

COUNTY OF LOS ANGELES
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
AND
PROBATION DEPARTMENT
SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAMS
FOSTER CARE PLACEMENT SERVICES CONTRACT

STATEMENT OF WORK



**COUNTY OF LOS ANGELES
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
AND
PROBATION DEPARTMENT**

**SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAM
FOSTER CARE PLACEMENT SERVICES
STATEMENT OF WORK**

<u>PART</u>	TABLE OF CONTENTS	<u>PAGE</u>
A. INTRODUCTION	4
1.0 PREAMBLE	4
2.0 OVERVIEW AND BACKGROUND	4
3.0 COUNTY PRIORITIES FOR CHILDREN	6
4.0 PROGRAM GOALS	6
5.0 TARGET DEMOGRAPHICS	7
6.0 CORE PRACTICE MODEL	7
B. PROGRAM REQUIREMENTS	8
7.0 SERVICE DELIVERY SITES	8
8.0 STAFF QUALIFICATIONS, REQUIREMENTS, AND EXEMPTIONS	9
9.0 TRAINING	10
10.0 PROGRAM REPORTING REQUIREMENTS	11
11.0 PROGRAM COMPLIANCE AND QUALITY ASSURANCE	15
12.0 PLAN OF OPERATION AND PROGRAM STATEMENT CHANGES	16
13.0 BUILDINGS AND GROUNDS	16
C. PROGRAM SERVICES	17
14.0 CHILD AND FAMILY TEAM	17
15.0 CORE SERVICES AND SUPPORTS	18
16.0 PREGNANT AND PARENTING YOUTH AND NMDs	37
17.0 ADDITIONAL SERVICES AND SUPPORTS	37
18.0 PLACEMENT PROCESS (INTAKE AND DISCHARGE)	43
19.0 NEEDS AND SERVICES PLAN	51

20.0 VISITATION PLAN..... 53

D. PERFORMANCE OUTCOME GOALS AND REQUIREMENTS SUMMARY..... 54

21.0 SAFETY 54

22.0 PERMANENCY..... 54

23.0 ACCESS TO EFFECTIVE AND CARING SERVICES FOR
WELL-BEING..... 54

**COUNTY OF LOS ANGELES COUNTY
DEPARTMENT OF CHILDREN AND FAMILY SERVICES
AND PROBATION DEPARTMENT**

**SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAM
FOSTER CARE PLACEMENT SERVICES**

STATEMENT OF WORK

PART A: INTRODUCTION

1.0 PREAMBLE

The County of Los Angeles (COUNTY) seeks to collaborate with its community partners to enhance the capacity of the health and human services system to improve the lives of children and families. These efforts require, as a fundamental expectation, that the COUNTY's contracting partners share the COUNTY and community's commitment to provide health and human services that support achievement of the COUNTY's Strategic Plan, Mission, Values, Goals and Performance Outcomes.

The COUNTY's vision is a value driven culture, characterized by extraordinary employee commitment to enrich lives through effective and caring service, and empower people through knowledge and information. This philosophy of service excellence is anchored in the COUNTY's shared values of: 1) Integrity; 2) Inclusivity; 3) Compassion; and 4) Customer Orientation.

These shared values are encompassed in the COUNTY's Strategic Plan's three Goals: 1) Make Investments that Transform Lives; 2) Foster, Vibrant and Resilient Communities; and 3) Realize Tomorrow's Government Today.

Improving the well-being of children and families requires coordination, collaboration and integration of services across functional and jurisdictional boundaries, by and among COUNTY departments/agencies, community, and contracting partners.

2.0 OVERVIEW AND BACKGROUND

On January 1, 2017, specific sections of Assembly Bills 403, 404 and 1997 became operative and established new requirements for foster care residential services, including the implementation of a new placement type, Short-Term Residential Therapeutic Program (STRTP). AB 403, 404 and AB 1997 were sponsored by the California Department of Social Services (CDSS) to administer the Continuum of Care Reform (CCR), the main goals of which are to further improve California's child welfare system and its outcomes, by increasing the use of home-based family care, and decreasing the length of time to achieve permanency. This will be accomplished in part through the strengthening of cross-agency networks of services and supports, coordinated through an effective Child

and Family Team (CFT) process, which support the ultimate goal of finding and maintaining a stable, permanent family.

A STRTP means a residential facility that provides an integrated program of specialized and intensive care and supervision, services and supports, treatment, and short-term 24-hour care and supervision to children, youth and non-minor dependents (NMDs). The care and supervision provided by a short-term residential therapeutic program shall be nonmedical, except as otherwise permitted by law.

- 2.1 The County of Los Angeles Juvenile Court gives responsibility for the care, custody, and control for each dependent child to the Department of Children and Family Services (DCFS) and Probation Department (Probation). The Board of Supervisors, through the Contract, gives authorization for the provision of placement services.
- 2.2 The Community Care Licensing Division (CCLD) regulations (see Exhibit A-1, Reference Links) that apply to STRTPs are from the Manual of Policies and Procedures, Title 22, including but not limited to:
 - (a) Division 6, Chapter 1, Sections 80000-80095, *General Licensing Requirements* (except as otherwise noted in Division 6, Chapter 7.5);
 - (b) Division 6, Chapter 7.5, Sections 87000 through 87095.69, *STRTP*;
 - (c) Division 6, Chapter 7.5, Subchapter 1, Sections 87097.00 through 87097.88, *Minor and Nonminor Dependent Parent Program*; and
 - (d) Division 6, Chapter 7.5, Subchapter 2, Sections 87096.00 through 87096.88, *Care of Children Under the Age of Six Years*.
 - (e) Division 6, Chapter 7.5, Subchapter 3, Sections 87098.00 through 87098.891, *Children's Residential Crisis Program*.
- 2.3 The California Law codes referenced in this Exhibit A, Statement of Work (SOW), are from the California Education Code (EDC), Health and Safety Code (HSC), Penal Code (PEN), and Welfare and Institutions Code (WIC) (See Exhibit A-1, Reference Links).
- 2.4 Discrimination on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, mental or physical disability, or HIV status is prohibited in the California foster care system.
 - 2.4.1 For transgender children, youth and NMDs, the CONTRACTOR shall provide services in accordance to the guidance and instructions provided in the ACL 19-27 Gender Affirming Care for Minor and Non-Minor Dependents in Foster Care (see Exhibit A-1, Reference Links) and the Placement Coordinating Memorandum titled Transgender

Children/Non-Minor Dependents (NMDs) in Out-of-Home Care (Exhibit A-18) prepared in collaboration between DCFS, PCW, the Department of Mental Health (DMH) and CCLD.

3.0 COUNTY PRIORITIES FOR CHILDREN

COUNTY has established the following priorities for their children: (1) Safety, (2) Permanency, and (3) Access to effective and caring services for well-being.

CONTRACTOR shall provide data related to COUNTY's priorities.

- 3.1 Safety: Safety is defined as freedom from abuse and neglect as defined in the PEN, Section 11165.5 (see Exhibit A-1, Reference Links). The Performance Outcome Goals and Requirements Summary addressing this priority in a STRTP setting are found in Part D, Section 21.0 of this SOW.
- 3.2 Permanency: Permanency is defined as a safe and stable nurturing relationship achieved through maintaining a child in the home, reunification, adoption, or legal guardianship. The Performance Outcome Goals and Requirements Summary addressing this priority in a STRTP setting are found in Part D, Section 22.0 of this SOW.
- 3.3 Access to Effective and Caring Services for Well-Being: COUNTY's goal is to ensure children receive services as identified through the CFT in the spirit of the Core Practice Model (CPM) to improve their level of functioning in the areas of education/career planning; transition out of foster care; physical; behavioral; social and emotional well-being; and self-sufficiency. The Performance Outcome Goals and Requirements Summary addressing this priority in a STRTP setting are found in Part D, Section 23.0 of this SOW.

4.0 PROGRAM GOALS

The COUNTY has incorporated program goals consistent with Assembly Bill 403 and 1997:

- Conducting comprehensive initial child assessments;
- Increasing the use of Home-Based Family Care and the Provision of Services and Supports to Home-Based Family Care, and wrap the necessary services around the child to ensure placement success and prevent replacements; and
- Creating faster paths to permanency resulting in shorter durations of involvement in the Child Welfare and Juvenile Justice Systems.

Aligned with the aforementioned goals are program services which shall include the timely provision of an array of appropriate services that are coordinated, comprehensive, and community-based, and which address the needs of children, with more intensive needs requiring medically necessary specialty mental health services in order to facilitate reunification and to ensure their safety, permanence, and well-being. These program services shall be trauma informed, culturally

relevant, and age and developmentally appropriate. Programs shall also collaborate with child welfare and mental health agencies for the provision of coordinated services to children and their families in accordance with the CPM as described in Part A, Section 6.0.

5.0 TARGET DEMOGRAPHICS

CONTRACTOR shall provide services to children in accordance to the CONTRACTOR's approved Plan of Operation and Program Statement and in accordance to Title 22, Chapter 7.5 STRTP, Sections 87022 and 87022.1.

- 5.1 CONTRACTOR may only accept placement of a child who has been assessed pursuant to WIC Section 11462.01 as meeting the applicable criteria for placement in a STRTP (see Exhibit A-1, Reference Links).
- 5.2 The overall target demographics for STRTPs is children, ages 0-17, and Non-Minor Dependents, ages 18-21, in need of a short-term residential therapeutic setting. The principal target demographics include children in which the Case Plan is for: 1) family reunification, 2) adoption, 3) legal guardianship, 4) permanent placement, 5) sibling group placement, 6) teen parents and their children, 7) neighborhood/school-based placement, 8) self-sufficiency, and 9) children with special health care needs as defined in WIC Section 17710(a) (see Exhibit A-1, Reference Links).

6.0 CORE PRACTICE MODEL

The CPM prioritizes child safety by enabling stronger teamwork with children and families, grounded in strong community support. The CPM is a deeper way to work with families to improve safety and outcomes for children. The model helps children and families build supportive teams that enable them to identify their strengths and underlying needs in a trusting, positive environment. These insights become the foundation of more effective action plans for change that are tailored specifically to each child and family. The strategies of this model include:

- Engagement: This is an opportunity to hear the family, build trust, show empathy, and honor the family's voice and choice.
- Teaming: Allows for teamwork to occur; shows how formal and informal supports can work together; promotes shared ownership and opportunity for change.
- Assessment and Understanding: Allows for shared identification of underlying needs and strengths; it is responsive to trauma and culture and empowers families.
- Planning and Intervention: Allows for the crafting of tailored services and attention to individual underlying needs.
- Tracking and Adapting: Allows for continuous monitoring of progress, while being thoughtful about the effectiveness of plans, and creates an opportunity to make adjustments using team assessments, so plans can

evolve to achieve long-term goals.

The CPM is a process that is family centered, solution focused, trauma responsive, strength-based, team driven, and improves outcomes for children and families.

For more information, the CONTACTOR may refer to the Pathways to Mental Health Services Core Practice Model Guide and COUNTY's CPM website (see Exhibit A-1, Reference Links).

PART B: PROGRAM REQUIREMENTS

7.0 SERVICE DELIVERY SITES

The CONTRACTOR's services described hereunder shall be provided in a licensed STRTP site(s) as listed on Exhibit A-2.

- 7.1 CONTRACTOR shall request approval from the DCFS Out-of-Home Care Management Division (OHCMD) Division Chief or designee and the Probation Placement Permanency & Quality Assurance Director in writing a minimum of thirty (30) days before: 1) terminating services at any of the approved location(s); and 2) before commencing services at any other location(s) not previously approved in writing by the DCFS OHCMD Division Chief or designee and/or the Probation Placement Permanency & Quality Assurance Director.
- 7.2 CONTRACTOR shall not place children at a service delivery site not listed on Exhibit A-2 of the STRTP Master Contract. Failure on the part of CONTRACTOR to comply with the provisions of this Section shall constitute a material breach of the Contract upon which COUNTY may take all appropriate action including but not limited to, implementation of Hold Status, Do Not Refer Status, and/or Do Not Use Status, as set forth in Part I, Unique Terms and Conditions, Section 16.0, Hold Status, Do Not Refer Status, Do Not Use Status, Corrective Action Plan of the Contract. If CONTRACTOR disagrees that there has been a material breach, CONTRACTOR may exercise any and all of its legal rights consistent with Part I, Unique Terms and Conditions, Section 20.0 Dispute Resolution Procedures of the Contract.
- 7.3 CONTRACTORS shall check the Megan's Law Website (see Exhibit A-1, Reference Links) prior to licensing a new site to ensure that no registered sex offender lives so close that he/she will be a potential threat to the safety of the children.
- 7.4 CONTRACTOR shall develop a Safety Plan for each service delivery site to ensure the safety of the children.
 - 7.4.1 COUNTY will evaluate the potential threat to safety at a new site prior to approval.

7.4.2 CONTRACTOR shall ensure all the following postings are visible and placed in a common area in accordance to Title 22, Division 6, Chapter 7.5, Sections 87009, 87022.1(b)(16), 87072.2, 87079(e)(1) and 87080, WIC 16001.9, HSC 1512, and CDSS Publications and Forms (see Exhibit A-1, Reference Links):

- Facility License (Section 87009)
- Personal Rights (WIC 16001.9)
- Know Your Sexual and Reproductive Health Rights (PUB 490)
- Foster Youth Mental Health Bill of Rights (PUB 488)
- Foster Care Ombudsman (PUB 379)
- Complaint Procedures (Section 87072.2)
- Emergency Disaster Plan and Contact Numbers (LIC 610)
- Evacuation Plan (Facility Sketch)
- Visiting Policy Notice (HSC 1512)
- Weekly Meal Menus (Section 87022.1(b)(16))
- Planned Activities (Section 87079(e)(1))
- Resident Council Meeting Notice (Section 87080)

8.0 STAFF QUALIFICATIONS, REQUIREMENTS AND EXEMPTIONS

CONTRACTOR shall adhere to Title 22, Division 6, Chapter 7.5, Sections 87019, 87022(c)(A) and (D), 87064, 87065, and 87095.66 requirements in connection with staff qualifications, requirements, and exemptions.

8.1 Criminal Record Clearance Procedures, Criminal Record Statements, and Child Abuse Index Checks

CONTRACTOR shall adhere to the requirements of Part I, Unique Terms and Conditions, Section 8.0 Background and Security Investigations, conduct a background check, obtain a criminal clearance and request criminal record exemptions as applicable for all employees, independent contractors, volunteer staff, or subcontractors prior to any contact with children while providing services under the Contract according to HSC Sections 1522 (see Exhibit A-1, Reference Links) and as specified in Title 22, Division 6, Chapter 1, Section 80019.

8.1.1 CONTRACTOR shall notify COUNTY of any approved or denied exemption request submitted to CDSS Criminal Background Check Bureau. Notifications shall be sent to CONTRACTOR's OHCMD assigned monitor within 2 business days of receipt by submitting the Criminal Record Exemption Notification (Exhibit A-3) along with any related documentation. COUNTY may request that employees, independent contractors, volunteer staff, or subcontractors with a criminal record exemption be immediately removed from performing services under the Contract. CONTRACTOR shall be notified of such decision within five (5) days of DCFS receipt of Exhibit A-3. The CONTRACTOR must receive written approval for anyone with a criminal record exemption prior to having contact with children.

8.2 CONTRACTOR shall check the Megan's Law Website (see Exhibit A-1, Reference Links) prior to: the hiring of any prospective employee(s), the use of agency independent contractor(s), volunteer(s), or subcontractor(s) who may come in unsupervised contact with the children in the course of their work, volunteer activity, or performance of the subcontract, and shall maintain records documenting this.

8.3 **Subsequent Arrests or Convictions**

CONTRACTOR shall notify the OHCMD assigned monitor, COUNTY Worker and CCLD in writing of any known allegations in the Child Abuse Central Index arrest and/or subsequent conviction, other than for minor traffic offenses, of all non-exempt persons in accordance with HSC, Section 1522 (see Exhibit A-1, Reference Links).

8.3.1 CONTRACTOR shall prepare and submit the Notification of Subsequent Arrest, Conviction, Probation or Parole Notification Violation (Exhibit A-4) to the assigned OHCMD monitor along with any related documentation within two (2) working days of the time such information becomes known to the CONTRACTOR. All supplemental documentation received after the Exhibit A-4 submission must be provided as it becomes available.

8.4 CONTRACTOR shall maintain all records related to background checks, criminal record clearance procedures, criminal record exemptions, criminal record statements, Child Abuse Central Index checks, and subsequent arrest request notification documentation, which shall be made available upon request.

8.5 **Staff Language Requirements**

CONTRACTOR shall provide child care staff, mental health personnel, and social work personnel who are proficient in both speaking and writing the language(s) of the children and family(ies). CONTRACTOR may comply with this requirement by providing equivalent bi-lingual resources for social work and mental health needs.

9.0 TRAINING

CONTRACTOR shall develop a comprehensive initial and an on-going training plan for agency staff, volunteers, subcontractors, and any staff working directly with children in accordance with Title 22, Division 6, Chapter 7.5, Sections 87022(c)(b), 87064.2, 87065, and 87065.1.

9.1 CONTRACTOR shall ensure training is conducted by qualified staff.

9.2 CONTRACTOR shall maintain the individual records of training completed by staff and volunteers, and shall make them available upon request.

- 9.3 The COUNTY reserves the right to designate up to 16 hours of additional training per year as determined by the COUNTY. Up to 16 hours may or may not be required by DCFS in any given year. Training needs will be researched and implemented by the CONTRACTOR as necessary.

In addition to the training topics listed under Title 22, Division 6, Chapter 7.5, Section 87065.1(d)(3), CONTRACTOR shall include the following topics as part of the required annual 40 hours of training:

- College and Career Readiness
- Implicit Bias
- Cultural Competency
- A minimum of 8 hours of Sexual and Reproductive Health Education
- Reduction of Law Enforcement Involvement
- Emergency Intervention Training as indicated in Title 22 Division 6, Chapter 7.5, Section 87095.65(b)

- 9.3.1 CONTRACTOR shall ensure staff providing direct education support to children, youth and NMDs attending 6-12 grade, receive College and Career Readiness training in accordance with the Turning Dreams Into Degrees in LA County curriculum as referenced in Exhibit A-1 (See training resources at Exhibit A-1-Reference Links). The training shall be tailored to the grade level of each child, youth and NMD (Grades 6-10 or 11-12). Staff who have completed training for children and youth in grades 6-10 must complete additional training tailored to children, youth and NMDs in grades 11-12 upon the child, youth and NMDs' transition to the 11th grade.

10.0 PROGRAM REPORTING REQUIREMENTS

All CONTRACTOR employees are mandated reporters of child abuse and neglect per PEN Code, Section 11165.7 (see Exhibit A-1, Reference Links). Child abuse and neglect in out-of-home care are defined in Section 11165.5 (see Exhibit A-1, Reference Links).

- 10.1 CONTRACTOR shall report all suspected child abuse allegations and incidents immediately upon discovery for all children to: (1) CCLD; (2) COUNTY's Child Protection Hotline; (3) for DCFS children, to the OHCMD assigned monitor; and (4) for Probation children, to the Placement Administrative Services' (PAS) Officer of the Day (OD).
- 10.2 CONTRACTOR agrees that the safety of the Child will always be the first priority. To ensure the safety of the Children, CONTRACTOR will, and will train staff to, immediately, upon discovery, whenever CONTRACTOR reasonably suspects that a Child has been a victim of abuse and/or is in danger of future abuse, notify: (1) CCLD and the COUNTY's Child Protection Hotline; (2) for DCFS children, the OHCMD assigned monitor;

and (3) for Probation children, the PAS OD. CONTRACTOR will remain with the Child if imminent risk is present. CONTRACTOR and CONTRACTOR's staff shall coordinate with CCLD, the OHCMD assigned monitor, and the PAS OD prior to the investigation of any allegation of child abuse and follow their instructions on how to proceed.

- 10.3 CONTRACTOR shall ensure that all known or suspected instances of child abuse are reported to a child protection agency as defined in PEN, Section 11166. This responsibility shall include:

10.3.1 A requirement that all employees, consultants, or agents performing services under this Contract who are required by PEN, Section 11165.7 (see Exhibit A-1, Reference Links), to report child abuse, sign a statement that he or she knows of the reporting requirements and will comply with them.

10.3.2 To the extent possible and reasonable, CONTRACTOR will educate employees, consultants or agents who are not mandated reporters of child abuse, as defined in California PEN Section 11166 (see Exhibit A-1, Reference Links), on procedures for reporting any reasonable suspicion of child abuse.

10.4 **Special Incident Report (SIR) Via the I-Track System**

The CONTRACTOR shall prepare and submit a SIR via the I-Track System, for each Child in accordance with the guidelines and time frames in Exhibit A-5, Special Incident Reporting Guide for Foster Care Placement Services Providers.

In addition to the reporting requirements described in Title 22, Division 6, Chapter 1, Section 80061 and Chapter 7.5, Sections 87022(c)(7), 87061, and 87095.61, the CONTRACTOR shall also notify the COUNTY of all reportable incidents via the I-Track web-based system (see Exhibit A-1, Reference Links).

For Probation children, the CONTRACTOR shall also report incidents by telephone to the PAS OD. Failure to report via the I-Track system may result in further action as described in Exhibit N, Investigation/Monitoring/Audit Remedies and Procedures.

10.4.1 Each incident will be evaluated by the COUNTY on a case-by-case basis to determine appropriate corrective action.

10.5 **Runaway and Abduction Procedures and Reporting**

CONTRACTOR shall comply with the runaway plan in accordance to their program statement and Title 22, Division 6, Chapter 7.5, Sections 87061(j)(7) and (8) and 87095.24. At time of admission, if it is determined that the child, youth and NMD has a history of running away from placement or is identified as a commercially sexually exploited child, youth and NMD,

the CONTRACTOR shall develop an individualized runaway plan for that specific child, youth and NMD.

10.5.1 **Call Law Enforcement**

CONTRACTOR shall exhaust all efforts to engage and redirect the child, youth and NMD attempting to runaway to remain in the facility in accordance to Title 22, Division 6, Chapter 7.5, Section 87095.24(c)(2) and the CONTRACTOR's Program Statement, Runaway Plan section. CONTRACTOR shall keep the contact information of the nearest law enforcement agency on hand and contact them to file a Missing Persons' Report in accordance to the timelines as specified in the SIR Guide (Exhibit A-5). Photographs may be released to law enforcement only in an effort to expedite locating of affected children, youth and NMDs. Identifying information for law enforcement shall only include a photograph of the child, youth and NMD, description of clothing when last seen, date of birth, last location of the child, youth and NMD, and any distinguishing marks or tattoos. CONTRACTOR shall inform law enforcement that photographs and other personal identifying information which includes the child, youth and NMD's social security number shall not be posted in any communities and document the discussion with law enforcement in the submitted SIR via I-Track.

10.5.1.1 CONTRACTOR must get a report number, the name of the person taking the report, follow up by getting a copy of the report, and document all efforts. All efforts to locate the child shall be documented and any documentation related to the missing child must be maintained in the child's records.

10.5.1.2 CONTRACTOR shall submit the Missing Person's Report and reporting number to the COUNTY Worker by the next day after the incident, or as soon as the report is made available by the law enforcement agency.

10.5.2 **Call the County**

CONTRACTOR shall call the COUNTY Worker and his/her supervisor upon discovery of a child running away. For Probation children, the CONTRACTOR shall call the PAS Absence Without Official Leave (AWOL) OD. For DCFS youth, if it is after hours or on the weekend, or if the COUNTY Worker or the supervisor are not reachable, the CONTRACTOR shall call the DCFS Child Protection Hotline at 1-800-540-4000. CONTRACTOR shall provide the COUNTY Worker with any information about run away child's neighbors, friends, school officials, and family members.

10.5.2.1 COUNTY staff will need detailed information, for instance: Who did the child leave the home with? Did someone pick up the child or did they leave on foot? Which direction did the child go? Was there a parent or relative involved? What was the child's state of mind – angry, depressed? What was the child wearing? For child(ren)/youth with a history of or at risk of Commercial Sexual Exploitation the CONTRACTOR shall document and report to the COUNTY Worker any of the following:

- Child/youth exhibits behaviors or otherwise indicates that she/he is being controlled or groomed by another person;
- Child/youth spends time with people known to be involved in commercial sex;
- Child/youth's use of internet, cell phone, or social media involves social or sexual behavior that is atypical of his/her age.

10.5.2.2 CONTRACTORS shall document and indicate if the child/youth fits any of the following descriptions:

- Child/youth has a history of running away, unstable housing, including multiple foster care placements, or periods of homelessness including couch surfing;
- Child/youth has had prior involvement with law enforcement or the juvenile justice system;
- Child/youth is frequently truant;
- Child/youth's relationships are concerning, placing him/her at risk or in danger of exploitation;
- Child/youth has a history of substance abuse, specifically narcotics, opiates, crack/cocaine, and amphetamines.

10.5.3 CONTRACTOR shall maintain important numbers to have on hand:

- COUNTY Worker
- COUNTY Worker's supervisor
- Child Protection Hotline: (800) 540-4000
- Runaway Outreach Unit: (213) 765-7310
- Probation PAS AWOL OD (323) 730-4466
- Probation Group Home Monitoring OD (323) 537-6297
- Closest law enforcement agency

10.5.4 I-Track Reporting

CONTRACTOR shall report a child abduction or runaway by completing an I-Track SIR. CONTRACTOR shall cross report to

CCLD, the DCFS OHCMD Quality Assurance Section, Runaway Outreach Unit, PAS AWOL OD, and to the COUNTY Worker. The report shall include the time and date of the abduction or the runaway child was last seen and any significant details leading to the incident.

10.5.5 Supplemental Information

CONTRACTOR shall be familiar with the CDSS' All County Information Notice (ACIN) I-13-17, "Promising Practices for Youth Who Are Missing or Run Away from Foster Care" (see Exhibit A-1, Reference Links). CONTRACTOR shall assist the COUNTY Worker in completing the following forms: Substitute Care Provider Incident Report, the SIR-Runaway Addendum, the Safety Support Plan, and Missing/Runaway Youth De-Briefing Form as instructed in the ACIN I-13-17.

10.5.5.1 CONTRACTOR shall keep all the copies of reports and documentation for at least six (6) months.

10.6 Foster Care Search System (FCSS)

CONTRACTOR shall notify COUNTY of any and all updates and/or changes to the agency, vacancy information, and facility changes (additional sites and relocations). CONTRACTOR shall report these updates/changes using the FCS. Instructional training videos on how to create an account and access the FCSS is available on the FCSS website (see Exhibit A-1, Reference Links).

10.6.1 CONTRACTOR shall designate staff to update FCSS regularly, at a minimum weekly, to ensure information pertaining to the agency, population served, and placement availability is current and accurate.

10.7 Utilization Report

CONTRACTOR shall report a monthly census indicating occupancy for the reporting month, which list all youth entering or continuing the program for that month and the number of program vacancies to OHCMD. CONTRACTOR shall submit the Utilization Report (Exhibit A-6) via email at DevO@dcfs.lacounty.gov, by the 10th of each month or next business day, if the 10th is a holiday or weekend. This section will no longer be applicable once the FCSS's automated reporting capability is fully operational. COUNTY will notify CONTRACTORS in writing when the Utilization Report is no longer required.

11.0 PROGRAM COMPLIANCE AND QUALITY ASSURANCE

CONTRACTOR shall develop and implement a continuous quality improvement plan in accordance with Title 22, Division 6, Chapter 7.5, Section 87081, which shall include internal controls and monitoring that comply with this Contract and the Office of Management and Budget (OMB) Super-Circular.

11.1 Throughout the term of this Contract, the COUNTY will monitor the CONTRACTOR's performance. Any failure by the CONTRACTOR to comply with the terms of this Contract, including any failure to meet the performance targets described on each Performance Outcome Summary which follows, may result in COUNTY's termination of the whole or any part of the Contract in accordance with Part II, Standard Terms and Conditions, Section 32.0, and/or placement of the CONTRACTOR on "Hold", "Do Not Refer", or "Do Not Use" Status or any other remedy specified in the Contract and as described in Exhibit N, STRTP Contract Investigation/Monitoring/Audit Remedies and Procedures.

11.2 Evidence-Based Practices

CONTRACTORS shall employ Trauma-Informed Evidence-Based Practices whenever possible, in accordance with Title 22, Division 6, Chapter 7.5, Section 87078.2, in an effort to increase achievement of the COUNTY's Performance Outcome Goals as described in Exhibits A-7, A-8 and A-9. For information on Evidence Based Practices CONTRACTOR may refer to the ACIN No. I-28-18 (see Exhibit A-1, Reference Links).

12.0 PLAN OF OPERATION AND PROGRAM STATEMENT CHANGES

Any changes/addendums CONTRACTOR makes to the Plan of Operation and Program Statement must be submitted to the COUNTY and CCLD for approval. Changes may not be implemented until written approval from COUNTY is received. CONTRACTOR shall allow for sixty (60) days for COUNTY approval.

12.1 COUNTY may request that CONTRACTOR make revisions to its Plan of Operation and Program Statement by notifying CONTRACTOR in writing, thirty (30) days in advance, of any proposed changes.

12.2 CONTRACTOR shall coordinate with OHCMD staff to submit any changes via electronic submission through the web based electronic Program Statement Submission System (ePSSS) (see Exhibit A-1, Reference Links).

13.0 BUILDINGS AND GROUNDS

CONTRACTOR shall maintain an environment, indoors and outdoors, that is clean and free from hazards in accordance to Title 22, Division 6, Chapter 1, Sections 80087 and 80088, and Chapter 7.5, Sections 87087, 87087.2, 87087.3, 87088, and 87088.3.

13.1 CONTRACTOR shall have safety equipment on hand in the pool area consisting of at least a donut ring with a rope and a pole with a hook.

13.2 For two-story residences, the CONTRACTOR shall have an exterior fire exit from the second story in addition to the inside exit. In some cases COUNTY can approve exit from a second-story window(s), if it is equipped with a properly located rollout ladder(s) stored in a locked cabinet with a breakout glass.

- 13.3 CONTRACTOR shall provide: 1) a home and yards that are safe, well-maintained, and appropriately furnished; 2) age appropriate environment; 3) a bedroom, or sufficient space in a shared bedroom, with a comfortable mattress in good condition and adequate space to store clothing and personal items; 4) an appropriate and well-lit space for studying; 5) acceptable housekeeping; and 6) safety gates and latches as applicable.
- 13.4 Disinfectants, cleaning solutions, poisons, firearms, and other items that could pose a danger, if readily available to children, shall be stored where inaccessible to children.
- 13.5 CONTRACTOR shall develop a Safety Plan and an Emergency Response Services plan for each facility; train all staff and children on policies and procedures, including an evacuation plan; and conduct routine drills.
- 13.6 Medicines shall be stored as specified in Section 80075(j) and (k) and separately from other items specified in Section 80087(g).

PART C – PROGRAM SERVICES

14.0 CHILD AND FAMILY TEAM (CFT)

CONTRACTOR shall develop and maintain a process to participate and collaborate with the CFT to decrease the length of time to achieve permanency through the strengthening of family engagement and cross-agency networks of services and supports in accordance with Title 22, Division 6, Chapter 7.5, Sections 87022.1(b)(8), (11) and (12), 87065.1, 87068.2, and 87068.3.

- 14.1 The CFT process shall be aligned with the values of the County of Los Angeles CPM (see Exhibit A-1, Reference Links).
 - 14.1.1 The CPM and the CFT process shall be family-centered to identify:
 - 1) the family's strengths and underlying needs; 2) collaborative case planning; 3) decision making; and 4) the consideration of the long-term success of the family.
 - 14.1.2 For further guidance when developing the CFT process, the CONTRACTOR shall refer to the COUNTY's policy on CFT (see Exhibit A-1, Reference Links).
- 14.2 CONTRACTOR shall follow the CFT guidelines as described in WIC Section 16501(a)(4) and as described in the CDSS All County Letter No. 16-84 (see Exhibit A-1, Reference Links).
- 14.3 The CFT process shall be a solution-focused approach meant to draw on the family's history of protection and ability to solve problems. The information assists families to develop their vision for their future and assists them in gathering a formal and informal support network that will be available to them after termination of formal services.

- 14.4 The CFT process shall continue the process of engagement with the family, child, and/or direct care staff, and provide a process for transparent communication to ensure that services are well coordinated in collaboration with service providers.
- 14.5 CONTRACTOR shall ensure participation in the CFT by any staff identified by the CONTRACTOR who has participated in the child's treatment plan, including individuals who participate in the child's education.

15.0 CORE SERVICES AND SUPPORTS

CONTRACTOR shall make Core Services and Supports available to children, youth and NMDs either directly or secured through formal agreements with other agencies, which are trauma-informed and culturally relevant in accordance with; Title 22, Division 6, Chapter 7.5, Sections 87078.1 and 87078.2; Core Services Matrix; and with the Program Statement (see Exhibit A-1, Reference Links).

All children, youth and NMDs have a right to fair and equal access to all available services, placement, care, treatment, and benefits.

15.1 Specialty Mental Health and Additional Treatment Services

CONTRACTOR shall provide specialty mental health and additional treatment services for children who meet medical necessity criteria for specialty mental health services under the Medi-Cal Early and Periodic Screening, Diagnosis, and Treatment program, as described in Title 9, Section 1830.210, and to the extent that funding and services are available and as identified in the Needs and Services Plan (NSP) in collaboration with the CFT and in accordance with Title 22, Division 6, Chapter 7.5, Section 87089.1.

15.1.1 Psychiatric Assessment and Psychotropic Medication

CONTRACTOR shall take all necessary steps to ensure that any child in its care with a known history of psychiatric problems (including hospitalizations) receives a psychiatric assessment within thirty (30) days of admission, conducted by a psychiatrist credentialed by the Department of Mental Health, and submit to the County Worker the written results of such tests and any other mental health treatment records when obtained by the CONTRACTOR.

15.1.1.1 Whenever psychotropic medication is prescribed as a result of the psychiatric evaluation, the CONTRACTOR shall monitor psychotropic medications in accordance with Title 22, Division 6, Chapter 7.5, Section 87075.

15.1.1.2 CONTRACTOR shall follow the psychotropic medication guidelines JV-217-INFO (see Exhibit A-1, Reference Links) and ensure that any prescribing physician, submitting an application for psychotropic medication authorization (JV-220A, JV-220B) for a foster child in

residential placement seeking an order pursuant to WIC 369.5, is credentialed by the DMH.

- 15.1.1.3 For each psychotropic medication prescribed to a child, the CONTRACTOR, in conjunction with the COUNTY Worker, shall ensure that: 1) the prescribing physician submits a request and obtains court authorization; and 2) these requests and orders are renewed every six (6) months (see Exhibit A-1, Reference Links for link to JV-220 forms) or as instructed by Juvenile Court in accordance to Title 22, Chapter 7.5, Section 87075(c). Upon receipt from the COUNTY Worker or physician, the CONTRACTOR shall maintain copies of the court authorizations in the child's case record.
- 15.1.1.4 CONTRACTOR shall incorporate into the treatment plan all psychotropic medication(s) the child receives per Foster Youth Rights and per Legal Rights of Teens in Out-of-Home Care (see Exhibit A-1, Reference Links).
- 15.1.1.5 Contractor shall follow COUNTY policy as prescribed in DCFS Policy 0600-514.10 (see Exhibit A-1, Reference Links) and Title 22, Chapter 7.5, Section 87070(b)(12) and 87068.1(c)(I)(E) regarding psychotropic medication: authorization, review, and monitoring for a DCFS supervised child.
- 15.1.1.6 CONTRACTOR shall educate and assist the children/youth regarding Psychotropic Medication use in accordance to DCFS Psychotropic Medication Policy No. 0600-514.10 (see Exhibit A-1, Reference Links), and document any pertinent observations of symptoms etc. for the completion and submission of court forms JV 218 and JV 219 (see Exhibit A-1, Reference Links). The CONTRACTOR shall provide the JV 218 form to the child. Although use of the forms is optional, the CONTRACTOR as part of educating the child, shall encourage completion of the form, which may be used to inform the court how the child feels about the use of psychotropic medication, effectiveness of the medicine, and any side effects of the medicine. If the child opts not to complete the JV-218 form, the child may send a letter to the Judge, confer with the judge at the hearing, or ask the COUNTY Worker or Court Appointed Special Advocate to tell the judge how they feel. Upon request from the COUNTY, the CONTRACTOR shall provide verbal responses to the questions in the JV-219 form.

15.1.1.7 At the time of a child's replacement, the CONTRACTOR shall follow the procedures for the transfer of psychotropic medication, as indicated in this SOW, Section 15.3.12.3.

15.1.1.8 CONTRACTOR shall ensure all documentation for the child's mental health, psychological and/or psychiatric evaluations, including hospitalizations shall be maintained in the child's file as described in Title 22, Division 6, Chapter 7.5, Sections 87070 and 87070.1.

15.1.2 **Additional Treatment Services**

CONTRACTOR shall assist in locating and referring children to School-Based Mental Health Services, Day Rehabilitation, Day Treatment Intensive, Crisis Stabilization, and Therapeutic Behavioral Services, in collaboration with the CFT and whenever identified in the NSP, to be included as part of the treatment plan, and in accordance with the Core Services Matrix (see Exhibit A-1, Reference Links).

15.2 **Transition Services**

CONTRACTOR shall provide transition support services for children and families upon initial entry and placement changes and for families who assume permanency through reunification, adoption, or guardianship and as identified in the NSP in collaboration with the CFT and in accordance with the Core Services Matrix (see Exhibit A-1, Reference Links) and Title 22, Division 6, Chapter 7.5, Section 87078.1(a)(2), 87068.2 (a) and (c), and 87068.22.

15.2.1 **Prior Authorization for Movement of Children**

If the CONTRACTOR should determine a child's needs cannot be met, the CONTRACTOR shall request a CFT meeting. CONTRACTOR may only move a child from one site to another within the CONTRACTOR's program or any other STRTP after receiving prior authorization from the CFT.

15.2.1.1 COUNTY shall not unreasonably withhold or delay the CFT meeting for the authorization to move a child from one site to another.

15.2.1.2 Placement change must not be made between the hours of 9:00 pm and 7:00 am, unless mutual agreement is reached at minimum by the CONTRACTOR, the child/youth's parents/legal guardian, the Child/Youth's attorney, and the child/youth (if 10 years or older) for the placement change to occur between the hours of 9:00 pm and 7:00 am. This requirement does not apply to NMDs or Emergency Replacement as indicated below in Section 15.2.2.

15.2.2 Procedure for Emergency Replacement

In the event of an emergency, the CONTRACTOR may move a child without prior authorization from the COUNTY Worker. CONTRACTOR shall make every effort to keep the child in the same school, if in the best interest of the child as determined by the child's education rights holder. For the purposes of this paragraph, an emergency is defined as any situation that threatens the health and safety of the child or others in the STRTP.

15.2.2.1 For DCFS, the CONTRACTOR shall notify either the COUNTY Worker (children's social worker), the COUNTY Worker's supervisor, the COUNTY Worker's administrator or, after working hours, the Child Protection Hotline (800-540-4000), of the emergency replacement. For Probation, in the event of an emergency, the CONTRACTOR shall contact the Deputy Probation Officer (DPO) of record during normal working hours, and PAS' OD. Notification shall be made as soon as possible but no later than 24 hours after the child is moved.

15.2.2.2 CONTRACTOR shall then discuss the situation with the COUNTY Worker or the COUNTY Worker's supervisor and document the conversation and decision in the child's record.

15.2.2.3 CONTRACTOR shall inform the CFT immediately or not later than 72 hours after emergency replacement.

15.3 Education, Physical, Behavioral, Extracurricular Supports

CONTRACTOR shall provide educational and physical, and behavioral supports, including extracurricular activities and social supports as identified in the NSP in collaboration with the CFT and in accordance with the Core Services Matrix (see Exhibit A-1, Reference Links) and Title 22, Division 6, Chapter 7.5, Sections 87067, 87068.2, 87072, 87078, 87078.1 and 87079.

15.3.1 Stable School Placements

CONTRACTOR shall collaborate with the COUNTY Worker to ensure stable school placements in accordance with WIC Section 16501.1(d)(1), (4), and (g)(8)(B) (see Exhibit A-1, Reference Links). CONTRACTOR shall also collaborate with the COUNTY Worker and the pertinent educational institution in accordance with EDC Section 48850(a) and (b) (see Exhibit A-1, Reference Links).

15.3.2 Right of Child to Remain in School of Origin

CONTRACTOR in collaboration with the CFT shall make every effort to maintain children in their school of origin, if in the best interest of the child as determined by the child's education rights holder in

accordance with EDC Sections 48853.5(e)(1)-(4), 48853.5(d)(1 and 2), and 48853.5(d)(4)(A) (see Exhibit A-1, Reference Links).

15.3.2.1 CONTRACTOR shall transport children to their school of origin or utilize alternate systems for transportation put in place by DCFS and/or school districts.

15.3.3 Immediate Enrollment of Children in School

If the educational rights holder has made a determination that it is in the best interest of the child to transfer from their school of origin, the CONTRACTOR shall immediately enroll the child in his/her local school in accordance with EDC, Section 48853.5(f)(8)(B) (see Exhibit A-1, Reference Links).

15.3.3.1 The CONTRACTOR shall actively begin the enrollment process of the child immediately, in order to engage the school for possible assistance with an acute issue and/or arrange for home-hospital instruction or homeschooling.

15.3.3.2 In the event immediate enrollment is not possible due to an acute issue with the child, the CONTRACTOR shall provide a written certification from a mental health or medical provider to the COUNTY Worker that there is an acute issue requiring a specific amount of time for resolution; or, the CONTRACTOR shall provide proof that the education rights holder agrees that the delay in school enrollment is in the child's best interest.

15.3.3.2.1 The acute issue experienced by the child causing the delay in school enrollment, shall be documented in a SIR and in the child's case file.

15.3.3.3 CONTRACTOR shall work in collaboration with the child's education rights holder, DCFS, and the school district to ensure that the child is enrolled in classes that are appropriate to the child's academic level, that will fulfill graduation requirements, and that are on a comprehensive campus unless there is a current expulsion order, an IEP that requires an alternative school setting, or the education rights holder consents to a different school setting. If the CONTRACTOR believes the child needs an initial or updated IEP, the CONTRACTOR shall work with the child's education rights holder and the school district to initiate the IEP process. CONTRACTOR shall document all educational barriers in the Education Section of the NSP, Exhibit A-11.

15.3.3.4 CONTRACTOR shall ensure children participate in educational enrichment activities while awaiting school enrollment.

15.3.4 CONTRACTOR's Participation in Child's School Program

CONTRACTOR shall work with the child's education rights holder and the school district in supporting the educational needs and rights of the child. All efforts must be documented and reported in the Education Section of the NSP, Exhibit A-11.

15.3.4.1 CONTRACTOR shall: 1) represent the child at parent meetings, open houses, etc.; 2) work with the child's teachers and academic counselor to monitor educational progress, attendance, development, educational level, behavior, assessment of strengths and weaknesses, and the overall academic achievement; 3) encourage and assist the child to participate in school activities; and 4) arrange appropriate transportation to and from school as per Title 22, Chapter 7.5, Section 87074(c)(2).

15.3.4.2 The child has the right to be enrolled in the least restrictive environment at school. The child's education rights holder, school district, DCFS, and the CONTRACTOR shall work together to ensure the child is enrolled in the appropriate academic level of classes to progress the child to a timely high school graduation.

15.3.4.3 CONTRACTOR shall assist youth ages 16 and older and NMDs in collaboration with the assigned COUNTY Worker in identifying the appropriate person to support the child, youth or NMD with college applications, including financial aid applications in accordance with ACL 18-104 Additional Case Plan Documentation for Postsecondary Education Support (see Exhibit A-1, Reference Links).

15.3.5 Daily Homework and Cognitive/Developmental Stimulation

CONTRACTOR shall provide daily homework assistance and make every attempt to engage the youth in completing homework and studies to ensure completion thereof. This assistance should include positive reward systems, access to each class' homework assignment from the school (teacher email and/or parent portal) and reviewing the child's work. CONTRACTOR shall designate a staff member to be in charge of communicating with the school to ensure homework completion and academic progress. In addition, CONTRACTOR shall arrange for a quiet working area with appropriate school supplies and computers.

- 15.3.5.1 CONTRACTOR shall provide sufficient computer access in terms of amount of time and number of computers that are updated and maintained with internet access with parental controls and current technology.
- 15.3.5.2 CONTRACTOR shall schedule at minimum one-hour per day during the summer break for children, youth and NMDs to work online with literacy and math program opportunities. CONTRACTOR shall ensure children, youth and NMDs explore all resources available in accordance to ACIN I-15-19 Available Education-Related Resources, including but not limited to the California Foster Youth Education Hub (see Exhibit A-1, Reference Links). CONTRACTOR shall document reasons for a child, youth or NMD not participating in the scheduled activities in the Education Section of the NSP, Exhibit A-11.
- 15.3.5.3 CONTRACTOR shall engage the child in age and developmentally appropriate activities. These may include computer access time, tutoring, homework assistance, visits to the library or museums, reading, arts, crafts, music, dramas, extracurricular activities and other educational enrichment. CONTRACTOR shall document reasons for a child not participating in developmental appropriate activities in the Education Section of the NSP, Exhibit A-11.

15.3.6 Tutoring

CONTRACTOR shall work with the school district in determining the need for tutoring and if any tutoring is available at the child's school.

- 15.3.6.1 CONTRACTOR shall make the tutoring arrangements and provide the necessary supports for participation before or after-school.
- 15.3.6.2 CONTRACTOR may consider Los Angeles County Office of Education (LACOE), Foster Youth Service Coordinating Program (FYSCP), Tutoring Program, and other community based tutoring resources (see Exhibit A-1, Reference Links).
- 15.3.6.3 CONTRACTOR shall provide tutoring when the youth is struggling in their class work and homework, receiving D's or F's, working below grade level in reading, writing, or math, if determined necessary by the CFT and/or the school's Student Study Team, to improve the child's basic reading, writing, and math skills.

15.3.6.4 CONTRACTOR is not obligated to pay for items covered by public funds.

15.3.7 Educational Information

CONTRACTOR shall document in the NSP and report to the COUNTY Worker and the educational rights holder the following information: 1) child, youth or NMD's attendance; 2) child, youth or NMD's academic and extra-curricular achievements; 3) issues of concern related to school matters; 4) child, youth or NMD's behavior; 5) school officials' concerns about the child, youth or NMD's health; 6) suspension or discipline of the child, youth or NMD; 7) academic credits; 8) child, youth or NMD's progress towards grade specific college planning milestones across 8th-12th grade; 9) strengths of the child, youth or NMD; and 10) if the child, youth or NMD is at risk of suspension or expulsion, or there is a concern related to the current or potential special education needs of the student, the CONTRACTOR shall additionally report them to the attorney for the child, youth or NMD.

15.3.8 College and Career Readiness

CONTRACTOR shall provide the youth and NMDs with existing information regarding available vocational, secondary and postsecondary educational options, including, but not limited to the following, which shall be documented in the youth and NMDs' NSP, in accordance with ACIN I-15-19 Available Education-Related Resources and ACL 18-104 Additional Case Plan Documentation for Postsecondary Education Support (see Exhibit A-1, Reference Links):

- Financial aid information, including information about federal, state and school-specific aid, grants and loans, as well as aid available specifically to current or former foster youth and NMDs, and contact information for the California Student Aid Commission.
- Postsecondary educational pathway information, including career and technical education
- Career exploration tools and opportunities, such as extracurricular activities that promote career exploration and career interest assessments
- Access to 100 hours of paid work experience before the age of 16; 300 hours before age 18.

15.3.8.1 CONTRACTOR shall provide the youth and NMDs with assistance with educational planning milestones, as indicated in the NSP, including, but not limited to, the following:

- Information about "A-G" courses in 8th grade

- Enrollment in “A-G” courses in 9-12th grade
- Completion of the PSAT in 10th grade
- Completion of the SAT or ACT in 11th and 12th grade

15.3.8.2 Upon request of the youth or NMD, CONTRACTOR in conjunction with COUNTY Worker shall assist the youth or NMD with the following steps to attending college:

- a. Application for admission;
- b. Financial Aid applications, such as the FAFSA, CA Dream Act Application, Chafee Grant application, WebGrants account and GPA verification form;
- c. Contact with Foster Youth Success Initiative (FYSI) Liaison, if attending a community college;
- d. Participation in Extended Opportunity Programs and Services (EOPS) or Extended Opportunity Program (EOP), if applicable;
- e. Participation in Disability Support Programs and Services (DSPS), if applicable;
- f. Assessment;
- g. College orientation and course planning;
- h. Enrollment and information on how to access priority registration at community colleges, CSU’s and UC’s;
- i. Payment of fees;
- j. Information about academic support, such as Next Up, Guardian or Renaissance Scholar programs available to foster youth and NMDs attending college;
- k. Priority housing for foster youth and NMD at CSU’s and UC’s; and
- l. Access to miscellaneous higher education resources.

Resources available to assist with educational planning:

- Free *Foster Educational Planning Guide* available in English and Spanish (see Exhibit A-1, Reference Links).
- Free *Financial Aid Guide for CA Foster Youth* (see Exhibit A-1, Reference Links).
- ILP Online, California College Pathways and California Career Zone (see Exhibit A-1, Reference Links)

Resources to assist with career planning:

- Web-Based Career Assessment Tools: O*Net Online, Study.com, California Community Colleges-My Path, My Next Move (see Exhibit A-1, Reference Links)
- Wage Reality Testing: Living Wage Calculator and Salary Surfer (see Exhibit A-1, Reference Links)

15.3.9 Immunizations and Routine Health Care

CONTRACTOR shall ensure the immunization and routine health care of children in accordance with the Child Health Disability Prevention (CHDP) Program (see Exhibit A-1, Reference Links).

15.3.9.1 CONTRACTOR shall, to the extent possible, utilize a Child Health Disability Prevention (CHDP) provider doctor/dentist, who does CHDP equivalent exams and performs the initial medical/dental assessment, care, and follow through, in accordance to CHDP Program Policy No. 0600-506.10 (see Exhibit A-1, Reference Links). CONTRACTOR shall follow Medical/Dental Exams Periodicity Schedule for children (see Exhibit A-1, Reference Links).

15.3.9.2 If the CONTRACTOR needs assistance in locating a CHDP provider doctor/dentist or one who does equivalent exam/services, the CONTRACTOR may: 1) log onto the web site of the Los Angeles County Department of Public Health (see Exhibit A-1, Reference Links), 2) contact the child's COUNTY Worker, or 3) contact a COUNTY Public Health Nurse at (213) 351-5614.

15.3.10 Medical, Dental, and Sexual and Reproductive Health Care Services

CONTRACTOR shall ensure that the necessary medical, dental, psychiatric and sexual and reproductive health needs of the child are met according to the Medi-Cal program; and Title 22, Division 6, Chapter 1, Section 80075.

15.3.10.1 CONTRACTOR shall ensure children receive medical, dental services and sexual and reproductive health care services from the provider of their choice, if payment is authorized under Medi-Cal.

15.3.10.2 CONTRACTOR shall ensure children receive emergency medical and dental treatment as needed, in accordance to the CONTRACTOR's Program Statement and Title 22, Division 6, Chapter 1, Section 80075.

15.3.10.3 CONTRACTOR shall ensure youth and NMDs have access and receive sexual and reproductive health services and age-appropriate, medically accurate information, as requested by the youth or NMD. CONTRACTOR shall also ensure the confidentiality rights of youth and NMDs pertaining to their sexual and reproductive health care and their related sexual and

reproductive health rights are respected and protected. The youth and NMD has the right to personally consent to such services, which shall be provided confidentially and maintained as confidential between the provider and youth or NMD to the extent required by the Health Insurance Portability and Accountability Act and the California Confidentiality of Medical Information Act (see Exhibit A-1, Reference Links), unless disclosed through written consent of the foster youth, NMD or through a court order. When a youth or NMD has the right to consent, there shall be privacy for examination or treatment by a medical provider, unless the youth or NMD specifically requests otherwise, in accordance to ACLs No. 16-82 and No. 16-88 (see Exhibit A-1, Reference Links). This includes the right to receive sexual and reproductive health services in a timely manner, and from the provider of their choice, if payment is authorized under Medi-Cal or otherwise available at no cost to the youth, NMD, CONTRACTOR or the COUNTY. For further guidance CONTRACTOR may refer to additional information found at CDSS website regarding resources for caregivers, mentors, social workers and probation officers (see Exhibit A-1, Reference Links).

15.3.11 Reimbursement for Medical and Dental Costs

CONTRACTOR shall utilize the Medi-Cal program for all eligible medical and dental care costs for children.

15.3.11.1 To the extent reimbursed by Medi-Cal or private insurance or otherwise reimbursed by the COUNTY, the CONTRACTOR shall ensure that each child receives routine physical and dental exams, any needed medical or dental care, and information and instructions on any on-going medical or dental treatment or medications needed within the three-month period prior to Emancipation.

15.3.11.2 If a child does not have valid proof of Medi-Cal coverage, the CONTRACTOR shall immediately contact the Foster Care Hotline (800-697-4444) and notify the COUNTY Worker.

15.3.11.3 For any services not eligible for Medi-Cal reimbursement and not covered by private insurance, the CONTRACTOR shall, to the extent feasible, obtain medical or dental care services for the child through a COUNTY or COUNTY contracted facility (see Exhibit A-1, Reference Links).

15.3.11.4 For any non-emergency services not eligible for Medical reimbursement, not covered by private insurance, and not obtainable at a COUNTY or COUNTY contracted facility, the CONTRACTOR must request prior written approval from the COUNTY Worker or the COUNTY Worker's Supervisor. If the COUNTY Worker does not respond to the CONTRACTOR's written request within three (3) business days, the CONTRACTOR shall attempt to contact the COUNTY Worker's Supervisor. CONTRACTOR shall maintain written documentation of attempts to obtain said written approval.

15.3.12 Administration of Prescription and Non-Prescription Medications

CONTRACTOR shall administer all prescription and non-prescription medication in accordance with Title 22, Division 6, Chapter 1, Section 80075 and Title 22, Division 6, Chapter 7.5, Section 87075. CONTRACTOR shall record the type, date, and time of all prescription and non-prescription medication administered to the child.

15.3.12.1 CONTRACTOR shall provide all necessary instructions to the person responsible for the care of the child when the child is away from the STRTP for visits in order for the child to remain medication compliant as prescribed by a physician. CONTRACTOR shall encourage the person responsible for the care of the child to maintain a record of the date and time of all prescription and non-prescription medication administered to the child. CONTRACTOR shall maintain a record of the parties responsible for providing the child medication when the child is away from the STRTP during visits.

15.3.12.2 In accordance with Title 22, Chapter 1, Section 80087(h), medicine shall be stored as specified in Section 80075(k) and kept as separately from other items specified in Section 80087(g). The items specified in Section 80087(g) shall not be stored in food storage areas or in storage areas used by or for clients.

15.3.12.2.1 CONTRACTORS shall provide and respect private storage space and personal belongings of the youth and NMD as it relates to their sexual and reproductive health care, including storage of birth

control, in accordance with WIC 16001.9 (a)(18) and Title 22, Division 6, Chapter 1, Section 87075(1)(b).

15.3.12.3 At the time of a child's replacement, the CONTRACTOR shall give any medications and court authorizations, including psychotropic medications to the COUNTY Worker. If the medications and court authorizations are not available at the time of replacement (outside the current agency), CONTRACTOR shall arrange for the transfer of medication within 24 hours to the child's new placement. CONTRACTOR shall use Exhibit A-16 to record the type of medication being transferred, the amount of medication, and the receiving party and transferring party's information, which shall minimally include, name, title, address, telephone number, date and signatures.

15.3.12.4 CONTRACTOR shall ensure appropriate disposal of discontinued medication by following recommendations available at the Don't Rush to Flush Website (see Exhibit A-1, Reference Links).

15.3.12.5 CONTRACTOR shall ensure appropriate disposal of confiscated controlled substances by first contacting the local law enforcement agency; If the local law enforcement agency refuses to accept, then CONTRACTOR shall follow the recommendations available at the US Department of Justice, Drug Enforcement Administration, Diversion Control Division, Drug Disposal Information website (see Exhibit A-1, Reference Links).

15.3.13 Maintenance of the Education and Medical Portion of the Health and Education Passport (HEP) or the Equivalent

CONTRACTOR shall file and maintain copies of updated relevant records in the HEP when received from the COUNTY, in accordance to, WIC Section 16010 (see Exhibit A-1, Reference Links).

15.3.14 Extracurricular, Enrichment, Cultural, and Social Activities

CONTRACTOR shall provide opportunity for and encourage, as appropriate, activities in accordance with WIC 362.05 (see Exhibit A-1, Reference Links) and Title 22, Chapter 7.5, Sections 87065(e), 87065.5(c), and 87079, and document in the NSP : 1) group interaction activities, both at the STRTP site and in the community; 2) school based and physical activities such as games, sports, and exercise, both at the STRTP site and in the community;

3) educational activities such as assistance with homework, college tours, college planning activities, etc. 4) career exploration activities such as access to professionals (from in-demand employment sectors) presenting their roles to youth and NMDs, summer camps, opportunities for paid work experience or career shadowing; 5) for youth and NMDs, CONTRACTOR shall provide access to information regarding available vocational and postsecondary educational options; 6) individual and family-oriented leisure time activities; and 7) at least two (2) planned social and recreational activities per month for children, youth and NMDs such as going to a movie, eating out, skating, etc. (to be paid for by the CONTRACTOR). The child, youth or NMD shall not be required to perform activities that interfere with school, training, treatment programs or family visits.

15.3.14.1 CONTRACTOR shall apply the Reasonable and Prudent Parent Standard as described and defined in Title 22, Chapter 7.5, Section 87067, when making decisions about allowing children's participation in age and developmentally appropriate cultural, extracurricular, enrichment, and social activities.

15.3.14.2 For Probation children, the CONTRACTOR shall obtain approval from the PAS OD for any special outings and out of county activities, not including normal leisure activities (e.g., movies, shopping, sporting events, and parks) as defined in the CONTRACTOR's program statement.

15.3.14.3 Each child who is capable shall be given the opportunity to participate in the planning, preparation, conduct, cleanup, and critique of planned activities in accordance to Title 22, Chapter 7.5, Section 87079(c).

15.3.14.4 CONTRACTOR shall provide opportunities to encourage the development of the child's cultural awareness, thereby increasing their self-esteem. CONTRACTOR shall also provide opportunities to develop social consciousness by teaching children the difference between right and wrong, self-control, compassion, morals, integrity, patience, respect, responsibility, etc. CONTRACTOR shall encourage and allow children to participate in activities in which they have an interest such as dance, art, sports, and music.

15.3.14.5 CONTRACTOR shall create a home-like, child-friendly environment and encourage each child to personalize his/her bedroom.

15.3.14.6 Pre-Approval for Child to Be Off Site

For DCFS, children may leave the facility unaccompanied for specific purposes, if determined appropriate by the CONTRACTOR based on the Reasonable and Prudent Parent Standard, or if it has been pre-approved by the COUNTY Worker, as described in the NSP/Quarterly Report template, and if the CONTRACTOR or the designee agrees. If determined necessary based on the Reasonable Prudent Parent Standard, the CONTRACTOR staff shall know the whereabouts of children, who are off grounds, and shall be able to identify who is responsible for supervision at all times.

15.3.14.6.1 For Probation, children shall be supervised at all times within the facility, as well as all times when outside the facility unless: 1) otherwise deemed appropriate by the CONTRACTOR based on the Reasonable and Prudent Parent Standard, consistent with all court orders; 2) specifically stated in the COUNTY approved NSP developed by the CONTRACTOR's Treatment Team; or 3) otherwise approved by the COUNTY. If a Probation child leaves a facility without authorization, the CONTRACTOR shall contact the Police Department and complete a police report. If the event occurs within normal working hours, the CONTRACTOR shall immediately notify PAS OD. If the event occurs after hours, the CONTRACTOR shall submit an I-Track report and notify the DPO of record the next business day.

15.3.14.7 Maintenance of a Sign-in/Sign-out Log

CONTRACTOR shall maintain a detailed sign-in/sign-out log for children who leave the facility for any reason other than regularly scheduled work, school, or group activities of the CONTRACTOR. This log shall include the name of the child, his/her destination, the time he/she left the facility, the anticipated time of return, and the name and telephone number of the person who is responsible to supervise the child while he/she is away from the facility.

15.3.15 Balanced Diet, Snacks, Special Diets, and Physical Activity

CONTRACTOR shall provide a balanced diet in sufficient quantities as defined in Title 22, Division 6, Chapter 7.5, Section 87076. A variety of snacks shall be made reasonably available unless specified in the NSP.

15.3.15.1 CONTRACTOR shall provide for the special dietary needs of the child including, but not limited to, vegetarian diets, religious diets, or diets based on health needs as identified in the NSP. CONTRACTOR shall inform COUNTY Worker when special dietary needs arise due to medical problems/conditions.

15.3.15.2 CONTRACTOR shall use the most current age-appropriate nutritional and physical activity guidelines recommendation by the Centers for Disease Control and Prevention and the American Academy of Pediatrics (see Exhibit A-1, Reference Links).

15.3.16 Food Preparation and Storage

CONTRACTOR shall comply with Title 22, Division, 6, Chapter 1, Section 80076, for food storage, food preparation, and sanitation procedures to prevent transmission of infectious illnesses.

15.3.16.1 CONTRACTOR shall not serve frozen milk or powdered milk for drinking.

15.4 Transition to Adulthood Services

CONTRACTOR shall provide activities designed to support transition-age children in achieving a successful adulthood as identified in the NSP in collaboration with the CFT and in accordance with the Core Services Matrix (see Exhibit A-1, Reference Links) and Title 22, Division 6, Chapter 7.5, Sections 87022(c)(11), 87068.2, 87068.22(b) and (c), and 87078.1.

15.4.1 For a child 16 years of age or older, the CONTRACTOR shall initiate family finding and engagement practices upon placement to assist the child and the COUNTY Worker in identifying biological or non-related family members to support lifelong connections that will help the child prepare for transition from foster care to independent living in accordance with Title 22, Division 6, Chapter 7.5 Sections 87068.2(f) and 87078(e).

15.4.2 Transitional Independent Living Plan (TILP)

CONTRACTOR shall participate with the COUNTY Worker in the development of a TILP for each child 14 years or older and should receive an updated, signed TILP for any child every 6 months after the initial TILP is received. CONTRACTOR shall have a copy of the TILP from the COUNTY Worker on file. CONTRACTOR will collaborate with the COUNTY Worker to implement the child's TILP as appropriate.

15.4.3 COUNTY's Youth Development Services

The CONTRACTOR shall ensure participation by children ages 16 years and older in the COUNTY's Youth Development Services.

15.4.4 Independent Living Program

CONTRACTOR shall encourage and support participation by children ages 16 and older, in the COUNTY's Independent Living Program and Individualized Transitional Skills Program, including emancipating children, such as career/vocational training, work experience, and higher education opportunities.

15.4.5 Independent Living Skills

CONTRACTOR shall develop an individualized plan for each child to learn basic living skills within the context of the family home setting. Such skills may include, as age appropriate: 1) learning to plan, shop, and prepare balanced meals; 2) purchase and care of clothing; 3) basic housekeeping skills; 4) budgeting; 5) use of public transportation as appropriate; 6) personal safety; and 7) health care and personal hygiene.

15.4.6 CONTRACTOR shall facilitate participation in COUNTY approved Emancipation services and/or develop on-site Emancipation services equivalent to the COUNTY's Independent Living Program for children unable to participate in the COUNTY'S Independent Living Program or approved off-grounds Emancipation services.

15.4.7 CONTRACTOR shall teach the child how to set short-term and long-term goals and objectives appropriate to the developmental level of the child. CONTRACTOR shall discuss possible short-term and long-term goals and objectives with the child as they relate to his/her NSP, career plans, strengths and interests, and educational possibilities. These discussions of life goals are to help prepare the child for Emancipation and adulthood, and, where the permanency plan is for family reunification, return to his/her family.

15.4.8 CONTRACTOR shall not discipline a child, youth or NMD by preventing them from attending career and vocational training programs, working on the job, or college planning activities, such as taking the SAT and ACT or attending a college tour.

15.4.9 CONTRACTOR shall facilitate participation with the public workforce system, which includes the America's Jobs Centers of California (AJCC's) and the Youth Source Centers (YSC), whenever possible, to ensure youth ages 14 and older and NMDs have access and services to promote educational and career readiness skills (see Exhibit A-1, Reference Links).

15.5 Permanency Support Services

CONTRACTOR shall provide services to achieve permanency, including supporting efforts to reunify or achieve adoption or guardianship and efforts to maintain or establish relationships with parents, siblings, extended family members, tribes, or others important to the child as appropriate; and as identified in the NSP in collaboration with the CFT and in accordance with

the Core Services Matrix (see Exhibit A-1, Reference Links) and Title 22, Division 6, Chapter 7.5, Sections 87068.2, 87078, 87078.1 and 87079.

15.5.1 **Permanency Planning**

CONTRACTOR shall document all children's permanency plan on the CONTRACTOR's intake form, as provided by the COUNTY Worker. CONTRACTOR shall work with the COUNTY Worker and the CFT to ensure that a permanent plan of reunification, adoption, relative guardianship or other legal guardianship is documented in the NSP.

15.5.1.1 **Facilitating Legal Permanency Plans**

CONTRACTOR, in collaboration with the CFT and the COUNTY Worker, shall facilitate the implementation of any permanent placement, such as family reunification, adoption, or legal guardianship, as determined by the COUNTY in collaboration with the CFT for a child under the CONTRACTOR's care.

15.5.1.1.1 CONTRACTOR shall attend all CFT meetings to discuss permanency planning. The COUNTY Worker will provide as much advance notice of the meetings as possible.

15.5.1.2 Once a guardianship is finalized or an adoptive placement of a child in an approved home occurs, COUNTY shall notify CONTRACTOR.

15.5.1.3 **Family Finding, Identifying, Developing, and Maintaining Important Relationships**

CONTRACTOR shall initiate family finding and engagement practices upon placement to assist the child in identifying, developing and maintaining important relationships, provided that these relationships are in the child's best interests and are consistent with COUNTY Case Plan. CONTRACTOR shall assist the COUNTY Worker in identifying these individuals as potential permanency resources. CONTRACTOR shall appoint a Mentoring Liaison and partner with existing mentoring programs or develop their own mentoring resources to enable children 10 years of age and older to develop a connection with a caring adult, when important relationships are lacking, in accordance with the Core Services Matrix and WIC Section 16001.9(a)(15), (see Exhibit A-1, Reference Links).

15.5.1.3.1 For a youth 16 years of age or older, the CONTRACTOR shall assist the youth and the

COUNTY Worker in identifying a caring adult that will help the child prepare for transition to self-sufficiency.

15.5.2 Family Reunification

If the permanency plan is for family reunification, the CONTRACTOR shall assist the COUNTY in reunification efforts by: (1) placing a child at a STRTP site in his/her own neighborhood to the extent possible; (2) facilitating visits and arranging transportation for the child with the family consistent with the orders of the court and the NSP; (3) offering and/or supporting other reunification services such as family counseling; and (4) monitoring the visits with the family consistent with the CFT recommendations, the case plan, and court orders.

15.5.3 Legal Guardianship and Adoption

If the permanency plan is for legal guardianship or adoption, the CONTRACTOR shall participate with the CFT to assess both the strengths and special needs of a child, to assist in determining an appropriate match. CONTRACTOR shall facilitate the child's involvement in legal guardianship or adoption-related activities and visits with prospective families.

15.5.3.1 CONTRACTOR shall provide counseling, support, and education for a child in making decisions and transitions related to legal guardianship or adoption. The COUNTY shall provide information, and the CONTRACTOR shall be fully informed, about the Adoption Assistance Program and the differences between legal guardianship, adoption, and foster care.

15.5.3.2 If the permanency plan is for relative legal guardianship, other legal guardianship, or adoption, the CONTRACTOR shall assist the COUNTY by: 1) facilitating visits and arranging transportation of the child with the COUNTY identified proposed prospective family consistent with the NSP; 2) offering support services such as family counseling to the child and the COUNTY identified proposed prospective family; and 3) monitoring visits with the COUNTY identified proposed prospective family as needed.

15.5.4 Post-Permanency

CONTRACTOR shall provide post-permanency support services for children following reunification, guardianship, or adoption to sustain permanency for up to twelve (12) months in accordance with Title 22, Division 6, Chapter 7.5, Sections 87022.1(b)(10).

15.6 Indian Child Services

CONTRACTOR, whenever serving Indian children, as defined in subdivisions (a) and (b) of WIC Section 224.1, shall provide the core services as specified in the Core Services Matrix, Subparagraphs (A) to (E), inclusive, to eligible children consistent with active efforts pursuant to WIC Section 361.7 and in accordance to the Federal Indian Child Welfare Act (25 U.S.C. Sec. 1901 et seq.) (see Exhibit A-1, Reference Links), its historical significance, the rights of children covered by the act, and the best interests of Indian children as including culturally appropriate, child-centered practices that respect Native American history, culture, retention of tribal membership, and connection to the tribal community and traditions.

15.6.1 CONTRACTOR shall provide unique services to Indian children as identified in the NSP, in close collaboration with the CFT and the DCFS American Indian Unit in collaboration with COUNTY and in accordance with the federal Indian Child Welfare Act (ICWA) (see Exhibit A-1, Reference Links).

15.6.2 CONTRACTOR shall refer to the National Indian Child Welfare Association for further guidance at (see Exhibit A-1, Reference Links).

15.7 CONTRACTOR should engage and collaborate with community based organizations and local law enforcement agencies to improve outcomes through effective intervention strategies for high-risk youth and NMDs. CONTRACTOR shall ensure direct care staff receive annual training and develop intervention strategies to help reduce law enforcement involvement and prevent the youth and NMDs from entering the juvenile justice system. Law enforcement must not be contacted as a substitute for effective care and supervision or the facility's approved continuum of emergency interventions as indicated in Title 22, Division 6, Chapter 7.5, Section 87095.01(e).

16.0 PREGNANT AND PARENTING YOUTH AND NMDs

CONTRACTORS who choose to accept pregnant and parenting youth and NMDs must have a COUNTY and CCLD approved program providing services to the identified target population of youth and NMD parents and their children in accordance to Title 22, Division 6, Chapter 7.5, Subchapter 1.

17.0 ADDITIONAL SERVICES AND SUPPORTS**17.1 Emergency Intervention Plan**

CONTRACTOR shall have an emergency intervention plan approved by CCLD that incorporates all of the requirements of Title 22, Division 6, Chapter 7.5, Sections 87095 and 87095.22.

17.1.1 All direct care staff, supervision staff, administrators or designees, facility social workers and any other treatment staff shall be trained in the procedures to activate the emergency intervention plan. If,

after all relevant procedures of the emergency intervention plan have been exhausted, and the child needs an emergency psychiatric assessment for acute psychiatric hospitalization, the CONTRACTOR shall contact DMH Access at **1-800-854-7771** and the COUNTY Worker.

17.1.2 CONTRACTOR shall abide by the requirements of HSC 1180-1180.6 (see Exhibit A-1, Reference Links) and Title 22, Chapter 7.5, Sections 87061(j)(6) & (7)(F), 87068.1(d), 87095.00(c), 87095.01, 87095.22, 87095.61, 87095.65, 87095.66, and 87095.68 regarding the use of seclusion and behavioral restraints.

17.2 **Tobacco, Alcohol, Drugs, and Illegal Substances**

CONTRACTOR shall ensure: 1) children are not exposed to smoking, second-hand smoke, including vaping and marijuana; 2) children under twenty-one (21) years of age are not permitted to use any tobacco, vaping, or marijuana products under any circumstances; 3) children are not to drink any alcoholic beverages under any circumstances; and 4) children are not to use narcotics, drugs, or illegal substances.

17.2.1 CONTRACTOR shall ensure staff, volunteers, or subcontracted employees do not smoke tobacco products, marijuana, and/or vape in any room or enclosed space.

17.2.2 CONTRACTOR shall document compliance with this section and take necessary corrective action to ensure compliance. "Second-hand smoke" and "Smoking" shall apply as defined in the Business and Professions Code Sections 22950.5(c) and (d).

17.3 **Child's Allowance and Earnings**

CONTRACTOR shall abide by the requirements outlined in Title 22, Division 6, Chapter 7.5, Section 87077, and adhere to their own Plan of Operation and Program Statement.

17.3.1 **Personal Allowance**

CONTRACTOR shall provide each child a base allowance appropriate to age and reasonably commensurate with peer group standards. The base amount shall not be less than the following amounts: \$7.00 (5-7 years); \$10.00 (8-10 years); \$13.00 (11-13 years); \$15.00 (14-15 years); \$18.00 (16-17); and \$25.00 (18-20 years) per week, starting with the first full week of placement. Allowances may be increased beyond the base amount according to a point/levels/rewards behavior management system as described in the CONTRACTOR's Plan of Operation and Program Statement.

17.3.1.1 CONTRACTOR shall increase personal allowances each and every time there is an Aid to Families with Dependent Children-Foster Care (AFDC-FC) rate and/or California

Necessities Index (CNI) increase. The AFDC-FC rate and/or CNI increase percentage must be equally applied to the personal allowance schedule. Personal allowances increases shall be applied and calculated based on any AFDC-FC and/or CNI increases.

17.3.1.2 CONTRACTOR shall maintain a log indicating the date, the amount of allowance a child receives, and the child's signature (when age appropriate) upon receipt of the allowance.

17.3.1.3 If a child is unable to handle money, the CONTRACTOR shall provide the child with assistance and instruction on how to handle money. Any unspent money must be deposited in the child's account or held in a secured place until the child is able to handle his/her money independently or shall accompany the child when the child's placement is terminated.

17.3.1.4 CONTRACTOR shall not substitute monetary allowances with non-monetary items such as clothing, food, and other items that the CONTRACTOR is required to provide.

17.3.1.5 CONTRACTOR shall not require a child to use his/her allowance or earnings to purchase items the CONTRACTOR is required to provide. These items include: 1) clothing; 2) personal care/hygiene items; 3) activities; 4) diapers, baby clothes, babysitter, etc., for child(ren) placed with a minor parent if the CONTRACTOR receives infant supplement money; 5) school supplies; and 6) meals.

17.3.1.6 The child's allowance, earnings, or other income may be applied toward other personal property above the basic services to be provided by the CONTRACTOR herein. Beyond supervision of spending for appropriateness, age, safety, and health, the CONTRACTOR shall permit the child to spend his/her allowance, earnings, and other income in accordance with the NSP and as the child desires.

17.3.1.7 The weekly monetary allowances shall not be withheld from the child by the CONTRACTOR.

17.3.2 **Child's Earnings**

CONTRACTOR and COUNTY Worker shall mutually agree on the method of securing a child's income and monitoring the child's use of funds, including the establishment of a bank account where

appropriate. CONTRACTOR shall encourage children age fourteen (14) and older to save their earnings for Emancipation.

17.3.2.1 CONTRACTOR may apply monetary consequences in accordance to Title 22, Division 6, Chapter 7.5, Section 87026 and the Foster Youth Bill of Rights (see Exhibit A-1, Reference Links). The COUNTY's Youth Development Services Program incentive money is considered "income" to the child and shall not be withheld from the child by the CONTRACTOR.

17.3.2.1.1 CONTRACTOR shall maintain an account of monetary fines collected.

17.3.2.1.2 For Probation Wards only, Court ordered restitution may be withheld from earnings.

17.4 **Clothing**

CONTRACTOR shall provide a regular monthly clothing allocation starting not more than thirty (30) days following the date of placement in the amount of at least \$70 to be spent on clothing. Donated clothing may supplement but not replace the \$70.

17.4.1 CONTRACTOR shall increase the clothing allowance each and every time there is an AFDC-FC rate and/or CNI increase. The AFDC-FC rate and/or CNI increase percentage must be equally applied to the clothing allowance. The clothing allowance increase shall be applied and calculated based on any AFDC-FC and/or CNI increases.

17.4.2 CONTRACTOR shall ensure that each child has the amount of clothing listed within the timeframes stated in the DCFS Clothing Standard (see DCFS Clothing Allowance Policy No. 0900-506.10 in Exhibit A-1, Reference Links).

17.4.3 After reaching the Clothing Standard, a child may decide to carry over any accrued amount of clothing allowance for use in the following months and can be spent on clothing, shoes, and accessories. If an expensive item(s) is desired that is not within the child's clothing allowance budget, the child may purchase the desired item(s) voluntarily using his/her own funds.

17.4.4 Any clothing allowance not spent must be deposited in the child's account and shall accompany the child when the child's placement is terminated.

17.4.5 Clothing shall fit according to industry size charts and shall never be too small or more than two sizes larger than actual measurements indicate. The clothing shall also be clean, in good condition, and appropriate for the intended use and season, including the school

dress code. CONTRACTOR shall not provide used/second hand underwear or shoes. CONTRACTOR may use donations of new clothing to meet the DCFS Clothing Standard (see DCFS Clothing Allowance Policy No. 0900-506.10 in Exhibit A-1, Reference Links). The child shall be involved in the selection of clothing based on the developmental level and gender expression of the child. The clothing is the property of the child and shall be retained by the child or his/her representative upon termination of placement. CONTRACTOR shall provide for laundry, dry cleaning, and mending of clothing in accordance with the Plan of Operation and Program Statement.

17.4.6 Special Clothing Needs

CONTRACTOR shall plan with a child and arrange for the purchase (as appropriate) of school uniforms, sports clothing, sports equipment, special occasion clothing, work uniforms, and other necessary items for dances, proms, employment interviews, and graduation.

17.4.7 Clothing Storage and Security

CONTRACTOR shall provide appropriate storage for the child's clothing. The COUNTY understands that clothing may disappear and that clothing security is not entirely within the CONTRACTOR's control. All losses shall be documented as part of the clothing inventory, including a brief description of the circumstances involved. CONTRACTOR shall report two or more instances of clothing loss in a six-month period to the COUNTY Worker.

17.4.8 Clothing Inventory

CONTRACTOR shall maintain for each child: 1) a written inventory of clothing; and 2) clothing receipts with a description of the item(s) purchased written on each receipt. CONTRACTOR shall update clothing inventories whenever clothing items are added from any source or removed for any reason from the child's clothing supply.

17.4.9 Monthly Clothing Allowance Logs

CONTRACTOR shall maintain logs which includes the date and amount of monthly clothing allowance the child receives. The log must also include the child's signature (when age appropriate), acknowledging receipt of the monthly clothing allowance.

17.5 Cell Phones and Other Electronic Devices

The CONTRACTOR must provide for safe storage of personal belongings, including cell phones and other electronic devices. The CONTRACTOR is not required to pay for the child's cell phone service, and may impose reasonable time limits and other rules for cell phone use. The CONTRACTOR may not, however, prohibit a child from possessing or using cell phones unless prohibited by the COUNTY Worker in collaboration with the CFT and as documented in the child's NSP. The CONTRACTOR shall

document in the NSP any restrictions that would create a serious risk of harm to the child and/or other persons. CONTRACTOR may and should apply the Prudent Parent standard to cell phone access and usage.

17.6 **Linens, Hygiene, and Personal Care Items**

17.6.1 **Linens**

CONTRACTOR shall: 1) supply each child sufficient clean face cloths, towels, and sheets; 2) provide clean and serviceable blankets and bedspreads; and 3) replace worn, torn or frayed face cloths, towels, sheets, blankets, bedspreads, and window treatment(s) as needed.

17.6.2 **Hygiene and Personal Care Items**

CONTRACTOR shall: 1) supply each child, initially and replace as needed, with new personal hygiene and personal care items. These shall include the child's own toothbrush, toothpaste, comb and other hair-care items, shampoo, soap, deodorant, sanitary napkins, etc.; 2) offer each child choice among brands as long as the cost is reasonable; and 3) provide each child specific brands necessary for health reasons. CONTRACTOR shall monitor the use of all products in aerosol or glass containers.

17.6.2.1 Personal care/hygiene items and appropriate grooming shall be provided with consideration given to specific cultural and ethnic needs.

17.6.3 **Life Book/Photo Album**

CONTRACTOR shall encourage and assist each child in creating and updating a life book/photo album (may be a digital album) of items that relate to childhood memories. If the child has not taken the life book with him/her, the CONTRACTOR shall provide the child's life book either to the COUNTY Worker at the time the child departs from the CONTRACTOR's care or, when the COUNTY Worker is not present, to COUNTY within three (3) business days of the time of the child's departure.

17.7 **Transportation Services**

No child, youth or NMD shall miss going to school, court, therapeutic, or medical appointments because the CONTRACTOR does not provide or arrange transportation.

CONTRACTOR shall provide or arrange transportation for children, youth and NMDs to participate in activities as agreed with the COUNTY in collaboration with the CFT and as identified in the NSP. These activities may include school, school-based sports, college tours, financial aid workshops, PSAT, SAT or ACT exams, band, performing arts, clubs, ILP activities, teen clubs, place of child, youth or NMD 's employment, adoption-

related events, visits with the family and relatives and prospective adoptive families, job training, cultural, extra-curricular and recreational activities, therapy, medical and dental appointments including sexual and reproductive health care and education, religious service of the child, youth or NMD's preference or family's preference, sibling visits, etc. This can include teaching the child, youth or NMD to take public transportation, and arranging transportation with other care providers or outreach advisors, ILP coordinators, COUNTY Workers, etc.

CONTRACTOR shall additionally provide transportation, to include transportation costs when applicable, as indicated in Exhibit B, CONTRACTOR's Plan of Operation and Program Statement and in accordance with Title 22, Division 6, Chapter 7.5, Section 87074.

17.7.1 For probation children, CONTRACTOR shall make the necessary arrangements for transporting children to and from court hearings.

17.7.2 When transporting youth and NMDs for sexual or reproductive health care and/or education in accordance to Section 15.3.10.2 of this SOW, CONTRACTOR shall respect the youth and NMD's right to not disclose specifics regarding the appointments and their right to receive sexual and reproductive health services in a timely manner, from the provider of their choice, if payment is authorized under Medi-Cal.

17.7.3 Requirements for Vehicles Used to Transport Children

CONTRACTOR shall: 1) provide safe, insured vehicle(s) in compliance with the STRTP Master Contract, Part I, Section 6.0 to provide adequate transportation for children; and 2) abide by all applicable Federal and State laws and regulations in transporting children.

CONTRACTOR shall maintain records to verify that staff who transport the children: 1) have and maintain a valid driver's license with the Department of Motor Vehicles; and 2) insure their vehicles, if used to transport the children, are in compliance with the insurance coverage requirements set forth in the STRTP Master Contract, Part I, Section 6.0.

18.0 PLACEMENT PROCESS (INTAKE AND DISCHARGE)

CONTRACTOR shall comply with the intake and discharge requirements of Title 22, Chapter 7.5, Section 87068.05, 87068.1, 87068.11, and 87068.4.

18.1 Whenever possible the CONTRACTOR shall participate in the CFT for the initial and any subsequent placement transition to help determine the most appropriate placement for the child or NMD.

- 18.2 CONTRACTOR shall ensure non-discrimination on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, tribal affiliation, color, religion, sex, sexual orientation, gender identity, mental or physical disability, or HIV status.
- 18.3 **Child and Adolescent Needs and Strengths (CANS) Assessment**
The CONTRACTOR's Treatment Team shall participate in the completion of the initial CANS assessment and shall be responsible for completing the reassessment every six (6) months. The CANS provides a structured assessment relevant to service planning and decision-making for the individual child/family and for the system of care.
- 18.4 All placement decisions will be made through the Interagency Placement Committee (IPC) in collaboration with the CFT and in accordance with ACL 17-122 and DCFS Policy No. 0100-510.55 (see Exhibit A-1, Reference Links). Whenever possible the CONTRACTOR shall actively participate in the IPC process to ensure the child, youth or NMD is properly matched with the STRTP program.
- 18.4.1 CONTRACTOR shall have the capacity to function as the less restrictive placement option than inpatient hospitalization or a Community Treatment Facility. CONTRACTOR shall collaborate with the COUNTY to enhance placement capacity by being responsive, and accepting referred children for placement who meet the criteria of the CONTRACTOR's Program Statement. CONTRACTOR must consider all the information provided by the placing agency, the CFT and the IPC to determine if the STRTP can meet the referred child's needs. CONTRACTOR must additionally consider the compatibility of the needs of any other children already living in the STRTP to ensure there would be no threat to the health and safety of, or interfere with the effectiveness of the core services provided to, the referred child or the other children residing there. CONTRACTOR shall respond to all referrals within two (2) days. If a pre-placement interview is deemed necessary, it must be conducted within the two (2) business days of being notified of the referral by the COUNTY. The CONTRACTOR shall notify the COUNTY Worker, the assigned OHCMD Quality Assurance Section Monitor, and IPC via email within two (2) days of the child's acceptance.
- 18.4.2 If the CONTRACTOR determines that a referred child, youth or NMD does not meet their criteria, the STRTP is unable to meet the needs of the referred child, youth or NMD, the referred child, youth or NMD is not compatible with the current population, or if the CONTRACTOR determines the referred child, youth or NMD will pose a threat to the health or safety of, or interfere with the effectiveness of the core services provided to, that child, youth or NMD or the other children, youth or NMDs residing there, the

CONTRACTOR shall notify the COUNTY Worker, the assigned OHCMD Quality Assurance Section Monitor, the PAS Supervisor and IPC by completing the IPC Referral Acknowledgment Form, which shall include the reason(s) for the denial the appropriate justification(s), as indicated in Title 22, Division 6, Chapter 7.5, Section 87068.05, and send via email within two (2) days. The CONTRACTOR shall document their assessment and determination in their files.

18.4.3 If the CONTRACTOR is unable to meet the diverse needs of children requiring the STRTP level of care, despite active efforts of the CFT and an IPC to address barriers to placement, the CONTRACTOR may be engaged by the COUNTY to determine whether the CONTRACTOR has demonstrated sufficient responsiveness, capacity, and experience to satisfactorily meet the County's needs.

18.4.4 CONTRACTOR shall comply with all COUNTY IPC protocols. Failure to adhere to the IPC protocols may result in further action as described in Exhibit N, Investigation/Monitoring/Audit Remedies and Procedures.

18.5 CONTRACTOR may place DCFS, Probation, and dual jurisdiction children, youth and NMDs (WIC 300 and 601 or 602 status), in the same STRTP facility once the assigned COUNTY Worker(s) from both Departments, in collaboration with the CONTRACTOR, has determined the identified STRTP facility can meet the specific needs of the child, youth or NMD and there is a commonality of needs with the other placed children, youth and NMDs in accordance with WIC 16514(c) and CDSS ACIN No. I-75-16 (see Exhibit A-1, Reference Links).

18.5.1 CONTRACTOR must consider the safety and needs of children and public safety of the community.

18.6 24/7 Intake

CONTRACTOR shall provide intake services from 8 a.m. to 8 p.m. daily, including weekends.

18.6.1 CONTRACTOR shall provide dedicated phone number(s) with on-call staff available daily on holidays.

18.7 Emergency Placements

Emergency Placement services is an optional component of the STRTP. An Emergency Placement may occur when a child or non-minor dependent (NMD) is believed to meet STRTP criteria and requires placement within 48 hours prior to the determination by the IPC in accordance with WIC Section 11462.01(h); Title 22, Division 6, Chapter 7.5, Sections 87068.1(e); 87068.11(h); and DCFS Policy No. 0600-515.11 (see Exhibit A-1,

Reference Links). Once IPC authorization is received, the placement is no longer considered an Emergency Placement.

Emergency placements are not limited to thirty (30) days. In some instances, the IPC or STRTP may determine that continued placement in the STRTP is not appropriate. If this occurs, the child may remain in the placement for the amount of time necessary to identify and transition the child to an alternative, suitable placement.

If CONTRACTOR accepts emergency placements, CONTRACTOR shall comply with Title 22, Division 6, Chapter 7.5, Section 87068.1(e) and the following:

18.7.1 CONTRACTOR shall only accept emergency placement referrals from the Emergency Shelter Care (ESC) program staff.

18.7.2 CONTRACTOR shall report the available number of beds daily to the ESC Program Manager or ESC monitor via email.

18.7.3 CONTRACTOR's on-call staff shall be available after-hours to accept placements 7 days a week, 24 hrs. a day. Intake processing may occur during the provider's regular hours and must be completed within seven (7) calendar days.

18.7.3.1 CONTRACTOR shall not require a Pre-Placement Interview with the child or NMD for an emergency placement.

18.7.3.2 CONTRACTOR shall collaborate with the assigned ESC monitor for emergency placements between 8 am to 10 pm and with the Emergency Response Command Post (ERCP) from 10 pm to 8 am.

18.7.4 When CONTRACTOR accepts emergency placement of a child or NMD, a written determination from a licensed mental health professional must be made within 72 hours of placement indicating the child or NMD requires the STRTP level of services in order to meet the child's/NMD's behavioral or therapeutic needs.

18.7.4.1 CONTRACTOR shall ensure all applicable STRTP program services begin immediately upon placement.

18.7.4.2 CONTRACTOR shall ensure a CFT meeting, IPC, and NSP are completed within thirty (30) days of placement. The 30-day timeline is not reset or altered if there is a replacement from one STRTP to another.

18.8 Health and Education Passport (HEP) or Equivalent

If the CONTRACTOR does not receive the HEP within thirty (30) days of initial placement or within forty-eight (48) hours of a replacement, the CONTRACTOR shall initiate the HEP as described in WIC Sections 16010 (see Exhibit A-1, Reference Links) and immediately report lack of receipt of the HEP to the DCFS Regional Administrator via email. If the Probation HEP is not provided at the time of placement, the CONTRACTOR shall follow the same procedure as for DCFS, but the CONTRACTOR shall notify the PAS OD.

18.8.1 CONTRACTOR shall not be held responsible in an audit for failure to have documents that were in existence at the time of placement, but were not provided to the CONTRACTOR by the COUNTY.

18.8.2 CONTRACTOR shall provide the updated HEP to the COUNTY Worker at the time a child departs from the CONTRACTOR'S program. If the COUNTY Worker is not present at the time of child's departure, the CONTRACTOR shall provide the HEP within forty-eight (48) hours to: 1) the COUNTY Worker or the COUNTY Worker's office for DCFS; or 2) PAS OD for Probation. CONTRACTOR shall update and be responsible for the HEP information only during the course of the placement.

18.9 Initial Crisis Management Assessment

CONTRACTOR shall conduct an assessment on each child before or as soon as possible after placement in accordance with Title 22, Chapter 7.5, Section 87068.1(d), including: 1) a child's advance directive regarding de-escalation or the use of seclusion or behavioral restraints; 2) identification of early warning signs, triggers, and precipitants that cause the child to escalate or become aggressive; 3) identification of techniques, methods or tools that would help the child control his/her behavior; 4) identification of pre-existing medical conditions, physical disabilities, or limitations that would place the child at greater risk during a restraint or seclusion; and 5) identification of any trauma history, including any history of sexual or physical abuse that the child feels is relevant.

18.10 Declaration in Support of Access to Juvenile Records Form

CONTRACTOR shall complete and submit the LAJUV010, Declaration In Support of Access to Juvenile Records Form (see Release of Confidential DCFS Case Record Information Policy No. 0500-501.20 in Exhibit A-1, Reference Links), in order for the COUNTY Worker to release any juvenile records. CONTRACTOR will ensure that only persons permitted by law have access to records.

18.11 Orientation of New Children

Within one business day of intake, the CONTRACTOR shall provide to, and discuss with, each new child in an age-appropriate manner, a comprehensive overview of the CONTRACTOR's program and procedures, including the following:

- a) Personal rights information in the LIC 613 B, Personal Rights form, the Foster Youth Bill of Rights, and WIC Section 16001.9 (see Exhibit A-1, Reference Links).
- b) For children 16 years of age or older, provide access to existing information regarding the available educational options, including, but not limited to, the coursework necessary for vocational and postsecondary educational programs, and information regarding financial aid for postsecondary education.
- c) Overview of: 1) opportunities for achievement; 2) career/vocational and job training; 3) life-skills training; 4) recreation; 5) educational options; 6) religious, spiritual, or ethical development in the child's faith or the faith of his/her parents' choice; 7) identification of child's STRTP social worker; 8) child's clothing and weekly allowances; 9) program rules including disciplinary practices and grievance/complaint procedures; 10) school attendance requirements including school dress code and academic expectations; and 11) discharge procedures.

18.11.1 CONTRACTOR shall also provide to, and discuss with, each new child in an age-appropriate manner, the Foster Youth Bill of Rights again in six (6) months from placement and every six (6) months thereafter to ensure understanding. CONTRACTOR shall have the child or the child's authorized representative sign an acknowledgement after completion of each review. CONTRACTOR shall retain copies of the acknowledgement in the child's records file, which shall be made available to COUNTY upon request.

18.11.2 CONTRACTOR shall provide to, and discuss with each child and their authorized representative the runaway plan.

18.11.2.1 If, during the discussion, it is determined that the child has a history of running away from placement or is identified as a Commercial Sexual Exploitation, then the CONTRACTOR's social worker and the child's authorized representative must develop an individualized plan for that particular child, taking into consideration the recommendation from the CFT in accordance to Title 22, Chapter 7.5, Section 87095.24(e)(1).

18.11.3 CONTRACTOR shall have the child or child's COUNTY Worker sign an acknowledgement of completion of the orientation and the receipt of written copies of personal rights, Foster Youth Bill of Rights, house rules, disciplinary practices, grievance/complaint procedures, and discharge procedures.

18.12 Readmission of a Child after Discharge from a Medical or Psychiatric Hospitalization:

CONTRACTOR shall readmit any child after discharge from a medical or psychiatric hospitalization. Exceptions to this rule are if: 1) the CONTRACTOR in consultation with the CFT mutually agree that the child's readmission jeopardizes the health and safety of that child or others in the facility; or 2) a mutual treatment decision is reached with the CFT not to return the child to the facility. CONTRACTOR shall immediately notify the child's COUNTY Worker of the decision not to readmit.

18.12.1 CONTRACTOR shall participate in CFT meetings for children in a psychiatric hospital when requested by COUNTY.

18.12.2 CONTRACTOR shall collaborate with the COUNTY Worker to discuss if a bed hold is necessary to determine if the child should return to the facility. The bed hold shall not exceed seven (7) days.

18.13 Movement of Children, Youth and NMDs, Removal and Intent to Discharge Procedures and Notification Requirements

CONTRACTOR shall develop a placement preservation strategy in collaboration with the assigned COUNTY Worker and the CFT and document any interventions and remedies in accordance with Title 22, Division 6, Chapter 7.5, Section 87068.4, WIC 16010.7 and ACL 19-26 (see Exhibit A-1, Reference Links), including consideration of a move within the CONTRACTOR's placement facilities, if available, prior to making a placement change. If CONTRACTOR's reasonable efforts to stabilize the child, youth or NMD's placement are not effective, then the CONTRACTOR may proceed with providing notification to the child, youth or NMD (only if the child is 10 years or older) and the child's attorney (if the child is under age 10), the COUNTY Worker and CFT at least fourteen (14) calendar days prior to CONTRACTOR's intent to discharge unless it is agreed upon at the CFT meeting that less notice is necessary due to an immediate threat to the health and safety of the child, youth or NMD or others. This requirement does not apply to Emergency Replacements as indicated in Section 18.13.5 of this SOW, or for planned placement changes as informed by the child, youth or NMD's CFT and as described in the child, youth or NMD's NSP. This requirement may also be waived by unanimous agreement (full agreement by everyone involved) by the child, youth or NMD's CFT and the child, youth or NMD (if 10 years or older); or the child, youth or NMD's CFT and the child's attorney (if the child is under age 10).

18.13.1 The COUNTY and the CONTRACTOR mutually agree that the lack of stability in placement is harmful to children and that the goal of this section is to maximize communication to lead to increased stability for children. All reasonable efforts shall be made to stabilize a child's placement and to determine through the CFT

process whether any additional services may be provided to the child without resorting to replacement.

18.13.2 Prior to discharging a child, youth or NMD, CONTRACTOR must notify the COUNTY of issues potentially affecting the stability of a child, youth or NMD's continued placement in CONTRACTOR's Program, COUNTY and CONTRACTOR shall convene a CFT meeting to determine whether the child, youth or NMD's placement may be stabilized and additional services may be provided without removing the child, youth or NMD from the CONTRACTOR's Program. CONTRACTOR shall provide the DCFS Regional Administrator and PCW Director, the child, youth or NMD's COUNTY Worker, and the COUNTY Worker's Supervisor a Notice of Intent to Discharge, documenting efforts to stabilize the placement, including police calls and mental health services, in advance of any anticipated discharge. The Notice of Intent to Discharge may be provided by email.

18.13.3 Placement changes must not be made between the hours of 9:00 pm and 7:00 am, unless mutual agreement is reached at minimum by the CONTRACTOR, the child, youth or NMD's representative, the prospective caregiver, the child, youth or NMD's social worker, and the child, youth or NMD (only if the child, youth or NMD is 10 years or older) or the child's attorney (if the child is under age 10) in accordance with Title 22, Division 6, Chapter 7.5, Section 87068.4 and WIC 16010.7 (see Exhibit A-1, Reference Links). This requirement does not apply to Emergency Replacements as indicated below in Section 18.13.5 or for planned placement changes as informed by the child, youth or NMD's CFT and as described in the child, youth or NMD's NSP.

18.13.4 CONTRACTOR shall collaborate with the CFT to develop a transfer plan for the child, youth or NMD. CONTRACTOR shall not transfer a child, youth or NMD unless prior written approval of the transfer has been obtained from the CFT, in accordance with Title 22, Division 6, Chapter 7.5, Section 87068.4.

18.14 Collection and Storage of Personal Belongings at Termination of Placement

When a child is discharged, the CONTRACTOR shall ensure that the child's clothing and personal belongings accompany the child to the next placement. If the child runs away, the CONTRACTOR shall gather the child's belongings and notify the COUNTY Worker that the belongings are at the STRTP site. If the COUNTY Worker does not pick-up the belongings, the CONTRACTOR shall store them for up to ten (10) calendar days from the date of notification. After ten (10) days, the CONTRACTOR shall contact and inform the COUNTY Worker that the belongings will be mailed

to the COUNTY Worker or his/her supervisor at COUNTY's expense unless an alternate plan is agreed upon.

18.14.1 For the Probation child, CONTRACTOR shall hold clothing and personal belongings for up to thirty (30) days and make diligent efforts to contact parents or guardians to pick them up.

18.14.2 The child's personal belongings during transition, should under no condition be placed in anything less than a suitcase or duffel bag.

18.15 **Discharge Summary**

CONTRACTOR shall prepare and submit a Discharge Summary (Exhibit A-10) to the Child's COUNTY Worker within 30 Days from the date the child's placement was terminated. The Discharge Summary shall include, but not be limited to, a closing summary of CONTRACTOR's records relating to the Child, including the type of placement to which the child was discharged (such as reunification with parent(s), relative, adoptive home, legal guardianship, licensed foster home, FFA certified home, small family home, another Short-Term Residential Therapeutic Programs, specified or specialized placement or hospital). A copy of Exhibit A-10 shall be retained in the child's records file and made available to COUNTY upon request.

18.16 **Children's Crisis Residential Program**

The Children's Crisis Residential Program (CCRP) is an optional component of the STRTP who holds a Children's Crisis Residential Mental Health Program approval pursuant to WIC Section 11462.011 (see Exhibit A-1), to serve children, youth or NMDs experiencing mental health crises as an alternative to psychiatric hospitalization. The CCRP must operate in accordance with Division 6, Chapter 7.5, Subchapter 3 and as governed by the provisions in the Department of Health Care Services Children's Crisis Residential Mental Health Program Interim Regulations (see Exhibit A-1, Reference Links).

19.0 **NEEDS AND SERVICES PLAN (NSP)**

CONTRACTOR shall comply with Title 22, Division 6, Chapter 7.5, Sections 87061(j)(4), 87065.2(c), 87068.1(c)(2), 87068.2, 87068.22, and 87068.3 when developing the child's NSP.

19.1 The DCFS 709 form, Foster Child Needs and Case Plan Summary (see DCFS Placement Responsibilities Policy No. 0100-510.61, Exhibit A-1, Reference Links), is to be used in the development of the NSP, but it is not to serve as the plan itself. Probation uses the PROB 1385, Probation Foster Care Case Plan, for the development of the NSP.

19.1.1 CONTRACTOR shall use the Provider NSP template (Exhibit A-11), and in accordance with Title 22, Division 6, Chapter 7.5, Sections 87061(j)(4), 87065.2(c), 87068.1(c)(2), 87068.2, 87068.22, and 87068.3.

- 19.2 The CONTRACTOR's social worker shall develop a comprehensive, individualized NSP, based upon the information provided by the COUNTY Worker, CFT, and the CONTRACTOR's initial assessment, by the 30th day of placement.
- 19.3 All required signatures, which shall at minimum include, the CONTRACTOR's Mental Health Administrator, the child (when age and developmentally appropriate) or NMD, and the child or NMD's assigned County Worker shall be obtained for all initial NSPs. In the event the CONTRACTOR is unable to meet this requirement, the CONTRACTOR shall provide documentation of all efforts and reasons for their inability to meet this requirement and attach to the NSP and maintain in the child's case file. Efforts should include telephone calls and email correspondence and documentation should include date, time, and method of contact.
- 19.4 The completed initial NSP shall be submitted by the CONTRACTOR's staff to the placement worker by the 35th day from placement.
- 19.5 The NSP shall be updated/modified every thirty (30) days thereafter and within five (5) days submitted to the COUNTY Worker.
- 19.6 Updates/modifications to the NSP shall address: 1) the child's need for continuing services; 2) the need for (any) modification in services; and 3) the recommendation(s) of the CFT regarding the feasibility of the child's return to their home, placement in a resource family home, placement in another facility, or move to independent living.
- 19.7 All required signatures, which shall at minimum include, the CONTRACTOR's Mental Health Administrator, the child (when age and developmentally appropriate) or NMD and the child or NMD's assigned County Worker shall be obtained for all updated/modified NSPs. In the event the CONTRACTOR is unable to meet this requirement, the CONTRACTOR shall provide documentation of all efforts and reasons for their inability to meet this requirement and attach to the NSP and maintain in the child's case file. Efforts should include telephone calls and email correspondence and documentation should include date, time, and method of contact.
- 19.8 For Probation children, the NSP shall address the criminogenic needs as identified in the DPO's assessment, and outline specific goals that target the identified criminogenic needs. All goals must be measurable.
- 19.9 A child (if age appropriate) and the COUNTY Worker shall receive copies of the approved NSP and any modifications thereto.
- 19.10 **STRTP Treatment Team**
CONTRACTOR shall provide a professional on-site treatment team. The treatment team shall be led by the CONTRACTOR's social worker or mental

health professional in charge of developing NSPs. It shall also include the facility managers, and the childcare and supervision staff. In consultation with the CFT, the treatment team will define how every adult, in contact with a child, will intervene to help the child overcome the problems and achieve the goals specified in the NSP. The purpose of the treatment team is to coordinate this plan so that each adult, in contact with the child fully understands the plan, his/her part in it, and the nature of his/her intervention with the child.

20.0 VISITATION PLAN

CONTRACTOR shall collaborate with the COUNTY Worker and CFT to develop a comprehensive family visitation plan in accordance with:

- a) the DCFS Family Visitation Policy No. 0400-504.00 (see Exhibit A-1, Reference Links);
 - b) the Juvenile Court Visitation Committee's Family Visitation Guidelines (see Exhibit A-1, Reference Links); and
 - c) the Title 22, Division 6, Chapter 7.5, Sections 87022.1(b)(13)(C), 87068.2(b)(6), 87072(d)(5), and 87087.3(a)(1).
- 20.1 CONTRACTOR shall at minimum follow the visitation frequency described in the following chart pertaining to face-to-face visits unless the Court orders or CFT recommends otherwise:
- (a) For 0-6 months, families should visit at least three times a week for 30-60 minutes.
 - (b) For 6-12 months, families should visit at least three times a week for one hour.
 - (c) For 1-4 years, families should visit at least twice per week for 1 ½ hours.
 - (d) For 5-15 years, families should visit at least once per week for two or more hours.
 - (e) For 16-18 years, there is no recommendation except the child's desires should be strongly considered in creating a Family Visitation Plan.
- 20.2 CONTRACTOR shall maintain a daily log of all visitors that includes the following information: 1) the COUNTY Worker (except On-Site DPOs); 2) the person they are visiting; and 3) the arrival and departure times.

PART D: PERFORMANCE OUTCOME GOALS AND REQUIREMENTS SUMMARY
(Requires updates when information is available)

21.0 SAFETY

CONTRACTOR shall ensure a safe environment, which provides well-being and leads to permanency for each child. Specifically, the CONTRACTOR shall provide all services related to safety described in this Contract and SOW, including but not limited to Exhibit A-7, Safety Performance Outcome Summary. In addition, the CONTRACTOR shall meet or exceed the performance targets described in Exhibit A-7, Safety Performance Outcome Summary.

22.0 PERMANENCY

CONTRACTOR shall provide the necessary services to ensure permanency is achieved by facilitating safe and nurturing relationships, which will lead to reunification, adoption, or legal guardianship as described in this Contract and SOW, including but not limited to Exhibit A-8, Permanency Performance Outcome Summary. In addition, the CONTRACTOR shall meet or exceed the performance targets described in Exhibit A-8, Permanency Performance Outcomes Summary.

23.0 ACCESS TO EFFECTIVE AND CARING SERVICES FOR WELL-BEING

CONTRACTOR shall ensure children receive services as identified through the CFT in the spirit of the CPM to improve their level of functioning in the areas of education/career planning; transition and Emancipation preparation; physical, behavioral, social, and emotional well-being; and self-sufficiency as described in this Contract and SOW, including but not limited to Exhibit A-9, Access to Effective and Caring Services for Well-Being Performance Outcome Summary.