



CCR State/County Implementation Team  
**Meeting Notes**  
 October 20, 2016

**Purpose:** Monthly meeting of County Behavioral Health Directors Association (CBHDA), California Department of Social Services (CDSS), County Welfare Directors Association (CWDA), Chief Probation Officers of California (CPOC), County State Association of Counties (CSAC), and Department of Health Care Services (DHCS) County Representatives to identify and address cross discipline policy issues related to the implementation of CCR.

AGENDA ITEM	NOTES/DISCUSSION
<b>I.</b> <b>Welcome, Agenda, and Introductions</b> Theresa Thurmond	
<b>II.</b> <b>Updates</b> Sara Rogers, CDSS	<p><b>Foster Family Agency (FFA) Interim Licensing Standards (Standards)</b>            The FFA Standards have been posted and are available on the CCR website <a href="http://www.cdss.ca.gov/cdssweb/PG4869.htm">http://www.cdss.ca.gov/cdssweb/PG4869.htm</a>. This version is not a draft, but feedback is welcome and can still be provided to the CDSS.</p> <p><b>Short-Term Residential Therapeutic Program (STRTP) Standards (Version 1)</b>            The STRTP Standards have been posted and can be used to help develop and update licensure documents. Additionally, an All County Letter (ACL) will be written to provide guidance around the program statement review. The CDSS will be developing a rigorous spreadsheet to track all 1,000 Group Home (GH) facilities in California and a website will also be created allowing counties to see the program statement, letters of recommendations, and any concerns about the facility.</p> <p><b>CCR Regional Ideas and Transformational Exchange (RITE)</b>            The CDSS, DHCS, CWDA, CBHDA, CPOC, CIBHS, the Regional Training Academies, and Casey Family Programs sponsored CCR meetings regionally throughout California in order to provide robust technical assistance (TA) at the local level. The first round will close with a meeting of the Northern Counties on October 27. Initially these meetings are limited to state and county staff but will be opened to broader participation in the spring of 2017. For more information please contact Theresa Thurmond at <a href="mailto:Theresa.Thurmond@dss.ca.gov">Theresa.Thurmond@dss.ca.gov</a>.</p> <p><b>STRTP Standards Orientations</b>            In order to ensure all prospective STRTPs and local partners have adequate opportunities to obtain information about the STRTP requirements, the CDSS will be hosting a webinar on Friday, November 18, 2016, from 1:30–4 p.m.</p> <p>In addition, the CDSS is hosting regional Provider Orientations across the state as a requirement for GHs that are ready to transition to STRTPs. There will be ongoing orientations in 2017 for those that are not ready by January 1, 2017.</p> <p>Location and Dates of the regional STRTP orientation trainings:            Sacramento    October 28, 2016</p>

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	<p>Fresno November 1, 2016  San Jose November 3, 2016  Riverside November 7, 2016  Culver City November 8, 2016  San Gabriel November 10, 2016</p> <p><b>Child and Family Team (CFT) Joint Letter ACL 16-84/ Mental Health Substance Use Disorder Services (MHSUDS) 16-049</b>  A joint CFT ACL and MHSUDS Information Notice was released October 7, 2016, by the CDSS and the DHCS. The ACL and MHSUDS Information Notice provides counties with information and guidance regarding the use of the CFT, the composition of the CFT, eligibility criteria, meeting frequency, and other pertinent information. An attachment to the letter contains helpful Frequently Asked Questions (FAQ's) addressed to Child Welfare Services (CWS), Probation, and Mental Health (MH).</p> <p>Later this fall, further clarification on confidentiality issues, and guidelines about effective interagency information sharing within CFTs will be out.</p> <p><b>County Coordination of STRTP Transition/Group Home Extension</b></p> <ul style="list-style-type: none"> <li>• GHs are hearing that counties do not want them to convert to STRTP since they don't want to pay the rate. But hopefully, this misinformation can be clarified at the local level</li> <li>• The DHCS is meeting with the CDSS on a regular basis and reviewing the Standards to eliminate duplication wherever possible (recommendations are welcome). For example, the team is looking at the nurse and psychiatrist requirement (making them available when needed rather than on staff 24 hours).</li> <li>• The draft protocol sent out previously includes both Medi-Cal Certification requirements and the MH Program Approval Requirements with the same goal of reducing duplication.</li> <li>• The DHCS is working on a Medi-Cal 101 training, but did not have an anticipated date for roll-out. All providers will be notified when the training is available.</li> <li>• The CCR web page on the CDSS internet site has information available including the Meeting &amp; Presentation Schedule, the FFA &amp; STRTP Standards, letters, and more at <a href="http://www.cdss.ca.gov/cdssweb/PG4869.htm">http://www.cdss.ca.gov/cdssweb/PG4869.htm</a>. The CCR Team is committed to keeping the site as current as possible. If you have questions or need assistance finding documents, please contact the CCR mailbox at <a href="mailto:CCR@dss.ca.gov">CCR@dss.ca.gov</a>.</li> <li>• Please note the CCR Stakeholder Advisory meeting, originally scheduled for November 1, has been changed to November 14, 2016, from 10:00-3:00 in the CDSS auditorium.</li> </ul>
<p><b>III. Education Sub-Workgroup</b>  Renzo Bernales, CDE  Stuart Oppenheim, CFPIC</p>	<p>The first sub-workgroup conference call was held on September 20, 2016, and an in person full-day meeting is scheduled for October 24, 2016. The plan is to focus on how Special Education Local Plan Area (SELPA's) were funded prior to the passage of AB 403, the one year extension plan, and the impact on SELPA funding for Our of Home Placements with the change from Rate Classification Levels (RCL) to Level of Care (LOC) funding.</p> <p>The agenda for October 24 includes panel presentations in the morning and will focus largely on Individualized Education Plan (IEPs) and CFTs in the afternoon providing a side by side comparison of the requirements for each of these meetings/teams.</p>

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	<p>Additional considerations:</p> <ul style="list-style-type: none"> <li>• Important to note that IEPs have legal implications that are not present for CFT meetings, including many procedural safeguards for parents and educational right’s holders, issues related to consent and rights to advocacy/legal action that may slow the finalization of the IEP process.</li> <li>• How are CFTs and IEPs coordinated? (Other agencies are invited to IEP meetings if they are likely to be responsible for providing or paying for transition (post-secondary transition) services to the child. The whole process can break down and become litigious.)</li> <li>• Education may want to place youth into a STRTP and their ability to sustain a STRTP on their own is limited. Since placement decisions occur under the Inter-Agency Placing Committee (IAPC), will Local Education Agencies (LEAs) need to go through that process. It is unclear if this will create unintended consequences for LEAs and their ability to comply with IDEA.</li> <li>• There is an IAPC “conversation” being held on October 31, 2016. If interested, please let the CDSS know.</li> <li>• Districts, through IEP teams, can place into a non-public agency or non-public school (NPS), so the question is can an STRTP become a non-public agency non-public or school too? It was mentioned that most RCL 14s have NPS or county schools but is not required. So STRTP’s don’t have to have a NPS but must say how they will educationally serve these youth; they can have a way to serve a child that child through an arrangement with another agency. State staff will need to have an understanding of what is necessary and what they will be doing to ensure educational services. There has been a bias that children in STRTPs (similar to RCL 14); probably require a NPS.</li> <li>• The IEP is a legally binding document and the LEA (district, charter school, County Office of Education (COE) where the parent lives is the LEA responsible which may or may not be the same LEA where the child lives in foster care.</li> <li>• Youth who may require special education and related services provided through an IEP, but have not been in stable placement have barriers in completing the evaluation process in order to receive an IEP. Is there something in the statute that can be clarified in order for this to be solved?</li> <li>• Federal standards around the “free and public education” which has youth being placed in settings that may no longer be available because of the decrease in number of lower level group homes. Parents of students with educational placements would be less inclined to agree to place in a foster home versus a GH setting.</li> <li>• Cultures differences between the CFT and the IEPs- language, legal ramifications, etc.</li> </ul>
<p><b>IV.</b>  <b>Specialty Mental Health</b>  Karen Baylor, DHCS</p>	<p>The MH Workgroup met at the end of September and was attended by Jennifer Kent (DHCS Director) and Will Lightbourne (CDSS Director). The main focus of the meeting was on the Medical Necessity Criteria.</p> <p>The DHCS will provide guidance regarding responsibilities for mild to moderate services through an Information Notice.</p> <p>There won’t be additional meetings for the MH Workgroup at this time, but the DHCS will continue to provide updates.</p> <p>A request was made for a referral guide to help CWS and other partners understand the pathways to MH services for foster children. The DHCS noted that this may not be possible because each county has different (multiple) points of entry to MH. A suggestion was made for TA from county to county. Counties that have good coordination processes could assist those counties</p>

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	<p>that are experiencing challenges.</p> <p>Although many counties are doing well there are many counties that do not have good coordination between MH and CWS and many youth are not getting the MH services needed. There is a need to train CWS and have a common language so that behaviors they see can be described in language that coincides with MH services.</p> <p>Follow up:            What are counties doing with prevention Mental Health Services Act (MHSA) funds?            MHSA funds are driven by a local stakeholder process so MH can't direct how the funds are expended.</p>
<p><b>V. Moving Vision into Practice</b> Sara Rogers, CDSS</p>	<p>As we move to Implementation, the value of an Integrated Practice Model document and the Integrated Training Plan for Children and Youth require further discussion, specific to how these documents will support implementation and the work that is in process. This topic needs further planning and exploration. The suggestion was made to also review historic work counties did around the principles of System of Care.</p> <p>Follow-up:            Stuart will work with Richard &amp; Kim S. to have preliminary discussion about System of Care and integrated work and plan a presentation for the next CCR State/County Implementation Team Meeting. The Community Team has done a good deal of work in regard to the above two documents and linkages will need to be made to their work.</p>
<p><b>VI. Next Steps</b> Theresa Thurmond</p>	<p>Next meeting: November 17, 2016, 3:00-5:00 p.m.</p> <p>December 8<sup>th</sup> will be a call-in meeting.</p> <p><b>Announcement:</b></p> <p>California has been selected as a pilot site for The National Adoption Competency Mental Health Training Initiative (NTI). The aim of NTI is to improve mental health assessments and services and to assure stability and well-being of children in foster care who are either moving towards or have achieved permanence through adoption or guardianship. Through this initiative, State, Tribe and Territory child welfare professionals and mental health practitioners will have access to standardized web-based, evidence-informed training to understand and better address the mental health needs of this population.</p> <p>A request was made for a NTI presentation at a future Children's System of Care Committee Meeting since CWS would be coming to MH for the services for these youth. This will be tentatively scheduled for January.</p> <p>The CDSS will be issuing an All County Information Notice (ACIN) soliciting interested participants. The draft ACIN will be circulated for Stakeholder review.</p>