

 **BLOOM WORKS**

The background image shows a city street scene with a large, ornate classical building on the left and modern high-rise buildings on the right. In the foreground, a group of children are running and playing in a public water fountain, splashing water. The scene is bright and sunny, suggesting a summer day.

# Treatment Foster Care: Designing Systems and Developing Families

**Findings Summary**  
**January 22, 2024**



**BETTER SERVICES START WITH  
PUTTING ~~TECHNOLOGY~~ FIRST.**

**^ PEOPLE**

# Our team



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# Where we are



"Sticky Family" Recruitment

Placements for Teens

Treatment Foster Care  
(TFC)

## Partners



**Child welfare faces a placement crisis.**

**There is a lack of resource families for those with higher emotional or behavioral, developmental, or medical needs.**

## **Our goals**



1. Understand how TFC differs from traditional foster care
2. Uncover barriers to meeting the needs of children and youth
3. Identify how to develop more TFC families

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# What we did



## Methods

- Focused on Arkansas and Indiana TFC programs
- Secondary research on TFC programs, evidence-based TFC training curricula, and child and youth needs assessment tools
- Semi-structured interviews with 44 participants in total:
  - 9 subject matter experts
  - 5 state agency staff
  - 15 private child placing agency staff
  - 15 TFC families

## Arkansas participants

- 1** State staff
- 8** Private staff
- 9** TFC families



### Family demographics

- 7 Black, 1 White, 1 other
- 28-59 years old
- \$20,000 - \$150,000 annual income
- 5 some college or less
- 4 college or more
- 4-22 years licensed

## Indiana participants

- 4** State staff
- 7** Private staff
- 6** TFC families



### Family demographics

- 1 Black, 5 White
- 2 LGBTQ
- 28-74 years old
- \$20,000 - \$75,000 annual income
- 3 some college or less
- 3 college or more
- 1-15 years licensed

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# How TFC differs from traditional foster care

# **TFC fits into a broader context – the placement continuum**

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## Legislative and policy shifts have created a gap

Foster Care
<ul style="list-style-type: none"><li>• Home setting</li></ul>



Residential Treatment Programs
<ul style="list-style-type: none"><li>• Group home or congregate care facility setting</li></ul>



## TFC has filled the gap

### Foster Care

- Removal is for a child or youth's protection
- Focus is on **behavioral change of parents**

### Treatment Foster Care

- Keep child or youth **in home setting**
- Focus is on **clinical treatment** of child or youth

### Residential Treatment Programs

- Group setting is restricted or locked
- Focus is on **behavior change of child or youth**



## The core elements of TFC

Foster Care

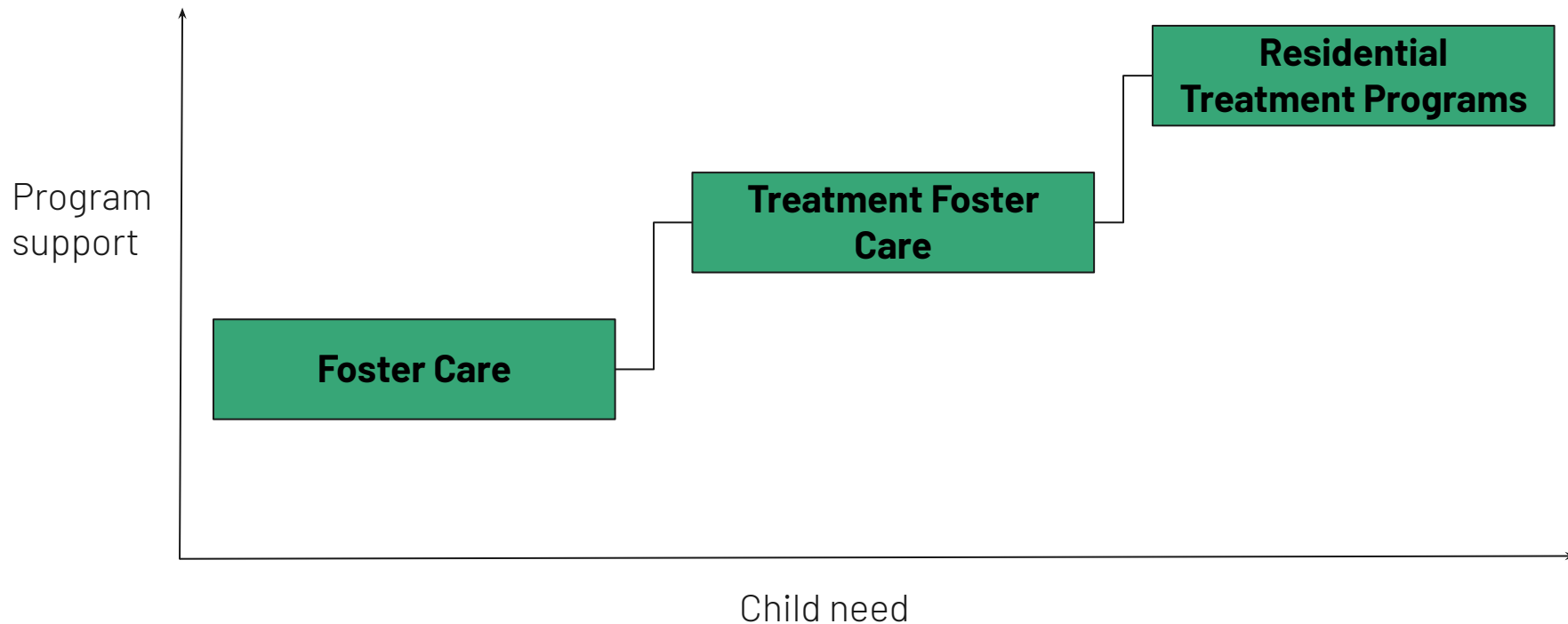
Treatment Foster Care
<ol style="list-style-type: none"><li>1. Highly skilled caregivers</li><li>2. Enhanced case management</li><li>3. Coordination of trauma-informed care</li></ol>

Residential Treatment Programs





## Higher needs are met with more support



**Placement continua have evolved  
to respond to crises, but lack  
intentional design**

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# Placement continua

Program				
Setting				
Child need				
Caregiver skill				
Cost				

Child need

# Arkansas DCFS placement continuum

Foster Care	Specialized Private Licensed Placing Agencies	Developmental Disabilities Services	Therapeutic Foster Care	Residential Treatment Programs
Out of home	Out of home, in community			Congregate settings
Lowest need	Lower child need	Medium child need	Higher child need	Highest child need
Lowest skill	Medium caregiver skill	Higher caregiver skill	Higher caregiver skill	Professional skill
Lowest fees	Medium fee rates, by age			Highest cost

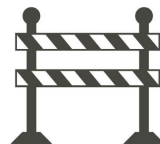
Child need →

## Arkansas DCFS TFC has 3 tiers

Foster Care	Specialized PLPAs	Developmental Disabilities Services	Therapeutic Foster Care	Residential Treatment Programs
Out of home	Out of home, in community			Congregate settings
Lowest need	Lower child need	Medium child need	<div>1</div> <div>2</div> <div>3</div>	Highest child need
Lowest skill	Medium caregiver skill	Higher caregiver skill	Higher caregiver skill	Professional skill
Lowest fees	Medium fee rates, by age			Highest cost

Child need →

## DCFS continuum roadblocks



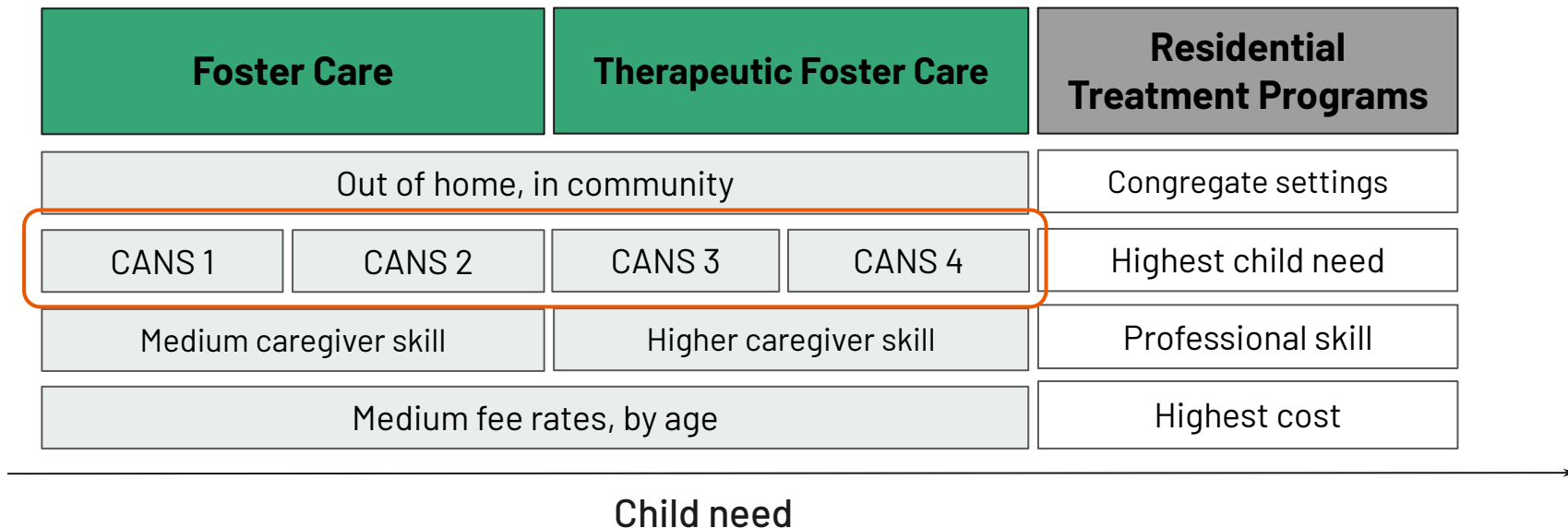
- It is common for all 12 TFC PLPAs to have no available homes in response to DCFS requests
- Assessments are not conducted automatically or for every child, so some may be overlooked
- Child and youth assessments are conducted by a third party, Optum, and the PLPAs receive only tier assigned
- Optum assigns children to a managed care organization (MCO) which can limit access to providers and cause burden

# Indiana DCS placement continuum

Foster Care		Therapeutic Foster Care		Residential Treatment Programs
Out of home, in community				Congregate settings
CANS 1	CANS 2	CANS 3	CANS 4	Highest child need
Medium caregiver skill		Higher caregiver skill		Professional skill
Medium fee rates, by age				Highest cost

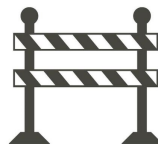
Child need →

## There are 4 levels within Indiana DCS programs





## DCS continuum roadblocks



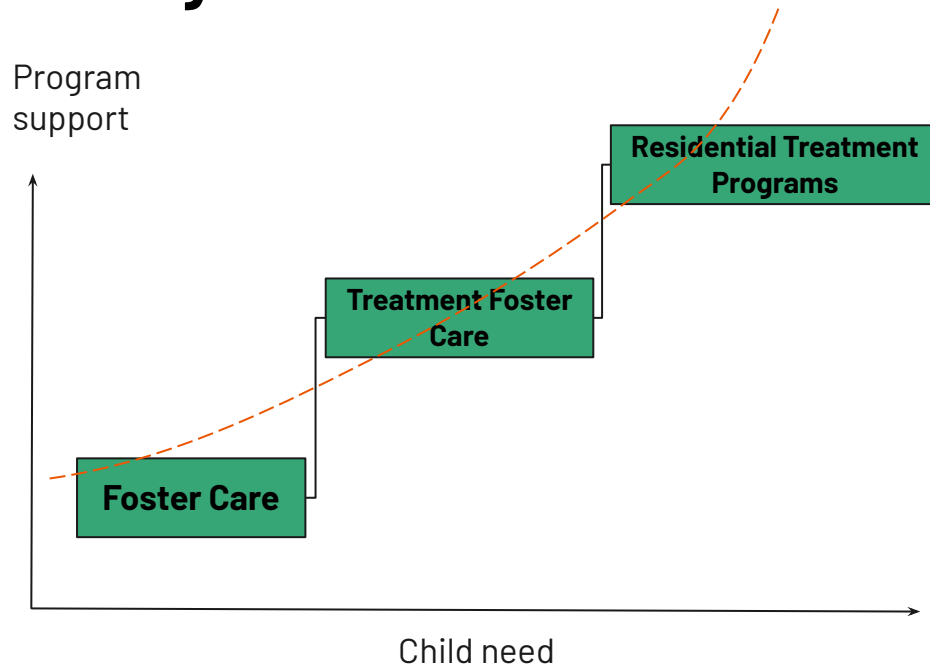
- A supply and demand mismatch of TFC homes
  - A system-wide shortage of families
  - CANS 1 and 2 are placed in LCPA-licensed TFC homes
  - CANS 3 and 4 are placed in DCS-licensed traditional homes
  - State is obligated to serve all, agencies can decline
- Eject/reject clauses are necessary for LPA business models, see KY
- Successful families get a cut as a child levels down

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# Barriers to meeting the needs of children and youth in care

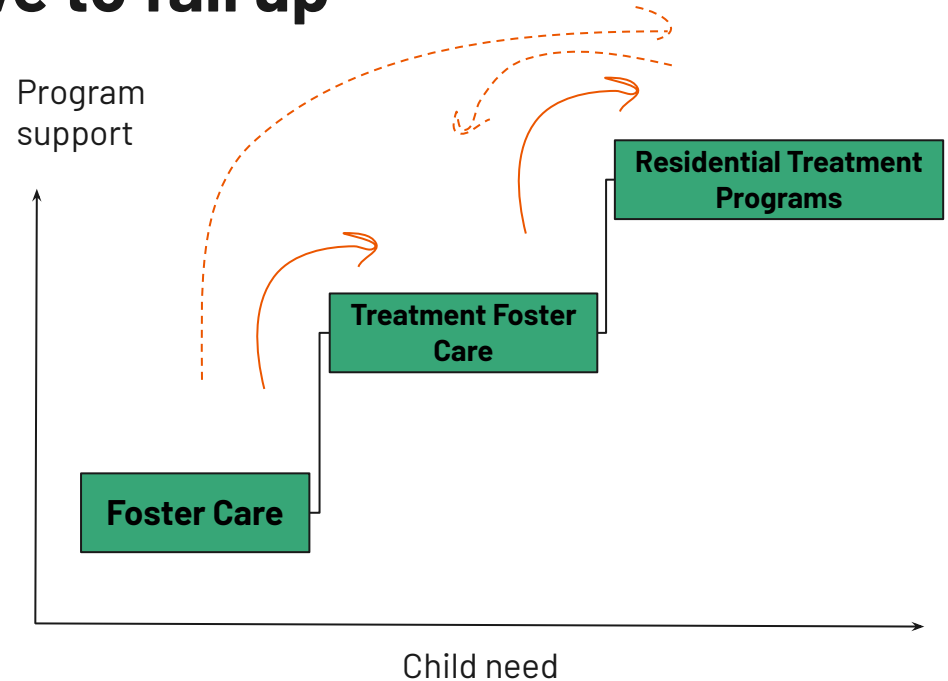
## Needs don't always fall neatly into buckets

- Each category dictates the care team
- Needs may vary within a placement
- When needs shift, there's a threat of disruption



## Children and youth have to fail up

- Assessments are not always done
- Children and youth have to demonstrate need to qualify for higher levels of support
- Assessments tools are best used as communication tools, not just level setters



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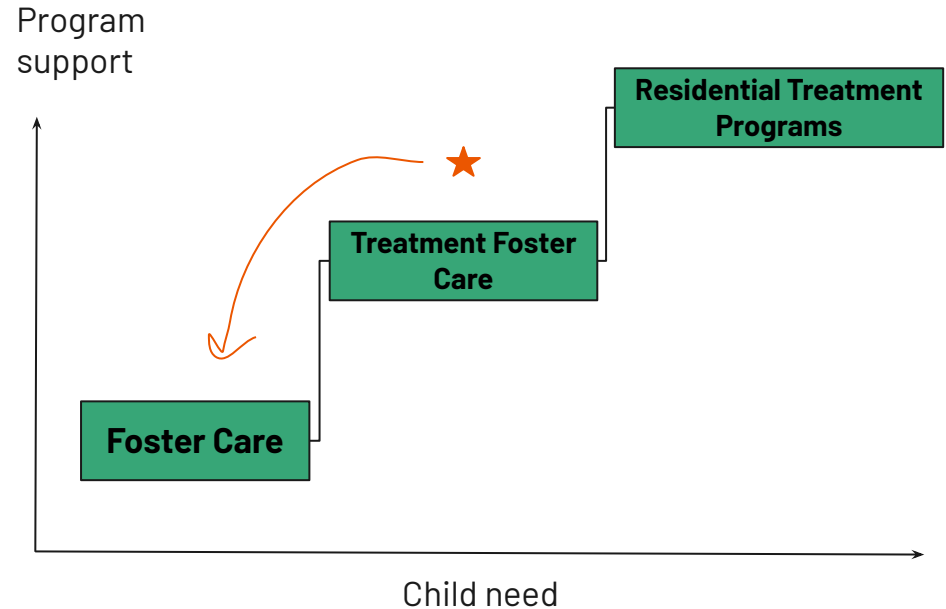
The intention of the CANS was not initially to determine the level of placement. It is at its core, a communication tool. Dr. Lyons who created it, historically referred to it as ‘a community metrics tool.’ And it is intended to be a **method of documenting the collaboration between all of the individuals so that we can identify what the needs are so that we can figure out how to implement interventions** to address the needs.”

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State child welfare staff, Indiana

## Tying need to pay yields contradictory incentives

- When need levels fall, children and youth may no longer qualify for programs
- So either they must transition out of TFC homes, or TFC families must accept lower rates
- Families are getting pay cuts for doing a good job



## Prevention and kinship are sometimes added here

Preventative Services	Kinship Care	Foster Care	Treatment Foster Care	Residential Treatment Programs
In home	Out of home, in community			Congregate setting
Child need variable		Lower child need	Higher child need	Highest child need
Caregiver skill variable		Lower caregiver skill	Higher caregiver skill	Professional skills
Lowest cost		Low fee rates, by age	Medium fee rates, by age	Highest fees

# This may not be quite right

Preventative Services	Kinship Care	Foster Care	Treatment Foster Care	Residential Treatment Programs
In home	Out of home, in community			Congregate setting
Child need variable *		Lower child need	Higher child need	Highest child need
Caregiver skill variable		Lower caregiver skill	Higher caregiver skill	Professional skills
Lowest cost		Low fee rates, by age	Medium fee rates, by age	Highest fees



## What we recommend

- Agencies map their placement continua for missing programs
- Use key data points to evaluate and refine each continuum
- Ensure all children and youth are assessed and get a care team
- Consider publicly-recruited TFC to address denials and supply/demand issues, see OK DHS Enhanced Foster Care
- Offer treatment services in prevention, like FCT model
- Add kin-finding to TFC recruitment and license kin as TFC
- Create cross-cutting programs where care follows children and youth across placements

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# How to develop more TFC families

## TFC families felt familiar



**Carer by Calling**



**Queer Ally**



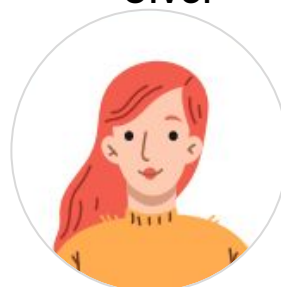
**Unconditional  
Giver**



**Mobility Coach**



**Non-profit  
Advocate**



**High-needs  
Specialist**

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I wanted to challenge myself to maybe be able to meet some emotional needs where they were necessary. And then **I had some previous medical training** from when I worked in respite care, working with folks I'd done the side of more **medically sensitive special education, and working with adults and children with more profound physical disabilities.**"

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TFC family, Indiana

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They said that we would have to put them back into foster care and then get them back again. And so we were like, 'No, we don't want to...' And so we finished classes with the therapeutic program because **that was the quickest one we could get into."**

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Kin caregiver and TFC family, Arkansas

**TFC families are mostly the same as traditional families, the difference is the program design and agency support.**

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## **On the whole, most entered unintentionally**

- Most new TFC families were not experts, or even former traditional foster parents
- Agency referrals were more likely to lead someone to TFC
- Kinship was also an entry point

## **The current state of TFC family recruitment**

- Families may not know they are signing up for something other than traditional foster care
- The same prospective families were targeted for different programs along the placement continuum
- Agencies expected families with no prior experience to be ready to take on children and youth with higher needs



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# What we propose

**A developmental model that can  
move families up the placement  
continuum**

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## To create a developmental model

**Awareness**

**Consideration**

**Preparation**

**Support and Growth**

- Understand family experiences moving through each stage of recruitment
- Support family growth as they move through each stage
- Create incremental steps that allow families to build awareness, understanding, and confidence progressively

**Awareness**

**Consideration**

**Preparation**

**Support and Growth**

## Findings about awareness and consideration

- Recruitment methods used were outdated
- TFC was an unintentional choice for many resource families
- There were barriers to entry, such as income and housing requirements
- Kin caregivers, and highly experienced caregivers were not being intentionally recruited as TFC families

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I initially started just by going with an individual that I knew that was in a program, and that's what she offered... I really didn't know the difference."

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TFC family, Arkansas

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To be 100% honest, I don't really know that we knew at the time that there were categories [of care]."

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TFC family, Indiana

Awareness

Consideration

Preparation

Support and Growth

## **Create awareness and modernize recruitment**

- Break down stigma and fears about being a resource family and the needs of children and youth
- Create awareness about the different programs within foster care
- Use referral incentives to build on strong recruitment methods like word of mouth
- Use targeted marketing methods that reflect populations in care and target education and healthcare specialists



Awareness

Consideration

Preparation

Support and Growth

## **Reduce barriers to entry**

- Eliminate excessive paperwork, support low digital literacy, and break down fears about background checks
- Develop professional programs and offer housing benefits to address income and housing barriers, eg. DC CFSA, Second Chance Youth Ranch, Pacific Clinics
- Design incentives for former foster and adoptive youth to become resource families

Awareness

Consideration

Preparation

Support and Growth

## **Incorporate kin-finding and license kin as TFC**

- Add child-specific and kin-finding to TFC recruitment
- Educate kin about TFC programs
- Reduce barriers to kin licensure
- Retain kin caregivers and incentivize them to become TFC families for non-kin children and youth

**Awareness**

**Consideration**

**Preparation**

**Support and Growth**

## Findings about preparation and training

- TFC families had good things to say about training
- TFC training was evidence-based in Arkansas, and trauma-informed in both Arkansas and Indiana
- Some TFC families had positive experiences from opportunities to learn before committing
- In-service training was family-specific and responded to their care needs

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You can take the classes and decide even after that process if you are no longer interested... **I think that took some of the anxiety off of my husband because he was a little uncertain** still trying to fully wrap his mind around what this was going to be for our family and what it would require.”

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TFC family, Indiana

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If I needed more training, I feel like all I'd have to do is say, 'Hey, like I'm not really sure how to handle this' and they'd be like, 'Oh, we have a training for that.' "

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TFC family, Indiana

Awareness

Consideration

Preparation

Support and Growth

## Create chances for families to dip a toe before diving in

- Escalate volunteer asks: donate goods, money, volunteer at an event, transport, respite care, then get licensed
- Create a model where volunteer work with children and youth in foster care counts towards training hours
- Separate learning opportunities from agency licensure to detach placement incentives from training and education

Awareness

Consideration

**Preparation**

Support and Growth

## **Extend positives of TFC training to traditional families**

- Adapt trauma-informed curricula that are culturally-responsive, concrete, with relevant examples to all ages
- Adapt, if not adopting, evidence-based materials
- Train in cohorts where possible to create a community of peers
- Enable families and caseworkers to collaborate in picking relevant in-service training topics



**Awareness**

**Consideration**

**Preparation**

**Support and Growth**

## Findings about support

- Communication was more transparent and responsive
- Enhanced care coordination in TFC reduced the burden on resource families to find and access services and providers
- TFC families still faced challenges in getting case information, especially from the state
- Being a TFC parent was a full-time job, such as attending appointments and supporting crises at school

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The behaviors I've seen in the children, **they tend to get addressed more, because you got the director, you get the counselors.** You got the case manager coming in and out. We didn't have that in regular [traditional foster] care.”

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TFC family, Arkansas

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Be honest, that they're going to have appointments, you're going to have to miss work. I know it's hard to recruit, but I think it's even worse when you've recruited some, to do a job that nobody wants to do. And then have **no support and then they're gone within a year if not sooner.**"

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TFC family, Indiana



Awareness

Consideration

Preparation

Support and Growth

## **Take a human-centered approach to case management**

- Be transparent about the needs of children and youth during placement matching and empower families to ask questions
- Use placement conversations to develop families by identifying knowledge gaps before accepting placements
- Reduce worker caseloads, with time to develop personal relationships between staff, families, and children and youth
- Prioritize intentional transitions between placements

Awareness

Consideration

Preparation

Support and Growth

## **Support parents both as individuals and in community**

- Develop networks like the BOND model (DC CFSA) for resource families to support each other and take on progressive leadership roles
- Provide therapy for resource families, to reflect on their own ACEs, triggers, and the pressures of fostering
- Expand training to educational professionals to go beyond preventing educational exclusion, and focus on thriving

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# Key Takeaways

## Build on and market the strengths of TFC

- A lot is working well in TFC
  - Care coordination meets the needs of children and youth
  - Evidence-based and trauma-informed training
  - Families appreciate agency support, communication, and transparency
- We need to market it better
  - Recruit more broadly and inclusively, using targeted methods
  - Highlight extra support, robust training, and reimbursement



## Coordinate across the system

- A developmental model for resource families:
  - Escalate asks across all stages
  - Human-centered case management responds to family growth needs
  - Active community of mentors and peers
  - Families can plan for growth, track progress, and level up comfortably
- Map and design the placement continuum to respond to:
  - Population needs and supply/demand issues
  - Incentive structures created by assessments, contracts, and reimbursements

 **BLOOM WORKS**

The background image is a faded photograph of a city street scene. On the left is a large, ornate, light-colored building with many windows and classical architectural details. To the right is a taller, more modern building. In the foreground, several children are running and playing in a public fountain, with water spraying up around them. Colorful balloons are visible in the air.

# Thank you!

Contact us at: [bloom-foster-fam-research@bloomworks.digital](mailto:bloom-foster-fam-research@bloomworks.digital)