



DEPARTMENT OF SOCIAL SERVICES COUNTY OF MADERA

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An Affirmative Action/Equal Opportunity Employer

SCI Methodology, rates, qualifying factors and forms

The following situations describe typical care and supervision of children expected within the basic foster care rate and **will not qualify** for a specialized foster care rate:

- ❖ Child is within the normal range for physical development for his/her age.
- ❖ Child is within the normal range for emotional, social and behavioral development.
- ❖ Child shows an expected level of separation anxiety from family and friends preceding the removal from the home.
- ❖ Child shows expected, mild symptoms in response to abuse and neglect experienced.
- ❖ Child has minor academic problems which may require additional assistance with homework, communication with school personnel or placement in special education settings.
- ❖ Child has no chronic medical/dental problems or conditions. The child has expected illnesses and medical/dental appointments, which require attention and treatment by general pediatricians or physicians (i.e. Chickenpox, ear infections, colds, flu, and/or allergies).
- ❖ Child has expected behavioral problems according to age and developmental/mental level and responds to effective and appropriate parenting strategies.
- ❖ Child has medical conditions and/or mental illness that have been stabilized with medication and/or therapeutic intervention.
- ❖ Child has dietary needs that require basic monitoring and meal planning.
- ❖ Child is toilet trained by the age of 6 years, but may have occasional toileting accidents numbering once per week or less. The child's toileting accidents can be controlled with medication. A child over the age of 6 years may have toileting accidents once per month or less.
- ❖ Child has occasional temper tantrums (1-2 per week), which may result in occasional minor destruction to property, minor self-injurious behavior (i.e. hair pulling, hitting), aggressiveness

to others in the vicinity (i.e. hitting, biting), verbal outbursts, pouting, moodiness, and withdrawal.

- ❖ Child has an age-appropriate or abuse specific need for monitoring and guidance for sexual play, exploration, and knowledge (i.e. supervision with other children, masturbation, sex-related questions).
- ❖ Child displays age-appropriate clinginess, shyness, mood, and energy levels.
- ❖ Child has regular sleep patterns as expected for developmental age, which includes occasional soothing at night (1-2 times per week).

Initial Assessment Process

The initial assessment process will be dependent upon several requirements, which are outlined as follows:

- 1.) Social Worker will not place multiple children with special needs in the same foster home without prior authorization, as children with special needs require additional time and attention.
- 2.) Social Worker will complete the SCI Rate Assessment Form for each child who may require specialized care and supervision.
- 3.) Social Worker will obtain and submit documentation from accredited professionals verifying the child's condition, diagnosis, and/or behavior as indicated on the Assessment Form.
- 4.) Social Worker will obtain and submit verification of required training, if appropriate.
- 5.) Social Worker will consult with Public Health Nurse (PHN) to assess the need for SCI Rate.
- 6.) Social Worker will submit appropriate documentation to their supervisor for review and approval.
- 7.) If Social Worker Supervisor (SWS) approves the SCI request, SWS will submit appropriate documentation to both the Program Manager and Deputy Director for review and approval.

Reassessment Process

- 1.) Social Worker will complete the "Specialized Foster Care Rate Assessment Form" every six months with the primary goal of reassessing the child's functioning level and to consider whether the SCI rate approved previously continues to be appropriate for his/her care and supervision needs.
- 2.) Social Worker will review with the PHN, the continued child specific matters as they relate to SCI rate.
- 3.) Social Worker will submit updates from accredited professionals in relation to the child's condition, diagnosis, and/or behavior with the Reassessment Form to the SWS. The updates

should address whether the child's functioning has regressed, remained stable over time or has improved.

- 4.) SWS will submit approved SCI rate documentation to both the Program Manager and Deputy Director for approval.

Training Requirements for Specialized Care Increment Rate Levels

Foster parents will successfully complete additional trainings parallel to the needs of the children placed in the home. Evidence of completion of trainings will be provided to the Social Worker.

Specialized Care Rates

Level 1 = Foster Care Rate + \$116.00

Level 2 = Foster Care Rate + \$242.00

Level 3 = Foster Care Rate + \$525.00

Level 4 = Foster Care Rate + \$777.00

ATTACHMENT A

**Madera County Specialized Foster Care/CVRC
Assessment Form**

Level of Care 1 2 3 4 CVRC	Effective/Service Date	Expiration Date
Madera County Foster Home/Relative Name	License Number	Address and Telephone Number(s)
Child's Name	Madera County Case Number	Child's Gender
Child's DOB	Child's Chronological Age	Child's Developmental Age
Social Worker Name	Date of Assessment Type of Assessment ↑ Initial ↑ 6 month	Date of Detention
Specific Diagnosis	Frequency and Duration	*For CVRC ONLY ↑ Under 3 yrs old ↑ Over 3 yrs old
Physician/Therapist Name	Address and Telephone Number(s)	Other

Specialized Care Factors/Treatment Plans

Level 1: Mild Specialized Foster Care

- 3-4 appointments per month for one specific issue, not including routine dental or physical examinations. The foster parent will transport the child to the required appointments. ***In order to meet this requirement, verification of child's condition and required appointments must be provided.***
- Long term medications (not including vitamins) needed on a daily basis for a period of one or more months. 1-2 medications not including prescription vitamins or short term antibiotics. ***In order to meet this requirement, verification of child's prescription must be provided.***
- Symptomatic respiratory difficulties requiring regular (daily) use of nebulizer breathing treatments. ***In order to meet this requirement, verification of child's condition, treatment plan and prescription must be provided.***
- Child is 7 years old or older and has toileting accidents once or twice per week. The child's Encopresis and/or Enuresis are not completely controlled by medication, but have partial effects. ***In order to meet this requirement, verification of condition must be provided from a Physician treating the child.***
- Child is physically challenged and/or requiring minimal bracing equipment. ***In order to meet this requirement, verification of child's condition must be provided by a Physician treating the child.***
- Child has a hearing impairment which requires a hearing aid and multiple appointments to correct hearing (should be time limited). ***In order to meet this requirement, verification of condition and necessary appointments must be provided by a Physician treating the child.***
- Child exhibits mild disruptive behavior (outside normal development). ***In order to meet this requirement, verification must be provided from a therapist treating the child. Foster parent is actively involved in the treatment plan.***
- Child has a mild learning disability/delay resulting from educational neglect or prolonged illness which requires weekly interventions from the foster parent (i.e. weekly school meetings, suspensions once every 3 months, etc.). ***In order to meet this requirement, verification of required school meetings and suspensions must be provided.***
- Child has a heart disease which requires close monitoring. No intervention, special treatments or diet. ***In order to meet this requirement, verification of child's condition must be provided by a Physician treating the child.***

If three (3) or more of the conditions listed above exist, rate will be increased to the next higher rate.

Level 2: Moderate Specialized Foster Care

- 4-6 appointments per month for a specific issue, not including routine physical or dental examinations. The foster parent will transport to these appointments. ***In order to meet this requirement, verification of child's condition and required appointments must be provided.***
- Child has Sickle Cell and is not currently requiring transfusions. ***In order to meet this requirement, verification of child's diagnosis must be provided.***
- Child has Diabetes and requires a special diet. No medication or insulin injections required. ***In order to meet this requirement, verification of child's condition and diet must be provided.***
- Child has a brain injury with stable shunt requiring no medical intervention. ***In order to meet this requirement, verification of child's condition must be provided by a Physician treating the child.***
- Child has feeding difficulties requiring therapy or special feeding techniques that are learned through special training. ***In order to meet this requirement, verification of child's condition and feeding needs must be provided by a Physician treating the child.***
- Child has Scoliosis requiring unassisted daily exercises. No bracing required. ***In order to meet this requirement, verification of child's condition and treatment plan must be provided by a Physician treating the child.***
- Child is hearing impaired requiring specialized communication techniques, speech therapy (that requires special training by the foster parent) and a special school program. ***In order to meet this requirement, verification of child's condition and needs must be provided by a Physician treating the child.***
- Child is mildly mentally retarded. ***In order to meet this requirement, verification of child's condition must be provided by a Physician treating the child.***
- Moderate learning delay/disability requiring daily foster parent assistance and annual specialized training. ***In order to meet this requirement, verification of child's condition and needs must be provided by a Physician treating the child. Foster parent must provide evidence of specialized training.***
- Child has been diagnosed with Attention Deficit Disorder (ADD) or Attention Deficit Hyper Disorder (ADHD) by a physician and requires behavior modification, but does not require medication. ***In order to meet this requirement, verification of child's condition and needs must be provided by a Physician treating the child. Foster parent must be actively involved in behavioral treatment and provide outline of services they are providing to the child i.e. transportation to services, behavior contract, specialized training, etc.***
- Child requires extra comfort and soothing for emotional outbursts to include, but not be limited to: constant crying or tearfulness, difficulty accepting change or instructions,

prolonged separation anxiety (more than 6 months), nightmares (3 - 4times per week) or attention seeking. ***In order to meet this requirement, verification must be obtained from a therapist who has assessed and/or is treating the child.***

If three (3) or more of the conditions listed above exist, rate will be increased to the next higher rate.

Level 3: Severe Specialized Foster Care

- 6-8 appointments per month for a specific issue, not including routine physical or dental examinations. The foster parent will transport to these appointments. ***In order to meet this requirement, verification of child's condition and required appointments must be provided.***
- Child has Fetal Alcohol Effect/Exposure, is a Drug Exposed Infant, or has drug/alcohol/nicotine withdrawal symptoms, requires Methadone treatment, and/or has developmental delays due to drug exposure, which requires regular (4-6) medical appointments per month (not including routine physical or dental examinations) and extra care and supervision by the foster parent. ***In order to meet this requirement, verification of condition and scheduled appointments must be provided by a Physician treating the child. Foster parent is actively involved in treatment plan.***
- The child exhibits behaviors which frequently (3-5 times per week) place self and/or others at risk. Close supervision is necessary to minimize risk and/or reduce potential for disruption. Psychotropic medication may be required with close supervision by caretaker and increase follow up by therapeutic provider. ***In order to meet this requirement, verification of child's condition must be provided by a Physician and/or therapist treating the child. Foster parent is actively involved in behavioral treatment plan.***
- Child has been diagnosed with Attention Deficit Disorder (ADD) or Attention Deficit Hyper Disorder (ADHD) by a physician and is demonstrating symptoms not responsive to physician or licensed clinician's prescription medication. ***In order to meet this requirement, verification of child's condition and needs must be provided by a Physician treating the child. Foster parent is actively involved in behavioral treatment plan.***
- Child has a seizure disorder which may require medication and requires close monitoring. Foster parent is to undergo annual specialized training for this disorder. ***In order to meet this requirement, verification of child's diagnosis and prescription (if applicable) must be provided by a Physician treating the child. Foster parent must provide verification of training received.***
- Child has Diabetes, requires a special diet and insulin injections or oral medication. Foster parent requires annual specialized treatment for these special needs. ***In order to meet this requirement, verification of child's diagnosis and prescription must be provided by a Physician treating the child. Foster parent must provide verification of training received.***
- Child has a cleft lip which requires surgical intervention and special feeding assistance. ***In order to meet this requirement, verification of child's diagnosis and needs must***

be provided by a Physician treating the child.

- Child has learning disabilities/delays requiring daily assistance from the foster parent (Downs Syndrome). Special education placement needed. ***In order to meet this requirement, verification of child's diagnosis and needs must be provided by a Physician treating the child.***
- Moderate Cerebral Palsy or physical disability requiring some additional help with feeding, dressing, bathing, etc. ***In order to meet this requirement, verification of child's diagnosis and needs must be provided by a Physician treating the child. Foster parent to undergo specialized training for this disability.***
- The child has been formally diagnosed with Anorexia, Obesity, or Bulimia and the foster parent is actively involved in treatment. ***In order to meet this requirement, verification of child's condition and treatment plan must be provided. Foster parent is to undergo specialized training for this disease.***
- Child has been formally diagnosed as Seriously Emotionally Disturbed (SED) and requires a specialized education setting, although the child has been able to reside with others. ***In order to meet this requirement, verification of the child's SED diagnosis and SED educational placement need must be provided.***
- Child has been hospitalized under Welfare and Institutions Code Section § 5150 due to being a danger to oneself or others in the past six months. The child requires specialized care and supervision due to suicidal ideation and threats. ***In order to meet this requirement, verification of the child's § 5150 status, his/her mental health diagnosis, pattern of hospitalizations, and current suicidal ideation and threats must be provided. Foster parent is to undergo annual mental health training for dealing with these issues.***
- Child engages in risky behavior, which may jeopardize his/her safety and well-being without 24-hour supervision (prostitution/promiscuity, drug use/abuse, illegal activities, sexual perpetration, and self-injurious behavior resulting in serious injuries). The child cannot be around other children without constant monitoring and/or supervision. ***In order to meet this requirement, verification must be obtained from the child's therapist, as well as supporting documentation from entities such as law enforcement, hospitals, and schools. Foster parent is to undergo specialized treatment for dealing with these issues.***
- Child is only partially mobile due to long-term illnesses, developmental disabilities, and/or environmental influences, but can make attempts to bathe, toilet and feed oneself, although the child requires assistance with those tasks. The child requires weekly medical, therapeutic and consultation appointments. ***In order to meet this requirement, verification of child's diagnosis, needs and treatment plan must be obtained from treating physicians and/or treating hospitals. Foster parent is to undergo specialized treatment for dealing with these issues.***

If three (3) or more of the conditions listed above exist, rate will be increased to the next higher rate.