



CDSS

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GOVERNOR

March 13, 2018

ALL COUNTY LETTER (ACL) NO. 18-25

TO: ALL COUNTY WELFARE DIRECTORS
ALL CHIEF PROBATION OFFICERS
ALL MENTAL HEALTH DIRECTORS
ALL COUNTY ADOPTION AGENCIES
ALL ADOPTION DISTRICT OFFICES
ALL GROUP HOME PROVIDERS
ALL FOSTER FAMILY AGENCIES
ALL TITLE IV-E AGREEMENT TRIBES
ALL OUT-OF-STATE GROUP HOMES

SUBJECT: IMPLEMENTATION OF THE INTENSIVE SERVICES FOSTER CARE (ISFC) PROGRAM

REFERENCE: [ASSEMBLY BILL \(AB\) 404, CHAPTER 732, STATUTES OF 2017;](#)
[HEALTH AND SAFETY CODE \(HSC\) SECTION 1517, WELFARE](#)
[AND INSTITUTIONS CODE SECTIONS 16519.5, 17731, 18360,](#)
[18360.05, 18360.10, 18360.15, 18360.25 ,18360.35, ACL NO 16-10,](#)
[ACL NO. 16-84, ACL NO. 17-11, ACL NO.17-75, ACL NO. 17-111,](#)
[ACL NO. 18-06, ACL 18-06E, ACL NO.18-09](#)

The purpose of this ACL is to inform and provide instructions to counties and providers implementing an ISFC program. The ISFC program is intended to serve children/youth who require intensive treatment and behavioral supports, as well as children/youth with specialized health care needs and including those served under Intensive Treatment Foster Care (ITFC). An eligible child for ISFC is a child or nonminor dependent in foster care who requires a higher level of care of supervision as determined by the Level of Care (LOC) Rate Determination Protocol (Protocol).

Eligible Families

An ISFC resource family means a resource family as defined in WIC Section [16519.5](#) or HSC Section [1517](#) and until December 31, 2019, includes a licensed foster family home or a certified family home of a licensed Foster Family Agency (FFA). Non-related legal guardians and Kinship Guardianship Assistance Payment families are not eligible to become ISFC resource parents.

Counties are encouraged to assess the capacity of their relative homes in collaboration with the FFAs to determine what strategies are effective to recruit, develop, support and/or train relatives as ISFC resource parents.

Program Description

The goal of the ISFC program is to ensure that youth in foster care receive the services they need in a home-based family care setting or to avoid or exit a short-term residential therapeutic program, group home (GH), or out-of-state GH care. The program requires specially trained resource parents and professional and paraprofessional support. Consistent with Continuum of Care Reform, the ISFC program provides core services and supports to a child/youth in foster care. These core services may include, but are not limited to arranging access to mental health treatment, providing trauma informed care and providing transitional support from foster placement to permanent home placement. Services needed by children and youth in the ISFC program who meet the eligibility criteria under other applicable publicly funded programs, including, but not limited to, mental health, education and health services shall have these services arranged for by the FFA or a County.

The role of an ISFC resource parent requires a significant commitment of time, involvement and responsibility that includes participating as an integral part of the child/youth's team. ISFC resource parents must have the ability to meet the individual intensive care needs of children/youth in this program. The ISFC program also creates an opportunity for the counties and agencies to apply promising and evidence based practices for child welfare and probation youth placed in this level of care such as but not limited to wraparound, Functional Family Therapy or Multi-Systemic Therapy.

The Role of the Child and Family Team (CFT)

Beginning January 1, 2017, placing agencies were required to convene a Child and Family Team (CFT) for all children/youth in foster care per [ACL 16-84](#). The CFT process is intended to give children/youth, and families an opportunity to provide meaningful input into their case plans, which includes placement decisions as well as services and supports. Information gathered from the CFT is extremely important when identifying initial and ongoing needs of the child/youth. A CFT meeting will be convened to discuss any placement changes and service needs for a child or youth. The team

must be consulted to identify the most appropriate placement of the child or youth, while always considering the least restrictive placement option. In addition, the CFT meeting can also provide useful information that may inform the LOC Protocol regarding the care and supervision needs for a child/youth. The ISFC level of care is part of the LOC Protocol.

Service Delivery Models

There are two ISFC service delivery models:

- The FFA model is delivered through a licensed FFA or a county licensed by the Department to run a FFA.
- The public delivery model defined as an ISFC program directly operated by a county as a governmental program.

All ISFC programs, including counties opting to operate a public delivery model must comply with the applicable ISFC statutes and the instructions in this letter.

ISFC Program Responsibilities

This section describes the program responsibilities for FFAs, and for County Welfare or Probation Departments interested in operating an ISFC program.

FFAs Operating an ISFC Program will:

- Identify how they will recruit and train ISFC resource parents.
- Accept children/youth for placement that require the intensive services and supports as described in the program statement.
- Provide placement matching between eligible children/youth with ISFC resource families.
- Provide the necessary core services and supports that are identified in the individual needs and services plan.
- Provide core services and supports either directly or by the FFA, County or secured through agreements with other agencies.
- Have the necessary professional and paraprofessional support staff.
- Have social work staff with a master's degree to provide case coordination for eligible children/youth.
- Ensure all training requirements are met (see Training Section in this ACL).
- Develop the child/youth's needs and services plan in coordination with the child/youth's case worker, ISFC resource parent and CFT.

FFAs may employ client support staff as need and appropriate.

Counties operating an ISFC Program as a Public Delivery Model will:

- Identify how they will recruit and specially train ISFC resource parents.
- Have the necessary professional and paraprofessional staff.
- Provide placement matching between eligible children/youth with foster care resource families.
- Have social work staff with a master's degree to provide case coordination for eligible children/youth.
- Ensure all training requirements are met (see Training Section in this ACL).

Counties operating this model may utilize the child/youth's case plan as the individual needs and services plan and core services may be provided either directly by the County or secured through agreements with other agencies.

ISFC and Therapeutic Foster Care (TFC)

Therapeutic Foster Care (TFC) is available as an Early and Periodic Screening, Diagnostic and Treatment, Specialty Mental Health Service (SMHS) to children/youth who are under the age of 21, who are Medi-Cal eligible and meet medical necessity criteria. TFC is a short-term, intensive, highly coordinated, trauma-informed and individualized intervention, provided by a TFC parent, and other SMHS providers associated with the TFC Agency, to a child or youth who has complex emotional and behavioral needs.

An ISFC resource parent may become a TFC parent if the ISFC resource parent meets all of the TFC requirements, including, but not limited to completing specific training, and is working under the supervision of a TFC Agency. Additional information about TFC such as TFC parent and TFC Agency requirements can be found in [ACIN-I-05-17/MHSUDS IN 17-009](#) and in the recently released [Medi-Cal Manual](#) for Intensive Care Coordination, Intensive Home Based Services, and TFC Services for Medi-Cal Beneficiaries, Third Edition.

The ISFC program is for child welfare or probation youth that are in foster care and is distinct from TFC which can be provided to any Medi-Cal beneficiary who meets specific eligibility criteria. A resource parent may be a TFC parent without becoming an ISFC resource parent.

LOC Rate Determination Protocol (LOC Protocol) Static Criteria and ISFC

As described in [ACL NO. 17-11](#), when a child requires an immediate placement based on the static criteria behavioral identifiers or situations in the LOC Protocol, the Social Worker/Probation Officers may make an immediate/urgent placement at the ISFC level to ensure the safety of a child/youth pending a LOC rate determination. As a part of the LOC Protocol rate structure, the ISFC LOC identifies the higher levels of intensive care

home based and supervision expectations to address the child/youth's complex and/or special health care or medical needs. Static criteria may be used for immediate placement needs and does not assume the child/youth will remain at the ISFC level rate once the initial LOC rate determination is completed. Counties will be able to better assess the placement needs and stabilize the placement while maintaining the child/youth safely in a home-based family setting.

The placing agency may initially pay an ISFC rate up to 60-days, for a child/youth who meets one or more of the static criteria. The care needs as presented based on the static criteria behavioral identifiers or situations must have occurred within the preceding 12 months. The initial 60-day placement may be extended an additional 60-days upon local county manager approval. The approval of additional 60-day option should only be exercised when no other appropriate and safe Home Based Family Care (HBFC) placements can be found. This type of immediate/urgent placement of the child/youth in a HBFC setting must be with a resource parent who is able to provide the care needs of the child/youth and has the capacity to be trained and meet the skill level required of an ISFC resource parent.

The training requirements for a resource parent who accept an urgent/immediate placement based on the static criteria must meet the training requirements outlined below.

ISFC Resource Parent Responsibilities and Capacity

An ISFC resource parent must:

- Participate in the development of the child/youth's plan.
- Complete all pre-placement and on-going specialized training needed to provide care and supervision for ISFC eligible child/youth. (see Training section in this ACL).
- Ensure the well-being of the child/youth, and participate in the implementation of the child/youth's needs and services plan, including participating as part of the Child and Family Team.
- Meet all requirements of the Resource Family Approval (RFA) Program.

The ISFC program allows for no more than two children/youth in foster care, one or both of whom may be an ISFC eligible child placed in an ISFC resource family home. In order to accommodate sibling group placements when at least one sibling (but no more than two) is identified as an ISFC child/youth, there can be no more than a total of five foster children in an ISFC resource family home. Prior to placement of a second ISFC child/youth, or any subsequent children/youth or sibling placement, a licensed FFA operating an ISFC program must provide each county placing agency with a written assessment of the risk and compatibility of placing subsequent foster children. Placement may then be made, if approved, by the county placing agency involved, considering the recommendations of the CFT.

ISFC Resource Parent Training

ISFC resource parents are required to complete 40 hours of pre-placement training. Those who have completed 12 hours of preapproval caregiver training during the RFA process only need an additional 28 hours to complete the required 40 hours of pre-placement training. For a FFH or Certified Family Home, up to 12 hours of preplacement training as required by HSC Section [1517](#) may be counted towards the 40-hour requirement. Finally, if the ISFC resource family is caring for children with special health care needs, training hours may be satisfied on an hour-by-hour basis for the training received pursuant to WIC Section [17731\(c\)](#).

In a two-parent household, placement of an eligible child may be made once at least one of the resource parents has completed 40 hours of pre-placement training as long as the second parent has completed 20 hours of pre-placement training. In such a circumstance, the second parent must complete the remaining 20 hours of preplacement training within 12 months of placement of the child.

The 40 hours of pre-placement training must include information relating to working with children who have experienced trauma, behavior de-escalation techniques and cardiopulmonary resuscitation and first aid. The pre-placement training may be customized to each resource parent based on the child the family intends to serve. Additional pre-placement training subject matter topics may be required by the county-placing agency, depending on the special needs of an eligible child/youth to be placed with the ISFC resource family.

Ongoing Training

ISFC resource parents must complete 24 hours of ongoing training within 12 months of the placement of an eligible child/youth, and 12 hours per year for each year thereafter. Eight hours of this required training may be satisfied each year through annual RFA caregiver training or, for FFHs or Certified Family Homes, annual training received required by that licensure or certification. As with initial training, if the ISFC resource family is caring for children with special health care needs, training hours may be satisfied on an hour-by-hour basis for the training received pursuant to [WIC Section 17731\(c\)](#).

For two-parent ISFC resource families, at least one of the parents must complete 24 hours of training within 12 months of the placement. Additionally, each parent must complete 12 hours per year for each year thereafter.

When an ISFC Level Placement is Made Before Pre-placement Training is Completed

A resource parent that has not completed the required ISFC training may accept an eligible child/youth or retain a child/youth identified as an eligible child/youth subsequent to placement under the following conditions:

- In a one-parent household, the resource parent must complete the 40 hours of required pre-placement training within 120 days after the placement, or identification, of an eligible child/youth.
- In a two-parent household, one of the parents must complete the 40 hours of required pre-placement training within 120 days after the placement, or identification, of an eligible child/youth. Additionally, the other resource parent must complete the initial 20 hours of pre-placement training within 180 days from the placement, or identification, of an eligible child/youth and complete the remaining 20 hours of preplacement training within 12 months of the placement. The other parent shall not be required to complete the 24 hours of ongoing training.
- Placement, or identification, of the eligible child is made pursuant to the LOC protocol to meet the urgent placement needs of the child.
- The county-placing agency must provide or arrange for any necessary services and supports to a child/youth in a resource family pending the family's transition to an ISFC resource family, or a placement change.

Health Care Professional Training

No resource parent or FFA staff who is a health care professional caring for a child with a specialized health care needs shall be required to complete any training or additional training determined by the responsible individualized health care plan team to be unnecessary on the basis of his or her professional qualification and expertise. Training hours may be satisfied on an hour-by-hour basis by the training received pursuant to WIC Section [17731\(c\)\(6\)](#).

For ISFC Client Support Staff working with children with special health care needs, ISFC training may also be satisfied on an hour-by-hour basis in accordance with training received pursuant to WIC Section [17731\(c\)](#) or as required by the licensing board within their scope of practice.

Agency and County Staff Training

Client Support Staff are professional and paraprofessional staff or contractors who meet the experience and education requirements of WIC Section [18360.10\(c\) \(2\), \(3\), and \(4\)](#), and are operating within the scope of practice of their license or certification. These staff can provide individualized support and services to the eligible child/youth and other individuals, as approved by the placing agency and informed by the CFT. Client support staff may include, but are not limited to, classifications such as behavioral specialists, family support specialists, family specialists, or parent partners.

Client support staff training hours remain the same as in the previous ITFC programs, but training subjects can be expanded to include training tailored to specific populations.

Client support staff shall have at least one of the following:

1. A minimum of a bachelor's degree and six months of experience in working with children/youth who have serious emotional or behavioral needs or children/youth who have special needs including, but not limited to, intensive medical needs or
2. A minimum of an associate's degree and one year of experience in working with children/youth who have serious emotional or behavioral needs, or children/youth who have special needs including, but not limited to, intensive medical needs.

The Department may waive the educational requirements described in 1 or 2 above for client support staff who have direct client supervision with at least two years of experience working with children/youth who have serious emotional or behavioral needs, or children/youth who have special needs including, but not limited to, intensive medical needs, and who have demonstrated a combination of education, skills, and experience that meets the specific needs of the target population, including, but not limited to, cultural and linguistic needs.

For ISFC client support staff who are also health care professionals working with children with special health care needs, ISFC training may also be satisfied on an hour-by-hour basis in accordance with training received pursuant to WIC Section [17731\(c\)](#), or as required by the licensing board within their scope of practice.

For a Public Delivery Model, if client support staff are hired, the support staff must have 40 hours of training to include, but not limited to, working with children/youth who have experienced complex trauma. If client support staff have completed the Child Welfare Services Core Training curricula, then this initial training requirement would be met.

ISFC RATE

Effective December 1, 2017, all ITFC and Treatment Foster Care Oregon Model (TFCO) [previously known as Multi-Dimensional Treatment Foster Care (MTFC)] providers were paid the ISFC rate as displayed in [ACL 17-75](#), Table H. Counties can continue to place ISFC children/youth with existing ITFC providers while the FFAs convert to the ISFC program. FFA Certified or RF approved parents in an existing ITFC Program should already be receiving the current ISFC rate of \$2,410.

The LOC Protocol identifies the care and supervision needs for the child/youth and the resource parents level of expected supervision and supports. The LOC Protocol is being implemented with the FFAs as outlined in [ACL NO. 18-06](#) and [ACL 18-06E](#). The LOC Protocol has been available for use by FFAs since March 1, 2018.

FFA and County Process for Submitting ISFC Program Statements/Program Descriptions

Existing FFAs that have transitioned from an ITFC to an ISFC program, and FFAs interested in implementing the ISFC program, must submit an amended FFA Program Statement Template that is updated to include the new ISFC requirements to the Foster Care Rates Bureau (FCRB). The FFA is only required to submit section 35 of the FFA Program Statement. The ISFC Section 35 of the [Program Statement template](#) should be sent to the California Department of Social Services FCRB via email to: Fosterca@dss.ca.gov. The emailed copy must have the ISFC provider's name as part of the file name to identify which provider the ISFC FFA Program Statement belongs to. A hard copy of the amended program statement must to be sent to the applicable Community Care Licensing [Children's Residential Regional Office](#).

FFAs that are new ISFC programs and that were not prior ITFC providers will receive an ISFC rate approval and issued a rate letter, and a program number from FCRB. The effective date of the rate will correspond with the date the ISFC program is approved.

Counties that are not operating as a FFA and intend to opt-in as an ISFC public delivery model shall submit an ISFC Program Description to the Department, (See Attachment). The Program Description captures how a county will meet the ISFC requirements as outlined in this letter. The County ISFC Program Description is to be emailed to Fosterca@dss.ca.gov.

Inquiries

If you have any questions regarding the rates policy information in this ACL, please contact the FCRB at (916) 651-9152 or send emails to Fosterca@dss.ca.gov.

Sincerely,

Original Document Signed By:

GREGORY E. ROSE
Deputy Director
Children and Family Services Division

c: CWDA
Attachment

ATTACHMENT

County Name: _____

PUBLIC DELIVERY MODEL

ISFC PROGRAM DESCRIPTION

A. Program Goals [Reference: WIC 18360.10]

1. Identify Program goals to ensure ISFC Resource Parents are carefully selected, trained, supervised, and matched with a child or nonminor dependent.
2. Describe how the ISFC program will target and support children or nonminor dependents who required a higher level of intensive services and supports.
3. Describe procedures to request CFTs as needed, including whenever there is a risk of placement disruption.

B. Training Requirements [Reference: WIC 18360.10(b)]

- Describe how ISFC Resource Parents will be trained. Identify other ISFC training requirements consistent with WIC 18360.10(b) to include initial and any ongoing training for ISFC Resource Parents.

C. ISFC Core Services and Supports [Reference: WIC 18360.10(c)]

1. Describe core services and supports and how they will be provided or arranged to support children and non-minor dependents, including culturally relevant services.
2. Describe how a County shall arrange for services for children and youth in the ISFC program who meet the eligibility criteria under other applicable publicly funded programs, including, but not limited to, mental health, education and health services
3. Identify the staff delivering core services and supports and manner in which they will be delivered.

D. Staffing Requirements [Reference: WIC 18360.10(c)]

1. Identify how social work staff with a Master's degree will provide case coordination for ISFC eligible child/youth

E. Staff Training Requirements [Reference: WIC 18360.10(c)]

- Ensure staff training requirements meet ISFC requirements set forth in ISFC statute

F. Needs and Services Plan [Reference: WIC 18360.15(a)]

Counties may utilize the child/youth's case plan as the individual needs and services plan.