Survey A: Children Placed in Residential Child Care Facilities (non-treatment)

The purpose of this survey is to help gather information to inform planning for how best to serve children when restrictions on federal IV-E reimbursement of congregate care in the Family First Prevention Services Act (FFPSA) take effect on October 1, 2021. After that date, new placements of children in congregate care facilities will generally be eligible for only two weeks of reimbursement unless the facility meets new federal criteria to be a qualified residential treatment facility (QRTP) and specific referral, assessment, and review procedures are followed.

North Carolina is approaching this challenge by asking how to best meet the needs of children who we have previously placed in congregate care in the context of the new funding realities. It is expected that congregate care will still be the best option for some children but many children will be better served by investments in strategies to find and support family-based placements, especially family based placements that will accept teens and sibling groups.

This survey includes questions about children in congregate care facilities, the reasons for their placement in those facilities, and services or supports that might have allowed a family based placement (i.e., kinship home, foster home, or therapeutic home). This survey asks about children in foster care in the legal custody of your county on November 30, 2020 who were placed in Residential Child Care facilities- non-treatment congregate care group homes or facilities funded primarily through the child welfare system.

We have used administrative data to identify children in your county's legal custody placed in group facilities on November 30, 2020. Please fill out one survey for each child putting the child's survey number on the top of each survey and answer the questions as it relates to that placement. The survey focuses on questions that cannot be answered by administrative data and may require staff's professional judgement.

Survey ID number:*

[   ]

November 30, 2020, Placement name:*

[   ]

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* Indicates the question must be answered in order to move on

1.   Is this child part of a sibling group in foster care?*

-- Please Select -- ▼

1a.   How many children are in the sibling group?*

○ 2   ○ 3   ○ 4   ○ 5   ○ 6 or more

1b.   How many of this child's siblings were placed together with the child in the same facility or on the same campus when the child was originally placed in the above facility?*

○ None   ○ 1   ○ 2   ○ 3   ○ 4   ○ 5 or more

2.   Was this young foster child placed in the facility together with his or her mother?*

-- Please Select -- ⌄

3.   How far in miles from your county is the facility where the child was placed in November 2020?*

○ Inside the county
○ Outside the county but within 10 miles of the county's borders
○ Between 10 and 50 miles from the county's borders
○ Between 50 and 100 miles from the county's borders
○ Over 100 miles from the county's borders

What services did the child receive from the congregate care provider or from another service provider in November 2020 when in this placement.

4.   What services was the child receiving from the congregate care provider? (check all that apply)*

Select at least 1.

☐ Mental health or substance abuse therapy
☐ Specialized or enhanced mental health or substance abuse services
☐ Tutoring
☐ LINKS services
☐ Specialized health services
☐ Mentoring
☐ None
☐ Other, please specify
   [   ]

5.   What services was the child receiving from another provider? (check all that apply)*

Select at least 1.

☐ Mental health or substance abuse therapy
☐ Specialized or enhanced mental health or substance abuse services
☐ Tutoring
☐ LINKS services
☐ Specialized health services
☐ Mentoring
☐ None
☐ Other, please specify
   [   ]

6.   Does the child have a behavioral health diagnosis? (check all that apply)*

☐ Yes, a mental health diagnosis
☐ Yes, a substance use diagnosis
☐ Yes, an intellectual developmental disorder diagnosis
☐ No behavioral health diagnosis

7.   Why was the child placed in the congregate care placement where the child resided in November 2020? (choose the best answer)*

○ No appropriate family placement (foster or kinship) was available or could be found
○ No appropriate family placement was available that would keep siblings together
○ One or more previous family placements failed
○ The worker judged that congregate care would meet child's needs better than family placement
○ The youth preferred a residential care facility
○ A therapeutic home or residential treatment placement would have been preferred but could not be accessed.
○ Other, please specify

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The next three questions ask specifically about why the child was placed in the residential child care facility where the child resided in November 2020 rather than in a kinship placement, foster family, or therapeutic home.

8.   Why was the child not placed in a kinship placement? (choose the best answer)*

○ We were unable to locate kin
○ The kin we located were not appropriate to provide placement
○ Kin we approached declined to provide placement
○ Placement with kin was tried previously and was unsuccessful
○ Other, please specify

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9.   Why was the child not placed in a family foster home? (choose the best answer)*

○ Our county had no available foster homes
○ We were unable to find an available family foster home that would accept the child
○ We were unable to find a family foster home that would accept the child and his/her siblings together
○ We were unable to find a family foster home close to our county that would accept the child
○ Placement in family foster homes had been tried previously and was unsuccessful
○ We did not believe this child could be served appropriately in a family foster home
○ Other, please specify

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10.   Did the client have therapeutic needs?*

[-- Please Select -- ▾]

10a.   Why was the child not placed in a therapeutic home? (choose the best answer)*

○ Our MCO denied authorization for a therapeutic home
○ We were unable to find a therapeutic home that would accept the child
○ Placement in a therapeutic home has been tried before and was unsuccessful
○ We did not believe this child could be served appropriately in a therapeutic home.
○ Other, please specify

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11.   What services or supports, if any, might have allowed this child to be placed successfully in a kinship home instead?*

○ No special supports would have been needed if a kinship home was available
○ No special supports or services would have been sufficient
○ Neither of these

11a.   If neither, choose up to three of the following:*

Select no more than 3.

☐ Financial support to a kinship home
☐ Capacity to provide individualized licensure training to kin in their homes
☐ Enhanced capacity to respond in the home or provide in home coaching
☐ Enhanced capacity to provide respite services
☐ Wrap-around capacity
☐ Other, please specify

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12.   What services or supports, if any, might have allowed this child to be placed successfully in a family foster home instead?*

○ No special supports would have been needed if a foster home were available
○ No special supports or services would have been sufficient
○ Neither of these

12a.   If neither, choose up to three of the following*

Select no more than 3.

☐ Enhanced capacity to respond in the home or provide in home coaching
☐ Enhanced capacity to provide respite services
☐ Specialized recruitment and supports for foster parents willing to serve teens and sibling groups.
☐ Wrap-around capacity
☐ Other, please specify

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