

**PLACEMENT AGENCY -- THP PLUS FOSTER CARE PROVIDER AGREEMENT
NONMINOR DEPENDENT PLACED BY AGENCY IN THP PLUS FOSTER CARE PROVIDER**

NAME OF YOUNG ADULT	THP PLUS FC PROVIDER NAME
BIRTH DATE OF YOUNG ADULT	DATE PLACED WITH THP PLUS FC PROVIDER
CASE NUMBER	DATE FIRST ENTERED FOSTER CARE AS YOUNG ADULT

The Placement Agency will pay \$ _____ per month in return for the above-named young adult's care and supervision as defined in Welfare and Institutions Code 11403.2 and other applicable law and regulations. First payment to be made within 45 days after placement with subsequent payments to be made monthly.

PLACEMENT AGENCY AGREES TO	THP PLUS FOSTER CARE PROVIDER AGREES TO
<ol style="list-style-type: none"> The placing agency will obtain from the young adult all appropriate releases of information relevant to this placement in order to provide the THP PLUS Foster Care provider with knowledge of the background and needs of this young adult. This may include, based on the young adult's consent, a social work assessment, medical reports, educational assessment psychiatric/psychological evaluations, identification of special needs, and the young adult's TILP. This shall be made available to the provider within 14 days from date of placement. Inform the provider, before placement, of this young adult's behaviors and proclivities that might be harmful to others. Work with the provider in the development and progress of a transition plan. The county placing agency will notify and invite the provider to participate in any young adult and family team meetings to discuss the young adult's transition plan. Work with provider staff toward successful completion of the young adult's needs and services plan, a positive placement outcome and timely permanency for the young adult. Work together with the provider to develop and maintain positive relationships with the young adult's siblings, and other family members. Maintain monthly contact with the young adult. Continue paying for the young adult's care as long as the young adult remains in placement or in the temporary absence of the young adult, when the placing agency asks the provider to retain an open placement. Provide the young adult with his or her Medi-Cal card or proof of other medical coverage. Inform the provider of the county clothing allowance policy and provide the funding consistent with those policies. Verify and remit/reconcile any underpayments within 45 days of provider notification of such underpayments. Notify the provider within 12 months of suspected overpayments, in accordance with applicable laws and regulations. Provide arrangements for educational travel to the young adult's secondary school of origin, as appropriate. Provide a contact telephone number for emergencies and after business hours: Emergency # _____ 	<ol style="list-style-type: none"> Provide this young adult with a transitional housing site that has been certified to care for the young adult's needs in accordance with applicable laws and regulations. Conform to applicable approval standards regulations and all laws governing foster care. Notify the placing agency within 24 hours of the provider having knowledge (unless there is a separate written agreement with the placing agency) by phone followed in writing of significant changes in the young adult's health, behavior or location as well as significant issues including suspected physical or psychological abuse, death, injury, unusual incidents, unusual absence of a young adult, placement issues, changes to work or school participation and all items required by approval standard regulations. Work together with the placing agency to encourage the maintenance of permanent connections with the young adult's family members, and other significant adults, as indicated in the transition plan, and/or young adult and family teams whenever possible. Use constructive alternative methods of harm reduction; not use corporal punishment; deprivation of meals, monetary allowances, threat of discharge or any degrading or humiliating punishment. Respect and keep confidential information given about this young adult. Work with the placing agency to develop and submit to them a transition plan that develops an understanding of the responsibilities, objectives and requirements of the agency in regard to the care of this young adult, including the information listed on the reverse side of this form, within 30 days of placement of the young adult. The transition plan shall be updated at least every six months. Written progress reports on the transition plan progress shall be provided at least every six months or more frequently by mutual agreement. Give placing agency 7 day notice of intent to discharge or move this young adult. Notify the placing agency of any intended move of this young adult between certified sites prior to the move. The provider has the authority to move a young adult in the case of imminent risk to the young adult or others in the household. The provider shall notify the placing agency within 24 hours of such move. Provider social worker shall visit this young adult in private in their site at the frequency specified in the provider's plan of operation. Provide state and federal agencies access to records as provided by state and federal law. Follow any requirements associated with the county's clothing allowance policy and procedures. Remit any overpayment in full to the county welfare department upon receipt of a notice of action or following the completion of due process. Inform county upon discovery of any apparent overpayment. Immediately notify the placing agency of any changes to the young adult's secondary educational travel plans (if appropriate).

Initial transition plan summary shall include:

- A. Medical and Dental needs
- B. Psychological/psychiatric issues identified
- C. Staffing review summaries
- D. Educational /employment assessment
- E. Peer adjustment
- F. Relationship to adults identified as potential permanent connection
- G. Involvement in recreation programs
- H. Behavior Problems impacting house rules
- I. Educational and employment objectives (goals established for next 3 months)
- J. Long-range goals including anticipated length of placement
- K. Tasks planned to reach educational and employment objectives and goals as defined in the young adult's TILP and who will be performing these tasks, including agency service activity
- L. Identification of unmet needs
- M. Involvement of young adult in the transition program

Periodic update of transition plan shall include:

- A. Current status of young adult's physical and psychological health as well as access to medical and dental exams
- B. Reassessment of young adult's adjustment to the placements, transitional program, peers and school/work
- C. Progress toward short-term objectives and long-range goals as defined in the young adult's TILP including tasks which have been performed to reach these objectives and goals
- D. Reassessment of unmet needs and efforts made to meet these needs
- E. Modification of transition plan, tasks to be performed and anticipated length of placement
- F. Involvement of young adult in transition program
- G. Plan to exit foster care to sustainable housing and incremental steps made towards independence.

By this signature I attest that I have read this agreement and agree to fulfill these requirements and I am authorized on behalf of my agency to sign this. The terms of this agreement shall remain in force until changed by mutual consent, in writing, of both parties.

YOUNG ADULTS'S PLACEMENT WORKER NAME		PHONE	
PRINT:	SIGNATURE:	()	
COUNTY AND NAME OF AGENCY	TITLE	DATE	
THP+FC PROVIDER'S/REPRESENTATIVE'S NAME		PHONE	
PRINT:	SIGNATURE:	()	
NAME OF AGENCY	TITLE	DATE	
AGENCY ADDRESS			