

State of California—Health and Human Services Agency



MICHELLE BAASS  
DIRECTOR



GAVIN NEWSOM  
GOVERNOR



KIM JOHNSON  
DIRECTOR

September 30, 2021

ALL COUNTY LETTER NO. 21-116  
BEHAVIORAL HEALTH (BH) INFORMATION NOTICE NO. 21-061

TO: ALL COUNTY WELFARE DIRECTORS  
ALL CHIEF PROBATION OFFICERS  
ALL COUNTY BEHAVIORAL HEALTH PROGRAM DIRECTORS  
ALL SHORT-TERM RESIDENTIAL THERAPEUTIC PROGRAM PROVIDERS  
ALL FOSTER FAMILY AGENCIES  
ALL WRAPAROUND PROVIDERS  
ALL BEHAVIORAL HEALTH PROVIDERS

CC: COUNTY WELFARE DIRECTORS ASSOCIATION OF CALIFORNIA  
COUNTY BEHAVIORAL HEALTH DIRECTORS ASSOCIATION OF CALIFORNIA  
CALIFORNIA COUNCIL OF COMMUNITY BEHAVIORAL HEALTH AGENCIES  
CHIEF PROBATION OFFICERS OF CALIFORNIA  
CALIFORNIA ALLIANCE OF CHILD AND FAMILY SERVICES

SUBJECT: FFPSA PART IV AFTERCARE REQUIREMENTS

REFERENCE: [Bipartisan Budget Act of 2018](#); Section 672(k)(4)(F) of Title 42 of the United States Code; Assembly Bill [\(AB\) 403](#); [AB 153](#); Welfare and Institutions (WIC) Code sections [4096.6](#) and [18250](#); All County Information Notice [\(ACIN\) I-52-15](#); All County Letter [\(ACL\) 08-66](#)

**PURPOSE**

This California Department of Social Services (CDSS) All County Letter (ACL) and Department of Health Care Services (DHCS) Behavioral Health Information Notice (BHIN) informs county child welfare agencies, juvenile probation departments, county mental health plans, and providers, including Short Term Residential

Therapeutic Program (STRTPs) and those delivering Wraparound services, about California's implementation of the Family First Prevention Services Act (FFPSA) Part IV requirements for family-based aftercare support. The FFPSA was signed into federal law as part of the [Bipartisan Budget Act of 2018](#) on February 9, 2018.

## **OVERVIEW**

Effective October 1, 2021, the FFPSA reforms the federal child welfare financing under Title IV-E of the Social Security Act, to authorize the use of federal Title IV-E funding for specified services to families whose children are at risk of entering foster care and to limit reliance on congregate care for children in foster care. California's FFPSA implementation plan has impacts on the Medi-Cal program, some aspects of which are described below. Federal Financial Participation (FFP) may be available under the Medi-Cal program for family-based aftercare services if the service is a medically necessary specialty mental health service (SMHS), any necessary federal approvals are obtained, and state and federal Medi-Cal requirements are met. The FFPSA requires that states implement the required components related to congregate care on or before October 1, 2021. To achieve compliance with the federal law by October 1, 2021, California passed [AB 153 \(Chapter 86, Statutes of 2021\)](#).

For additional information about the requirements of the FFPSA and AB 153, please see [ACIN I-73-21/BHIN 21-055](#).

## **FFPSA PART IV AFTERCARE REQUIREMENTS**

Section 672(k)(4)(F) of Title 42 of the United States Code requires provision of six months of family-based aftercare services post discharge from a Qualified Residential Treatment Programs (QRTPs). California operationalized FFPSA's requirement in [Welfare and Institutions \(WIC\) Code section 4096.6](#), which states that by October 1, 2021, each county child welfare agency, probation department, and mental health plan (MHP), in consultation with the local interagency leadership team established pursuant to Section 16521.6, will jointly provide, arrange for, or ensure the provision of at least six months of post-discharge aftercare services to be provided to children discharged from a placement in an STRTP or from an out-of-state residential facility to a family-based setting. [WIC section 4096.6](#) also specifies that Federal Financial Participation (FFP) under the Medi-Cal program may be available if all state and federal requirements are met and the treatment is medically necessary, regardless of the six months post-discharge requirement. These requirements must be implemented by California by October 1, 2021 for all STRTP placements starting on and after October 1,

2021 to ensure that such placements will be eligible for Title IV-E funding for otherwise eligible children.

A family-based setting refers to situations when a child or nonminor dependent reunifies with a parent, guardian, Indian custodian, or other caregivers or is placed with an approved resource family, including relatives and nonrelative extended family members, or a tribally approved home. In addition, a nonminor dependent exiting an STRTP to a supervised independent living setting, defined in [WIC section 11400\(x\)](#), should also be offered FFPSA aftercare services, including Wraparound.

By October 1, 2022, aftercare services must utilize California's Wraparound model pursuant to statute and must be aligned with the ten Wraparound Principles, comply with the California Wraparound Standards currently specified in [ACIN I-52-15](#), and support each child's permanency plan. The child-specific transition/permanency plan must be an individualized, family-based aftercare support plan, which identifies necessary supports, services, and treatment to be provided to the child and the child's caregivers and the Child and Family Team (CFT).

## **CALIFORNIA'S IMPLEMENTATION OF FAMILY-BASED AFTERCARE**

California is utilizing a phased-in approach to high-fidelity Wraparound implementation for aftercare.

**Phase One** will include an initial implementation of aftercare services within each county by leveraging current Wraparound programs and other resources currently provided by counties, STRTPs, and other providers. Counties must submit to CDSS and DHCS a plan by November 15, 2021, which is further described below, and include at minimum the county's plan for provision of family-based aftercare services pursuant to [WIC section 4096.6\(d\)](#) and the county's Wraparound plan pursuant to [WIC section 18252](#), if a county operates a voluntary Wraparound program per [WIC section 18250](#). [WIC section 4096.6\(d\)](#) requires that the county plan for the provision of family-based aftercare services include, but not be limited to, how existing Wraparound programs and resources will be leveraged to provide interim aftercare services until full implementation of Phase Two.

Note that for children and nonminor dependents who are placed into an STRTP on and after October 1, 2021, caseworkers are required to include in the case plan documentation of a plan, developed in collaboration with the STRTP, for the provision of discharge planning and family-based aftercare support pursuant to [WIC section 4096.6](#). See [WIC section 706.6\(d\)\(3\)\(E\)\(ii\)](#) and [WIC section 16501.1\(d\)\(2\)\(F\)\(ii\)](#).

**Phase Two** will include implementation of high-fidelity Wraparound requirements by October 1, 2022. County agencies will submit an updated Wraparound county plan, which must show a county's plan for full compliance with the high-fidelity requirements, and providers planning to deliver Wraparound services must obtain Wraparound certification from CDSS and DHCS, or their designee. The high-fidelity Wraparound requirements for both providers and counties will include the following areas: workforce development (training, coaching, curriculum), fiscal planning and sustainability (fiscal structures, leveraging of funds across systems), and fidelity and outcomes data (data collection sources, fidelity and outcome measures, and continuous quality improvement processes). The requirements are currently being developed by multiple partners and stakeholders.

## **PLANNING AND IMPLEMENTATION STRUCTURE**

The CDSS and DHCS are in the process of co-creating California Wraparound high-fidelity requirements with counties, providers, Tribes, and other partners and stakeholders through the committees and workgroups described below.

The **California Wraparound Steering Committee** is comprised of Wraparound experts from across California. The purpose of the Steering Committee is to develop a collaborative California Wraparound community that seeks to build continuity in practice and improve equitable safety, well-being, and permanency outcomes for children and families through the provision of high-fidelity Wraparound programs.

The **California Wraparound Advisory Committee (CWAC)**, also comprised of Wraparound experts, administrators, and practitioners from across California, collectively makes recommendations, identifies and shares solutions, and promotes best practices related to Wraparound policies and programs.

The **California Wraparound Hubs** are regional networking and peer support groups that share information, collaborative practices, and discuss topics relevant to Wraparound.

The CDSS also convened three workgroups to further develop the high-fidelity Wraparound requirements, which include: **Fiscal and Organizational Leadership**, **Fidelity and Outcomes Data**, and **Workforce Development**. For more information about these workgroups and committees, please email [WraparoundQuestions@dss.ca.gov](mailto:WraparoundQuestions@dss.ca.gov).

## **WRAPAROUND COUNTY PLAN TEMPLATE**

Counties must submit a Wraparound County Plan to CDSS and DHCS using the attached Wraparound County Plan template. Pursuant to [WIC section 4096.6\(d\)](#), this plan must include, at minimum, information describing the proposed provision of family-based aftercare services. For counties operating a voluntary Wraparound program pursuant to [WIC section 18250](#), the County Wraparound Plan must include information required pursuant to [WIC section 4096.6\(d\)](#) (the county's proposed aftercare plan) and information required pursuant to [WIC section 18252](#) (the county's current or proposed voluntary Wraparound program).

During **Phase One**, county child welfare agencies, probation departments, and mental health plans, in consultation with the local interagency leadership team established pursuant to Section 16521.6, will jointly submit a proposed Wraparound County Plan, which will outline, at minimum, the current status of each county's Wraparound program or other resources, how they will leverage these resources to provide family-based aftercare services, and how they will continue to develop high-fidelity Wraparound programs that align with the California Wraparound Standards in [ACIN I-52-15](#) to serve the children, youth, and nonminor dependents receiving aftercare services. Examples of other programs and resources may include, but are not be limited to, combinations of CFT meetings, Family Urgent Response System mobile response, Mental Health Services Act Full-Service Partnerships, Intensive Care Coordination, Intensive Home-Based Services, Therapeutic Behavioral Services, and Therapeutic Foster Care. The purpose of the plan is informational, not compliance oriented. The Wraparound County Plan template is a tool to promote communication regarding Wraparound implementation between CDSS, DHCS, and the counties, with a focus on aftercare, and a mechanism to obtain program approval from CDSS and DHCS. **The deadline for Phase One, submission of the Attachment A "Wraparound County Plan template," is November 15, 2021.**

Note that for children and nonminor dependents who are placed into an STRTP on and after October 1, 2021, caseworkers are required to include in the case plan documentation of a plan, developed in collaboration with the short-term residential therapeutic program, for the provision of discharge planning and family-based aftercare support pursuant to [WIC section 4096.6](#). See [WIC section 706.6\(d\)\(3\)\(E\)\(ii\)](#) and [WIC section 16501.1\(d\)\(2\)\(F\)\(ii\)](#).

During **Phase Two**, county agencies will continue planning and implementation efforts of high-fidelity Wraparound, as described above. Counties will submit an updated County Wraparound Plan specifying implementation plans and progress towards high-fidelity Wraparound. The requirements are currently being developed in collaboration

with stakeholders and further guidance regarding Phase Two will be provided. **The anticipated submission deadline for the Phase Two County Wraparound Plan is October 1, 2022.**

### **PROVIDER CERTIFICATION**

In preparation for Phase Two implementation by October 1, 2022, the process and requirements for the certification of providers offering aftercare Wraparound services will be developed in collaboration with the aforementioned partners and workgroups. Once the certification process is developed and launched, the CDSS and DHCS will ensure providers delivering Wraparound services have the necessary time for submission and review of certification materials and any necessary programmatic or contractual updates.

### **FISCAL AND ORGANIZATIONAL LEADERSHIP**

In preparation for Phase Two implementation by October 1, 2022, the Wraparound Fiscal and Organizational Leadership Workgroup and the Wraparound Steering Committee will support the development of requirements, guidance, and resources to support the fiscal fidelity and sustainability and the implementation of high-fidelity Wraparound. This includes, but is not limited to, the identification of potential funding streams to leverage to support Wraparound, Wraparound contracting guidance, sample Wraparound program cost estimates, and guidance regarding coordination of care and payment for youth placed out-of-county. All guidance will be in alignment with the California Wraparound Standards, currently described in [ACIN I-52-15](#). Once developed, CDSS and DHCS will issue guidance and further instructions in subsequent county letters and BHINs. Additionally, the [National Wraparound Initiative's \(NWI\) Wraparound Implementation Guide](#) provides helpful guidance and support for organizations and systems implementing Wraparound programs. Additional resources are also available on the [CDSS Wraparound website](#).

### **FIDELITY AND OUTCOMES DATA**

In preparation for Phase Two implementation by October 1, 2022, the Wraparound Fidelity and Data Outcomes Workgroup and the Wraparound Steering Committee will support the development of requirements, guidance, and resources regarding data collection, reporting and analysis, and continuous quality improvement processes. This includes, but is not limited to, statewide partnership with the [Wraparound Evaluation and Research Team](#) and fidelity tools, CWS/CMS data entry and reporting processes,

data matching with behavioral health, CANS, and other data sources, development of a statewide theory of change, and development of process, fidelity, and outcome measures. All child welfare guidance will be in alignment with the California Wraparound Standards, currently described in [ACIN I-52-15](#).

Additional resources are also being identified and developed to support counties in creating fiscally sound high-fidelity Wraparound programs that meet the unique needs of the children, youth, and families served. While the resource listed below is under development, it might be helpful to counties and providers in its current form. As such, draft versions of this document, and other resources, will be posted on the [CDSS Wraparound website](#) and will be replaced with subsequent versions as information is added and updated.

#### *Theory of Change*

In preparation for Phase Two, the theory of change document aids in visualizing the components necessary to support high-fidelity Wraparound practice, processes, and programs in California, including, but not limited to, system context, inputs, high-fidelity indicators, and intermediate and long-term outcomes. This theory of change document was developed by the California Wraparound Steering Committee and the California Wraparound Fidelity and Data Outcomes Workgroup based on the [NWI's Theory of Change](#). To access the most up-to-date version of the California Wraparound Theory of Change, please visit [the CDSS Wraparound website](#).

#### *Child Welfare Services/Case Management System (CWS/CMS) Data Entry*

WIC section 4096.6(c)(1)(F) requires CDSS and DHCS, with input from stakeholder advisory groups, to establish minimum standards for data collection and outcome measures for family-based aftercare services. Sections 18253 and 18256 have additional requirements to identify and develop data collection processes and outcome measures to regularly and consistently monitor, analyze, and make improvements to statewide and local Wraparound programs. CWS/CMS is one of many sources of data and information to measure Wraparound outcomes for continuous quality improvement. Consistent with [ACL 08-66](#), county child welfare and probation departments are already required to associate the cases of children and families who are receiving Wraparound services with a Special Project Code.

Beginning October 1, 2021, all counties must document any currently open or future child welfare or probation cases, including in-home, out of home, voluntary, and court-ordered cases, with children or youth who are receiving Wraparound services (without regard to the funding source), including family-based aftercare, using the State Special Project Code: "S-Wraparound Program".

Because probation department use of CWS/CMS is subject to different requirements that child welfare departments, many probation departments close the case in CWS/CMS once the youth exits placement. As such, the CWS/CMS case may not be open to document the end date of Wraparound services, so the probation department can leave the end date field blank. CWS/CMS will auto-populate the end date as the CWS/CMS case closure date, once the case is closed. If a child and family are receiving services from both child welfare and probation and the probation case closes before the child welfare case, the child welfare department should ensure the accurate end date of Wraparound services is entered. However, child welfare and probation agencies must ensure the beginning and end dates of each Wraparound episode is accurate, and, if possible, update the end date of Wraparound services even after the case is closed in CWS/CMS.

Based on successful experiences of many counties who consistently and accurately identify Wraparound cases using this Special Project Code, CDSS recommends that counties task a Wraparound coordinator, an Interagency Placement Committee team member, or other administrative professional who tracks Wraparound referrals and enrollment to enter the Special Project Code into the CWS/CMS cases of families receiving Wraparound services, as these individuals may have privileges allowing for updating case information after a case has closed and as case worker documentation of Special Project Codes can be inconsistent and inaccurate. **For instructions on how to document Wraparound Services, including family-based Aftercare, in CWS/CMS, see Attachment B.**

As Wraparound data collection, data matching from other sources, data analysis, and outcomes development efforts continue, CDSS will determine if more reliable replacement fields in CWS/CMS should be developed and data collection in CWS-CARES will be developed. In addition, data reports will be developed by CDSS and DHCS, in partnership with the aforementioned stakeholders, to identify in CWS/CMS cases in which Wraparound services are being provided, including children receiving family-based aftercare.

## **WORKFORCE DEVELOPMENT**

In preparation for Phase Two implementation by October 1, 2022, the Wraparound Workforce Development Workgroup and the Wraparound Steering Committee will support the development of requirements, guidance, and curriculum regarding training, coaching, supervision, recruitment, selection, and retention of Wraparound staff. This includes, but is not limited to facilitators, parent partners, youth partners, supervisors, and program leadership for both county-administered and contracted provider-administered Wraparound programs. The degree of flexibility for such requirements and guidance is also being discussed and considered.

CDSS contracts with the UC Davis Resource Center for Family-Focused Practice (RCFFP) to support California Wraparound through shared technical assistance with CDSS, curriculum development, specific course offerings, workgroup and meeting facilitation, and document and resource development. The foundational Wraparound course curriculum is currently being piloted for statewide use. This course and curriculum will serve as the foundational training for all Wraparound staff, and will precede additional trainings for further development of the various roles within California Wraparound, including Child and Family Team (CFT) Facilitator training, Child and Adolescent Strengths and Needs (CANS) training, parent partner foundational training, and youth partner foundational training.

To ensure alignment and consistency in practice across the state and across varying levels of intensity of service provision, current statewide, standardized CFT facilitation and CANS curriculum and training will be leveraged and integrated into the compendium of Wraparound training and curriculum to be developed. Counties and providers are encouraged to begin participating in the available trainings to support consistent and quality practice of family-based aftercare services under Phase One, and as preparation for the phase-in of high-fidelity Wraparound including aftercare, under Phase Two.

#### *Wraparound and CFT Facilitators Training and Curriculum*

The National Wraparound Institute's (NWI) [Wraparound Implementation Guide](#) defines a facilitator as "a person who is trained to coordinate the wraparound process for an individual family. This person may also be called care coordinator, navigator, wraparound specialist, resource facilitator or some other term. The person in the facilitator role may change over time, depending on what the family thinks is working best. For example, a parent, caregiver, or other team member may take over facilitating team meetings after a period of time." Although other team members may take on the role of the wraparound facilitator, coordination of care for the safety, permanency, and well-being of the child and youth will remain the responsibility of the placing agency.

[ACL 16-84](#) states that the role of the facilitator is one that helps to identify needed contacts, builds consensus within the team around collaborative plans, actively supports the agenda, and ensures that the family voice and choice is heard throughout the entire teaming process. The county placing agency, the county behavioral health agency, or a qualified SMHS provider may facilitate the CFT. In order to bill SMHS, all state and federal requirements must be met.

As such, to facilitate families' healing, growth, and goal achievement, Wraparound facilitators must be well-trained and skilled in a variety of competencies to support the

multi-layered responsibilities, care coordination, and dynamics of Wraparound CFTs. Many of these competencies are articulated in the [California Wraparound Standards](#), the [California Integrated Practice Model](#), and in the statewide standardized CFT Training for Facilitators. CDSS provides CFT facilitation training and training for trainers for staff of county-administered and provider-administered Wraparound programs through the [UC Davis RCFFP](#).

### *Wraparound and CANS Training and Curriculum*

As outlined in [ACL 18-09](#), the California Integrated Practice-CANS (IP-CANS), is required for all children with an open case (whether voluntary or with Dependency Court involvement such as Family Maintenance, Family Reunification, and Other Planned Permanent Living Arrangement).

The CANS, used within the Wraparound and CFT processes as outlined in [ACL 18-81](#), includes gathering of information, completion of a draft CANS, and bringing the initial results back to the team for discussion and consensus. Used in this way, the CANS supports engagement with youth and families in their own care by assessing well-being and identifying a range of social and behavioral needs of youth, the parents, and the current caregivers. CANS-informed Wraparound and CFT meetings assist in care coordination, collaborative decision-making, and monitoring progress and outcomes for the family. Additionally, any individual completing the CANS must have active certification through the [Praed Foundation](#).

CANS training and technical assistance is provided to county child welfare agencies by CDSS via the Praed Foundation and the Regional Training Academies (RTAs). The CDSS approved CANS training offerings are available via each RTA's website for their region through the CalSWEC website [Statewide Training Schedule](#). Providers and other system partners may contact the [Praed Foundation](#) to arrange training opportunities. For additional information regarding the use of CANS, including certification and training, please see [ACL 18-81](#).

For additional information and opportunities for training, coaching, consultation, and support, please visit the [UC Davis RCFFP Wraparound website](#) and the [CDSS Wraparound website](#).

### **FUNDING**

The CDSS will release county fiscal letters (CFL) following the release of this ACL. The CFLs will provide county child welfare and probation allocation amounts and claiming instructions regarding the funding appropriated in the State of California's fiscal year 2021-22 budget for implementation of FFPSA, which includes Wraparound aftercare

ALL COUNTY LETTER NO: 21-116  
BH INFORMATION NO: 21-061  
Page 11

services. DHCS will issue additional guidance and claiming instructions for MHPs regarding reimbursement for medically necessary specialty mental health services that are delivered as part of aftercare services.

For questions or need additional guidance regarding the information in this letter, contact the Integrated Practice Resource Development Bureau at [WraparoundQuestions@dss.ca.gov](mailto:WraparoundQuestions@dss.ca.gov) or DHCS at [FFPSA@dhcs.ca.gov](mailto:FFPSA@dhcs.ca.gov).

Sincerely,

***Original Document Signed By***

ANGIE SCHWARTZ, Director  
Children and Family Services Division  
California Department of Social Services

***Original Document Signed By***

KELLY PFEIFER, M.D.  
Deputy Director  
Behavioral Health  
Department of Health Care Services

Attachments