

Date: September 29, 2021

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

EXECUTIVE SUMMARY

**ALL COUNTY LETTER NO. 21-115
PROVIDER INFORMATION NOTICE 21-115-CRP**

The purpose of this combined All County Letter and Provider Information Notice is to provide resources, information and tools to county placing agencies and Short-Term Residential Therapeutic providers regarding accessing the nursing services required by the Family First Prevention Services Act (FFPSA) and subsequent Assembly Bill 153 (Chapter 86, Statutes of 2021). The Department is issuing this notice to support county and partner efforts toward the coordination of nursing care and service delivery for foster youth within Short Term Residential Therapeutic Programs.



KIM JOHNSON
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DEPARTMENT OF SOCIAL SERVICES
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GAVIN NEWSOM
GOVERNOR

September 30, 2021

ALL COUNTY LETTER NO. 21-115
PROVIDER INFORMATION NOTICE 21-115-CRP

TO: ALL COUNTY WELFARE DIRECTORS
ALL CHIEF PROBATION OFFICERS
COUNTY BEHAVIORAL HEALTH DIRECTORS
ALL REGIONAL CENTERS
ALL SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAMS
SPECIAL EDUCATION LOCAL PLAN AUTHORITIES

SUBJECT: NURSING SERVICES FOR CHILDREN AND NONMINOR
DEPENDENTS IN SHORT-TERM RESIDENTIAL THERAPEUTIC
PROGRAMS

REFERENCE: [ASSEMBLY BILL \(AB\) 403 \(CHAPTER 773, STATUTES OF 2015\); AB 1997 \(CHAPTER 612, STATUTES OF 2016\); AB 404 \(CHAPTER 732, STATUTES OF 2017\); AB 2083 \(CHAPTER 815, STATUTES OF 2018\); AB 153 \(CHAPTER 86, STATUTES OF 2021\); WELFARE AND INSTITUTIONS CODE \(WIC\) SECTIONS 4096.55, 16010, 17731; HEALTH AND SAFETY CODE \(HSC\) SECTIONS 1502, 1502.4, 1562.01; BUSINESS AND PROFESSIONS CODE CHAPTER 6, DIVISION 2, COMMENCING WITH SECTION 2700; STRTP ILS SECTIONS 87000 ET. SEQ.; MANUAL OF POLICIES AND PROCEDURES \(MPP\) 31-405.24](#)

The purpose of this combined All County Letter (ACL) and Provider Information Notice (PIN) is to provide county placing agencies, Short-Term Residential Therapeutic Programs (ST RTP), and other interested parties, information about the new requirement for STRTPs to provide children and nonminor dependents (NMD), including those placed by child welfare agencies and probation departments, access to nursing resources 24 hours a day 7 days a week.

BACKGROUND

The Continuum of Care and System of Care Reform, established through [Assembly Bill \(AB\) 403](#) and subsequent legislation are comprehensive reform efforts to ensure that children and NMDs in family-based and congregate care settings have their day-to-day physical, mental, and emotional needs met. The STRTPs provide an array of core supports and services directed at addressing the needs of children and NMDs and ensuring their well-being and safety in order for them to move to permanent home-based placement or transition out of foster care.

The [Bipartisan Budget Act of 2018 - Public Law \(P.L.\) 115- 123](#), which includes the Family First Prevention Services Act (FFPSA) was signed into law in February of 2018 and is similarly focused on the reduction of unnecessary congregate care placements. The FFPSA seeks to accomplish this goal by increasing options for prevention services, increasing oversight and requirements for placements, and enhancing the requirements for congregate care placement settings, including that certain congregate care settings have licensed nursing staff and other clinical staff available 24 hours a day 7 days a week. The STRTPs must adhere to these requirements no later than October 1, 2021, in order for foster care maintenance payments for placements made on or after October 1, 2021, to be eligible for Federal Financial Participation (FFP).

GENERAL REQUIREMENTS

The [AB 153](#) amended the Health and Safety Code (HSC) [1562.01\(d\)\(2\)\(C\)\(i\)\(II\)](#) to require that on and after October 1, 2021, an STRTP include within their program statement a description of its plan for how it shall make licensed nursing staff and resources available, as set forth in HSC Section 1562.01(n).

As mandated by AB 153, on and after October 1, 2021, an STRTP must:

- Ensure the availability of licensed nursing staff, which may include the nursing resources established pursuant to WIC Section [4096.55](#).
- Have licensed nursing staff available 24 hours a day, seven (7) days a week, to provide care within the scope of their practice.
- Have nursing staff on-site according to the treatment model of the STRTP and as otherwise required by the needs of any child or NMD in the facility.
- If a child or NMD who is placed in an STRTP by a county placing agency requires regular onsite nursing care and does not require inpatient care in a licensed health facility, the STRTP shall provide the nursing care consistent with its treatment model or shall partner with the county placing agency to arrange for the nursing care to be provided.

The STRTP must update their program statement to include a plan for how they will come into compliance with the nursing service requirements, including, but not limited to, if they intend to utilize the State contracted telehealth nursing services (described below). Further guidance on how to appropriately update the STRTP's program statement is forthcoming.

Current STRTP Independent Living Skills (ILS) and [Mental Health Program Approval standards](#) address the requirements for licensed clinical staff and onsite nursing services consistent with the treatment model of the program. The care and supervision provided by an STRTP is generally non-medical, except as permitted by applicable law. Any identified needs of an individual child or NMD must be reflected and provided for through the development of the admission agreement and the needs and services plan for the child or NMD (Cal. Code Regs., Tit. 22, section 80068; STRTP ILS sections 87068.1, 87068.11, 87068.2 and 87068.22). Further, children who receive services under Medi-Cal are already entitled to medically necessary care, including home health interventions.

Per STRTP ILS Sections 87068.1(c) and (e), 87068.11(e), (f) and (h), 87070, and 87072, it remains the responsibility of the STRTP to do the following:

- Ensure children and NMDs in placement have the right to access and receive medical care
- Have the names and contact information for each child and NMD's physician and dentist, and other medical and mental health providers, on file and readily available
- Have a copy of the child/NMD's medical assessment on file within 30 calendar days of placement
- Have the medical and dental history, if available, including immunization records
- Have the medical and dental insurance coverage information, including information regarding the agency or person responsible for medical and dental costs for each child and NMD on file and readily available
- Have the record of current medications, including the name of the prescribing physician
- Have consent forms, completed by each child's authorized representative(s), to permit the facility to authorize medical care, on file and readily available
- Request the Health and Education Passport from the placement agency

Note: The above is **not** a complete list of all requirements related to intake, record-keeping, and personal rights. An STRTP must comply with all applicable law, Division 6 of Title 22 of the California Code of Regulations, the Mental Health Program Approval standards and the STRTP ILS.

Under Welfare and Institutions Code Section [4096.55](#), CDSS in collaboration with the Department of Health Care Services (DHCS), must make nursing resources

available to assist STRTPs with meeting the needs of any foster child or NMD placed with the provider by a county child welfare agency or probation department. The assistance may include a contract that provides access to nursing services or other nursing resources designed to meet the medical needs. If a child or NMD requires regular onsite nursing care, the county placing agency must ensure the care is provided, either by the STRTP consistent with their treatment model or by the county arranging for that care to be provided utilizing their nursing resources.

Under this statutory authority, CDSS has contracted with a nursing services provider to operate the STRTP 24/7 Nurse Hotline. General instructions for accessing nursing services using this hotline are provided below. Further training and guidance regarding the STRTP 24/7 Nurse Hotline as well as accessing on-site nursing services is forthcoming.

ACCESSING NURSING SERVICES

If an STRTP's treatment model does not already provide for access to nursing services 24 hours a day, 7 days a week whether onsite or via telehealth, the STRTP must ensure the availability of nursing services, which may include accessing nursing resources through the state funded STRTP 24/7 Nurse Hotline.

If an STRTP needs non-emergency nursing services for a child or NMD, or the child or NMD is seeking nursing care for themselves, the STRTP 24/7 Nurse Hotline may be utilized.

Through this hotline, STRTPs have access to medical nursing staff 24 hours a day, seven days a week for children and NMDs placed at their facility. The STRTP 24/7 Nurse Hotline will be able to provide advice and triage.

In the event of a medical emergency, providers should continue to utilize 9-1-1 or go to their nearest hospital.

ACCESSING ON-SITE NURSING SERVICES

While the 24/7 Nurse Hotline meets the federal and state requirement for STRTPs to provide access to 24/7 nursing resources, the CDSS is aware that some children may require access to on-site nursing services.

County placing agencies remain responsible for the case management activities that ensure the needs of children and NMDs are met and reflected in the case plan, including ensuring that children receive access to any necessary medical services ([MPP 31-405.24](#)). The STRTP providers are responsible for the provision of care consistent with their treatment model, and as reflected in the admission agreement and the child's Needs and Services Plan. An STRTP generally provides nonmedical care and supervision as set forth in HSC Sections 1502(a)(18) and 1502.4(a) and ILS Section 87001(s)(3). Because not all STRTPs have a treatment model that requires regular on-

site nursing care, when such care is required for a child placed by a county placing agency, it is the responsibility of the county placing agency to arrange for those medical needs to be met. The STRTPs must partner with county placing agencies to implement such arrangements.

Further, Medi-Cal provides access to an array of medical services when medical necessity is determined.

The CDSS and DHCS will provide further guidance regarding how to access Medi-Cal benefits related to meeting the on-site health care needs of youth placed in STRTPs.

CONTACTS

For questions or concerns, please contact the System of Care Branch at ffpsa@dss.ca.gov or (916) 651-1101.

To access [all published ACLs and ACINs](#), please visit <https://www.cdss.ca.gov/inforesources/letters-and-notices>.

To access [all PINs published by the Children's Residential Program](#), please visit <https://www.cdss.ca.gov/inforesources/community-care-licensing/policy/provider-information-notices/childrens-residentials>.

Sincerely,

ANGIE SCHWARTZ
Deputy Director
Children and Family Services Division

KEVIN GAINES
Deputy Director
Community Care Licensing Division