

Appendix A: Problems-to-components grid

<u>Problem</u>	<u>Treatment components that may be useful</u>
1. Safety (environmental)	Safety training, system interventions, psychoeducation
2. Caretaker support	Family therapy, intervention with caretakers
3. Anxiety	Distress reduction/affect regulation training, titrated exposure, cognitive processing
4. Depression	Relationship building and support, cognitive processing, group therapy
5. Anger/aggression	Distress reduction/affect regulation training, trigger identification/intervention, cognitive processing
6. Low self-esteem	Cognitive processing, relational processing, group therapy, relationship building and support
7. Posttraumatic stress	Distress reduction/affect regulation training, titrated exposure, cognitive processing, psychoeducation, relationship building and support, trigger identification/intervention
8. Attachment insecurity	Relationship building and support, relational processing, group therapy, intervention with caretakers
9. Identity issues	Relationship building and support, relational processing
10. Relationship problems	Relationship building and support, relational processing, cognitive processing, group therapy
11. Suicidality	Safety training, distress reduction/affect regulation training, cognitive processing, systems intervention
12. Risky behaviors and tension-reduction behaviors	Psychoeducation, safety training, cognitive processing, trigger identification/intervention
13. Dissociation	Distress reduction/affect regulation training, affect regulation training, emotional processing, trigger identification/intervention
14. Substance abuse	Psychoeducation, trigger identification/intervention, titrated exposure, distress reduction/affect regulation training
15. Grief	Psychoeducation, cognitive processing, relationship building and support
16. Sexual concerns and/or dysfunctional behaviors	Psychoeducation, trigger identification/intervention, titrated exposure, distress reduction/affect regulation training
17. Self-mutilation	Trigger identification/intervention, distress reduction/affect regulation training

Source: University of Southern California Keck School of Medicine, Adolescent Trauma Training Center
Integrative Treatment of Complex Trauma for Adolescents (ITCT-A; Briere & Lanktree, 2013).

Appendix B: Wraparound Principles in Enhanced Care Programs

Wraparound is a supportive and effective model of delivering services to families and is currently being analyzed for inclusion in the federal clearinghouse of evidence-based practices. The Wraparound process (as outlined in [ACIN I-52-15](#)) is consistently woven through the fabric of statewide efforts to fully implement the Continuum of Care Reform, Family First Prevention Services Act (FFPSA), System of Care coordination (AB 2083) and other initiatives.

Wraparound implemented with high fidelity is required as a part of California's operationalization of FFPSA's 6-month aftercare service requirement for all youth transitioning from an STRTP to a family-based setting. It is also very possible that a youth or family would have participated in Wraparound prior to their placement in an STRTP or individualized placement as an effort to prevent that need.

Given the demonstrated effectiveness of the Wraparound process and the likelihood that it is both familiar to a family and has/will bookend an STRTP or individualized placement for a youth, it is strongly recommended that all individualized placement and treatment models embrace and align with the 10 Wraparound principles listed below (and fully outlined by the [National Wraparound Institute here](#)).

- Family Voice and Choice
- Natural Supports
- Team Based
- Collaboration
- Community Based
- Culturally Competent
- Individualized
- Strengths Based
- Persistence
- Outcome Based

For more information on wraparound, please visit the [UC Davis Wraparound site here](#) or [CDSS' information here](#).

Appendix C: Staff Training Topics

E-ISFC Staff Training

With recognition that the needs of all youth and families are different, Enhanced ISFC staff are provided with extensive training. Examples of trainings include:

- New Employee/Hire Orientation
- Child Development and Relational Treatment
- Impact of Trauma on Child Development
- Crisis Intervention
- Comprehensive Assessment and Planning (i.e., documentation training)
- CANS
- Working with Resource Parents
- Promoting Permanency
- Agency policies and procedures
- Mandated Child Abuse Reporting
- Adoption Competency Training (ACT)
- Trauma-informed Service Delivery
- Substance Use
- Educational Disabilities
- Working with commercially Sexually Exploited Youth
- Cultural Proficiency Trainings
 - Sexual Orientation, Gender Identity and Expression and serving LGBTQ+ Youth
- Pathways to Permanence I or II
- Foster Youth Rights
- Symptoms and Impact of Child Abuse
- Foster Youth and the Educational System (includes content in IEPs and managing educational needs)

Specialized Parent Training

To ensure that all caregivers are prepared to meet the unique challenges of the youth in their home, the FFA provides at least 40 hours of intensive pre-approval training in alignment with both Intensive Services Foster Care (ISFC) standards and requirements, followed by additional training and coaching specific to the youth they will care for. Below is a list of possible topics for trainings that a Specialized Parent may receive:

- Introduction to Child Welfare (and its goals of safety, permanency and wellbeing)
- Introduction to Trauma-Informed Foster Parenting
- Foster Youth and the Education System (includes content in IEPs and managing educational needs)
- Foster Parenting and Unconditional Care (for the highest-need youth)
- Substance Use
- Educational Disabilities
- Working with Commercially Sexually Exploited Youth

- Sexual Orientation, Gender Identity and Expression and serving LGBTQ+ Youth
- Suicide Risk and Prevention with Children, Adolescents, and Nonminor Dependents
- Foster Care Medication Policies and Procedures
- Implicit Bias in the Foster Care System
- Culturally Responsive Caregiving
- Building Resiliency in Youth Impacted by Trauma and Loss
- CPR and First Aid
- CCL Regulations While Caring for Foster Youth
- Understanding Child Abuse and Caregiving Reporting Requirements
- Understanding Attachment When Caring for Foster Youth
- Creating a Safe Caregiving Environment
- Progressive Crisis Intervention
- Pathways to Permanence

SAMPLE SPECIALIZED RESOURCE PARENT TRAINING	
Topic	Example Training Titles
<i>Introduction to E-ISFC and the Mental Health Service System</i>	<i>E-ISFC Logic Model Training: Supports the Specialized Parent with understanding the target population, the specific interventions, the requirements of the parent and the agency and the intended overall program outcomes of E-ISFC.</i>
<i>Understanding Child and Adolescent Development and Age-appropriate Interventions for Positive Behavior Management</i>	<i>Wisdom Path Way (WPW) Reparative Parenting model- Level I: 3 day/18-hour course on the overview of child development and the impacts of trauma and attachment.</i>
<i>Working with Abused, Neglected, and/or Delinquent Children/Youth Using a Trauma-Informed Approach and Understanding Youth Attachment Challenges</i>	<i>WPW- Level II: 4 day/24 hours teaching and coaching on the WPW approach and development of coaching plans, limit setting, and the impacts of trauma and attachment.</i>
<i>Preventing and Managing a Crisis</i>	<i>Crisis Training for Foster Families (a derivative of Therapeutic Crisis Intervention)</i>
<i>Communication and Relationship Building with Children/Youth and Families</i>	<i>WPW- Level II: 4 day/24 hours teaching and coaching on the WPW approach and development of coaching plans, limit setting, and the impacts of trauma and attachment.</i>
<i>Cultural Humility & Awareness</i>	<i>Embedded in WPW Level I and II. Supports the Specialized Parent with understanding the impacts of historical and systemic trauma in various cultures. Additional training on SOGIE.</i>
<i>Teaming</i>	<i>Training of the CFT process and CFT meeting roles and responsibilities. On-going coaching is provided to support the Specialized Parent on their role within the CFT.</i>
<i>Parent Self-Care, Loss and Vicarious Trauma</i>	<i>E-ISFC Staff will use the Taking Care of Yourself checklist from the National Child Traumatic Stress Network with resource parent. Discussion will also include the program respite care program.</i>
<i>Others</i>	<i>HIPAA, Progress Note Documentation -The Daily Life of a Chart/Medi-Cal note writing, Computer Intro-Parents will be loaned an Agency laptop to use while providing E-ISFC services, Motivational Interviewing, Specialty Training such as CSEC, SUD and other individual youth needs.</i>

E-STRTP Staff Training

STRTP regulations outline the primary requirements for staff training; however, E-STRTP programs provide additional trainings that are relevant for the program's target population. Examples of additional trainings include:

- New Employee Onboarding
 - Introduction to Trauma-Informed Care
 - Collaborative Problem Solving
 - Motivational Interviewing
 - System of Care
 - PRO-ACT (Crisis Communication Day 1 & 2 and Restraint)
 - Vicarious/Secondary Trauma
- Additional Training:
 - Employee Wellness – Emotional Intelligence: Awareness
 - Question, Persuade, Refer (QPR)
 - Boundaries and Dual Relationships for Paraprofessionals
 - Identifying and Preventing Child Abuse and Neglect
 - Medication Management for Children's Services Paraprofessionals
 - Overview of Psychiatric Medications for Paraprofessionals
 - Traumatic Stress Disorders in Children, Adolescents, and Nonminor Dependents
 - Critical and Unusual Incidents
 - Behavioral Support and Management
 - Foster Youth and the Educational System (includes content in IEPs and managing educational needs)

Appendix D: Budget Samples

E-ISFC Sample Budget #1

Specialty Mental Health	Rate Per Minute	Total Unit of Service per Month	Cost Per Client per Month	Total Annual Cost per Client
Case Management	\$2.41	357	\$860	\$10,320
MH Services	\$3.14	1638	\$5,143	\$61,716
Medication Support	\$5.79	42	\$243	\$2,916
Crisis Intervention	\$4.51	63	\$284	\$3,408

\$6,530

\$78,360

TFC	Rate Per Day	Service Days per Client per Month (average)	Cost Per Client per Month	Total Annual Cost per Client
TFC	\$398	15	\$5,970	\$71,640

Enhanced ISFC Plus (Pilot Program)			Cost Per Client per Month	Total Annual Cost per Client
ISFC Plus (Pilot)			\$11,355	\$91,236

Grand Total

\$23,855

\$286,263

Direct Costs

Personnel Costs	Contract Amount
Salaries	\$97,850
Payroll Taxes	\$7,486
Employee Benefits	\$28,132
Subtotal Personnel Costs	\$133,468
 <i>Operating Expenses</i>	
Equip/Parts/IT networks	\$8,000
General Supplies	\$500
Postage/Shipping/Printing	\$300
Foster Parent Fees	\$8,550
Foster Parent Recruitment	\$6,000
Audit fee	\$700
Travel	\$3000
Training & Conference	\$5300
Client Program Costs	\$10,000
Contract Psychiatrists	\$17,920
Insurance Liability	\$17,169
Occupancy Cost	\$22,313
Other Regional support Cost	\$ 11,000
Subtotal Operating Expenses	\$110,752
 <i>Indirect Costs *</i>	
Administrative Overhead	\$42,043
Subtotal Indirect Costs	\$42,043
GRAND TOTAL*	\$286,263

E-ISFC Sample Budget #2

		E-ISFC (4 homes)	
PROJECTED CLIENT CAPACITY			
Max Program Capacity		4.0	
Projected Social Services Revenue			
Social Services Wraparound Revenue		240,000	
Social Services Placement Revenue		240,000	
Total Social Services Revenue		\$480,000	
Projected Behavioral Health Revenue			
Projected EPSDT Specialty Mental Health Services Revenue		253,440	
Projected Therapeutic Foster Care Revenue		208,704	
Total Behavioral Health Revenue		\$462,144	
Other Revenue			
Wraparound Reinvestment, MHSA, General Fund, AB153, etc.		\$553,500	
TOTAL PROJECTED REVENUE			\$1,495,644
Projected Expenses			
PERSONNEL			
		Total	
Subtotal Salary			\$563,219
	Benefits		152,069
TOTAL PERSONNEL			\$715,288
OPERATIONS			
Contract Services			\$38,538
Program Support			\$57,121
Occupancy			\$246,285
Child and Family Related			\$254,582
TOTAL OPERATIONS			\$596,526
TOTAL DIRECT EXPENSE			\$1,311,814
	Allocable Overhead		183,654
TOTAL EXPENSE			\$1,495,468
Net Position			\$176
Average Cost Per Child Per Month		\$31,156	

Personnel Line Items	
Position	FTE
Regional Executive Director	0.05
Program Director	0.25
Wraparound & Placement Program Supervisor	0.65
Recruitment & Retention Supervisor	0.05
Nurse	0.10
Care Coordinator/Placement Clinician	1.00
Bilingual Care Coordinator/Bilingual Placement Clinician	1.00
Placement Support Counselor	1.00
Bilingual Support Counselor/Bilingual Placement Support Counselor	1.00
Family Partner/Peer Partner	0.50
Permanency Specialist	0.50
Therapist	0.15
Therapeutic Foster Care Clinician	1.00
Resource Family Recruiter and Retention Specialist	0.50
Senior Administrative Assistant	0.05
Program Assistant	0.15
Health Information Specialist	0.15
Facility Manager	0.10
Administrator On-Call	0.50
24/7 Crisis Response On-Call	0.55

Operations Line Items
<i>Contract Services</i>
Psychiatry Services
Contract Nursing Services
Note Approvers
Other Contract Services
<i>Program Support</i>
Office Supplies
Telephone
Staff Training/Professional Development
Subscriptions and Dues
Travel/Mileage Reimbursement
Staff Recruitment Materials
Resource Family Recruitment Materials
Advertising/Marketing- Digital Resource Family Recruitment
<i>Occupancy</i>
Facility Lease
Facility Interest
Facility Depreciation
Utilities
Building Maintenance and Supplies
Equipment (rep, dep, expendable)
<i>Child and Family Related</i>
Treatment and Engagement Supplies
Resource Family Placement Fees
Resource Family Respite Fees

E-STRTP Sample Budget

Staffing		Monthly Expense
Program Director		\$400
Program Administrator/Manager		\$1,310
Therapeutic Skills Coach		\$8,070
TSC Overnight		\$1,825
Additional Coverage (holidays/PTO)		\$1,400
Records Manager		\$700
IT/QA Staff		\$250
Maintenance Staff		\$272
	Total Wages	\$14,227
	Benefits	\$3,272
Total Monthly Staffing Expense		\$17,499
Client Expense		
Food, Supplies, Clothing, Activities, Allowances		\$1,250
Operation Expense		
Facility Cost		\$900
Facility Maintenance Supplies		\$120
Insurance Expense		\$200
Mileage/Vehicle Expense		\$525
Miscellaneous Admin Expense		\$500
Office Supplies		\$75
Telephone/Internet		\$200
Utilities		\$375
	Monthly Operating Expense	\$2,895
	Total Monthly Expense	\$21,644
	Indirect Admin - 12%	\$2,597
Total Monthly STRTP Rate		
	Expense	\$24,242

STRTP Rate per month per youth	\$24,242
EPSDT Services - ~18 hours per week per youth	\$14,040
Total Monthly Cost	\$38,282

Appendix E: Fiscal Sources Detail

No two counties will have the same strategy to fund Enhanced Care Programs. The level of detail provided in the file is intended to lead into county-specific discussions through the tailored TA about how the funding can be braided to support this work. Some counties will have a straight-forward strategy and others will need to plan to create something that works.

County System of Care Funding Sources

	Youth/Family Supports	Pre-Placement Support	ECP Placement	Layered Services^	System of Care
	Transition Services	- Child-Specific Support AB 153 - Wraparound			
	Crisis Services	- Family Urgent Response System FURS AB403 - County BH Mobile Response Team			
	Foster Parent Recruitment	Foster Parent Recruitment, Retention, and Support FPRRS AB403			
Enhanced Care Program	Care and Supervision		- AFDC-FC Title IV-E - Child-Specific Support AB153 - County Gen. Funds/ Realignment - Innovative Model of Care Funds AB2944		
	Mental Health Services		- Medi-Cal EPSDT Specialty MH Services		

			- Medi-Cal TFC		
Educational Support				- County Office of Education COE ° - SELPA - LEA Funding	
Substance Use				- Drug Medi-Cal ° - Medi-Cal EPSDT Specialty MH Services°	
Wraparound				- MHSA FSP Funds ° - County Gen Funds/ Realignment - Medi-Cal EPSDT Specialty MH Services	
Developmental Disabilities				Regional Center °	
Medical Services				Medi-Cal Title XIX °	
CSEC				State CSEC Program	
Vocational/ Life Training				Medi-Cal Title XX °	
Close SOC Gaps					- County Capacity Building AB153 - FFPSA Part IV *
Use of Federal Funds					MHP MHSA 3-year plan
Close Complex Need Gaps					Children's Crisis Continuum Pilot AB153 *

^ These services are encumbered through service contracts, if available. For example, not every county has a Wraparound program.

° An ECP provider would need to secure separate contracts to access these fund sources directly. For example, they would have to become Drug Medi-Cal certified to be able to provide SUD services.

* Funding details/processes not yet published.

In the following tables, “**Current Funding**” is used to identify funding sources or programs commonly used to support the services identified. The term “**Possible Funding**” is used to identify funding sources or programs that may be part of the youth treatment, but will vary based on youth needs and county resources. Many items in the Possible Funding sections depend on each county opting-in or applying for the programs or grants.

In addition to the program activities included in the tables, all counties may have created local programs or services to meet the needs of their communities. Such initiatives vary widely around the state and are dependent on both funding availability and local priorities.

Pre-Placement Support Funding

Pre-Placement Support is provided to youth in the time period before they are admitted into an enhanced care program. This time period varies widely from 1 day to possibly multiple weeks, depending on the specific situation and case history of the youth.

Current Funding	Info	Details
Active Support Intervention Services (ASIST)	ACL 19-53 AB 403	<ul style="list-style-type: none">• Short-term aid to help youth transitioning from residential facilities that are not transitioning to STRTP.• Financial assistance for counties that opted-in only.• TA services available from CDSS to all counties.
Family Urgent Response System FURS	ACL 20-89 AB 403	<ul style="list-style-type: none">• Emergency support for youth or families needing crisis and/or de-escalation support.• Limited to 3 hours of support per incident.• State and county funds.
Possible Funding	Info	Details
MHSA Funds	ACL 20-104	<ul style="list-style-type: none">• Programing and funding determined by the county 3-year MHSA plan.• Includes Wraparound coordinated at the county level.• Providers must have a Wraparound Services contract.• Highly flexible based on local plans/priorities.

Complex Care Funding Type I	ACL 21-119 AB 153	<ul style="list-style-type: none"> • Child-specific funding for individualized services. • Must be consistent with a permanency plan. • Must submit a request form with plan and budget. • Fund allocation by county.
Foster Parent Recruitment, Retention, and Support FPRRS	ACL 20-11 AB 403	<ul style="list-style-type: none"> • Funding to recruit, retain and support foster caregivers. • Provides staffing, family finding, childcare, exceptional supports. • Must submit yearly program plans & outcomes reports. • Relies on 2011 Realignment funds.
State CSEC Program	ACL 21-142 AB 855	<ul style="list-style-type: none"> • For minors at risk of commercial sexual exploitation. • Flexible funding covers a wide array of services. • Funding provided directly to counties and through the State CSEC Program.
County General Funds/ Realignment Funds		<ul style="list-style-type: none"> • Flexible funding from local resources. • Funding determined based on availability of funds and local priorities.

Enhanced Care Program Funding

This funding provides for the core support needed by the youth. The foundation of the ECP is what enables the youth to stabilize and access the other community (“layered”) services to meet their needs. For the ECP provider, the braided budget that is created from these sources will determine the financial viability of the program.

Current Funding	Info	Details
AFDC-FC	ACL 21-76 Title IV-E	<ul style="list-style-type: none"> • Care and Supervision funding for non-Medi-Cal staff and support services. • Separate rate for STRTP and ISFC programs
Medi-Cal EPSDT SMHS		<ul style="list-style-type: none"> • Mental Health Services cover an array of MH support. • Service rates negotiated by provider contract.
Medi-Cal TFC		<ul style="list-style-type: none"> • Therapeutic Foster Care provided by foster parent in an ISFC home. • Requires trained foster parent to act as a Medi-Cal provider, supervised by FFA licensed clinical staff.
County General Funds/ Realignment Funds		<ul style="list-style-type: none"> • Flexible funding from local resources. • Funding determined based on availability of funds and local priorities.
Possible Funding	Info	Details

Innovative Model of Care Funds	ACL 22-21 AB 2944	<ul style="list-style-type: none"> • Updates AFDC-FC rate for children with unmet complex needs • 2 types of funds: Program-specific and Child-specific • Must provide program description for an innovative model or individual youth. • Counties responsible for 100% of non-FFP portion.
Complex Care Funding Type I	ACL 21-119 AB 153	<ul style="list-style-type: none"> • Child-specific funding for individualized services. • Must be consistent with a permanency plan. • Must submit a request form with plan and budget. • Recurring funding with a yearly allocation by county.
MHSA Funding		<ul style="list-style-type: none"> • Mental Health services that are covered by the county MHSA plan. • Funding differs based on county allocations and service contracts.

Layered/Community Services Funding

The provider contracted for the Enhanced Care Program may be able to also provide the layered support services, subject to the individual service structure and contracting requirements. In most cases, the ECP staff will work to provide access to these services, aligned with the youth's treatment plan, but not necessarily provide the services directly.

Current Funding	Info	Details
Regional Center	Title IV-E	<ul style="list-style-type: none"> • Services for Individuals with Developmental Disabilities. • Services aligned with an Individualized Program Plan (IPP) for each youth. • Providers must be vendorized to bill services.
Drug Medi-Cal		<ul style="list-style-type: none"> • Services to clients with Substance Use Disorders. • Providers must be Drug Medi-Cal certified in addition to their program license.
State CSEC Program	ACL 21-142 AB 855	<ul style="list-style-type: none"> • For minors at risk of commercial sexual exploitation. • Flexible funding covers a wide array of services. • Funding provided directly to counties and through the State CSEC Program.
Medi-Cal Title XIX		<ul style="list-style-type: none"> • Provides access to medical services and supports for foster youth. • Medical services provided by an approved Medi-Cal provider.
Medi-Cal Title XX		<ul style="list-style-type: none"> • Services for life skills, vocational training, transition support.

		<ul style="list-style-type: none"> • Services provided under approved contracts.
Possible Funding	Info	Details
Foster Youth Services Coordinating Program FYSCP	ACL 16-91 SB 860	<ul style="list-style-type: none"> • Program run by the County Office of Education. • Requires county application for funds. • Education support provided directly to foster youth.
MHSA FSP Funds	ACL 20-104	<ul style="list-style-type: none"> • Programing and funding determined by county 3-year MHSA plan. • Wraparound services coordinated at the county level. • Providers must have a Wraparound Services contract.
Approved Relative Caregiver Funds	ACL 15-96	<ul style="list-style-type: none"> • Flexible funds support placement with youth relatives. • Increases payment to relative caregivers to equal AFDC funds. • Funding for counties that opted-in.

System of Care Funding

Recent funding opportunities are designed to identify and fill gaps in the county system of care. These funds or programs require long-term plans rooted in stakeholder engagement and serve to address pressing needs of the community. Some of the activity involved in these initiatives may benefit the youth placed in ECPs eventually, but the funding will not be available in the short-term.

Each county must determine its ability to engage with these programs to promote the need of youth with unmet complex needs. Although the funding possibilities are extensive and flexible, a lot of coordination will be needed across the county system of care.

Possible Funding	Info	Details
Complex Care County Capacity Building Type II	ACL 21-143 AB 153	<ul style="list-style-type: none"> • County capacity building activities to expand or create new programs that fill gaps in the system of care. • Must submit self-assessment aligned with AB 2083 requirements. • County plans completed with stakeholder engagement. • Goal to address long-term capacity, not short-term need.
MHP MHSA 3-year plan		<ul style="list-style-type: none"> • County MHSA plans provide access to flexible funds aligned with Title IV-E guidelines. • Enhanced Care supports may be added to the next version of the MHSA plans.
Children's Crisis Continuum Pilot	AB 153	<ul style="list-style-type: none"> • Funding to participating counties for specialized supports to meet complex needs. • RFA details expected to be released in April, 2022.

FFPSA Part IV	<u>ACL 21-116</u> AB 153	<ul style="list-style-type: none"> • Funding to support the FFPSA Aftercare requirements in the County Wraparound Plan. • EPSDT matches federal funds. • Focus is on creating high-fidelity Wraparound programs consistent with the CA Wraparound Standards. • Providers will have to be certified. • Funding details to be provided.
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