

2019 PROGRAM SPECIFICATION  
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PROGRAM #: 512

STANDARD PROGRAM: Level 3 – Foster Home Treatment Service

TARGET POP: Children/Youth

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YEAR: 2019

UNITS: Daily

CLIENTS: 32 ADP

ALLOCATION: TBD

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UNIT DEFINITION:

Daily Rate for Treatment Services

GEOGRAPHICAL AREA TO BE SERVED:

Racine County

DAYS/HRS OF SERVICE AVAILABILITY:

traditional and non-traditional work days/hours

MINIMUM STANDARDS:

Provider must agree to comply with the following terms and conditions:

- Standard contract language
- Certification standards where applicable
- Fiscal and program reporting criteria
- Allowable Cost Policy
- Audit criteria
- Policies and procedures as defined in Racine County Human Services Department Contract Administration Manual
- Maintain adequate liability coverage
- Recognize that authorization for services is approved by Racine County Human Services Department.
- All informational materials (program descriptions, brochures, posters, etc.) must identify it as a RCHSD program through the use of a standardized RCHSD format provided by Racine County.
- The program must be identified as a RCHSD program in all public presentations and media contacts/interviews.
- Civil Rights/Affirmative Action Policies
- Fair Labor Standards Act
- Criminal and Caregiver background checks, drug screening, driver's license checks for all staff working within the project scope.

## PROGRAM DESCRIPTION:

The RCHSD Level 3 Foster Care Program shall always remain in compliance with Wis. Admin Code DCF 56. The following program description is provided as a supplement to DCF 56.

The RCHSD Level 3 Foster Care Program is a foster care service located within Racine County for youth who are considered at risk for medium to long term placement outside of their natural home and/or community. These include:

- Youth who are on a court-ordered stay of placement to one of the state juvenile correctional facilities;
- Youth who are returning to the community from a correctional placement where alternate care is a designated condition of release;
- Youth who because of persistent treatment needs have been identified for placement in an alternate care facility (CCI, Group Care, out-of-county Level 3 foster care);
- Youth returning to the community from an alternate care setting where a direct release to the natural home is precluded by significant levels of dysfunction in the family of origin;
- Youth whose family of origin is considered dysfunctional to the extent placement outside of the natural home is deemed to be in the best interest of the child;
- Youth returning to the community from either a juvenile correctional facility or child caring institution who require a transitional setting in the community to allow additional time to prepare for reintegration.

In **LEVEL 3 FOSTER CARE**, the population served is defined as: any Racine County youth who has been determined to be high risk/special needs. The GOAL of Level 3 foster care is to provide intensive, short-term (3-4 months), in-home therapy which will enable a youth to safely remain in a community setting or return to his/her family of origin. These services prevent the youth's placement in a more restrictive setting, such as a CCI or residential care. In Level 3 foster care, the Level 3 Foster Care Provider is responsible for the Treatment Service Delivery duties. RCHSD staff attend monthly staffing meetings and are actively involved in the development and monitoring of the placement plan.

In **AFTERCARE** services, the population served is defined as: any Racine County youth who has been determined to be high risk/special needs and is in a Level 2 or less restrictive living arrangement. The services prevent a youth's placement in a more restrictive setting such as a Level 3 foster home, group home or RCCCY.

### **Treatment and Aftercare Service Delivery**

Program Components: The following program components would comprise the majority of services offered to the youth and families by the treatment social worker assigned to the Level 3 foster care home.

Direct services provided to the home include, at minimum, the following components:

1. Referral/Intake;
2. Treatment Planning;
3. Individual, group and/or family mental health and/or AODA counseling;
4. Family of origin counseling;
5. Foster family/household problem solving and needs resolution meetings;
6. Twenty-four hour, seven days weekly crisis intervention services from assigned direct service and support personnel;
7. Liaison services with the Racine County Human Services Department, local school district, VTAE and other area public and/or private youth serving agencies;

Aftercare service delivery shall include all services listed above except for #6.

Referral/Intake: All referrals to the Racine County Level 3 Foster Care Network come through RCHSD. Typically, intake interviews are performed by the treatment social worker assigned to the Network home. Initial contact with the Level 3 foster parent by the treatment worker shall occur within 24 business hours of placement. The initial meeting or face-to-face contact between the Level 3 foster child, foster parent and treatment worker will occur within 5 business days of placement.

Treatment Planning: Following the initial referral and intake interview, a 30-day treatment/permanency plan is developed for each youth in placement. Participants in the development process include the RCHSD case manager, the Level 3 Foster Care Program treatment social worker, the Level 3 foster parents, the youth and his/her birth family. **[Each treatment/permanency plan is updated every 90 days, at which time authorization for continuing placement (with accompanying goals and areas of responsibility) is developed.]**

Individual Counseling: Counseling frequency will be determined by the Treatment Team at the 30-day staffing meetings. Individual counseling is provided to each of the youth placed in a Network home, either by Foster Care Treatment social workers or by outside therapists. Treatment focuses on problem areas identified by the RCHSD case manager, the youth, his/her family, the Level 3 foster parent and the Level 3 Foster Care Program treatment social worker. An individual treatment plan is developed (and reviewed) in conjunction with the 90 day treatment/permanency planning process. Treatment progress is monitored through the individual sessions; parental reports, foster parent updates, report of significant others and progress reports from school and/or other agencies involved with the youth.

Minimum Contacts: There will be a **minimum of one face-to-face contact every other week** by the Treatment social worker to each of the youth placed in a Level 3 home. This frequency of contact for all youth in Level 3 Foster Care will be adjusted by the treatment team (RCHSD case manager, case management supervisor and treatment worker), depending upon the child's needs. Contact frequency will be reviewed and revised at the 30-day staffing meetings and/or the Permanency Plan meetings. Minimum contact requirements for Aftercare youth will be determined by the individual treatment/permanency plan.

Foster Family/Household Problem Solving Meetings: The Treatment social worker will **contact the foster parents no less frequently than twice a month with at least one contact face-to-face in the Level 3 home.** The social worker may combine one of these contacts with one required youth contact. The treatment social worker assigned to each of the Network homes meets with the foster family and youth to review client progress, set short term goals, resolve problems and address concerns that may have developed during the course of "day-to-day" living. These regularly scheduled "family meetings" are intended to improve communication between the youth, his/her birth parents and the foster family.

Family of Origin Counseling: Family of origin counseling focuses on helping the youth, his/her family and significant others address those family related issues which led to the individual's removal from the natural home. Family therapy will be offered by the Treatment social worker or by an outside agency if the family has an established relationship. The frequency of family therapy will be determined by the Treatment Team and/or the treating professional. It may occur as frequently as once a week or once a month. It is expected that in many instances other family members will have issues of their own (i.e., AODA, COA, marital/relationship problems, etc.) that will be addressed during the course of family therapy as well. As discharge nears, the treatment social worker reviews the client's home adjustment as an additional indicator of their readiness to return to the natural home.

Crisis Intervention Services: Occasionally, the treatment social worker and/or other support staff will be required to respond to crisis situations that occur in the foster home and/or natural home (if the youth is on a furlough or transitioning back home). Emphasis is placed on responding to those crises that jeopardize the client's Level 3 placement return home and/or significantly impede client/family treatment progress. The treatment social worker and/or foster care supervisor is available (via 24 hour pager) to the Level 3 foster parents, youth and their families during evenings, weekends and holidays.

Liaison Services: The treatment social worker is responsible for maintaining contact with the Department on a regular basis and the RCHSD case manager promptly if any significant events relating to a youth, his/her placement and/or his/her natural family (e.g., emergency room treatment or hospitalization, alcohol or other drug use, police involvement, runaway, severe depression/suicide ideation, etc.). Additionally, the treatment social worker maintains regular contact with school officials, employers, treatment providers and other individuals/agencies with whom a youth and his/her family interacts to check on school/work attendance, participation in treatment, etc. and to consult with them about problems or concerns. **All youth** in placement are **staffed quarterly** with the treatment social worker, Provider's Level 3 Foster Care supervisor, the RCHSD case manager, the Level 3 foster parents and RCHSD Foster Care Program Supervisor. The treatment social worker provides written monthly reports to the case manager on each client.

Permanency Planning: Treatment social worker is expected to actively participate in the Permanency Planning process, work cooperatively with the birth parents and foster parents and act in partnership with the Department and other Provider agencies to reunite the youth with his/her family of origin.

Staff Qualifications: The treatment social worker will possess either a master's degree in a social work-related field or a bachelor's degree and a minimum of two years post-degree experience in a social work-related field and at least 50% of the treatment staff will be certified under ch. 457, Stats. and ch. MPSW 3.

In addition to Provider's internal record keeping, Provider will maintain records reflecting length of time for first treatment visit, date of first treatment plan, demographics of children and families served and results of Client Satisfaction surveys.

### EVALUATION OUTCOMES:

#### Treatment Service Delivery:

1. 100% of Level 3 foster care parents will be contacted by a treatment worker within 24 business hours of placement.
2. 100% of Level 3 youth and foster care parents will have a face-to-face visit within 5 business days of placement.
3. 100% of youth will have a designated treatment plan within 30 days of placement.
4. 100% of scheduled staffings shall be attended by Provider.
5. 60% of foster parents will complete a Client Satisfaction survey at the conclusion of each Level 3 placement.
6. 85% of completed satisfaction surveys will indicate the foster parent feels that the treatment worker responded to his/her needs in a timely, effective fashion.
7. 75% of youth in Level 3 care shall demonstrate improvement in overall behavior per a standardized measurement tool.

Quarterly Evaluation Outcome Reports reflecting the aforementioned evaluation criteria must be provided no later than 4/30/19, 7/31/19 and 10/31/19.

An Evaluation Outcome Report must be submitted to Racine County HSD Contract Compliance Monitor by 2/1/20.