

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

STATEMENT OF WORK



Yellow Highlights = Changes from original FFA SOW

Green Highlights = New changes since first posting on 6/15/17

Pink Highlights = New changes since second posting on 8/1/2017

Olive Green = New changes since third posting on _____

Blue Highlights = Requires updates when information is available

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AND
PROBATION DEPARTMENT**

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

TABLE OF CONTENTS

<u>PART</u>		<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 POPULATION	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 INTENTIONALLY LEFT BLANK.....	10
	11.0 INTENTIONALLY LEFT BLANK.....	10
	10.0 PROGRAM REPORTING REQUIREMENTS	10
	11.0 PROGRAM COMPLIANCE AND QUALITY ASSURANCE.....	13
	12.0 CHILDREN'S CASE RECORDS.....	13
	12.0 PLAN OF OPERATION AND PROGRAM STATEMENT CHANGES	14
	13.0 BUILDINGS AND GROUNDS.....	14
C.	PROGRAM SERVICES	15

14.0	CHILD AND FAMILY TEAM	15
15.0	CORE SERVICES AND SUPPORTS	16
16.0	INTENTIONALLY LEFT BLANK	
17.0	ADDITIONAL SERVICES AND SUPPORTS.....	25
18.0	PLACEMENT PROCESS (INTAKE AND DISCHARGE).....	31
21.0	ASSESSMENT AND EVALUATION	35
19.0	NEEDS AND SERVICES PLAN.....	35
20.0	VISITATION PLAN.....	37
D.	PERFORMANCE OUTCOME GOALS AND REQUIREMENTS SUMMARY....	38
21.0	SAFETY	38
22.0	PERMANENCY.....	38
23.0	ACCESS TO EFFECTIVE AND CARING SERVICES FOR WELL-BEING.....	38

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

SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAM 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 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 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 ~~reducing the use of congregate care placement settings,~~ 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. 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 84091.4 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*.

~~2.3 The rate-setting regulations that apply to STRTPs are from the Manual of Policies and Procedures, Division 11-400, 11-402, 11-404 through 11-406, 11-415, 11-425, and 11-430. The Foster Care Funding and Rates Bureau will establish rates only for STRTPs that are organized and operated as non-profit corporations.~~

~~The rate-setting regulations are available online at <http://www.cdss.ca.gov/inferesources/Letters-Regulations/Legislation-and-Regulations/Foster-Care-Regulations/FC-Rates-Regulations>.~~

- 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), Vehicle Code (VEH), 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.

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 Shared Core Practice Model (SCPM) 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
- ~~Reducing the use of Congregate Care Placement Settings; 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 their own home, or an appropriate homelike setting 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 SCPM as described in Part A, Section 6.0.

5.0 TARGET POPULATION

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 population 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 groups 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).

~~5.2.1 CONTRACTOR may accept Non-Minor Dependents (NMDs), ages 18-19 if the youth has not completed high school. The youth can remain in the STRTP until completion of high school or age 19, whichever comes first.~~

~~5.2.2 CONTRACTOR may accept NMDs, age 18 up to 21, if the NMD has a documented medical condition that prevents participation in educational or employment activities and confirmation that continuation in the facility functions as a short-term transition to the appropriate system of care, which shall be documented in Needs and Services Plan.~~

6.0 SHARED CORE PRACTICE MODEL

The SCPM prioritizes child safety by enabling stronger teamwork with children and families, grounded in strong community support. The SCPM 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 **SCPM** 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** of the STRTP Master Contract.

7.1 **CONTRACTOR** shall request approval from the **DCFS—Contracts Administration Division Manager**, **DCFS Out-of-Home Care Management (OHCM) Division Chief** or designee and the **Probation Placement Permanency & Quality Assurance (PPQA) 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 (OHCM) Division Chief or designee and/or the Probation Placement Permanency & Quality Assurance (PPQA) Director. **Contracts Administration Division Manager.**

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.

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

For the safety and welfare of children, the CONTRACTOR shall adhere to the requirements of Part I, Unique Terms and Conditions, Section 8.0 Background and Security Investigations, of the Contract 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 1522-1522.04 (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 the California Department of Social Services (CDSS) Criminal Background Check Bureau (CBCB). Notifications shall be sent to CONTRACTOR's Out-of-Home Care Management assigned monitor. CONTRACTOR shall inform OHCMD of any criminal record exemption granted 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 COUNTY Program Managers DCFS Out-of-Home Care Management Division (OHCMD) Division Chief or designee for DCFS children, or the Probation Placement Permanency & Quality Assurance (PPQA) Director or designee for Probation children, in writing of any known allegations in the Child Abuse Central index (CACI), arrest and/or subsequent conviction, other than for minor traffic offenses, of all non-exempt persons in accordance with specified in HSC, Sections 1522.1 and 1522(b) (see Exhibit A-1, Reference Links).

8.3.1 CONTRACTOR shall prepare and submit the Notification of Subsequent Arrest, Conviction, Probation or Parole Notification (Exhibit A-4) to the assigned OHCMD monitor along with any related documentation within one working day of the time such information becomes known to the CONTRACTOR.

~~Such notice shall be given within one working day of the time such information becomes known to the CONTRACTOR. The Notification of Subsequent Arrest, Conviction, Probation or Parole Notification (Exhibit A-1X) OHCMD along with any related documentation within two working days of the time such information becomes known to the CONTRACTOR.~~

~~8.4 CONTRACTOR shall place any CCLD approved exemptions in the affected employee's personnel file and make them available to COUNTY upon request.~~

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.

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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 CONTRACTOR 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:

10.3.2 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 Via the I-Track System**

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

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.

~~12.1.1 All CONTRACTOR employees are mandated reporters of child abuse and neglect per PEN Section 11165.7(a)(14), which can be found at: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?awCode=PEN§ionNum=11165.7. Child abuse and neglect in out-of-home care are defined in Section 11165.5: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?awCode=PEN§ionNum=11165.5.~~

10.5 **Runaway and Child 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 87095.24.

10.5.1 **Call Law Enforcement**

CONTRACTOR shall keep the contact information of the nearest law enforcement agency on hand and contact them immediately to file a Missing Persons' Report. Photographs may be released to law enforcement only in an effort to expedite locating of affected children.

Identifying information for law enforcement shall only include a photograph of the child, description of clothing when last seen, date of birth, last location of the child, and any distinguishing marks or tattoos. CONTRACTOR shall inform law enforcement that photographs and other personal identifying information which includes the child'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 immediately.

10.5.2 Call the County

CONTRACTOR shall immediately 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 to the County Worker with any information about run away child's neighbors, friends, school officials, and family members.

10.5.2.1 COUNTY staff ~~or the Hotline/Probation Intake Detention Control (IDC)~~ 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 (CSEC) 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 or 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:

- CSW
- CSWs' supervisor
- Child Protection Hotline: (800) 540-4000
- Runaway Outreach Unit: (213) 765-7310
- Probation Placement Administrative Services AWOL OD (323) 730-4466
- Probation Group Home Monitoring Officer of the Day (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 Special Incident Report. 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 additionally follow 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). In collaboration CONTRACTOR shall assist with the County Worker in completing the following forms:

~~the CONTRACTOR shall ensure the Substitute Care Provider Incident Report, the Special Incident Report-Runaway Addendum, the Safety Support Plan, and Missing/Runaway Youth De-briefing Form as instructed in are completed accordingly and as stated on 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 Foster Care Search System (FCSS). 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 e-mail at DevO@dcs.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.

10.8 Outcome Data Reporting

CONTRACTOR hereby agrees to participate in the collection and reporting of outcome data related to child safety, well-being, and permanency. CONTRACTOR shall provide a monthly report to DCFS OHCMD Quality Assurance Section, located at 9320 Telstar Avenue, Room 216, El Monte, CA 91731. The monthly report shall reflect: 1) the number of child abuse/neglect referrals and/or allegations made during the previous month; and 2) as to each child placed with CONTRACTOR, the number of changes in placement which have occurred with regard to that child since initial placement with CONTRACTOR. This report shall be provided by the 15th day of the following month in a format approved by OHCMD.

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.

~~13.1 Incidents~~

~~Each incident of substantiated abuse or neglect that occurs under the CONTRACTOR's supervision must be reported via the I-Track web-based system at <https://itrack.dcss.lacounty.gov> as stated in this SOW, Section 12.0. Each incident will be evaluated by the COUNTY on a case-by-case basis to determine appropriate corrective action.~~

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 ~~or exceed~~ 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 17.0, 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 Evidence-Based Policy and Practices programs whenever possible in an effort to increase achievement of the COUNTY's Performance Outcome Goals as described in Exhibits A-7, A-8 and A-9.

~~14.0 CHILDREN'S CASE RECORDS~~

~~CONTRACTOR shall maintain the child's case records in accordance to Part I, Section 19 of the Unique Terms and Conditions and Title 22, Division 6, Chapter 7.5, Sections 87026(c)(2)(A), 87070, and 87070.1.~~

~~14.1 CONTRACTOR shall ensure that all records for child are current and accessible at all times including during and after a disaster. This includes, but is not limited to, records related to health, medical, dental, mental health, vision, education, job training, etc.~~

~~14.2 Health and Education Passport (HEP) or Equivalent~~

~~CONTRACTOR shall file and maintain copies of updated relevant records in the HEP when received from the COUNTY in accordance with Title 22, Division 6, Section 87068.11(f)(2)(A) and WIC 16010: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC§ionNum=16010.~~

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 (ACL) 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 either directly or secured through formal agreements with other agencies, which are trauma-informed and culturally relevant in accordance with WIC 11462(b)(1); Title 22, Division 6, Chapter 7.5, Section 87078.1; Core Services Matrix; and with the program statement (see Exhibit A-1, Reference Links).

All children 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 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 arrange for any child in its care with a known history of psychiatric problems (including hospitalizations) to receive a psychiatric assessment within thirty (30) days of admission, provided that such evaluation is authorized by the Department of Mental Health (DMH), conducted by a licensed mental health professional; 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.

~~18.1.2 CONTRACTOR shall provide as needed services of a psychologist for psychological testing and treatment and a physician or psychiatrist to prescribe and monitor psychotropic medications in accordance with Title 22, Division 6, Chapter 7.5, Section 87075. CONTRACTOR shall also arrange any additional mental health services as needed or as identified in the child's Needs and Services Plan (NSP) in accordance with Title 22, Division 6, Chapter 7.5, Sections 87072(d)(17) and 87089.1.~~

~~18.1.1.2 CONTRACTOR shall ensure that psychiatric needs of a child are met in accordance with the Child Health Disability Prevention (CHDP) program, Medi-Cal program, and CCLD regulations to the extent that funding and services are available.~~

~~18.1.1.3 CONTRACTOR shall: 1) take all necessary steps to ensure that any child in its care with a known history of psychiatric problems (including hospitalizations) receives a clinical evaluation, provided that such an evaluation is authorized by DMH, and conducted by a licensed mental health professional; and 2) submit to the County Worker the written results of such tests when obtained by the CONTRACTOR.~~

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.

~~18.1.1.5 CONTRACTOR shall ensure children on psychotropic medication have a psychiatric/psychological assessment within thirty (30) days of admission, indicating the child's diagnosis, need for treatment, prognosis, and possible side effects of the medication. CONTRACTOR shall arrange for the child to receive monthly evaluations by the prescribing physician unless otherwise documented by the physician.~~

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 social 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. ~~The JV-218 form is optional, however, the CONTRACTOR shall ensure the JV-219 form is submitted as instructed in order to ensure timely receipt for the child's hearing as instructed in the Psychotropic Medication: Authorization, Review, and Monitoring for DCFS Supervised Children DCFS Policy 0600-514.10 (see Exhibit A-1, Reference Links).~~

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 provide 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.

15.2.2 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' Officer of the Day (OD). Notification shall be made as soon as possible but no later than 24 hours after the child is moved.

15.2.2.2 Notification shall be made as soon as possible but no later than 24 hours after the child is moved. 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 ~~comply~~ 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 ~~also comply~~ EDC Section 48850(a) and (b) (see Exhibit A-1, Reference Links). ~~which states, in part, that, "In fulfilling their responsibilities to pupils in foster care, educators, COUNTY placing agencies, care providers, advocates, and the juvenile courts shall work together to maintain stable school placements and to ensure that each pupil is placed in the least restrictive educational programs, and has access to the academic resources, services, and extracurricular and enrichment activities that are available to all pupils. In all instances, educational and school placement decisions must be based on the best interests of the child.~~

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, until court jurisdiction terminates. If court jurisdiction ends during an academic year and the child is in K—8th grade, the right to remain in their school of origin lasts through the end of that academic year. If court jurisdiction ends while the child is in high school, the right to remain in their school of origin lasts through graduation in accordance ~~compliance~~ with EDC Sections 48853.5(e)(1)-(4), 48853.5(d)(1 and 2), and 48853.5(d)(4)(A), which states, in part, "At the initial detention or placement, or any subsequent change in placement of a foster child, the local educational agency serving the foster child shall allow the foster child to continue his or her education in the school of origin and the conditions thereof (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 Registration 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).

CONTRACTOR shall register children immediately and actively work with the school to enroll children in school in accordance with EDC Section 48853.5(f)(8)(B) (see Exhibit A-1, Reference Links). If a foster child changes schools, s/he has a right to be enrolled in the new school immediately, even if there are outstanding fees, fines,

~~textbooks, or other items or money due to a school or if s/he does not have the clothing or records normally required for enrollment, including but not limited to academic records, medical records, proof of immunization history, proof of residency, or school uniforms.~~

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.

15.3.5 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, and ensure each child's homework is completed daily by having 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 youth to work online with literacy and/or math program opportunities.

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 developmentally 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. ~~for tutoring to improve the child's basic skills to the extent that these services are available and are specified in the NSP.~~

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's attendance; 2) child's academic and extra-curricular achievements; 3) issues of concern related to school matters; 4) child's behavior; 5) school officials' concerns about the child's health; 6) suspension or discipline of the child; 7) academic credits; 8) strengths of the child; and 9) if the child 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.

15.3.8 School Photos, Uniforms, Proms, Graduations, etc.

CONTRACTOR shall ensure each child receives school photos and uniforms when appropriate. CONTRACTOR shall ensure each child is given the opportunity to attend his/her prom and graduation and provided with resources and assistance.

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). And shall accurately reflect this information in the child's medical records folder or Health Portion of the HEP when provided by COUNTY.~~

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 and Dental Services

~~CONTRACTOR shall ensure that the necessary medical, dental, and psychiatric needs of the child are met according to the Medi-Cal program; and Title 22, Division 6, Chapter 1, Section 80075. The CONTRACTOR shall, to the extent possible, utilize a child Health Disability Prevention (CHDP) provider Doctor/Dentist, or a provider Doctor/Dentist who does CHDP equivalent exams and performs the initial medical/dental assessment, care, and follow through.~~

15.3.10.1 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.

15.3.11 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). Information for County or County contracted providers can be found at: <http://dhs.lacounty.gov/wps/portal/dhs/locations/>.

15.3.11.4 For any non-emergency services not eligible for Medi-Cal 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 complaint 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.

15.3.12.3 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 develop an acknowledgement of receipt form 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.

15.3.13 **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 **Planned Leisure, 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 including: 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) individual and family-oriented leisure time activities; and 4) at least two (2) planned social/recreational activities per month for children such as going to a movie, eating out, skating, etc. (to be paid for by the CONTRACTOR).

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 **Residential Based Services Director** 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 (YDS)

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

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 (ITSP), 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 by preventing a child from attending career/vocational training programs or working on the job.

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), ~~16501.1(g)(16)(B)~~, (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; (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 legal guardian/proposed legal guardian consistent with the NSP; 2) offering support services such as family counseling to the child and the COUNTY identified proposed prospective family legal guardian/proposed legal guardian; and 3) monitoring visits with the COUNTY identified proposed prospective family legal guardian/proposed legal guardian as needed.

15.5.4 Post Permanency

CONTRACTOR shall provide post permanency support services for children following reunification, guardianship, or adoption to sustain permanency.

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).

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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, 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.

16.2.1 CONTRACTOR shall ensure staff, volunteers or subcontracted employees do not smoke tobacco products, marijuana, and/or vape in any room or enclosed space, including when the children are in the facility.

16.2.2 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: \$7.50 (5-7 years); \$12.50 (8-10 years); \$15.00 (11-13 years); \$20.00 (14-15 years); and \$25 (16-20) 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 occurring after July 1, 2017.

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 85 to be spent on clothing. Donated clothing may supplement but not replace the \$70 85.

17.4.1 CONTRACTOR shall increase the clothing allowance 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 clothing allowance. The clothing allowance increase shall be applied and calculated based on any AFDC-FC and/or CNI increases occurring after July 1, 2017.

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.

16.6.2.1 Personal care/hygiene items 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 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 to participate in ~~shall arrange transportation to~~ 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, band, performing arts, clubs, ILP activities, teen clubs, place of child's employment, adoption-related events, visits with the family/relatives and prospective adoptive families, job training, cultural, extra-curricular and recreational activities, therapy, medical/dental appointments, religious service of the child or family's preference, sibling visits, etc. This can include teaching the child to take public transportation, and arranging transportation with other care providers or outreach advisors, ILP coordinators, County Workers, etc

CONTRACTOR shall additionally provide transportation and transportation expenses as outlined in Exhibit B of the Contract, the 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 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 87068.1, 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. ~~for children who have had an initial CANS assessment, either prior to or during placement.~~ 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 IPC in collaboration with the CFT. Whenever possible the CONTRACTOR shall actively participate in the IPC process to ensure the child 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. ~~and shares common needs with the current population.~~

18.4.2 If the CONTRACTOR determines that a referred child does not meet their criteria, the STRTP is unable to meet the needs of the referred child, the referred child is not compatible with the current population, or if the STRTP determines the referred child will pose a threat to the health or safety of, or interfere with the effectiveness of the core services provided to, that child or the other children residing there, the CONTRACTOR shall immediately notify the County Worker, the assigned OHCMD Quality Assurance Section Monitor, and IPC and

provide an explanation in writing via e-mail within three 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.

~~Every referred child who meets the criteria of the CONTRACTOR's program statement and shares common needs with the current population, will be accepted.~~

18.5 CONTRACTOR shall not place both DCFS and Probation children in the same STRTP facility unless the identified STRTP facility can meet the child's needs and the CONTRACTOR has written approval from both the County Worker and DPO for a dual jurisdiction child (WIC 300/600 status) pursuant to WIC 16514(c) and in accordance with CDSS All County Information Notice (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 during week days for intake services after 8 p.m. and 24 hours on weekends on holidays.

18.7 Emergency Placements

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

18.7.1 CONTRACTOR shall collaborate with the Interagency Placement Committee (IPC) to ensure the placement is appropriate or develop a transition plan within 30 days from placement.

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 e-mail. If the Probation HEP is not provided by Central Placement staff at the time of placement,

the CONTRACTOR shall follow the same procedure as for DCFS, but the CONTRACTOR shall notify the PAS OD. Central Placement Resource Control Unit via e-mail.

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 Central Placement's Resource Control Unit 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 three (3) months from placement to ensure understanding.

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 CSEC, 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 Referred to a Medical or Psychiatric Hospitalization:

CONTRACTOR shall readmit any child after discharge from a medical or psychiatric hospitalization. referred by the CONTRACTOR to a psychiatric hospital after the child is discharged from the hospital. 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.

~~For emergency replacement procedures CONTRACTOR shall follow procedures as described in Section 15.2.2 of this SOW.~~

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 **Written Notice at Least **Fourteen (14) Days Prior to Discharge****

CONTRACTOR shall provide ~~Notice of Intent to Discharge no less than notification to the COUNTY Worker and CFT at least fourteen (14) calendar days prior to their intent the anticipated to discharge date 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 or others.~~ CONTRACTOR shall explore through the CFT process and document any interventions/remedies before replacement, including consideration of a move within the CONTRACTOR's placement facilities, if available. ~~In the event of an emergency situation, CONTRACTOR shall follow the replacement procedures as described in This section does not restrict the procedures for emergency replacement as outlined in Section 15.2.2 of this SOW.~~

~~18.12.1 CONTRACTOR shall explore through the CFT process and document any interventions/remedies before replacement, including consideration of a move within the CONTRACTOR's placement facilities, if available.~~

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, the CONTRACTOR shall, for DCFS children, provide the DCFS Regional Administrator and the child's 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 for a DCFS child may be provided by email. ~~or fax.~~ For Probation children the CONTRACTOR shall: 1) provide oral notice to the PAS OD at (323) 730-4454 regarding Notice of Intent to Discharge; and 2) send the Notice of Intent to Discharge to the DPO of Record via e-mail.

COUNTY and the CONTRACTOR will pursue appropriate performance indicators to be measured and reported on regarding increased placement stability.

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. 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 Program, specified or specialized placement or hospital).

21.0 ASSESSMENTS AND EVALUATIONS

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 Needs and Services Plan (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.

~~21.2 CONTRACTOR shall use the NSP available at <http://lakids.dcfslacounty.gov/DCFS/forms/index.htm>.~~

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 (age-appropriate children, treatment team, placement worker, etc.), shall be obtained for all initial NSPs within five (5) days of development. 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 e-mail correspondence and documentation should include date, time, and method of contact. Exceptions to this requirement may be granted only in cases where the CONTRACTOR is not responsible for the delay.

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 (age-appropriate children, treatment team, County Worker, etc.), shall be obtained for all updated/modified NSPs within five (5) days of development. 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 e-mail 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.

Probation uses the PROB 1385, Probation Foster Care Case Plan, for the NSP, Exhibit A-V. DCFS uses the DCFS 709, Foster Child's Needs and Case Plan Summary available at xxx, in the development of the NSP template. The PROB 1385 and the DCFS 709 are not to serve as the NSP itself.

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 Child Welfare 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 the FVP

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

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.

Statement of Work

SHORT TERM RESIDENTIAL THERAPEUTIC PROGRAM (STRTP)	
SOW SECTION	REFERENCE LINKS
2.2 (a)	Title 22, Division 6, Chapter 1, Sections 80000-80095, <i>General Licensing Requirements</i> : http://www.cdss.ca.gov/inforesources/Letters-Regulations/Legislation-and-Regulations/Community-Care-Licensing-Regulations/Residential
2.2 (b-d)	Title 22, Division 6, Chapter 7.5, Sections 84091.4 through 87097.88, <i>Short Term Residential Therapeutic Program</i> (Including Subchapters 1 & 2): http://www.cdss.ca.gov/inforesources/Continuum-of-Care-Reform/Short-Term-Residential-Therapeutic-Program
2.3	California Education Code (EDC), California Health and Safety Code (HSC), California Vehicle Code (VEH), Penal Code (PEN) and California Welfare and Institutions Code (WIC), are all available at: http://leginfo.legislature.ca.gov/faces/codes.xhtml
3.1 & 10.0	PEN, Section 11165.5, Child Abuse and Neglect: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=11165.5.&lawCode=PEN
5.1	WIC, Section 11462.01(b), STRTP Placement Criteria: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=11462.01.&lawCode=WIC
5.2	WIC, Children with Special Health Care Needs: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=17710.&lawCode=WIC
6.0	Pathways to Mental Health Service Core Practice Model Guide: http://www.childsworld.ca.gov/res/pdf/CorePracticeModelGuide.pdf
6.0 & 14.1	Los Angeles County Core Practice Model (CPM): www.gettothecore.org
7.3 & 8.2	Megan's Law Website at http://meganslaw.ca.gov
8.1 & 8.3	HSC, Section 1522, Criminal Record Clearance: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=1522.&lawCode=HSC
10.0	PEN, Section 11165.7, Child Abuse and Neglect Reporting Act (CANRA) Mandated Reporter: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=PEN&sectionNum=11165.7
10.3	PEN, Section 11166, Reasonable Suspicion: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=11166.&lawCode=PEN
10.4	I-Track: https://itrack.dcfslacounty.gov
10.5.5	All County Information Notice (ACIN) I-13-17, "Promising Practices for Youth Who Are Missing or Run Away From Foster Care": http://www.cdss.ca.gov/Portals/9/ACIN/2017/I-13_17.pdf?ver=2017-05-01-151257-900
10.6	Foster Care Search System (FCSS): https://fcss.dcfslacounty.gov/Login.aspx

SHORT TERM RESIDENTIAL THERAPEUTIC PROGRAM (STRTP)	
SOW SECTION	REFERENCE LINKS
12.2	Program Statement Submission System (ePSSS): https://myapps.dcfslacounty.gov/epsss.html
14.1.2	LA County DCFS Policy on the Child and Family Team Process: http://policy.dcfslacounty.gov/Default.htm#Child_and_Family_Teams.htm?Highlight=chi
14.2	WIC, Section 16501(a)(4), Child and Family Team: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16501.&lawCode=WIC
14.2	California Department of Social Services (CDSS), All County Letter (ACL) No. 16-84, Requirements And Guidelines For Creating And Providing A Child And Family Team: http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acl/2016/16-84.pdf
15.0	WIC 11462(b)(1), Trauma Informed and Culturally Relevant Services: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=11462.&lawCode=WIC
15.0-15.5	STRTP Core Services Matrix: http://www.cdss.ca.gov/inforesources/Continuum-of-Care-Reform/Short-Term-Residential-Therapeutic-Program
15.1.1.2 & 15.1.16	Psychotropic Medication Guidelines (JV-217-INFO): http://www.courts.ca.gov/formnumber.htm
15.1.1.3, 15.1.1.5 and 15.1.16	Psychotropic Medication: Authorization, Review, and Monitoring for DCFS Supervised Children DCFS Policy No. 0600-514.10: http://policy.dcfslacounty.gov/Default.htm#Psychotropic_Meds.htm?Highlight=psychotropic
15.1.1.4, 17.3.2.1 & 18.11	Foster Youth Bill of Rights: http://www.cdss.ca.gov/cdssweb/entres/forms/English/pub396.pdf
15.1.1.4 & 18.11	Legal Rights of Teens in Out-of-Home Care: http://www.ylc.org/resource-bank/?folder_id=111&root_folder_id=110
15.3.1	WIC, Section 16501.1(d)(4), and (g)(8)(B), Stable School Placements: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?lawCode=WIC&sectionNum=16501.1 .
15.3.1	EDC, Section 48850(a) and (b), Stable School Placements: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=48850.&lawCode=EDC
15.3.2 & 15.3.3	EDC, Section 48853.5, School Enrollment: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=48853.5.&lawCode=EDC
15.3.6.2	Los Angeles County Office of Education (LACOE), Foster Youth Service Coordinating Program (FYSCP) Tutoring Program and other community-based tutoring resources: https://secure-web.cisco.com/10t5Lfw7XnEcXeRaQwg7I5NrkGzS4bBHONnOP7XXmCX

SHORT TERM RESIDENTIAL THERAPEUTIC PROGRAM (STRTP)	
SOW SECTION	REFERENCE LINKS
	opQTZhw7RniN6ffvD3zQY37K-864Vml8nVqtDjvLC_v2P_b6_wegV4HXnAANxWUoZvLNmrW8-m1dLH5qU8W7h4c8RRrj6pzPOF8-D-wT_Yrl8eqz692V8sW3XXTiLJda9z0fVRDaDsViD7SJVOZ5dfLF2L5lusAhSk6mnV6Nuz0xyxRkl7E75N14_1gpOhSr-T-36X_Ojf9_RGFCUv6cKAGnQnX1M_R5fs7JYywy3xpRsT8w98u1acrbSX-Jvf1J04m7tfsnJS03T7_v-bIV9Gk9beO8F0a55wjYprslLJc22ZjKeT0iBX-lkQJavVQ2UeiO0D_GstH678zTRQM4qNag_RSyjsQKh7d5_JMkx5A/https%3A%2F%2Fwww.lacoe.edu%2FStudentServices%2FHomelessFosterYouth%2FFosterYouth%2FTutoring.aspx
15.3.9	Child Health Disability Prevention (CHDP) Program: http://www.lapublichealth.org/cms/CHDP.htm
15.3.9.1	CHDP Program Policy No. 0600-506.10: http://policy.dcms.lacounty.gov/Default.htm#Child_Health_and_Disabil.htm?Highlight=medical
15.3.9.1	Medical/Dental Exams Periodicity Schedule for Children: https://www.aap.org/en-us/Documents/periodicity_schedule.pdf
15.3.9.2	Los Angeles County Department of Public Health: http://www.lapublichealth.org/cms/CHDP.htm
15.3.11.3	Los Angeles County Department of Health Services contracted providers: http://dhs.lacounty.gov/wps/portal/dhs/locations/
15.3.13 & 18.8	WIC, Section 16010, Health and Education Records: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16010.&lawCode=WIC
15.3.15.2	Centers for Disease Control, Division of Nutrition, Physical Activity, Obesity: https://www.cdc.gov/nccdphp/dnpao/
15.3.15.3	American Academy of Pediatrics: https://www.healthychildren.org/English/Pages/default.aspx
15.5.1.3	WIC, Section 16001.9(a)(15), Social Contacts (Connections): http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16001.9.&lawCode=WIC
15.6	Federal Indian Child Welfare Act (ICWA): https://www.ecfr.gov/cgi-bin/text-idx?SID=5851874fabfe7843125fcdad04ef112d&mc=true&node=pt25.1.23&rgn=div5
15.6.2	National Indian Child Welfare Association for Further Guidance: http://www.nicwa.org/Indian_Child_Welfare_Act/history/
17.1.2	HSC, Section 1180-1180.6, Seclusion and Behavioral Restraints: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=1180.&lawCode=HSC
17.4.2 & 17.4.5	DCFS Clothing Allowance Policy No. 0900-506.10: http://policy.dcms.lacounty.gov/Default.htm#Clothing_Allowances.htm#Initial

SHORT TERM RESIDENTIAL THERAPEUTIC PROGRAM (STRTP)	
SOW SECTION	REFERENCE LINKS
18.5	WIC, Section 16514(c), Placements of Dependents and Wards: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16514.&lawCode=WIC
18.5	ACIN No. I-75-16, Placements of Dependents and Wards: http://www.cdss.ca.gov/lettersnotices/EntRes/getinfo/acin/2016/I-75_16.pdf
18.10	Release of Confidential DCFS Case Record Information Policy No. 0500-501.20: http://policy.dcss.lacounty.gov/Default.htm#Release_of_Confidential.htm?Highlight=0500-501.20
18.11	WIC, Section 16001.9(a), Rights: http://leginfo.legislature.ca.gov/faces/codes_displaySection.xhtml?sectionNum=16001.9.&lawCode=WIC
18.11	LIC613B Personal Rights form: http://www.cdss.ca.gov/cdssweb/entres/forms/English/LIC613B.PDF
19.1	DCFS 709 Form (DCFS Placement Responsibilities Policy No. 0100-510.61): http://policy.dcss.lacounty.gov/Default.htm#Responsibilities_For_Pla.htm?Highlight=0100-510.61
20.0	DCFS Family Visitation Policy No. 0400-504.00: http://policy.dcss.lacounty.gov/Default.htm#Family_Visitation_.htm?Highlight=visitation
20.0	Juvenile Court Visitation Committee's Family Visitation Guidelines: http://www.courts.ca.gov/cms/rules/index.cfm?title=standards&linkid=standard5_20

SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAMS (STRTP)

SERVICE DELIVERY SITES

Administrative Office/Headquarters

AGENCY NAME	AGENCY CORPORATE ADDRESS	AGENCY CONTACT PERSON	TELEPHONE NUMBER/ EMAIL ADDRESS

Name of STRTP Administrator: _____

Licensed Facilities Included in this Contract

FACILITY NAME	CHILDREN SERVED <small>(DCFS, Probation, or Dually Supervised)</small>	NUMBER OF CONTRACTED BEDS	FACILITY ADDRESS	FACILITY MANAGER	TELEPHONE NUMBER/ EMAIL ADDRESS

Use additional sheets if necessary.

SERVICE DELIVERY SITES

Yes No

Are any of the facilities listed above on County owned or County Leased property? If yes, please provide an explanation:

Yes No

Do any or your agency's Board members or employees, or members of their immediate families own any property leased or rented by your agency? If yes, please provide an explanation.

On behalf of _____ (Contractor's name), I _____
(Name of Contractor's authorized representative), certify that the information contained in this Service Delivery Sites – Exhibit A-1 is true and correct to the best of my information and belief.

Print Name and Title of Principal Owner, an Officer, or Manager responsible for submission of the SOQ to the County.

Signature of Principal Owner, an Officer, or Manager responsible for submission of the SOQ to the County.

Date

**County of Los Angeles - Department of Children and Family Services (DCFS)
Out-of-Home Care Management Division (OHCMD)
Foster Family Agency (FFA) and
Short-Term Residential Therapeutic Programs (STRTP)
Quality Assurance Section**

**CRIMINAL RECORD EXEMPTION NOTIFICATION
INSTRUCTIONS**

The **Criminal Record Exemption Notification** form must be completed and e-mailed password protected with a unique password selected by the Contractor, as an attachment to the assigned OHCMD Quality Assurance (QA) Reviewer, within 2 business days of the FFA/STRTP **submitting** or **obtaining** a criminal record exemption. A subsequent e-mail should be sent to the OHCMD QA Reviewer with the password to open the document. Once the password has been emailed to OHCMD QA Reviewer, a subsequent email with the password will only be required when the Contractor changes the password. The OHCMD QA Monitor will notify the Contractor within 5 days of receiving the **Criminal Record Exemption Notification** form if a resource family home or a STRTP Facility, which has been granted a criminal record exemption, will or will not be utilized as a placement resource for DCFS children.

County of Los Angeles - Department of Children and Family Services (DCFS)
Out-of-Home Care Management Division (OHCMD)
FFA and STRTP Quality Assurance Section

CRIMINAL RECORD EXEMPTION NOTIFICATION

Contractor _____

Please complete the following areas if you have **requested** or **obtained** a criminal record exemption for a prospective/current resource parent, other household member, substitute caregiver/babysitter, or FFA/STRTP staff. Please submit this form password protected with a unique password selected by the Contractor within 2 business days of requesting or obtaining a criminal record exemption via e-mail to the assigned OHCMD Quality Assurance (QA) Reviewer.

1. Information Pertaining to Criminal Record Exemption Request:

Date of Exemption request: _____

Name of person requiring an Exemption:

Relationship: *(Select One)*

- Prospective Resource Parent Current Resource Parent
 Member of Household Substitute Caregiver/Babysitter Staff

2. Information Pertaining to Criminal Record Exemption Obtained:

Date Exemption was obtained: _____

Name of person granted an Exemption:

Relationship: *(Select One)*

- Prospective Resource Parent Current Resource Parent
 Member of Household Substitute Caregiver/Babysitter Staff

3. Criminal Record Exemption is No Longer Needed for this Individual

Date Exemption no longer needed: _____

FOR COUNTY USE ONLY

Exemption Notification received on _____ by QA Reviewer _____

Please Note: It is the responsibility of the FFA/STRTP to assess for appropriateness of placement of DCFS children.

County of Los Angeles - Department of Children and Family Services (DCFS)**Out-of-Home Care Management Division (OHCMD)****FFA and STRTP Quality Assurance Section****NOTIFICATION OF SUBSEQUENT ARREST, CONVICTION,
PROBATION OR PAROLE VIOLATION
INSTRUCTIONS**

When a subsequent arrest, conviction, probation or parole violation of a prospective/current certified foster parent, other household member, substitute caregiver/babysitter, or FFA/STRTP staff is made known to a Contractor, the information shall be submitted within 2 business days by the Contractor to OHCMD by utilizing the **Notification of Subsequent Arrest, Conviction, Probation or Parole Violation** form.

This form must be completed and e-mailed password protected with a unique password selected by the Contractor, as an attachment to the assigned OHCMD Quality Assurance (QA) Reviewer within 2 business days of the Contractor receiving notification of a subsequent arrest, conviction, probation or parole violation for any Staff, Certified Foster Parents, Substitute Caregivers, Babysitters or Household Members. A subsequent e-mail should be sent to the OHCMD QA Reviewer with the password to open the document. Once the password has been emailed to OHCMD QA Reviewer, a subsequent email with the password will only be required when the Contractor changes the password.

When County of Los Angeles supervised children are placed in a resource family home, the Contractor shall also be responsible for submitting this information to OHCMD and all other appropriate parties utilizing the I-Track system.

**County of Los Angeles - Department of Children and Family Services (DCFS)
Out-of-Home Care Management Division (OHCMD)
FFA and STRTP Quality Assurance Section**

**NOTIFICATION OF SUBSEQUENT ARREST, CONVICTION,
PROBATION OR PAROLE VIOLATION**

Contractor: _____

Person for Whom Notification is Necessary: _____

1. Relationship: (Select One)

- Prospective Certified Foster Parent Current Certified Foster Parent
 Member of Household Substitute Caregiver/Babysitter Staff

For Household Members and Substitute Caregivers/Babysitters, please indicate the Prospective or Resource Parent to whom the individual is associated:

Name of Resource Parent: _____

2. Please check to indicate the offense that occurred for the person listed above:

- Arrest Conviction Probation Violation Parole Violation

3. Date Offense Occurred: _____

NOTE: This form must be completed and e-mailed password protected with a unique password selected by the Contractor, as an attachment to the assigned OHCMD Quality Assurance (QA) Reviewer within 2 business days of the Contractor receiving notification of a subsequent arrest, conviction, probation or parole violation for any Staff, Resource Parent, Substitute Caregiver, Babysitter or Household Member.

When County of Los Angeles supervised children are placed in the home, all information must also be reported by the Contractor to OHCMD and all other appropriate parties using the I-Track system.

SPECIAL INCIDENT REPORTING (SIR) GUIDE FOR FOSTER CARE PLACEMENT SERVICES PROVIDERS

The County of Los Angeles Departments of Children and Family Services (DCFS) and Probation Department (Probation) have developed this SIR guide. It does not supersede the requirements outlined in California Code of Regulations Title 22, Sections 80061, 84061, 87061, 87095.1, 88361, and 88487.6.

The Foster Care Placement Services provider shall maintain a copy of all reports as required in Sections 1 through 6 of this guide in the placed child's file. The provider shall also summarize the information in the child's quarterly reports to the county worker. Children's files shall be retained at the facility for at least five years following the term of this Contract.

Many of these special incident reporting decisions require good judgment and sound discretion. If in doubt whether to report, the group home should call the appropriate agency for clarification. Whoever is reporting should be prepared for follow-up questions and have expertise in the reporting procedure.

The agency shall report special incidents to the DCFS Out-of-Home Care Management Division Quality Assurance Section (OHCMD QAS), Children's Social Worker (CSW), Deputy Probation Officer (DPO), Placement Permanency & Quality Assurance STRTP Compliance Monitor (PPQA CM), Placement Administrative Services Officer of the Day (PAS OD), and Community Care Licensing Division (CCLD) via the **I-Track web-based system** at <https://itrack.dcfslacounty.gov> as specified in the tables below.

If the agency cannot obtain complete information regarding the incident within the required reporting timeframes, the agency should submit an initial SIR that includes as much information as possible. If the agency determines that it is necessary to provide additional information about an incident for which an I-Track report has already been submitted, the agency may submit an addendum within seven business days of becoming aware of the incident per the Title 22 requirements noted above. If the I-Track web-based system is off-line, the STRTP shall email the report per the tables below and resubmit the report via I-Track noting the date of the previously emailed transmission – when I-Track is available.

TABLE OF CONTENTS

<u>TYPE OF INCIDENT</u>	<u>PAGE #</u>
1. BEHAVIORAL/MENTAL HEALTH INCIDENT	2
2. INJURY, ILLNESS OR ACCIDENT	3
3. DEATH	3
4. UNAUTHORIZED ABSENCE	4
5. ALLEGED CHILD ABUSE	4
6. AGENCY EMERGENCY/DISASTER	5
7. SIGNIFICANT CHANGE IN THE STRTP	5

1. **BEHAVIORAL/MENTAL HEALTH INCIDENT** – Incident that adversely affects the physical health, mental health, emotional health, educational well-being, or safety of a child.

Incident **may include, but is not limited to**, the following examples:

- | | |
|-----------------------------------|-----------------------------|
| • Assaultive Behavior (Caregiver) | • Property Damage |
| • Assaultive Behavior (Peer) | • Seclusion |
| • Assaultive Behavior (Other) | • Self-Injurious Behavior * |
| • Inappropriate Sexual Behavior | • Staff Related |
| • Medical Related * | • Substance Abuse |
| • Physical Restraint | • Suicidal Ideation |
| • Police Involvement | • Suicide Attempt * |
| | • Theft |

*** Must be immediately reported**

HOW	TO WHOM	WHEN
Telephone	CSW or DPO	Within 24 hours
	PPQA CM OD	Within 24 hours
	Parent	Within 24 hours
I-Track (email if I-Track is down and follow with I-Track submittal when the system is available)	CSW or DPO	Within 24 hours
	OHCMD QAS or PPQA CM	Within 24 hours
	CCLD	Within 24 hours

2. INJURY, ILLNESS OR ACCIDENT – Incident that results in medical treatment by a health care professional beyond routine medical care, with the exception of planned surgery. *If in doubt, report or call the required agency for clarification.*

Incident **may include, but is not limited to**, the following examples:

- Accident
- Injury
- Illness
- Hospitalization (Medical or Psychiatric)

HOW	TO WHOM	WHEN
Telephone	CSW or DPO	Within 24 hours
	PPQA CM OD	Within 24 hours
	Parent/guardian	Within 24 hours
I-Track (E-mail only if I-Track is down)	CSW or DPO	Within 24 hours
	OHCMD QAS or PPQA CM	Within 24 hours
	CCLD	Within 24 hours

3. DEATH

HOW	TO WHOM	WHEN
Telephone	CSW or DPO (Agency to confirm that DCFS/Probation will contact parent/guardian)	Immediately
	PPQA CM OD	Immediately
	Child Protection Hotline (CPHL) at (800) 540-4000	Immediately
I-Track (E-mail only if I-Track is down)	CSW or DPO	Within 24 hours
	OHCMD QAS or PPQA CM	Within 24 hours
	CCLD	Within 24 hours

4. UNAUTHORIZED ABSENCE – Absence of a child without the permission and supervision of the caregiver, which threatens the physical health, emotional health, or safety of the child.

Incident **may include, but is not limited to**, the following examples:

- Abduction
- Runaway

HOW	TO WHOM	WHEN
Telephone	1. Law Enforcement	Immediately
	2. CSW (If after hours, call CPHL)	Immediately
	3. DPO	Immediately
	4. Parent/Guardian (if known)	Immediately
Email	PAS OD	Immediately
I-Track (email if I-Track is down and submit in I-Track when system is up)	CSW or DPO	Within 24 hours
	OHCMD QAS or PPQA CM	Within 24 hours
	CCLD	Within 24 hours

5. ALLEGED CHILD ABUSE – *All personnel are required by law to report known, suspected, or alleged incidents of child abuse as defined in Penal Code Section 11165-11174.4.*

Incident **may include, but is not limited to**, the following examples:

- Neglect (general and severe, including medical neglect)
- Physical – an injury purposefully inflicted upon a minor (including corporal punishment and willful cruelty or infliction of unjustifiable pain or punishment)
- Sexual (including sexual assault, sexual exploitation through pornography or prostitution, sexual activity between minors, and sexual activity between an adult and a minor)
- Verbal/Emotional

HOW	TO WHOM	WHEN
Telephone	CSW or DPO	Immediately
	PPQA CM OD	Immediately
	CPHL for DCFS and Probation	Immediately
	Law Enforcement	Immediately
	Parent/guardian	Within 24 hours
I-Track (Fax only if I-Track is down)	CSW or DPO	Within 24 hours
	OHCMD QAS or PPQA STRTP CM	Within 24 hours
	CCLD	Within 24 hours

NOTE: Written submission of State Form SS8572, "Suspected Child Abuse Report," within 36 hours is mandatory. Please indicate in the SIR (I-Track) that the SS8572 is forwarded to required parties.

6. AGENCY EMERGENCY/DISASTER – Incident that involves the community or physical plant and may have a serious impact on residents or create a potentially dangerous environment.

Incident **may include, but is not limited to**, the following examples:

- Earthquake Damage
- Epidemic
- Explosion
- Fire
- Flood

HOW	TO WHOM	WHEN
Telephone	Local Fire Authority for all fires and explosions (Section 80061(b)(1) of CCR)	Immediately
	Local Health Officer for all epidemic outbreaks [California Code of Regulations § 80061(b)(1)]	Immediately
	CSW or DPO	Within 24 hours
	OHCMD QAS or PPQA CM OD	Within 24 hours
	CCLD	Within 24 hours
I-Track (Email only if I-Track is down)	CSW or DPO	Within 24 hours
	OHCMD QAS or PPQA CM	Within 24 hours
	CCLD	Within 24 hours

7. SIGNIFICANT OPERATIONAL CHANGES – Changes in an organization’s operations and operational structure that may affect the services to the placed children and youth. **NOTE: While agencies are not required to report significant changes via I-Track, these incidents must be reported per the requirements in the California Code of Regulations Title 22, Sections 80061 and 84061, 87061, 88361, and 88487.6.**

Incident **may include, but is not limited to**, the following examples:

- Administration (e.g., Chief Executive Officer, Program Administrator, Mental Health Service Head, Facility Manager)
- Mailing Address (For any facility or resource home)
- Plan of Operation/Program Statement
- Staffing disruption (e.g., strike, disaster evacuation or staff shortage)



**DEPARTMENT OF CHILDREN AND FAMILY SERVICES
SHORT TERM RESIDENTIAL THERAPEUTIC PROGRAMS (STRTP) MONTHLY UTILIZATION SELF-REPORT**

Month/Year _____

STRTP CORPORATION

Agency Name:													
Agency Address:													
Agency Contact:	Phone No.						Email:						
Intake Worker:	Phone No.						Email:						

STRTP SITES

	1	2	3	4	5	6	7	8	9	10	11	12	13
Site Address	Program (STRTP or CTF)	License #	Licensed Capacity	FCRB Capacity	Adjusted Capacity	DCFS Children	Probation Children	Dually Superv. Children	Non-L.A. County Children	DCFS Children in STRTP the last day of the month*	Vacancy	Age Range	Gender M / F

Explain any discrepancies:

- Column 1: Indicate the program type operating under the STRTP license.
- Column 2: Indicate the license number as it appears on the license.
- Column 3: Indicate the capacity approved as it appears on the license.
- Column 4: Indicate the Foster Care Rates Bureau (FCRB) approved capacity as it appears on the Rate Letter.
- Column 5: Indicate the number of actual active beds.
- Column 6, 7 & 8: Indicate the number of LA County children served throughout the month including AWOL/discharged children.
- Column 9: Indicate the number of non-LA County children.
- Column 10: Indicate the number of remaining DCFS children in the STRTP on the last day of the month. *Include dually supervised children in count.
- Column 11: Indicate the actual number of vacant beds.
- Column 12: Indicate the approved age range as it appears on the license.
- Column 13: Indicate the approved gender as it appears on the license.

SAFETY PERFORMANCE OUTCOME SUMMARY*		
PROGRAM: Short-Term Residential Therapeutic Programs (STRTP)		
PROGRAM TARGET GROUP: Children in STRTP		
PROGRAM GOAL AND OUTCOME: Children shall be free of abuse and neglect as specified in HSC, Section 1522(b).		
OUTCOME INDICATORS	PERFORMANCE TARGET	METHOD OF DATA COLLECTION
Abuse & neglect referrals and their disposition	99.68% of children are free from a report of substantiated maltreatment as specified in HSC, Section 1522(b)	CWS/CMS Referrals and I-Track Special Incident Reports
Child-to-child injuries resulting from lack of supervision that necessitate the submission of a SIR and require treatment by a health professional	98% of children are free from child-to-child injuries while under the supervision of STRTP staff	CCLD Citations and I-Track Special Incident Reports

*These outcome indicators and performance targets may change based on any subsequent requirements or guidance regarding performance expectations provided by CDSS or federal authorities. DCFS may also change the outcome indicators or adjust performance targets for future contract periods to maintain optimal levels of performance.

PERMANENCY PERFORMANCE OUTCOME SUMMARY*		
PROGRAM: Short-Term Residential Therapeutic Programs (STRTP)		
PROGRAM TARGET GROUP: Children in STRTP		
PROGRAM GOAL AND OUTCOME: Children shall achieve permanency through reunification, adoption, relative guardianship, or other guardianship as defined in the Case Plan		
OUTCOME INDICATORS	PERFORMANCE TARGETS	METHOD OF DATA COLLECTION
Discharge consistent with Needs and Services Plan (NSP) including permanency plan	At least 62% of the children successfully meet the NSP goals and are discharged in accordance with permanency plan	CWS/CMS Placement History, Court Report, Child's Case File, NSP, Discharge Summary, and I-Track Special Incident Reports
Discharge to less restrictive environment	At least 62% of the children discharged from the STRTP over a six (6) month period are discharged to a less restrictive setting than current placement	CWS/CMS Placement History, Court Report, Child's Case File, NSP, Discharge Summary, and I-Track Special Incident Reports
Placement stability	80% or more of the total children served per year are not replaced per the STRTP's request	Discharge Summary and I-Track Special Incident Reports
Stability of children in family, relative, or foster placement six (6) months after discharge, in accordance with the NSP	87% of children discharged in accordance with the Permanency Plan to reunification or relative placement have not reentered the DCFS system six (6) months after discharge	CWS/CMS Placement History, Court Report, Child's Case File, NSP, and Discharge Summary
	46% of placed children discharged in accordance with the permanency plan to a foster care placement have not changed foster families six (6) months after discharge from the STRTP	CWS/CMS Placement History, Court Report, Child's Case File, NSP, and Discharge Summary

*These outcome indicators and performance targets may change based on any subsequent requirements or guidance regarding performance expectations provided by CDSS or federal authorities. DCFS may also change the outcome indicators or adjust performance targets for future contract periods to maintain optimal levels of performance.

ACCESS TO EFFECTIVE AND CARING SERVICES FOR WELL-BEING PERFORMANCE OUTCOME SUMMARY*		
PROGRAM: Short-Term Residential Therapeutic Programs (STRTP)		
PROGRAM TARGET GROUP: Children in STRTP		
PROGRAM GOAL AND OUTCOME: Children shall receive services as identified through the Child and Family Team in the spirit of the Core Practice Model 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.		
OUTCOME INDICATORS	PERFORMANCE TARGETS	METHOD OF DATA COLLECTION
Completion of individualized Needs and Services Plan (NSP) within thirty (30) days of placement, and every thirty (30) days thereafter	100% of the individualized NSPs completed in thirty (30) days and every thirty (30) days thereafter.	Child's Case Records and NSP
Improved level of child's functioning	At least 62% of the children successfully meet the NSP goals prior to discharge	Child's Case Records and NSP
Children enrolled in school immediately, attending school regularly, achieving academic progress, and participating in supplemental education and extra-curricular activities	At least 83% of the children will have increased educational scores and/or attendance	School Attendance Logs and Report Cards
Children (ages 16 and older) shall receive Transition and Emancipation services and encouraged and supported to participate in the COUNTY's ILP	100% of these children will receive Transition and Emancipation services and encouraged and supported to participate in the COUNTY's ILP	Child Case Records, Discharge Summary and Transitional Living Plan (TILP)
Maintenance of current health and education binders	100% of the children have completed and current health/education binders	Child Case Records and Health and Education binder or equivalent

*These outcome indicators and performance targets may change based on any subsequent requirements or guidance regarding performance expectations provided by CDSS or federal authorities. DCFS may also change the outcome indicators or adjust performance targets for future contract periods to maintain optimal levels of performance.

**SHORT TERM RESIDENTIAL THERAPEUTIC PROGRAMS (STRTP)¹
DISCHARGE SUMMARY**

1. What was the reason for the child's exit from the STRTP?
2. Who determined the child was ready to leave the STRTP?
3. Was the child discharged to Permanency?
Yes [] No []
If "yes," check one: Reunification [] Adoption [] Legal Guardian []
Provide the address to which the child was discharged, if available:
4. Was the child discharged according to their Permanency Plan?
Yes [] No []
5. Was the child discharged to a less restrictive environment?
Yes [] No []
If "yes," indicate whether to: Parent(s) [] NREFM or Relative Home []
RFA Home [] SFH [] FFA RFA Home []
6. Did the child meet their Needs and Services Plan goals prior to discharge?
ILP/Emancipation goals: Yes [] No []
Educational goals: Yes [] No []
Mental Health Treatment goals: Yes [] No []
7. What was the agency's assessment of the child's level of functioning upon discharge?
8. What was the agency's recommendation for aftercare services for the child (individual/conjoint counseling, special education services, etc.)?

¹ For DCFS Placed Children, complete and send to DCFS Out-of-Home Care Management, Division Chief, 9320 Telstar Avenue, Suite 216, El Monte, CA 91731. For Probation youth, contact the Central Placement OHC Unit at (323) 226-8600.

Provider Needs and Service Plan

Intentionally Left Blank

**STRTP Plan of Operation
And
Program Statement**

STRTP Facility License(s)

STRTP Rate Letter

TRANSFER OF MEDICATION FORM

CHILD'S INFORMATION

Name: _____ DOB: _____
Date of Termination/Placement Move: _____

ASSIGNED COUNTY WORKER

County Worker (Indicate DCFS/Probation): _____
Contact Phone Number: _____

PERSON TRANSFERRING MEDICATION*

Agency Representative/Title: _____
Name of Agency (Indicate FFA/STRTP): _____
Address: _____
Contact Phone Number: _____

PERSON RECEIVING MEDICATION

Name/Title: _____
Name of Agency, if applicable (Indicate FFA/STRTP/County): _____
Address: _____
Contact Phone Number: _____

MEDICATION INFORMATION

Medication Name: _____
Dosage (Quantity/Frequency): _____
Date Prescribed: _____ Prescribing Physician: _____
Date last seen by Psychiatrist: _____
How many days of medication left? _____ How many refills left? _____
Pharmacy/Address: _____
Most Recent Psychotropic Medication Authorization (PMA) Date (provide receiving party a copy of PMA, if available): _____
Please describe any significant side effects (Provide Receiving Party copies of the JV 218 form – Child's opinion about the medicine and the JV 219 form - Statement about medicine prescribed, if available): _____

Print Name of Person Transferring Medication Signature of Person Transferring Medication Date

Print Name of Person Receiving Medication Signature of Person Receiving Medication Date

*The person responsible for transferring medication must provide a completed copy of this form to the case carrying County Worker