

Qualified Residential Treatment Program (QRTP)

After-Care Requirements

Summary

The intent of the after care requirement is to provide individualized community-based trauma informed services and supports that build on treatment gains to promote the safety and well-being of children and families, with the goal of preserving the child in a supportive family environment. Providing services and supports will assist in reintegrating the youth into the community while also avoiding their reentry into residential care.

Questions & Answers

1) **Q:** How are after-care supports defined?

A: Aftercare supports are the monthly (at minimum) connections that a QRTP is required to make by reaching out the youth and family to connect, but this does not require face-to-face contact. Virtual and telephonic contact are also acceptable.

2) **Q:** How are after-care services defined?

A: Aftercare services are services that the QRTP, youth and family have identified that are needed after discharge. The QRTP is required to refer and connect the youth and family to services but the QRTP does not need to be the service provider.

3) **Q:** Are all residential agencies required to provide after-care supports?

A: All child-serving residential agencies certified by ODJFS or OhioMHAS are required to provide after-care supports to any youth placed in their facilities for more than 14 days, if the youth is discharged to any setting that is not another residential or detention.

4) **Q:** Does the QRTP need to have face-to-face with the youth and family monthly for 6 months?

A: No, the QRTP is required to reach out to the family monthly to connect but this does not require face-to-face contact. Virtual and telephonic contact are also acceptable.

5) **Q:** Does the QRTP have to provide services to the family post-charge (i.e. counseling)?

A: The QRTP is required to refer and connect the youth and family to services, if the family is open to them, but the QRTP does not need to be the service provider.

6) **Q:** What if the youth and family refuses services?

A: The QRTP is still required to provide support by reaching out to the youth and family, at minimum monthly, for six months to ask if the youth and family need anything and to touch base.

7) **Q:** How will services be funded?

A: In many situations, the behavioral health services the family and youth will be referred to will be Medicaid reimbursable when the recipient is Medicaid eligible. If the youth is no longer in custody but the family is still open with the PCSA, and the service is IV-E reimbursable as approved via Ohio's IV-E Prevention Plan, the service could be IV-E reimbursable if included in the family's prevention plans.

8) Q: How will the after-care connection/contact be funded?

A: ODJFS and the other sister state agencies are working to identify protentional funding opportunities to support providers and IV-E agencies as they develop policies and plan to provide these monthly connections.

9) Q: Where will the after-care connection/contact be documented?

A: ODJFS agencies will have access to the SACWIS Residential Treatment Information System (RTIS). These connection activities will be documented within RTIS and ODJFS and IV-E staff will use this documentation to monitor the after-care requirement.

10) Q: Is aftercare still required if the youth emancipates from a QRTP?

A: Yes, referrals for services and aftercare supports are required for emancipated youth.

11) Q: Is ongoing consultation with community providers providing aftercare required?

A: Yes, the QRTP should make themselves available for consultation and document any consultation in writing.

12) Q: Is the QRTP required to provide anything in writing upon discharge of the youth?

A: Yes, the QRTP should provide written documentation to all participants with information on accessing additional supports and services from the QRTP and the community providers. This documentation should include contact information and steps to access each provider.