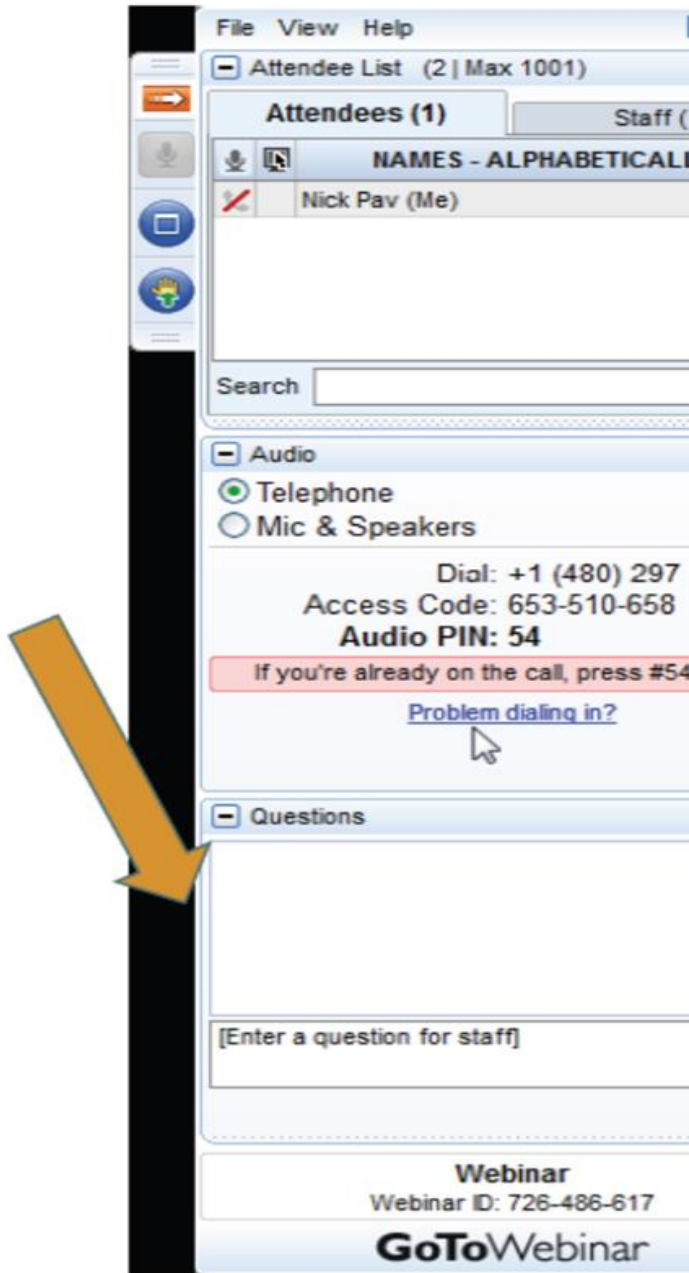


WEBINAR | JANUARY 2025

The Critical Role of STRTPs: Services, Challenges, and Pathways Forward

ALLIANCE
for **CHILDREN'S**
RIGHTS





Logistics

- Webinar resources, including recording and supplemental materials, will be posted at <https://allianceforchildrensrights.org/resources/>
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California
Alliance

Empowering lives. Enriching futures.

The Critical Role of STRTPs: Services, Challenges, and Pathways Forward

cacfs.org

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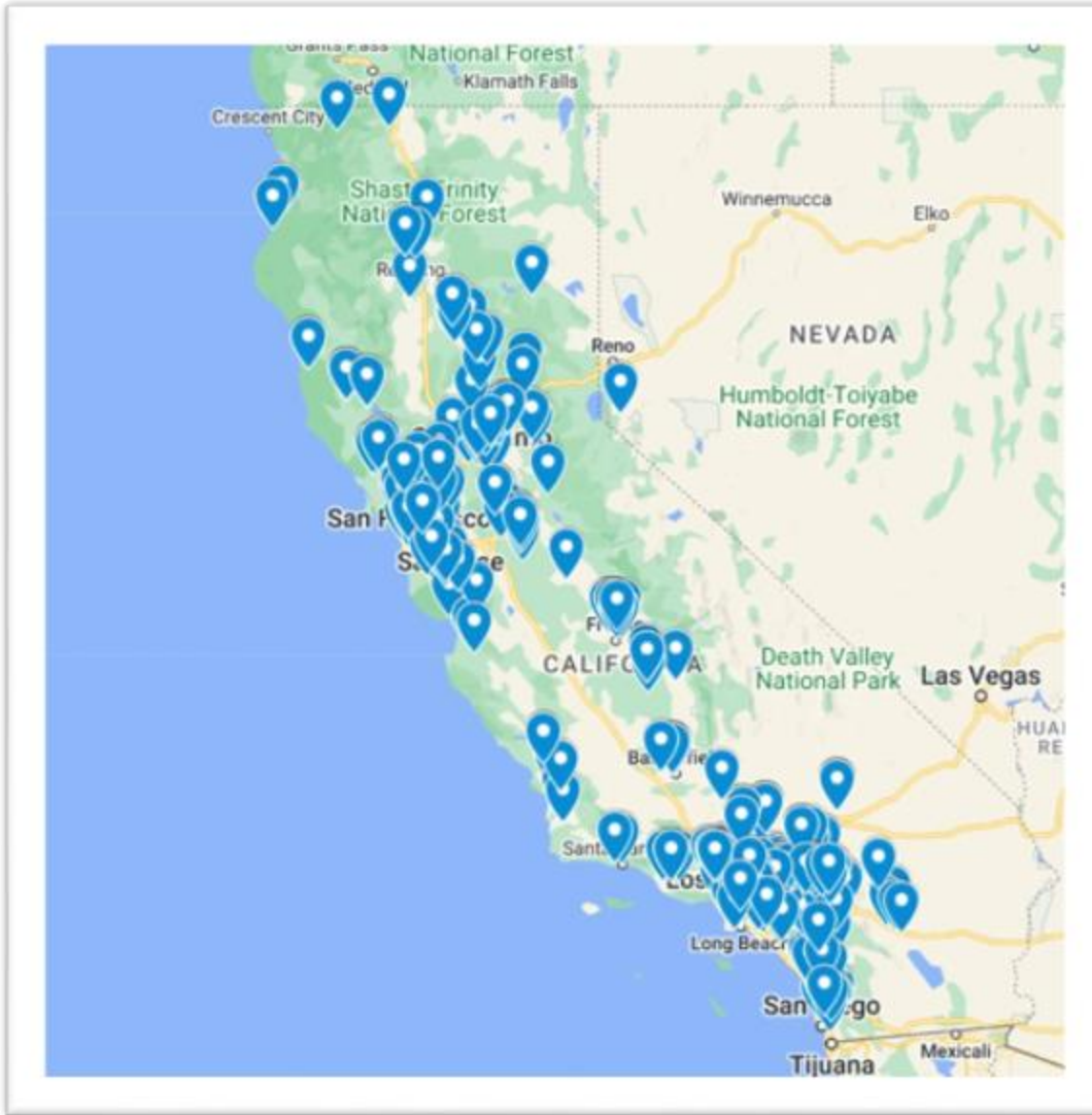
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Policy Advocate,
Transition-Aged
Youth



Annie Thomas
Policy Advocate,
Juvenile Justice

About Us

- ❖ The California Alliance is the collective voice for over [165 nationally accredited non-profit community-based organizations](#) dedicated to serving children, youth, and families.
- ❖ Our member organizations provide behavioral health, foster care, juvenile justice, education, and prevention services across California's 58 counties.
- ❖ Our primary objective is to ensure California's children, youth, and families facing vulnerable circumstances thrive in their communities.
- ❖ To achieve this, we provide legislative and regulatory advocacy to the Governor, the Legislature, and a wide range of state departments.
- ❖ From policy reform to building stronger networks, our collective efforts are shaping a more inclusive and empowered future for all children, youth, and families.



Key Member Benefits

✓ Advocacy & Representation

- Our experienced policy experts advocate on behalf of our members at the state and local levels, impacting legislation and regulations that shape the child and family services landscape

✓ Access to Information

- Receive critical updates, policy insights, and research reports that keep you informed about the latest developments in your field.

✓ Training & Professional Development

- Through our Catalyst Center, members receive discounted access to a wide range of training programs, webinars, and workshops that build capacity and enhance service delivery.

✓ Networking & Collaboration

- Join committees, attend events, and participate in exclusive learning communities to connect with other leaders, share best practices, and collaborate on solutions.



Who Are Our Members?



St. Anne's Family Services

Intensive STRTP for pregnant and parenting youth who are in foster care or have been impacted by the juvenile justice system.



Casa Pacifica

Intensive STRTP for female, transgender, and nonbinary youth ages 12-17 with needs too acute for a foster home or youth care program and seeking placement in a primarily female setting.



Greater New Beginnings

Intensive STRTP for male youth between the ages of 12-17 who are at-risk and who have been placed by referral from the Juvenile Court.



Mary's Path

Intensive STRTP for pregnant and parenting young moms, the majority of whom are victims of sex trafficking.



What are STRTPs?

What is a STRTP?

- ❖ Many of the members within our Residential Services Committee, which consists of private non-profit organizations, provide residential care to their communities through Short-Term Residential Therapeutic Programs (STRTPs).
- ❖ A STRTP is a residential facility that serves the highest-need youth and non-minor dependents with an integrated high-quality, short-term, 24-hour program of specialized and intensive services:
 - ❖ Care and Supervision
 - ❖ Child Welfare Services
 - ❖ Mental Health Treatment
- ❖ All services are designed to stabilize, support, and transition children to a lower level of care on a case-by-case basis, consistent with the child's needs and case plan.
- ❖ A child is eligible for an STRTP if they meet the medical necessity criteria for:
 - ❖ Medi-Cal Specialty Mental Health Services,
 - ❖ are seriously emotionally disturbed, or
 - ❖ exhibit behavioral or treatment needs that can only be met by a STRTP.

Who Do STRTPs Serve?

- ❖ A STRTP may have a specialized program to serve:
 - ❖ a juvenile sex offender/sexually reactive youth,
 - ❖ a child who is affiliated with or impacted by a gang,
 - ❖ a commercially exploited child, and
 - ❖ a private, voluntary placement if the youth exhibits status-offender behavior, uncontrollable behavior, or if short-term intervention is needed to transition the child back into the home.
- ❖ Youth with unmet complex needs face many challenges:
 - ❖ There has been a significant reduction in available STRTP beds
 - ❖ There are challenges in finding placements for youth with the most intense behaviors
 - ❖ There is not as high an increase in Resource Family Homes as anticipated by CDSS
- ❖ Without STRTPs, these youth risk being institutionalized in long-term group care because of their risk of causing harm to themselves or others.
- ❖ STRTPs give children the support, treatment, and tools they need so they can once again thrive in a family home.

Services Provided to Youth

- ❖ STRTPs provide 24/7 care, crisis intervention, and support.
- ❖ In statute, County Child Welfare Departments are a designated placement agency that finds homes or other places for young people who need temporary (ST RTP) or permanent care.
- ❖ As part of their services, our members provide a wide array of services to youth, including:
 - ❖ Therapeutic rehabilitation and recreation programs, such as Anger Management/Aggression Replacement Therapy (ART), motivational interviewing, social skills & self-regulating training, transitional housing, young fathers' curriculum, neurofeedback, creative healing arts
 - ❖ Specialty Mental Health Services (SMHS) such as individual, group, and/or family therapy and counseling
 - ❖ Substance use treatment/life recovery
 - ❖ Education evaluation and school placement
 - ❖ Supervised visits with supportive family members
 - ❖ Daycare/Parenting Education in Jails with TAY (18–25-year-olds)
 - ❖ Vocational Training/Apprenticeships (Masonry, Welding, Landscaping, Culinary/Baking, Digital Printing, Warehousing, Construction, & More)

Group Homes vs. STRTPs

Group Homes

- Historically designed to provide **basic care and supervision** for youth in foster care or juvenile probation, with a focus on a stable learning environment rather than intensive treatment or therapeutic services.
- Licensed by CDSS for general residential care without a mental health component.
- Primarily offer supervision, basic care, and housing with limited therapeutic services, if any.
- Often used as long-term placements with no defined duration for the youth's stay.
- Largely phased out and replaced by STRTPs to ensure youth receive specialized, intensive care with the goal of permanency.
- Staff are not typically required to have advanced mental health training.

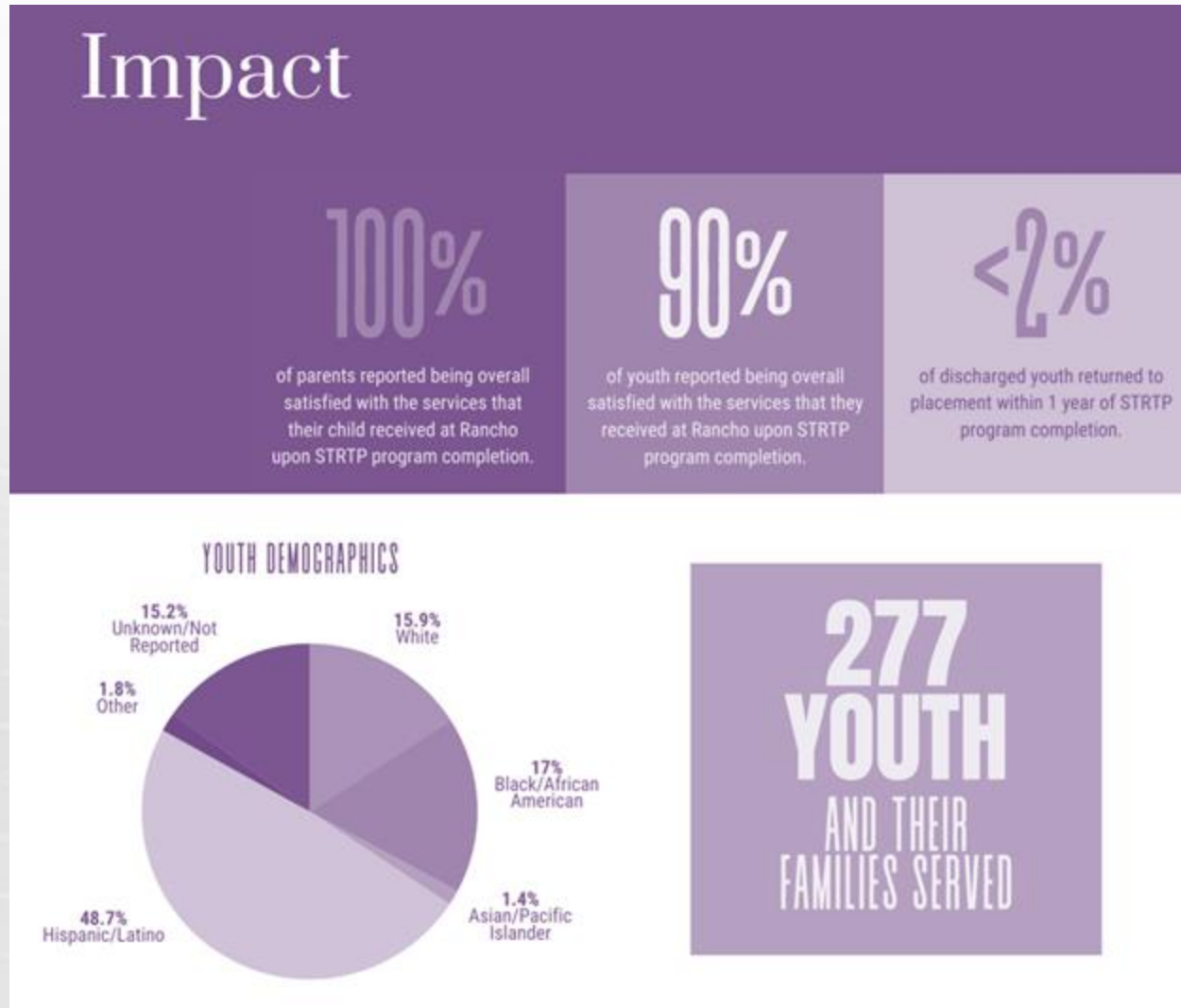
STRTPs

- Created under California's Continuum of Care Reform (CCR) to replace group homes as part of a shift toward providing **short-term, trauma-informed, intensive, and therapeutic care** for youth with complex behavioral health needs in need of crisis intervention.
- Licensed by CDSS and require mental health certification from the counties in which they operate. They also must comply with stricter regulations, including delivering evidence-based therapeutic services.
- Provide integrated mental health treatment and a wide array of services.
- Designed for short-term intervention to stabilize and transition them to a family-based setting or lower level of care.
- Staff must have specific training in trauma-informed care and require licensed clinicians and mental health professionals on staff.

Value of STRTPs to Child Welfare System

- ❖ **Critical Option for Non-Family Placements:** STRTPs provide essential care for youth who cannot be placed in traditional family settings due to their complex emotional, behavioral, or mental health needs. They ensure these children still receive the care they need in a structured environment when family-based care isn't an option.
- ❖ **Comprehensive Therapeutic Services:** STRTPs offer an integrated program of specialized, trauma-informed care that includes mental health services, crisis intervention, independent living skills training, and family engagement, helping youth achieve stability and developmental progress.
- ❖ **Bridge for Youth in the Continuum of Care:** As a critical component of the child welfare system, STRTPs fill a gap by addressing the needs of youth who require more intensive support than traditional foster care can provide, ensuring a continuum of care for all children in the system
- ❖ Not all kids can be placed in a family setting, STRTPs provide tools to youth to help bring them to a lower tier of care and help support their integration into a family setting.

Member Spotlight – Rancho San Antonio



- ❖ For decades, Rancho was licensed as a Group Home for disenfranchised youth and, in 2018, transitioned from a licensed Group Home to STRTP.
- ❖ Legislative changes resulting from CCR and FFPSA expedited the diversification of programming that Rancho proudly presents today.
- ❖ Rancho's trauma-informed STRTPs serve court-referred male youth aged 13-18, including nonminor dependents, to address the life patterns that led to their placement outside of the home.
- ❖ All residents receive Specialty Mental Health Services including individual, family, and group therapy, substance abuse treatment, and up to one year of Aftercare Services.

Rancho San Antonio

“Beyond just protecting these programs, California needs to invest in every young person who needs the support of a resource family or organization that provides a higher level of care... I don’t know what would have happened to me if I hadn’t found Rancho San Antonio.”

- Manny P., Former Youth at RSA



Mountain Valley Academy

“MVA has taught me more than just academics, it has taught me kindness and perseverance through example. I’m positive that I speak for everyone that the welcoming nature of the school is felt by us all.”

- Valedictorian Elena C., Class of 2023



Progress Ranch

“This is intense, minute-by-minute work we do here to get them to a family. Sometimes we are saving their life.”

- Alyssum Maguire, Executive Director



Trinity Youth Services

“Trinity staff were amazing. They would try to relate to us and make us feel like we weren’t criminals. They also treated us with respect.”

- Manuel M., Former Youth at TYS



Vista Del Mar Child and Family Services

“I would not have been prepared to raise a child who experienced trauma were it not for the education I received from the amazing staff here.”

- Susan C., and her newly adopted son Joshua, Former Family Served at VDM



Sycamores

“Without Sycamores, I wouldn’t have had the support system to graduate from Cal Poly Pomona as a former foster youth and a first-generation college student.”

- Martine J., Former Youth at Sycamores



Overview of Issues Impacting STRTPs

Staffing Challenges

❖ Recruiting and Retaining Staff

- ❖ California law requires background checks for all employees who've lived outside the state in the past five years. However, members report delays of 6-9 months for background check clearances given state-by-state processing times. As a result, community-based organizations (CBOs) struggle to hire qualified staff, reducing program capacity and leaving youth without the care and support.
 - ❖ CA Alliance is sponsoring AB 276 (Bennett) to address this concern.
- ❖ STRTPs struggle to attract and retain qualified staff, such as therapists, social workers, and direct care staff, due to low wages and high stress.
- ❖ Addressing paperwork burnout for providers, especially under behavioral health contracts with counties & Medi-Cal.

❖ Providing Care to Children & Youth with High Needs

- ❖ Many youth in STRTPs require intensive mental health services, which can be difficult to provide consistently due to workforce shortages or funding constraints.
- ❖ Staff require extensive training to address the unique needs of foster youth, including trauma-informed care, behavioral interventions, and crisis management.
- ❖ STRTPs must prevent youth from being exploited or contacted by predators, often requiring increased training and vigilant oversight by staff, which could be emotionally draining and lead to burnout.

Operational Difficulties

❖ Regulatory Burden

- ❖ Meeting California's stringent licensing and regulatory requirements, set by the California Department of Social Services, can be resource-intensive and unfortunately rates may not be sufficient to cover related costs.
- ❖ Frequent audits and complex paperwork requirements add administrative strain to already overburdened organizations, especially considering Medi-Cal billing requirements for behavioral health services.
- ❖ Ensuring compliance with trauma-informed standards and quality-of-care requirements.

❖ Inadequate Funding

- ❖ Current rates often do not adequately cover the true cost of care, including staffing, training, and therapeutic services, especially for youth with complex needs such as Commercially Sexually Exploited Children (CSEC) or those with severe behavioral or mental health challenges.
- ❖ Rising costs for staff, facilities, and licensing requirements strain STRTP budgets, while reimbursement rates have not kept up with inflation or increased service demands.
- ❖ The Tiered Rate Structure, set to take effect in 2027, has placed a greater emphasis on family-based care, sometimes reducing the focus and funding for STRTPs, even though they remain essential for youth with the most intensive needs.

Tiered Rate Structure

Overview of CDSS Tiered Rate Structure (TRS)

❖ Background

- ❖ The Permanent Rate Structure proposal was introduced on January 10, 2024, as part of the 2024-25 Governor's Budget. In June of 2024, the Permanent Rate Structure passed as a part of Assembly Bill 161, the Health and Human Services Trailer Bill Language (TBL). The Foster Care Permanent Rate Structure payments will begin on July 1, 2027, or once automation is complete, whichever is later.

❖ Goals of the New Permanent Tiered Rate Structure

- ❖ California is restructuring rates so that they are based on the individual needs of each child, not the placement type.
- ❖ California's permanent rate structure will provide youth in family settings the same level of funding to support care/supervision, strength building, and immediate needs at the child's assessed level of need, regardless of the placement type.
- ❖ Support family reunification, when possible, to help keep families together, and when that is not possible, find a safe home environment for the child

How are Rates Developed?

- ❖ **Use of the CANS as a Rate-Setting Tool:** The Child and Adolescents Needs and Strengths (CANS) Assessment will be used as a rate-setting tool under the new rate structure.
 - Higher tiers correspond to youth with more intensive needs (e.g., severe mental health or behavioral challenges), requiring higher levels of care and supervision.
 - Funding Allocation: The rate for each tier is designed to reflect the cost of providing the necessary services and supports for youth at that level.
- ❖ While this process would help youth with higher needs be eligible for more funding, **there are numerous concerns about this approach including:**
 - Accountability on timely completion of CANS assessments and tier assignments: Currently, providers are waiting several months, and in some cases up to a year, for a level of care (LOC) matrix to be completed by the placing county for a particular youth. Thus, there should be provisions on how to ensure timeliness as it pertains to the CANS, to ensure that similar issues do not continue.
 - Reassessment of the CANS: The TRS should add to the list of possible reasons for reassessment on the CANS to ensure that higher acuity youth are getting the care they need. An increase in behavioral of concern to the caregiver and/or provider, onset of suicidal ideation, self-harm, high risk behavioral and/or physical aggression, and school suspension or expulsion should be included as reasons for reassessing a youth's CANS prior to the 6 months' timeline. There should also be timelines and intervention regarding responding to requests for reassessments.

Permanent Foster Care Tiered Rate Structure Framework

Tier 1 (74% of children and youth)

(Latent Classes 1 and 2 for the 0-5-year-olds and Latent Classes 1, 2, and 3 for the 6+ year olds)

Care and Supervision* Paid to the caregiver	\$1,788
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Strength Building and Maintenance Child and Family work with a Financial Management Coordinator	\$500
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Immediate Needs	NA
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FFA Admin (for youth placed in an FFA)* <i>Recruitment, retention, approval, training, etc.</i>	\$1,610
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Tier 2 (19% of children and youth)

(Latent Class 3 for the 0 – 5-year-olds and Latent Classes 4 and 5 for the 6+ year olds)

Care and Supervision* Paid to the caregiver	\$3,490
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Strength Building and Maintenance Child and Family work with a Financial Management Coordinator	\$700
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Immediate Needs County or contracted provider coordinate services	\$1,000
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FFA Admin (for youth placed in an FFA)* <i>Recruitment, retention, approval, training, etc.</i>	\$2,634
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Tier 3 (ages 0-5) (4.5% of children and youth)

(Latent Class 4 for 0 – 5-year-olds)

Care and Supervision* Paid to the caregiver	\$6,296
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Strength Building and Maintenance Child and Family work with a Financial Management Coordinator	\$900
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Immediate Needs County or contracted provider coordinate services	\$1,500
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FFA Admin (for youth placed in an FFA)* <i>Recruitment, retention, approval, training, etc.</i>	\$2,634
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Tier 3+ (ages 6+) (2.5% of children and youth)

(Latent Class 6 and 6a for 6+ year olds)

Care and Supervision* Paid to the caregiver	\$6,296
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Strength Building and Maintenance Child and Family work with a Financial Management Coordinator	\$900
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Immediate Needs County or contracted provider coordinate services	\$4,100
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FFA/STRTP Admin (for youth placed in an FFA or an STRTP)* <i>Recruitment, retention, approval, training, etc.</i>	\$7,213
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*Components of the rate that will receive a California Necessities Index

How the New Tiered Rate Structure Impacts STRTPs

❖ Concerns with Fund Distributions

- Currently, STRTPs receive \$16,328 for children placed within the facility. This rate is increased annually by the CNI, to ensure that the rate has a cost-of-living adjustment.
- However, under the new tiered rate structure, STRTPs are only guaranteed \$13,509 as a per child rate. Additionally, not all components of this new rate structure will be increased by the CNI, only the STRTP agency administrative rate of \$7,213 will include the annual COLA.
- Only if an STRTP becomes an immediate needs provider, it could also receive an additional \$4,100 for a total of \$17,609, but this is not guaranteed. The state has not yet released the application process on becoming an Immediate needs providers or outlined the specific requirements for the program.
- Additionally, there are concerns that even the highest tiers may not adequately cover the true costs of caring for youth with the most intensive needs, particularly in STRTPs, where overhead and staffing costs are significant.

- ❖ **Specialized populations served by STRTPs not included in TRS such as probation youth:** While the Tiered Rate Structure does include youth incarceration as a condition requiring a new or updated CANS, it still does not address potential discrepancies between court orders made for the residential treatment of youth and the rate tier identified by a CANS completed with a justice-involved youth.

The Immediate Needs Dollars

Establishing an Immediate Needs Program

1. The CDSS will establish Model Standards, grounded in the ICPM, the CFT, the CANS, and the research, and modeled after the Wraparound Standards, for each tier and will provide contracts requirements.



2. County agencies will submit a county plan demonstrating full compliance with the Model Standards for each tier. Counties also have the option to develop a regional plan in partnership with counties in their region. Contracted providers of the county also must provide documentation demonstrating full compliance.



3. The CDSS will review and approve the county plans for each tier.



4. The county will then implement their network utilizing FFAs, STRTPs, MHPs, and/or CBOs for the delivery of services.



Advocacy Priorities for Tiered Rate Structure

❖ Ensure rates adequately pay for the cost of providing services to children and youth with high needs, including:

- Recruiting and Retaining Committed and Well-Supported Staff
 - Due to the high acuity of needs in youth at Tier 3+, maintaining appropriate staffing levels often requires hiring additional personnel to manage behavioural aggression and physical altercations.
 - We ask that staff ratios be adjusted to 1:2 vs 1:4 in the daytime and 1:6 in the evening and more funding be provided for staff training.
- Maintaining Safe Spaces for Youth that Meet Licensing Standards
 - Pursuant to the ILS, STRTPs must include common rooms, including a living room, dining room, a recreation/activity room, and at least one room for relaxation and visitation with friends and family. None of these requirements appear to be considered in the tiered rate structure, although there is wide-spread agreement that there will be a need for facility-based interventions for youth at Tier 3+.
- Covering Transportation Costs
 - We ask that CDSS incorporate funding adjustments in its cost analysis methodology for Tier 3+ STRTP rates that account for rising transportation-related costs, including vehicle insurance, gas maintenance, staff time, and unfunded mandates such as transportation to a youth's school of origin, all of which are crucial to fulfilling licensing standards and ensuring continuity of care and education.
- Maintaining Technology and Information Systems
 - The tiered rate structure overlooks adequate funding for essential IT staff, systems, office supplies, and other support technologies, all of which are increasingly vital for program compliance and quality service delivery.

Presumptive Transfer

Background: Presumptive Transfer

❖ Background:

- ❖ "Presumptive Transfer"- Law (AB 1299) dealing with out of county Medi-Cal effective 7/1/17
- ❖ Automatically transfers responsibility to arrange and provide for Specialty Mental Health Services (SMHS), including funding, from county of original jurisdiction to county of residence
- ❖ Receiving County Behavioral Health Department must accept transfer
- ❖ If a youth's Medi-Cal is presumptively transferred to the county of residence, the agency must have a Behavioral Health contract with the Mental Health Plan (MHP) in the county of residence to receive funding for services
- ❖ Intention – improve access to services for foster youth in out of county placements

Challenges with Presumptive Transfer

- ❖ High receiving counties found their mental health budgets stretched
- ❖ Counties who make few placements themselves were unclear about why they'd need to provide BH contracts for the STRTPs located in their county
- ❖ Many counties found themselves overwhelmed by influx of youth from out of county
- ❖ Some providers experienced late payments or no payments at all for services provided

Updates to Presumptive Transfer – AB 1051

- ❖ **A foster child's county of original jurisdiction shall retain responsibility** to arrange and provide specialty mental health services if the foster child is placed out of the county of original jurisdiction in a community treatment facility, group home, or short-term residential therapeutic program, or is admitted to a children's crisis residential program ...
- ❖ Effective date: July 1, 2024



Who is Impacted by AB 1051?

❖ AB 1051 Applies To:

- Foster/Probation youth placed in Short-term residential therapeutic programs
- Foster/Probation youth placed in Community treatment facilities
- Foster/Probation youth placed in Group homes
- Foster/Probation youth placed in Children's crisis residential programs



What are we seeing now?

❖ **AB 1051 has been very challenging to implement. Ongoing issues in the field include:**

- Questions from counties about who qualifies for an exception under the law
- County to county agreements - these are not in place and providers are stuck without contracts or payment for months
- Many counties are not using the CalMHSA portal for payments
- Very difficult for our providers to get a contract if there isn't one in place
- Suddenly, some providers are having to negotiate multiple contracts with the placing counties instead of just one prior to AB 1051
- The worst possible outcomes: children needing to be placed in a STRTP but cannot because there isn't an agreement with the county or a provider contract

Use of Cameras Policy & Provider Information Notice (PIN)

Background on Cameras Policy

- ❖ Prior to 2023, CDSS had not issued guidance regarding cameras in children's residential facilities, other than allowing agencies to submit a waiver form to allow for cameras.
- ❖ In 2023, CDSS released a Draft Policy that would have banned cameras in STRTPs, and suspended the waiver process, with worries that the use of cameras in residential settings was not trauma-informed. However, this draft policy would have posed several issues, including:
 - Youth safety: Video cameras in the common areas provide an increased sense of security because the youth know that if one of their personal items is missing, or if there is an altercation between youth, providers can review the video footage to see what happened, and resolve the situation, and retrieve any items if taken. This provides a sense of protection for the youth, especially those with higher acuity.
 - Incident Investigation: Footage review is integrated into facility emergency intervention plan post-incident debriefing practices and as a critical training resource for staff to improve their ability to provide intensive treatment services. Review of footage is often utilized by county, state and law enforcement agencies to assist in resolving investigations, when appropriate. As such, video cameras are critical tool to protect the safety of clients and staff at licensed congregate care facilities and a preventative tool to mitigate and prevent potential allegations that may arise in a 24-hour setting.
 - Not in alignment with federal regulations: Video monitoring is required for specific populations federally, including immigrant youth, or Unaccompanied Children (UC). Some STRTPs run programs for UC but are required to meet minimum federal safety and security related requirements for their facilities put forth by the Office of Refugee Resettlement (ORR) which includes video monitoring in common and living areas. Our providers who have standing contracts to serve UC have been required to add additional cameras and window security by ORR previously to be in accordance with their policies.

The Use of Cameras in Residential Care

- ❖ The Alliance, along with other partners, worked extensively with CDSS Community Care Licensing to inform a more robust, trauma-informed policy regarding the use of cameras in Children's Residential Settings.
 - The Alliance recommendations included allowing cameras with specific provisions such as:
 - Cameras being located in common areas inside the unit in full view to the extent possible with the audio function disabled and not in private areas such as bathrooms or bedrooms.
 - Youth that are admitted receiving an agreement form that includes an explanation of the use and scope of the cameras.
 - A public notice is posted in the STRTP facility entrance and in areas that are under surveillance.
 - Any remote viewing of clients will be limited to management staff and access will be encrypted, and password protected in order to protect the privacy of youth.
- ❖ CDSS updated and finalized their guidance in 2024, which included our recommendations.
- ❖ CDSS issued a separate best practices PIN on the use of video cameras in county and licensed Foster Family Agency resource family homes.

Take Action

Take Action in Advocacy

❖ Support AB 276 (Bennett)!

- THE PROBLEM: California law requires background checks for all employees who've lived outside the state in the past five years. However, members report delays of 6-9 months for background check clearances given state-by-state processing times. As a result, community-based organizations (CBOs) struggle to hire qualified staff, reducing program capacity and leaving youth without the care and support they need.
- PROPOSED SOLUTION: Our sponsored bill will allow conditional employment for candidates, while out-of-state clearances are pending, and ensure federal funding remains intact

❖ Make Your Voice Heard!

- Join CDSS Stakeholder Calls and Share & Advocate to Ensure STRTPs Remain Funded
- [Visit CDSS website to learn more about the CANS Assessment and Tiered Rate Structure](#)
- Visit the [CA Alliance Webpage](#) to Learn More About Our Sponsored Bills & 2025 Advocacy Priorities (Advocacy Resources Coming Soon)

Resources

Do you have any questions?

cacfs.org

2201 K St, Sacramento, CA 95816

- CDSS Tiered Rate Structure - [CDSS Foster Care Rate Reform Proposal](#)
- AB 1051 - [Bill Text - AB-1051 Medi-Cal: specialty mental health services: foster children.](#)
- Video Cameras in Children's Residential Congregate Care Facilities - [PIN24-09-CRP.pdf](#)
- Requirements and Best Practices for the Use of Video Cameras in County and Licensed Foster Family Agencies Approved Resource Family Homes - [PIN24-08-CRP_ACL.pdf](#)

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