Therapeutic Foster Care Flowchart

This flow chart may be used by department staff, MCOs, contractors and others to understand and implement steps involved in **Therapeutic Foster Care (TFC)**.

Careful consideration should be made to identify the eligible youth, the timing of placement and intended outcomes. Guidance on identifying youth for this program can be found in the TFC Toolkit. Steps are as follows:

DECISION POINT

Social Work Case Manager (SWCM) staffs a potential TFC case with a Social Work Supervisor (SWS) to ensure the youth and family meets placement criteria.

If approved, **SWCM** completes the <u>Preplacement Screening for Therapeutic Foster Care</u> Form. **SWS** forwards form to the **Service Area Manager** (**SAM**) or designee for approval. **SAM** sends signed form to the **SWCM** for the case file.

SWCM verbally receives parent or identified family confirmation to participate.

SWCM completes <u>Family Foster Care Referral Form</u> and sends to Recruitment, Retention, Training, and Support (RRTS) provider with <u>Preplacement Screening for TFC form</u> at <u>foster-adopt@fouroaks.org</u>. **SWCM** copies **TFC Case Management** at <u>abowlin@dhs.state.ia.us</u> to inform a referral is being made to RRTS.

DECISION POINT

RRTS TFC Specialist and **SWCM** consider available TFC resource home options and select the home that best meets the treatment needs of the youth and identified family.

RRTS activates TFC Match Search Protocol to identify and match the youth and TFC resource home. Communication between RRTS and **SWCM** follows TFC Match Search Protocol.

SWCM emails **TFC Case Manager** of match, and **TFC Case Manager** schedules Person-Centered Service Planning (PCSP) Meeting.

Upon confirmation of match, **RRTS TFC Specialist** initiates reserve bed payment of \$50 per day for a max of 30 days. A max of two reserved bed payments are permitted.

TFC Case Manager contacts Foundation 2 at (319) 362-2174 to engage crisis supports, discuss crisis plan, and coordinate services as appropriate.

RRTS TFC Specialist will contact SWCM to coordinate preplacement visitation with TFC resource home and information sharing, as appropriate. **SWCM** notifies the education point of contact at the school district or AEA responsible for the youth's education, to ensure educational stability in accordance with Employee Manual Chapter 18-C(2)).

TFC Case Manager makes referrals as identified in PCSP, such as health counseling, Behavioral Health Intervention Services (BHIS), mental health and disability services, medication prescriber, short-term crisis service and other medical referrals.

RRTS Support Caseworker identifies and assists to schedule TFC Resource Parent training to meet the specific needs of the youth.

DECISION POINT

TFC Case Manager convenes a PCSP Meeting with SWCM, parent or identified family, youth, TFC Resource Parent, RRTS Support Caseworker, Foundation 2 and others identified, to develop the PCSP, including a crisis plan. All required releases of information will be completed.

The Inter-disciplinary Team Member's Agreement and the Service Plan must be signed by all parties.

DECISION POINT

SWCM and **TFC Case Manager** coordinate transition and transportation to the TFC resource home, at a date identified in the PCSP Meeting and in accordance with the court order.

The **SWCM** requests a motion for court ordered placement to family foster care, if not already ordered.

SWCM completes FACS system entries needed for foster care placement (\$150 per day).

SWCM schedules meeting with the TFC Resource Parent and youth within five business days of placement. The **TFC Case Manager** and youth's parent or identified family should also be present, if possible.

The **SWCM** will:

- Engage TFC Resource Parent and parent or identified family in establishing communication and relationship-building through role clarification to recognize the important role each person has in life of the youth.
- Answer questions the youth or others present have.

The **TFC Case Manager** will:

- Lead brief review of services and expectations, including but not limited to the following:
 - Family interaction
 - Education and school matters
 - Respite care
 - Crisis services
 - Therapeutic and psychiatric services
- Answer questions the youth or others present have.

TFC Case Manager

convenes the PCSP Team, typically every 45 days after placement. These meetings are used to monitor treatment progress and address unmet needs. This does not replace home visits of the **SWCM** or **TFC Case Manager**.

When the PCSP Team identifies sufficient progress toward established goals has been made in the TFC resource home, the **SWCM** begins discharge planning. Transition and discharge activities are initiated by the **SWCM** and **TFC Case Manager** with support from the PCSP Team including:

- Connecting the parent or identified family to community-based services and resources.
- ▶ Ensuring waiver enrollment is complete. Transition planning should include a timeline.

DECISION POINT

The **SWCM** requests a motion for court ordered return to parent or identified family. The **SWCM** coordinates transportation to the parent or identified family home in accordance with the court order.

The **SWCM** completes FACS system entries needed to end placement and \$150 per day payment. Reserved bed payment of \$50 resumes until the next youth enters.

Throughout the 90 days following the youth's exit from the TFC resource home, the TFC Resource Parent and other team members remain connected to support the family's transition. The PCSP may be adapted, as needed and PCSP Meetings continue.

