



Tobacco Settlement
Revenue –
Investments in Youth

CHILD WELFARE PROMISING PRACTICE PROFILES

Alabama's Therapeutic Foster Care (TFC)

SUMMARY

Therapeutic Foster Care (TFC) is intended to provide a therapeutic environment in a home-like setting for children and youth in foster care. Foster parents who are licensed and contracted to provide TFC typically require special training or skills that enable them to work with foster youth who have special needs. TFC seeks to provide children with a safe and nurturing environment until they are able to move to a more permanent living situation, including reuniting with their parents, adoption, or guardianship. In Alabama, funds from the tobacco Master Settlement Agreement (MSA), have allowed the TFC program to sustain increased payments for foster parents who care for children; finance a new assessment process to ensure that children are placed in the most appropriate setting and provided with services that respond to their individualized needs; and support a continuum of care model to assure that children are moved expeditiously to permanency and are placed in the least restrictive setting that can meet their needs. Tobacco settlement dollars have also enabled the TFC program to draw down additional federal dollars in matching funds for eligible children.

For youth programs to be successful, policymakers, program leaders and intermediary organizations need access to flexible and sustainable sources of funding. State payments from the tobacco MSA currently fund a range of health, education, prevention, and other initiatives serving young people. This promising practice profile focuses on the use of MSA funds to support child welfare initiatives that promote the positive development of youth.

BACKGROUND

Alabama receives approximately \$100 million per year from the tobacco Master Settlement Agreement (MSA). MSA dollars are initially deposited into the 21st Century Fund, set up to receive the settlement dollars and distribute funds to pay for economic development bonds, medical care, programs for the elderly, and programs and services for children. The first \$13 million distributed from the 21st Century Fund is used for debt services on economic development bonds. The majority of the remaining funds are then transferred to the Children First Trust Fund (CFTF). Each year the legislature enacts a separate bill allocating MSA revenue to the CFTF. Funds are divided among 12 agencies for specific programs as instructed by law, including the **Therapeutic Foster Care (TFC)** program.

Funding for the TFC program is provided through the Department of Human Resources (DHR), which receives 20% of CFTF's MSA dollars annually. From 2003-2008, DHR tobacco revenues totaled about \$64 million dollars. Of that total, nearly \$34 million was allocated to TFC, or about 53% of total MSA funds. TFC payments ranged from \$3.8 million to \$9.7 million per year. TFC has been able to use MSA monies to leverage significant federal and state funding and receives approximately \$95/day per youth from State general funds and Medicaid matches.

IMPLEMENTATION

Alabama began implementing therapeutic foster care in the 1990s. Therapeutic Foster Care is a time-limited (usually no longer than eighteen months) intensive intervention for children who are in the custody of the state, not able to live at home, and who fit the diagnostic and behavioral criteria set forth by the Department of Human Resources. Therapeutic Foster Care is a less restrictive, community based program for children whose special needs can be met through services delivered primarily by trained therapeutic foster parents working in partnership with the child, the child's family, and the Individualized Service Planning (ISP) Team. Support from all team members allows the child to benefit from a home environment and community based setting while receiving intensive treatment and clinical services. All children placed in TFC are continually evaluated to determine the need for ongoing TFC services. TFC is not meant to be a long-term placement option but serves to meet a child's specific needs until he/she is ready to be moved to a less restrictive environment.

The goals of the TFC program are:

1. To enable children placed in out of home care to live in community-based therapeutic foster family homes to meet their identified complex needs.
2. To provide for increased support and compensation to foster family homes in order to provide adequate services to children.
3. To provide direct services to sexually abused children.
4. To conduct assessments for children in out of home placements to determine need and appropriateness.

TFC is housed within the Alabama Department of Human Resources and is overseen by the Alabama State Children's Policy Council. The Alabama Children's Policy Council consists of 38 members appointed by the governor, lieutenant governor, leaders of the Legislature; heads of state agencies; members of the judicial branch; and other representatives selected by the Council. The Commissioner of the Alabama Department of Children's Affairs serves as the Council's chairman, with the Chief Justice as the Vice Chair.

TFC agencies are solicited through a request for proposals (RFP) process by the Department of Human Resources. Eligible applicants include governmental agencies, faith-based organizations, non-governmental public or private organizations and qualified individuals who meet the terms and conditions of the RFP. The contract term is for a period of two years. TFC agencies are primarily responsible for treatment planning and coordination of the child's treatment team. This team is typically composed of a TFC worker, a DHR caseworker, a supervisor or clinical consultant, the child, the child's parents, the TFC foster parents, and others closely involved with the child and family. The role of the TFC foster parent is central to the success of the TFC treatment model. TFC foster parents are viewed as colleagues and team members by all staff. They serve as in-home treatment agents, implementing strategies specified in a child's treatment plan. Other major responsibilities required of TFC agencies include, but are not limited to, case assessment, case management, parent support and consultation, clinical and administrative supervision of staff, 24-hour crisis intervention, on-call services, participation on child and family planning (ISP) team, therapeutic foster care recruitment, orientation, training and selection, child intake and placement, record keeping and program evaluation.

TFC serves children/youth from birth to 21. However, children under the age of six rarely require TFC services because their needs can usually be met through traditional foster care with the aid of wraparound services. A child/youth entering into TFC must have a Diagnostic and Statistical Manual of Mental Disorders (DSM-IV) diagnosis that would require the treatment and structure offered through TFC. The DSM-IV is published by the American Psychiatric Association and provides diagnostic criteria for mental disorders. A DSM-IV diagnosis alone may not warrant a placement into TFC. The diagnosis must have an accompanied behavior that would require the treatment and structure of TFC before a child or youth would be a candidate for TFC placement.

After a child has been in placement for 6 months, a Multi-Dimensional Assessment Tool (MAT) is used to re-evaluate the child's treatment needs. The MAT is a descriptive assessment tool designed to identify current needs and strengths for children and families and is used throughout the program to track progress and determine when TFC services are no longer necessary.

MSA funds financed the development of the MAT and provide annual support for its utilization. MSA funds have also increased the capacity of the Department of Human Resources to meet the growing demand for therapeutic foster care. In 2007, over 1,400 children across the state were provided with therapeutic foster care services, with 329 children transferred to less restrictive placements. In addition, MSA dollars have allowed for sustained increased foster payments for children, including a 75 percent increase in foster care basic monthly maintenance payments in 2002.

EVALUATION

Evaluation efforts are used to inform and improve Therapeutic Foster Care (TFC) services. TFC evaluation efforts include:

- **Individual treatment.** TFC programs document the implementation of all treatment plans and track progress and outcomes on all long and short term goals throughout each child's stay in care. Tracked areas included specific behaviors, child's educational status, law enforcement status, and family involvement.
- **Follow-up to individual treatment.** TFC programs track children discharged from their care for a minimum of 6 months following their discharge.
- **Performance evaluations.** TFC programs provide TFC parents and professional staff with written performance evaluations at least annually which include descriptive assessments of their performance and specific job responsibilities and goals for improved performance.
- **Quality assurance.** TFC programs develop written quality assurance (QA) plans to monitor the performance of each program of therapeutic foster care. The TFC QA system regularly collects and analyzes data, conducts case studies, special studies and site visits to evaluate the program's performance.
- **Satisfaction surveys.** Surveys are completed by the child/youth, birth parent(s), foster parent(s), and placing agency at the end of 90 days after a child enters the TFC program and thereafter, annually, or at a child's discharge from the program.

KEYS TO SUCCESS

- ✓ Therapeutic Foster Care is an **integral part of Alabama's continued efforts to provide a continuum of services for children in foster care.**
- ✓ **MSA funds provide greater capacity to leverage funding and maximize federal revenues** by drawing down additional dollars in matching funds for eligible children.

- ✓ **Evaluation results are used to adjust program strategies and interventions** and improve outcomes.

RESOURCES

Websites

- Alabama Department of Human Resources, <http://www.dhr.alabama.gov>
- Alabama State Children's Policy Council, <http://www.dca.state.al.us/Default.aspx?catid=1&subid=6>
- American Lung Association State Legislated Actions on Tobacco Issues "SLATI" <http://slati.lungusa.org/default.asp>
- Children First Trust Fund, <http://www.dca.state.al.us/Default.aspx?catid=7>
- The Finance Project's Tobacco Settlement Revenue - Investments in Youth Initiative, <http://www.financeproject.org/tobacco>

Publications

- 2007 Children First Trust Fund Annual Report, http://www.dca.state.al.us/CMS/Files/Downloads/Copy_of_2007_CFTF_Annual_Report.pdf
- Alabama Department of Human Resources Request for Proposals, Therapeutic Foster Care for Children, March 2008, http://www.dhr.state.al.us/large_docs/TFCRFPFinal02.14.08.pdf
- Therapeutic Foster Care Manual prepared by Alabama's Department of Human Resources, June 2008, http://www.dhr.alabama.gov/large_docs/TFC%20Manual%20June%202008.pdf
- The Finance Project, *Tobacco Settlement Agreement State Profile-Alabama* (2008). Available online at: <http://www.financeproject.org/tobacco/factsheet.cfm?abbr=ME>
- Tobacco Master Settlement Agreement, Available online at: http://www.naag.org/backpages/naag/tobacco/msa/msa-pdf/1109185724_1032468605_cigmsa.pdf

CONTACT

Gary Mitchell
Program Manger, Office of Resource Development
Alabama Department of Human Resources
64 North Union Street, Room 651
Montgomery, AL 36130
334-353-1196
gary.mitchell@dhr.alabama.gov

This Profile is part of a series of resources developed by The Finance Project intended to provide key state decision makers and opinion leaders with the information and tools necessary to consider how tobacco Master Settlement Agreement revenues can support initiatives that promote the positive development of youth, including the prevention of smoking and the adoption of healthy behaviors. The Finance Project has not conducted program evaluations of the initiatives profiled and does not endorse particular policies, practices, or programs. This Profile was developed under a grant from Underage Tobacco Prevention: Philip Morris USA, an Altria Company. For more information, visit www.financeproject.org/tobacco or email tobacco@financeproject.org.