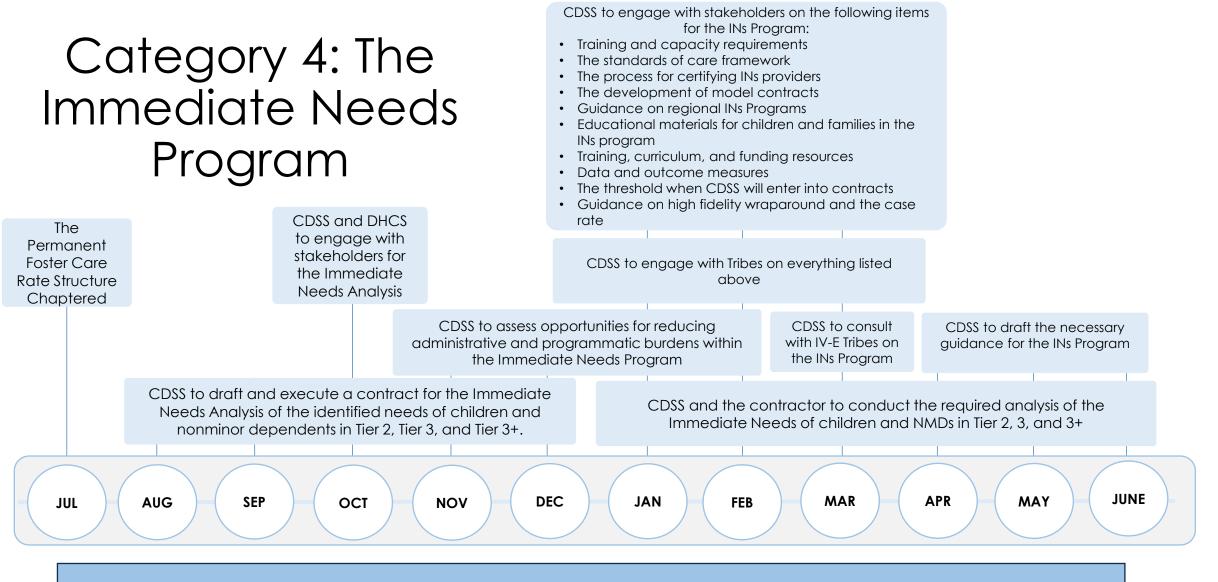
HIGH FIDELITY WRAP AND CASE RATE

All children and nonminor dependents under age 21 in foster care who meet the criteria to participate in the Immediate Needs Program are eligible to receive high-fidelity wraparound services as a component of the Immediate Needs Program.

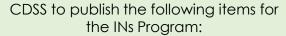
Placing agencies and mental health plans shall coordinate referrals for high-fidelity wraparound services and mental health plans shall provide or arrange for the provision of highfidelity wraparound services

DHCS is directed to create a case rate or other type of reimbursement for high-fidelity wraparound A portion of the Immediate Needs Funding shall be used as the non-federal share of Medi-Cal covered high-fidelity wraparound services for youth in Tiers 2, 3 and 3+

• Counties can add additional allowable funds toward non-federal share if Immediate Needs Funding is insufficient



July 2024 – June 2025 The Planning Phase



- Training and capacity requirements
- The standards of care framework
- The process for certifying INs providers
- The development of model contracts
- Guidance on regional INs
 Programs
- Educational materials for children and families in the INs program
- Training, curriculum, and funding resources
- Data and outcome measures

JUL

• The threshold when CDSS will enter into contracts

AUG

Category 4: The Immediate Needs Program

JUNE

MAY

APR

CDSS and DHCS to draft guidance on how the INs funding may be used to support the High-Fidelity Medi-Cal benefit for the non-fed share of the High-Fidelity Wraparound Program

FEB

MAR

CDSS to provide the

Legislature the

Immediate Needs analysis

JAN

CDSS and the contractor to conduct the required analysis of the Immediate Needs of children and NMDs in Tier 2, 3, and 3+

OCT

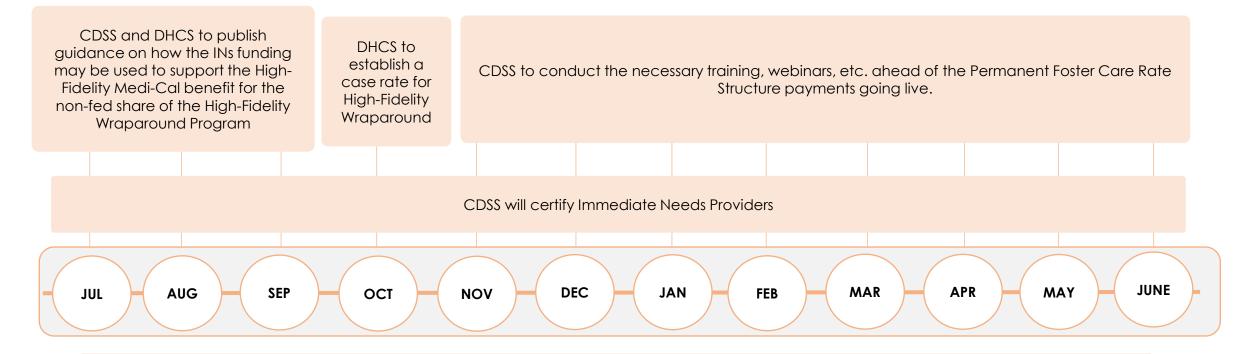
NOV

SEP

July 2025 – June 2026 The Preparation Phase

DEC

Category 4: The Immediate Needs Program

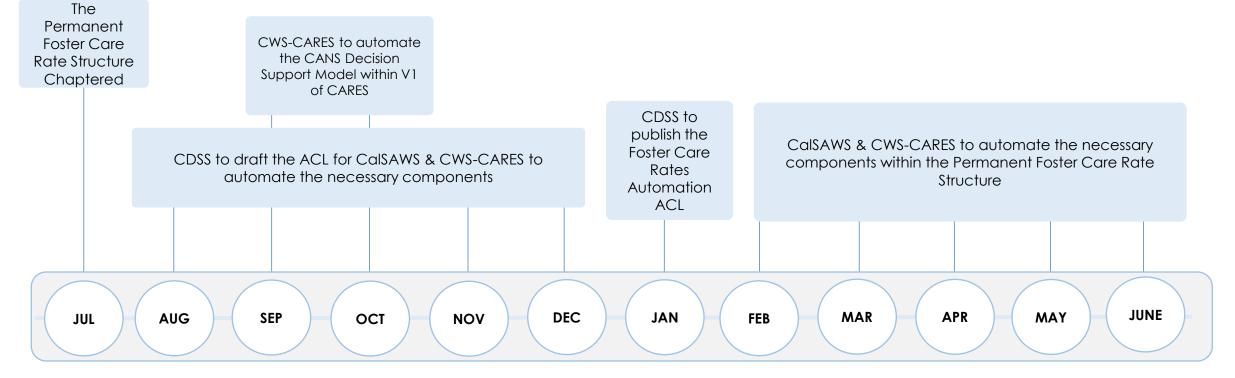


July 2026 – June 2027 The Early Implementation Phase



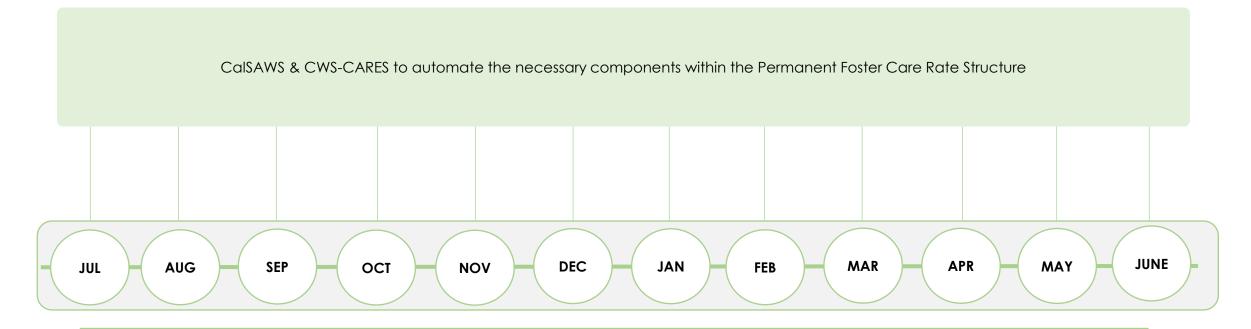
5. The Automation Implementation Plan

Category 5: CalSAWS and CWS-CARES Automation



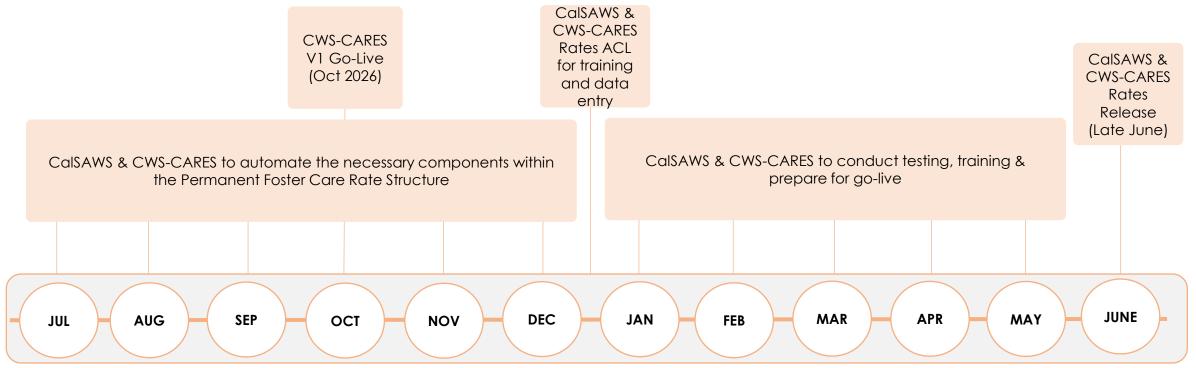


Category 5: CalSAWS and CWS-CARES Automation



July 2025 – June 2026 The Preparation Phase

Category 5: CalSAWS and CWS-CARES Automation



July 2026 – June 2027 The Early Implementation Phase

How Probation Can Start Preparing

Collaborate with Partner in Implementation

- Start a local CFT/CANS implementation team with your local child welfare agency, behavioral health agency, and community providers to determine:
 - Who will complete the IP-CANS: probation, behavioral health, child welfare, or a contracted provider.
 - How the IP-CANS will be shared with necessary partners.
 - The timeline for the IP-CANS to be shared for timely data entry into CARES-Live.
- Memorialize these decisions in a formal contract or interagency agreement/MOU

Get Training and Technical Assistance

- Ensure IP-CANS completers, supervisors, and probation officers receive the necessary CANS trainings:
 - <u>CACTW and RTA training</u>
 - Request CACWT accounts by contacting the RTA in their corresponding region.
- Ensure CFT facilitators, supervisors, and probation officers receive the necessary CFT Facilitation trainings:
 - <u>CPOC training</u>
- See <u>ACIN I-35-24</u> for a list of CFT and IP-CANS trainings.
- Request CFT/CANS implementation technical assistance
 - <u>RTA technical assistance</u>

CFT and IP-CANS Training

- CFT Overview
 - Who? Probation officers, supervisors, and probation leadership
- Effective CFT Meetings
 - Who? Probation officers and supervisors
- CFT Meeting Facilitation
 - Who? CFT facilitators
- Integrating CANS into CFT Meetings and Case Planning
 - Who? Probation officers and supervisors
- CANS: Supporting Collaborative Assessment and Action Planning (previously Module A) - CANS overview
 - Who? Probation officers, supervisors, and probation leadership
- The CANS: Overview and Preparation for Certification (previously Module B)
 Who? CANS completers
- CANS in Supervision Coaching Staff towards Practice Integration (previously Module C)
 - Who? Supervisors of CANS completers

Get Access To and Training for CANS Data Entry into CARES-Live

- As part of your implementation efforts, decide who from your department will enter the CANS data into CARES-Live.
- For access to CARES-Live, users must have a CWS/CMS user profile.
- Work with your CARES-Live County Administrator to add new CARES-Live CANS user accounts.
 - To add a new CARES-Live Administrators or make changes to the existing Administrators, contact <u>CWS_CustRel@osi.ca.gov</u>.
- Access <u>CARES-Live demos and job aids.</u>
- Additional information and training coming soon via ACL.

Other Resources and Action Steps

- Start sharing the <u>CFT and CANS brochures and videos</u> with CFT participants
 - Encourage CFT participants to complete the CFT survey linked within the brochures
- Review and use <u>CFT and CANS tools and resources</u>
- Review <u>CFT/CANS state policy letters</u>
- Join <u>CFT/CANS collaboratives</u>

The Immediate Needs Program

County Immediate Needs Program Plans

- Pursuant to <u>WIC section 16562(d) (2) (E)</u>, county placing agencies and county mental health plans shall, amongst other requirements, develop plans with certain information about their Immediate Needs Program.
- Pursuant to <u>WIC section 16562(h)</u>, High Fidelity Wraparound will be a foundational component of county Immediate Needs Programs.
- Start a local Immediate Needs Program and Wraparound implementation team with your county child welfare agency, county juvenile probation department, county mental health plan, community providers, and local Tribes.
 - Ensure implementation team members understand the requirements of placing agencies articulated in <u>WIC</u> <u>section 16562(d)</u>.
 - Establish processes for interagency exchange of funding and data.

The Immediate Needs Program

County Immediate Needs Program Plans (continued)

- The local Immediate Needs Program and Wraparound implementation team should also plan for the item below:
 - Evaluate and ensure county Wraparound programs align with the <u>draft Wraparound Standards</u>.
 - Also aligns with the FFPSA Part IV aftercare (post STRTP) requirements.
 - How will the Wraparound program be administered? By probation, behavioral health, child welfare, or a contracted provider.
 - Although the data reporting requirements are still under development, many of these requirements will be met through the CWS-CARES information system, to be launched in October 2026.
 - Memorialize these decisions in a formal contract or interagency agreement/MOU.

The Immediate Needs Program

Other resources and steps to get prepared:

- High Fidelity Wraparound
 - tend Wraparound trainings though UC Davis.
 - Review and use the <u>Wraparound Toolkit</u> to support implementation
 - Review Wraparound <u>state policy letters</u> to ensure Wraparound program are aligned with state requirements
 - Request Wraparound <u>implementation technical</u> <u>assistance</u> from CDSS and UC Davis
 - Join Wraparound collaboratives and meetings:
 - <u>Advisory Committee</u>
 - <u>Wraparound Hubs</u>
- Attend Immediate Needs Program <u>stakeholder meetings and</u> <u>webinars</u>.

Additional guidance regarding the Immediate Needs Program Requirements is forthcoming. The Strengths Building Program

- Participate in stakeholder engagement opportunities on the operationalization of the Strengths Building Program:

 Working Group for CDSS to Engage with Stakeholders on the Strengths Building Program
 - Series Recurrence: This meeting series will occur every other Thursday from 4:00 5:00pm. This series will kick off on Thursday, March 27th and run through Thursday, May 22nd.
 How to Join: Zoom Registration Link

Review and Provide Feedback on Program

Guidance

Resources

- Implementation Guidance Released to Date:
 - o <u>ACL 24-94</u> Operationalization Of The New Foster Care Tiered Rate Structure (TRS)
 - o ACL 25-10 Updated Requirements For Administration Of The Integrated Practice-Child And Adolescent Needs And Strengths Tool And Child And Family Teams
- Opportunities to stay connected and engaged on implementation:
 - o <u>The Tiered Foster Care Rate Structure</u> <u>Implementation Website</u>
 - o The TRS Implementation Newsletter Sign-Up Sheet
 - December Edition of the Newsletter
 - February Edition of the Newsletter

Thank You!