

THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS  
ACTION AGENDA SUMMARY

*CCP*  
DEPT: Community Services Agency

BOARD AGENDA # \*B-2

Urgent

Routine

CEO Concurs with Recommendation YES  NO

(Information Attached)

AGENDA DATE September 28, 2010

4/5 Vote Required YES  NO

SUBJECT:

Approval of the Community Services Agency and Probation Department Stanislaus County System Improvement Plan (SIP) 2010-2013 for the California Child and Family Services Program

STAFF RECOMMENDATIONS:

1. Approve the Stanislaus County System Improvement Plan (SIP) 2010-2013 for the Community Services Agency and the Probation Department.
2. Authorize the Chairman of the Board of Supervisors to sign the Stanislaus County System Improvement Plan (SIP) 2010-2013 for submission to the California Department of Social Services.

FISCAL IMPACT:

There is no fiscal impact to the County of Stanislaus associated with the Stanislaus County System Improvement Plan (SIP) 2010-2013. The Community Services Agency has budgeted \$16,987,512 to support Child Welfare Services in Fiscal Year 2010-2011.

BOARD ACTION AS FOLLOWS:

No. 2010-600

On motion of Supervisor DeMartini, Seconded by Supervisor Chiesa  
and approved by the following vote,

Ayes: Supervisors: O'Brien, Chiesa, Monteith, DeMartini, and Chairman Grover

Noes: Supervisors: None

Excused or Absent: Supervisors: None

Abstaining: Supervisor: None

1) X Approved as recommended

2) \_\_\_\_\_ Denied

3) \_\_\_\_\_ Approved as amended

4) \_\_\_\_\_ Other:

MOTION:

*Christine Ferraro*

ATTEST:

CHRISTINE FERRARO TALLMAN, Clerk

File No.

## **DISCUSSION:**

The Stanislaus County System Improvement Plan (SIP) 2010-2013 is a required component of the California Child and Family Services Review (C-CFSR), which resulted from Assembly Bill 636 (Steinberg). The purpose of the C-CFSR is to strengthen the accountability system used in California to monitor and assess the quality of services provided on behalf of maltreated children. It established core outcomes that are central to maintaining an effective system of child welfare services. The outcomes focus on the areas of child safety, permanency and well-being.

A prerequisite of the SIP is the County Self-Assessment which is also a required component of the California Child and Family Services Review. The County Self-Assessment was developed and approved by the Board of Supervisors on May 25, 2010.

The Self-Assessment was used in conjunction with the Peer Quality Case Review process to identify areas and strategies for improvement included in the System Improvement Plan (SIP). Counties are required to develop a SIP every (3) three years for submission to the California Department of Social Services (CDSS). Stanislaus County has completed two previous SIPs, in 2004 and 2007. Each of the SIPs, including the 2010-2013 document is a collaboration between the Community Services Agency and the Probation Department.

The Agency's Child & Family Services Division identified (4) four outcomes as the focus of the Stanislaus County SIP. Though opportunities for growth exist in other areas, these were the outcomes determined to be the most critical. Outcomes include:

### **1. Recurrence of Maltreatment**

Given significant shortfalls in County funding that resulted in reductions in the Child and Family Services Division, a number of important services are being dismantled that could negatively impact outcomes. These include but are not limited to Families in Partnership (intensive Family Preservation), Differential Response for children 6 – 17 years and clean and sober living facilities. The priority continues to be the safety of children in our community. Non-recurrence of abuse and neglect is a safety measure and is a priority of Stanislaus County. Stanislaus County non-recurrence rates at 94.2% remain just below the National Standard of 94.6%. Non-recurrence of maltreatment continues to be a focus of our efforts.

### **2. Placement Stability**

The Peer Quality Case Review (PQCR) process focused on the stability of placements for children and youth in foster care for 24 months or more. The group that is the least stable is the children and youth ages 11 – 15 years of age. Partnership with Foster Family Agencies (FFAs) has become a focus as the majority of these children are placed in FFA certified homes. Relative caregivers are an important factor in placement stabilization, yet the PQCR and self assessment process indicated these placements are not consistent and require more thorough review.

3. Timely Reunification

Timely reunification, without foster care re-entry, is an important priority to the Agency. Engagement of families, particularly those with substance abuse issues was an identified challenge for social workers. From the Self Assessment it was clear that providing a rich array of pre-placement preventative services produce successful outcomes. Only those participants who are resistant to services require court system involvement.

Due to greatly diminished resources, the co-location of substance abuse counselors at the Community Services Agency is no longer possible, making it very difficult to engage parents in substance abuse assessment at the Agency or in the parents' home. Instead parents must on their own follow through with referrals to community-based organizations. In some cases this may delay the ability to get parents into treatment.

Additionally, social workers may not have the expertise necessary to assess and more effectively engage substance-using parents. Enhancing family engagement skills and motivational interviewing may help social workers to develop further expertise with this population.

4. Permanency, including Reunification, Adoption & Guardianship

Permanency for children and youth is essential and contributes significantly to other outcomes. Children and youth who have been in foster care for longer amounts of time without any permanent home situation are statistically more likely to experience a placement disruption. The assessment shows that the County is challenged to find county foster homes and relatives for foster youth and relies heavily on Foster Family Agencies (FFAs) for placement.

The strategies developed in the Child and Family Services plan focus on processes, procedures and training issues that may impact outcome performance. The goal of these strategies is to minimize and mitigate any impact to children and families caused from the deterioration of performance outcomes that may result from budget reductions and changes in staffing and services.

The Probation Department identified the following (3) three outcomes as the focus of the Stanislaus County System Improvement Plan (SIP) 2010-2013:

1. Placement Assessment Tool – This new tool is in addition to the Risk/Needs assessment tool already being utilized for the Probation population.
2. Placement Matching
3. Family Engagement

Challenges identified by the Probation Department during the Self-Assessment include how to better match minors with group homes and how to encourage more families of placed minors to participate in the reunification plan. To respond to the first challenge, the Probation Department will seek a validated placement assessment tool to better determine the minors' needs and how to best match them to appropriate placements. To respond to the second and third challenges, the

Probation Department will utilize the Court to hold parents and guardians accountable for their participation in reunification services.

The Probation Department is also performing well on State and Federal outcome measures. Identified strengths include probation officer case management, rate of monthly contacts with placed minors, and collaboration with mental health and behavioral health specialists. Additionally, it was found that smaller caseloads allowed officers to maintain contact with group homes and acquire updated health and education information for minors in their care. This focus allowed officers to consistently provide assistance to parents and guardians choosing to engage in reunification services with their placed children. The Probation Department will pursue funding through the Child Welfare Services Outcome Improvement Project (CWSOIP) grant to assist in travel costs for family placement visits.

It is recommended the Board approve the Community Services Agency and Probation Department Stanislaus County System Improvement Plan (SIP) 2010-2013 for the California Child and Family Services Program.

**POLICY ISSUE:**

Approval of the Stanislaus County System Improvement Plan (SIP) 2010-2013 supports the Board's priorities of A Safe Community, A Healthy Community, Effective Partnerships and Efficient Delivery of Public Services by providing an analysis of the various outcomes, systemic factors and public/private service delivery systems in Stanislaus County that are essential to ensure that every child lives in a safe, stable, permanent home nurtured by healthy families and strong communities.

**STAFFING IMPACT:**

Existing County Staff and Community partners are committed to support the improvements outlined in the Stanislaus County System Improvement Plan (SIP) 2010-2013.

**CONTACT PERSON:**

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**CHILD AND FAMILY SERVICES  
JUVENILE PROBATION**

**SYSTEM IMPROVEMENT PLAN**



**2010 - 2013**

**BOS RESOLUTION**

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**SIP NARRATIVE**

## **SIP PROCESS:**

Stanislaus County Child and Family Services and Juvenile Probation collaborated to complete the System Improvement Plan (SIP), as was done for both Peer Quality Case Review (PQCR) and the County Self Assessment (CSA). Information gathered during Stanislaus County's PQCR and Self Assessment processes was used in conjunction to System Improvement Plan workgroups held in June and July 2010 to identify focus areas and strategies for the county SIP.

SIP workgroups were focused on one target outcome per session in order to gather the richest information from the widest audience. Both divisions addressed placement stability, as was the case during PQCR. Since the populations with the most placement disruptions are adolescent youth, many of whom become involved with both Child and Family Services and Juvenile Probation; it was deemed advantageous to conduct a workgroup with the community jointly, rather than individually. Additional brainstorming sessions were held to focus on each of the other outcomes: timely reunification, recurrence of maltreatment and permanency for children and youth.

Social Workers and Probation Officers were the focus of interviews during the PQCR process. In addition, focus groups were held at that time with current and former foster youth from CFS and probation, Foster Family Agency social workers, Supervisors and foster parents.

For the Self Assessment, focus groups were held with all social workers and supervisors from CFS by unit/program. In addition, a joint session was conducted with agency and community partners, including the Child Abuse Prevention Council (CAPC) members, which includes community partners, volunteer members, parent consumers and other important stakeholders for child abuse and neglect.

(See Attachments, pages 65, 66 for attendees for workgroups)

## **OUTCOMES:**

Child & Family Services identified four outcomes as the focus of the 2010-2013 System Improvement Plan (SIP). Though opportunities for growth exist in other areas, these were the outcomes determined to be the most critical. Outcomes include:

1. Recurrence of Maltreatment

Recurrence of abuse and neglect is a safety measure that has been the consistent priority of Stanislaus County over the years. Although we are nearing the National Standard, it continues to be the focus of our efforts. Given significant shortfalls in county funding that are resulting in an approximately 29% reduction in the Child and Family Services budget compared to two years ago, a number of important services are being dismantled that could negatively impact outcomes. These include but are not limited to Families in Partnership (intensive Family Preservation), Differential

Response for children 6 – 17 years, and sober living. Our priority continues to be the safety of children in our community.

2. Placement Stability

The PQCR process focused on the stability of placements for children and youth in foster care for 24 months or more. The group that is the least stable is the children and youth ages 11 – 15 years of age. Partnership with Foster Family Agencies (FFAs) has become a focus as the majority of our children are placed in their certified homes. Relative caregivers are an important factor in placement stabilization, yet our PQCR and self assessment process indicated that we are not consistently thorough in our relative assessment processes. When initial relative placements fail, further exploration does not consistently occur.

3. Timely Reunification

Timely reunification, without foster care re-entry, is an important priority to the agency. Engagement of families, particularly those with substance abuse issues was an identified challenge for social workers. From our Self Assessment it was clear that the rich array of pre-placement services results in only the most resistant becoming involved with the court system. Reunification can be longer when the family has already received and been unsuccessful in services.

Prior to our significant budget cuts, a substance abuse counselor was collocated at Child and Family Services to assess refer and engage families with substance abuse issues. That was a more efficient practice than simply referring a parent to a community based organization and leaving it to them to participate in an assessment, drug testing and treatment. With the elimination of substance abuse counselors and higher caseloads, we are not able to engage parents in substance abuse assessment here at the agency or in the parents' home, but depend on them to follow through with referrals on their own. This delays and may in some cases reduce the success that we have had at getting parents into treatment.

Additionally, substance abuse counselors have the expertise necessary to assess and more effectively engage substance using parents. Our social workers do not necessarily have the same level of experience in assessment and treatment. Enhancing family engagement skills and motivational interviewing may help social workers to develop further expertise with this difficult population.

4. Permanency, including Reunification, Adoption & Guardianship

Permanency for children and youth is essential and contributes significantly to the other outcomes. Children and youth who have been in foster care for longer amounts of time, without any permanent home situation, are statistically more likely to experience a placement disruption. Our assessment shows that our county is challenged to find county foster homes and relatives for our foster youth.

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The Probation Department identified the following three outcomes as the focus of the 2010-2013 System Improvement Plan (SIP):

1. Placement Assessment Tool (In addition to the risk/needs assessment tool already being utilized for this population)
2. Placement Matching
3. Family Engagement

**RESEARCH:**

Child and Family Services:

A number of evidenced-based practices are used or targeted for use in Stanislaus County's Child and Family Services Division. Differential Response (California's version of Alternative Response) is one such program. Differential Response (DR) has been found to be effective as a child abuse prevention and early intervention strategy. Our own data demonstrates clear improvements in the percentages of children who do not experience a recurrence of maltreatment since DR was implemented in 2005. While funding reductions have necessitated its elimination for children 6 to 17 years of age, it will continue for children 0 – 5 years.

Motivational Interviewing is a practice that is well supported by research evidence. It has been shown to improve substance abuse outcomes by itself, in addition to other practices. Motivational Interviewing has been identified as a targeted practice for training and implementation with social workers and community partners, such as Public Health Nurses and Family Resource Center's DR workers.

The Family to Family model has demonstrated promising research evidence in relation to permanency outcomes. Stanislaus County Child and Family services implemented the Family to Family Initiative beginning in 2002, and began having Team Decision Making (TDM) meetings in 2003. Unfortunately, due to recent budget challenges, TDM facilitators, supervisor and scheduler positions have been eliminated from the 2010/11 budget. As a result, Stanislaus County is encouraging a TDM-like meeting at the discretion of the social worker and supervisor, but is not able to mandate the evidence-based practice.

Another Family to Family strategy that Stanislaus County will expand is that of Community Partnership. In building on this existing strategy, Child and Family Services will be partnering with the community, including faith-based organizations and the United Way, to help support families at risk of child abuse and neglect prior to, during or following the provision of child welfare services.



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Wraparound is a strategy for permanency and child well-being that has demonstrated promising research evidence, particularly in the area of placement stabilization. Stanislaus County is in the process of implementing a wraparound program.

Probation:

Based on UC Berkeley data for the Probation Department, there is a need to evaluate whether minors are being properly initially and, when applicable, subsequently placed. A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Therefore, placement stability was chosen as the preferred focus area.

During the PQCR, it was evident that the probation cases reviewed indicated a theme of utilizing case management and documentation of monthly visits, contact with minors and follow up with mental health and behavioral health professionals. Probation officers regularly reviewed case plans with youth and received their feedback. Additionally, low case loads allowed officers to maintain contact with group homes and provide them with updated health and education information. However, it was also found in the areas of youth assessment and placement matching that a validated assessment tool was not utilized in making initial or subsequent placement decisions. Furthermore, even though case documentation may be up-to-date, the anecdotal information or experiences probation officers have with minors is sometimes lost when cases are transferred between officers unless they are clearly noted in the file.

**CURRENT ACTIVITIES:**

Child and Family Services:

See Attachment Section for SIP Strategy Matrix (page 59)

Probation: The Probation Department is currently engaging families to participate in reunification plans through on going monthly face-to-face or written contact with parents/guardians. Even for those minors in permanency planning where the goal is long term foster care or emancipation, the probation officers are still seeking to engage parents/guardians in assisting in the youth's transition to adulthood. Because of the nature of probation cases, probation officers routinely attempt to involve parents/guardians in the minor's overall case plan development, if available.

The Probation Officers currently have access to a website managed by the California Alliance of Child and Family Services (<http://www.cacfs.org/AboutUs>) which allows officers to search for appropriate placement vacancies based on a minor's demographics, delinquent status and/or they specific needs (arson, sex offender, etc). This has been used sparingly to identify appropriate placements for probation youth; unfortunately, the service does not encompass all California agencies, only those that

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have current vacancies. This could be considered a form of a “matching tool”; yet it is driven by the consumers of the website and not clinically validated.

**NEW ACTIVITIES:**

Child and Family Services:

Include Foster Family Agencies in Joint Assessment Meetings to make concurrent planning, permanency decisions and identify potential adoptive or other permanent homes.

Quarterly Adoption Meetings to coordinate with licensed adoption agencies serving Stanislaus County youth to ensure all children with a permanent plan of adoption find an adoptive family.

Motivational Interviewing to improve social worker, Family Resource Center and Public Health Nurse (PhN) engagement of families, particularly those with substance abuse issues.

Probation: As far as new activities utilized by Probation, the placement unit is beginning to improve family participation so that youth could reunify in a timely manner. To do this, probation will be utilizing CWSOIP funds to do the following:

1. Provide lodging/travel/food costs for parents to visit minors in placement as part of case/reunification plan.
2. Provide Transportation costs not paid for by Group Home/FFA for weekend furloughs of minors to visit family as identified in their reunification/case plan.

It can be very difficult to engage a family in the placement process once the minor has been ordered into out of home care. Probation knows that a minor has a better chance of being successful when the family is involved and participates in his/her treatment and placement program. Therefore we hope to engage families through these efforts to improve the success we have with our minors in out-of-home placement.

Furthermore, maintaining accountability of the minor while in the facility and during the duration of the placement episode is vital to the minor’s success, especially when reunification is the plan. Therefore, the following additional activity is going to be implemented:

1. Increased placement visits (in addition to monthly face-to-face contact) to include weekend and evening contacts to hold minor and Group Home/FFA accountable for program compliance.

**ACTIVITIES LINKS TO OUTCOMES:**

Child and Family Services:

Child and Family Services has many strategies outlined in the matrix designed to address the four (4) targeted outcomes. While none replace the many services and programs lost due to the dire budget situation, each builds on positive worker practices and partnerships with the community to ensure safety, permanency and well-being of foster youth.

Probation:

Through increased family participation in the reunification process, and by targeting the delivery of services to these families in the form of transportation, lodging and food costs, it would be expected that the placement stability would improve for those affected minors.

**CAPIT/CBCAP/PSSF PLAN:**

The CAPC committee who governs the distribution of CAPIT, CBCAP and Children's Trust funds were included as key stakeholders in the System Improvement Plan (SIP) process.

**PQCR Narratives**

Stanislaus County's PQCR was held over the course of three days from September 22 through 24, 2009. Each peer review team was comprised of two child welfare social workers and/or supervisors and one juvenile probation officer. Interview teams conducted a total of four interviews, three child welfare and one probation case. Stanislaus County utilized representatives from the following peer counties: Madera, Merced, San Joaquin and Tuolumne.

Probation chose cases where children had experienced instability in that the minors had been in placement more than 24 months and had more than two placements. The selected minors were still on probation and receiving services from the Department. A total of 4 probation cases were chosen and 4 interviews were conducted.

As it relates to placement stability, and based on a review and analysis of the promising practices, challenges and barriers identified in this report, it appears three major areas need to be addressed by the Probation Department:

- Placement Assessment Tool (In addition to the risk/needs assessment tool already being utilized for this population)
- Placement Matching
- Family Engagement

#### **I. Child and Family Services**

Peer Quality Case Review (PQCR) was conducted in September 2009 at the Community Services Agency. Four teams of three peer reviewers, including social workers, probation officers and supervisors, interviewed Child and Family Services social workers regarding 12 cases.

Child and Family Services selected the area of placement stability for youth ages 13 - 17 in foster care for 24 months or longer. This measure computes the percentage of children with two or fewer placements who have been in foster care for 24 months or more. Our performance in April 2009, when we identified the focus area for our PQCR, was 40.4 percent. That is just shy of the National Standard of 41.8 percent.

This measure computes the percentage of children with two or fewer placements who have been in foster care for 24 months or more. Time in care is based on the latest date of removal from the home. The denominator is the total number of children who have been in care for 24 months or more; the numerator is the count of these children with two or fewer placements. This measure contributes to the fourth permanency composite.

Although our performance related to the National Standard is not far off the mark, our County selected this area of focus due to our values and the importance we place on the success of adolescent youth while in and upon exiting foster care. The majority of our youth in foster care 24 months or longer who experience more than two placements

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are the teenagers. While placement disruptions do occur for younger children, 75% of children in placement greater than two years and have more than two placements are 13 to 17 years old.

As an Accredited Child Welfare program with the Council on Accreditation, Stanislaus County has a long history of striving for and ensuring that our child welfare program meets or exceeds best practice standards for the profession. It has long been insufficient to accept success as achieving the minimum requirements of the law, but rather to participate in continuous process improvement. As a result, Stanislaus County has sought opportunities of learning and technical assistance which include Family to Family Initiative (F2F), California Permanency for Youth Project (CPYP), Pilot 11 / Redesign participants, and most recently the California Connected by 25 Initiative (CC25I).

As part of the Family to Family Initiative, Stanislaus County Child and Family Services (CFS) implemented Self Evaluation in early 2002. Members of our agency at all levels and various partners have participated in monthly or twice monthly self evaluation meetings to analyze outcome and performance data of all types and develop strategies for improvement. As an important goal of Family to Family is to stabilize placements change rates for foster children, we began the analysis of placement disruptions at that time.

Shortly after the implementation of our Team Decision Making (TDM) meeting model, in February 2003, we began quarterly analysis of our TDM practices and placement stability rates. We have learned much from an anecdotal and qualitative perspective, but continued to desire richer case review information that may give us additional insights into our successful and non successful social work practices. In addition, we have made a number of efforts to address outcomes for adolescent youth. These include the California Permanency for Youth Project and the California Connected by 25 Initiative.

Peer Quality Case Review (PQCR) focused on placement disruptions for our most challenging to place population, that is teenagers, granted us the opportunity to conduct a more case specific examination of our most challenging cases with placement disruptions.

Common Themes:

- Youth Drug Addiction was identified as a prevalent and challenging issue that adversely affects placement stability. Substance abuse services that are specific for the adolescent population are not readily available. In discussing potential solutions to this area, it was discovered that a community organization is in the process of starting a 13 week treatment group for adolescents. Services are not billed to MediCal so CWSOIP funds will be utilized to contract for these services for the youth in foster care who need them.
- Sharing of pertinent relative, placement, youth and other information when children change social workers is an area that is not consistently addressed. The agency has

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transfer staffing and much information is documented on the transfer staffing form. In considering the observations and recommendations of the PQCR it is apparent that neither the form nor the case file contains an adequate format for summary information of the type that would better address these issues. Reviewing case files and/or CWS/CMS contact logs is a daunting task for any social worker, regardless of caseload size, so modifications to the existing form and/or summaries of issues relevant to placement disruptions may need to be integrated into practice to assist future workers to accurately capture past events.

- Child and Family Services initiatives to address permanency for youth through CPYP and California Connected by 25 Initiative have focused much of our resources and efforts on emancipation outcomes and developing life long connections for youth with a committed and caring adult. Because of the reality that some youth will emancipate from care without established legal permanency, such as adoption or guardianship, intensive efforts must be made to prepare the youth for successful independent adulthood. That is best accomplished with the commitment of at least one caring adult who will support the youth through at least the early years of adulthood. The goal of the agency is to seek out lifelong connections for youth, with the possibility that legal permanency may develop, while simultaneously preparing the youth for independent adulthood. While family finding efforts are strong when children and youth enter foster care, they diminish to some extent as the focus moves from Family Reunification to Permanent Placement. There are many valid reasons to this attribute, such as challenge of finding placement matches for difficult to place youth, youth's unwillingness to be adopted or under guardianship, youth's efforts to sabotage placements, lack of services after permanency that inhibits exiting foster care, insufficient resources to engage in intensive family finding efforts throughout the youth's stay in foster care, as well as other issues.
- Relatives are thoroughly researched and documented at the point that a youth enters foster care. These are updated annually for all youth without permanency. A lesson learned is that there may be a tendency to assume that all relatives have been ruled out early on in the dependency and reconsideration of relatives for placement would be fruitless.

## **II. Probation**

The Probation Department selected Placement Stability as the focus area due to the number of placement changes experienced by children placed through the Stanislaus County Probation Department. Based on a review of the UC Berkeley point-in-time data for Stanislaus County Probation, 88% (24 of 27) of minors in the age range from 15-17 who were in care for at least 24 months had more than two placement settings. Only 3 minors (12%) in care for the same time frame were in two or fewer placements.

Based on the data, there is a need to evaluate whether minors in this category are being properly initially and, when applicable, subsequently placed. The Stanislaus County Probation Department has three probation officers assigned to supervise minors with placement orders. A supervising probation officer supervises these officers, as well

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as three other officers assigned to the unit. The Department has 65 children with placement orders. Probation chose cases where children had experienced instability in that the minors had been in placement more than 24 months and had more than two placements. The selected minors were still on probation and receiving services from the Department. Furthermore, over 89% of the minors with placement orders were either White or Hispanic. Therefore, a cross section of four probation cases were chosen that met the above criteria and four interviews were conducted.

A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Therefore, placement stability was chosen as the preferred focus area.

During the PQCR, it was evident that the probation cases reviewed indicated a theme of utilizing case management and documentation of monthly visits, contact with minors and follow up with mental health and behavioral health professionals. Probation officers regularly reviewed case plans with youth and received their feedback. Additionally, low case loads allowed officers to maintain contact with group homes and provide them with updated health and education information. However, it was also found in the areas of youth assessment and placement matching that a validated assessment tool was not utilized in making initial or subsequent placement decisions. Furthermore, even though case documentation may be up-to-date, the anecdotal information or experiences probation officers have with minors is sometimes lost when cases are transferred between officers unless they are clearly noted in the file.

Three major areas were identified as needing to be addressed by the Probation Department:

- **Assessment**  
Even though there are internal processes for determining proper placement of foster youth, these are more informal and based on anecdotal information or, often times, an officer's experience with similar youth. While the Probation Department utilizes a validated tool for assessing each minor's risk and needs, placement officers do not have access to an assessment tool for determining the most appropriate placement option for the minor. It was recommended that the Probation Department pursue the development of a tool or evaluation of an existing tool to aid in the initial and subsequent assessment of placement youth.
- **Placement Matching**  
A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Clearly without a validated assessment of a minor's needs, it is almost impossible to expect that a foster youth is being properly placed. Current placement matching is done utilizing prior experience with similar youth and the results a particular foster agency, group home, etc may have had with those types of youth. Youth with specific treatment needs (i.e. sex offenders, arsonist, mental health, etc) continue to be placed accordingly; however, most probation placement youth come with a variety of issues and often do not have



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singular treatment focus. With introduction of a validated assessment tool, it is recommended that placement decisions are directed, in part, by the assessment. Furthermore, it was recommended that the Probation Department develop a method of measuring success rates for currently utilized foster/group homes and to track the data to create a baseline to compare against for future analysis of specific types or levels of facilities.

- Family Engagement

The PQCR process identified that placement stability is being affected, in part, on the success of the Probation Department's ability to engage families throughout the youth's placement episode. Focus on parent reunification services and follow-through on concurrent planning by utilizing relative and non-relative placements needs to be increased. It was recommended that those families/youth still receiving reunification services be directed by the Court and held accountable by Probation to actively participate in the programs/services with focus on transitioning of the youth from group home/foster care back into the home with ancillary services to be provided to assist in making the transition successful (i.e. wraparound services, TBS, etc). Additionally, it was found from the interviews that concurrent planning was not regularly discussed in the context of a documented "plan". Case plan development will ensure the inclusion of the youth and his/her parents/guardians with focus on creating documented concurrent plans should the reunification services fail. Placement findings and orders will always reflect the expected concurrent plan in those permanency cases.

**County Self Assessment Narratives**

### **Child and Family Services**

*(Child and Family Services summary Self Assessment information has been updated to reflect the major changes and budget reductions that have occurred since the County Self Assessment was submitted in May 2010).*

Stanislaus County's Child and Family Services program has been a progressive and innovative program that has been accredited by the Council on Accreditation since 1988. We strive to demonstrate and provide services to children and families, in collaboration with our community partners that are consistent with the "best practice" standards of the profession. Since our selection as a "Pilot 11" county in 2004, we have developed a strong network of community and agency partnerships and services that provide a safety net for Stanislaus County's children and families.

Stanislaus County has been performing well on most of our State and Federal Outcome measures. We certainly have the opportunity for growth and improvement, but we have a strong agency and community culture that embraces working together to accomplish the goals. Partnerships and collaboration within our county are so strong that we have developed a shared vision and responsibility for the safety, permanency and well-being of children within our community. A number of multidisciplinary processes have been developed and strengthened to achieve the strong outcomes we observe.

Stanislaus County's rate of entry into foster care has been consistently one of the lowest in the state, that is, fewer children entered foster care than in other counties. In 2009, Stanislaus County's rate of entry into foster care was 1.7 per every 1000 children, compared to a State average of 3.1 per 1000 children. That lower rate resulted from years of prevention and early intervention efforts that sought to fund pre-placement prevention services as a means of reducing high county costs associated with foster care.

Stanislaus County has been one of the few counties in the state that has had a strong network of substance abuse services and clean and sober living environments that support children and families. These have been developed out of the partnership with mental health and various community members and organizations in order to ensure safety for children. Children have frequently resided with their parents in a supervised clean and sober housing environment while their parents were participating in treatment services. Foster care placement rates and expenses were reduced for the county as a result. The supervision provided by the facility ensured that children of substance abusing parents were appropriately cared for while parents were learning to live without drugs or alcohol. Although sober living was an excellent approach to ensuring safety, it was not a mandated service required by regulation or legislation, thus was an adjunct service that was eliminated when the budget was reduced by more than 20% in the 2010/2011 fiscal year. This budget reduction has left a gap in preplacement prevention substance abuse and clean and sober living services.

In addition, our approaches to serving families have relied heavily on a multidisciplinary team approach, rather than serving families in various silos. Examples included the Families in Partnership program that serviced families with substantiated abuse or

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neglect and the Multidisciplinary Team (MDT) that serves Differential Response families.

The Families in Partnership (FIP) program has been a very unique and innovative program. Where as others struggle to facilitate communication between child welfare social workers, mental health clinicians, substance abuse counselors and public health nurse, Stanislaus made all those part of a team who worked together to serve the same children and families they might have served separately. What resulted was a more effective, coordinated system of support that prevented children from entering foster care unnecessarily. FIP worked with families at high risk of foster care entry by providing intensive family preservation services. This strong emphasis on pre-placement, preventative services resulted in fewer children entering foster care unnecessarily and provided improved permanency. As Department budgets have diminished, the county share of cost of team members has moved from the contributing department to Child and Family Services. The Board of Supervisors has provided the county share for the FIP program in very recent years, as Child and Family Services cost of doing business began to surpass the allocation. In the 2010/2011 fiscal year budget, the county determined that it could no longer provide the additional funds as many county-funded programs were experiencing reductions due the current economic crisis. Since the FIP model of family maintenance services is not a mandated approach to child welfare service delivery, the partner positions were eliminated in order to ensure that Child and Family Services can continue to meet its program mandates.

Differential Response in Stanislaus County has been another benchmark program of prevention and early intervention services in the state. Instead of waiting to intervene until the situation for the child(ren) has deteriorated, Differential Response provides for prevention and early intervention that is separate from the child protection system. Though referrals originate with calls to the child abuse hotline, the services families' receive at the Family Resource Center are voluntary and meet the needs as identified by the family. Because the threat of removing children is so stressful for families, engagement with the formal county system is less successful than with community partners who do not represent the same "authority" to the family. The Family Resource Centers and community partners, however, can be more successful in engaging families to accomplish positive change. Differential Response and its multidisciplinary team brings together Child and Family Services with Family Resource Centers and other community partners, providing a safety net for children at risk of abuse and neglect. The reciprocal communication and strong partnership between Child and Family Services and the community, is more effective in ensuring that children do not experience a recurrence of abuse or neglect. When risks are greater than originally assessed, the system is able to be more responsive than without this safety net.

Differential Response also fell victim to budget related cuts. Services for children 0 to 5 years of age and their families have been funded for the past three years by the Children and Families Commission (First 5), while Promoting Safe and Stable Families (PSSF) federal funds has supported Differential Response for children 6 to 17 years of age. Due to the significant budget reductions experienced by Child and Family Services this fiscal year (2010/2011), PSSF funds were redirected internally to support treatment and parenting services as mandated by the court. As a result, funding was

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eliminated for Differential Response to this older child population. As Requests for Proposals goes out for CAPIT, CBCAP and Children's Trust funds this fiscal year, it is anticipated that Differential Response for older children will likely be a prioritized area for services.

Team Decision Making (TDM) was another practice developed out of our Child Welfare Redesign / System Improvement efforts. Team Decision Making (TDM) is an evidenced based practice that reduces foster care entry and eliminates unnecessary placement moves for children in foster care. TDM is another example of how Stanislaus County has partnered with community and consumers to assist and protect children and families. With the TDM philosophy, Child and Family Services social workers no longer made decisions in a vacuum without the contribution of other community and agency partners, as well as the family. A facilitator brought together the important stakeholders to share in the determination of the best way to serve the family and ensure safety for the children. The agency's decision is more transparent to those who are involved with working with the family, and include those stakeholders in the decision making process. As a result, recurrence of maltreatment is reduced, unnecessary removal from home is prevented, reunification is timelier, placements are better suited to the needs of the child and thus more stable, and permanency is achieved. Team Decision Making (TDM) meetings require a neutral facilitator, thus two social workers have been dedicated to this function. Because of the profound cuts to Child and Family Services, these positions were eliminated and the staff redirected to case carrying positions whose social workers were subject to the Reduction in Force (RIF) for the 2010/2011 Fiscal Year. TDM is a recommended strategy on California's Program Improvement Plan (PIP) and has been a strategy included in Stanislaus County's System Improvement Plan (SIP) for the past 6 years; however, it is not mandated by legislation and therefore was eliminated in order to balance the Child and Family Services Division's budget.

In partnership with our community, services to youth in foster care and those aging out of the system had improved. Significant focus had been placed on connecting children to a life long connection so they exit care with a committed and caring adult who will support them as they move into independent adulthood. Stanislaus County has one of the few Family-Finding Models that use technology to search for relatives at the point that children enter foster care. A dedicated social worker position, the Permanency Specialist, ensured that relative searches and permanency work was completed for all children and youth. More children were able to reside with relatives and achieve permanency, thereby exiting foster care, as a result. This position was also eliminated in order to fill a case carrying position vacated due to Reductions in Force (RIF).

Stanislaus Child and Family Services values the well-being of children and works diligently to keep children with their siblings while in care, to promote school attendance, to support psychotropic medication use and group home care only when necessary, and to ensure children of all ages are adopted or in a permanent home of guardianship.

Child and Family Services' participation in Redesign efforts created an agency and partner culture of continuously striving to improve. Much attention has been directed to our strengths as well as our opportunities for growth. When areas of concern are demonstrated, it is our custom to seek solutions and move toward growth through

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whatever change is necessary, rather than to make excuses and accept the status quo. Our many years of accreditation and system improvement efforts speak to our on-going dedication to improving the lives of children and families in our community.

Our opportunities for growth exist as well and are areas that we will seek to find solutions in coming years. Areas to potentially address in the System Improvement Plan (SIP) include improving non-recurrence of maltreatment, placement stability, permanency for older youth, and support for parents after reunification, foster parent recruitment and training, and services to youth exiting foster care. For example, many of our foster parents are most interested in adopting infants and very small children, while the majority of children in care are older children and teenagers. Though we have expanded and improved our training curriculum for foster parents to better prepare them for parenting an older child or teen, that still is a challenge we have not overcome. As a result, permanency through adoption for older children is more difficult to achieve. Stanislaus County has a number of Foster Family Agencies (FFA) certifying foster homes in our community, which ensures more placement opportunities but at a great cost of care. Recruitment of county homes has become more challenging as foster parents are reimbursed more and receive more intensive support when certified by an FFA. FFAs have the same challenges with placement matching and recruiting adoptive homes as the county. Another reduction that Child and Family Services had to make was the elimination of the foster parent recruiter trainer position in the 2010/2011 fiscal year in order to fill a RIF vacated case-carrying position. Although this position was extraordinarily valuable, it was not mandated.

Another challenge is how to support families after they exit the child welfare system so that their children do not re-enter foster care. We have developed team decision making practices to support this, but once families are no longer connected with the system formally, they may not have the support they need to face life's challenges in the months following reunification. Funding for aftercare services are not readily available and thus is designated as an unmet need.

As indicated previously, the biggest challenge facing Child and Family Services and Stanislaus County in the next three years is the economy and the dwindling budget. As the available financial resources diminish, the community safety net we have built and the complementary service delivery systems we have established is being eroded. It is anticipated that the child welfare system in our county will become increasingly dependent upon foster care placement to ensure child safety.

The continuing poor economy and on-going housing crisis is projected to result in an approximate \$23 million dollar general fund deficit in the County for the 2010/2011 fiscal year. To address this challenge, the county reduced all staff salaries by 5 percent, and implemented 13 mandatory furlough days. In addition to this, all departments had to cut approximately 9% from their county general fund. The Child and Family Services Division budget is approximately 7% of the Community Services Agency (CSA) total budget, which totaled more than \$271 million in 2009/2010 fiscal year. The Community Services Agency budget includes programs, such as StanWORKs (CalWORKs and other Aid payments), Adult Protective Services, and In Home Supportive Services. Not all of CSA's programs require county general fund match and some have a

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maintenance of effort. A Maintenance of Effort is a minimum amount that a county must pay to operate a program. StanWORKs and Adult Protective Services are programs that have a legislated Maintenance of Effort and therefore cannot be reduced below the minimum required in County General Fund contribution; where as, Child and Family Services does not have a legislated Maintenance of Effort. This resulted in disproportionate general fund reductions to Child and Family Services. Because Realignment Revenues (sales tax revenues) have also been down, these funds are not available to supplement the difference in county general fund losses. The shortfall of more than \$600,000 in county general fund resulted in a more than \$6.2 million reduction in the overall Child and Family Services budget for the 2010/2011 fiscal year, or approximately 21%. This is in addition to cuts in the 2009/2010 fiscal year for a total of 29% across two years. This year, Child and Family Services was could not match the full basic allocation, thereby being unable to access the 100% federally funded augmentation dollars (approximately \$2,000,000) that are contingent upon fully expending the basic allocation. County instructions to departments facing reductions were to focus on mandated services and cut non-mandated programs first. In keeping with this, much of the divisions' system improvement efforts over the last several years have been severely cut and/or eliminated because they are not mandated services. In addition to services reductions, Child and Family Services division reduced staffing by 28.3% over the past two years, from 187 authorized and contracted staff two years ago to our present 134 authorized staff, representing a reduction of 53 staff. Further description of reductions can be found on page 59. This deficit in funding for Child and Family Services will reduce our ability to meet our legal mandates as well as make adequate progress on outcome improvement.

Already, we have had to reduce contracted services to families in pre-placement preventative services in order to prioritize families with court-ordered services. This could result in more children entering the court system since the pre-placement preventative services are declining.

### **Probation**

The Stanislaus County Probation Department has three probation officers assigned to supervise minors with placement orders. A supervising probation officer supervises these officers, as well as three other officers assigned to the unit. The Department has 65 children with placement orders. The majority of these minors were receiving services from the Probation Department prior to the placement orders being given by the Court. The Intake probation officer first develops the case plan with the minor and his/her parents during the initial contact with the Probation Department. The placement officer, the minor, and his or her parents update the case plan as progress is made and/or needs are identified. The probation officers make every effort to place the minor within close proximity to Stanislaus County to increase the family's ability to participate in the minor's treatment and encourage the family to maintain frequent visits with the minor while he/she is in placement. The probation officer maintains monthly face-to-face contact with all minors in placement and frequently more often. When appropriate, the Probation Department utilizes transition options for minors with reunification plans. Such options include utilizing foster family agencies and non-relative family members as part of the transition plan. In any case, the probation officer continues to assist the

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family with identifying specialized services the child may need, as well as addressing any family issues that have not been resolved while the child was in placement. The family and minor are also encouraged to continue to address the issue(s) that led the child to being placed outside the family home. Although the minor and his family have access to many services while the minor is in placement, it is common for families to not engage in reunification services because the family is not mandated by the Court to do so. As a result, probation officers focus on permanency plans when reunification services are no longer feasible or terminated. The families have access to numerous services including parenting classes, mental health services, alcohol and drug treatment, public health nurses and family service specialists. These intense services are provided for the child and family to facilitate a successful reunification.



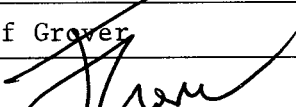
As it relates to placement stability, and based on a review and analysis of the promising practices, challenges and barriers identified in this report, it appears three major areas need to be addressed by the Probation Department:

- **Assessment**  
Even though there are internal processes for determining proper placement of foster youth, these are more informal and based on anecdotal information or, often times, an officer's experience with similar youth. No validated placement assessment tool is used in assessing what the minor's needs are and how best to match them to an appropriate placement. It will be strongly recommended that the Probation Department pursue the development of a tool or evaluation of an existing tool to aid in the initial and subsequent assessment of placement youth.
- **Placement Matching**  
As noted in the focus area section of this report, a review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Clearly without a validated assessment of a minor's needs, it is almost impossible to expect that a foster youth is being properly placed. Current placement matching is done utilizing prior experience with similar youth and the results a particular foster agency, group home, etc may have had with those types of youth. Youth with specific treatment needs (i.e. sex offenders, arsonist, mental health, etc) continue to be placed accordingly; however, most probation placement youth come with a variety of issues and often do not have a singular treatment focus. With introduction of a validated assessment tool, it is recommended that placement decisions are directed, in part, by the assessment. Furthermore, it will be recommended that the Probation Department develop a method of measuring success rates for those foster/group homes used and track the data to create a baseline to compare against for future analysis of specific types or levels of facilities.
- **Family Engagement**  
Although progress has been made in several areas previously identified in the past PQCR regarding family engagement, it appears from the current analysis that placement stability is being affected, in part, on the success of the Probation Department's ability to engage families throughout the youth's placement episode. Focus on parent reunification services and follow through on concurrent planning by



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utilizing relative and non-relative placements needs to be increased. It will be recommended that those families/youth still receiving reunification services be directed by the Court and held accountable by Probation to actively participate in the programs/services with focus on transitioning of the youth from group home/foster care back into the home with ancillary services to be provided to assist in making the transition successful (i.e. wraparound services, TBS, etc). Additionally, it was found from the interviews that concurrent planning was not regularly discussed in the context of a documented "plan". Case plan development will continue to include the youth and his/her parents/guardians with focus on creating documented concurrent plans should the reunification services fail. Placement findings and orders will always reflect the expected concurrent plan in those permanency cases.

<b>California's Child and Family Services Review System Improvement Plan</b>	
<b>County:</b>	<b>Stanislaus</b>
<b>Responsible County Child Welfare Agency:</b>	Community Services Agency Child & Family Services Division
<b>Period of Plan:</b>	<b>09/28/2010 – 09/28/2013</b>
<b>Period of Outcomes Data:</b>	Quarter ending:
<b>Date Submitted:</b>	<b>09/28/2010</b>
<b>County System Improvement Plan Contact Person</b>	
<b>Name:</b>	Janette Newberry
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<b>Submitted by each agency for the children under its care</b>	
<b>Submitted by:</b>	<b>County Child Welfare Agency Director (Lead Agency)</b>
<b>Name:</b>	Christine Applegate
<b>Signature:</b>	
<b>Submitted by:</b>	<b>County Chief Probation Officer</b>
<b>Name:</b>	Jerry Powers
<b>Signature:</b>	
<b>Board of Supervisors (BOS) Approval</b>	
<b>BOS Approval Date:</b>	September 28, 2010
<b>Name:</b>	Jeff Grover
<b>Signature:</b>	

### **Child and Family Services Narrative**

The information obtained through the PQCR and County Self Assessment processes led to the identification of outcomes and strategies for the System Improvement Plan (SIP). Activities that were targeted were practical given all the significant funding challenges experienced by the Child and Family Services Division.

Stanislaus County has experienced many unique challenges during the present fiscal climate. These are outlined in the Self Assessment discussion section.

The serious revenue shortfalls have led to the elimination or reduction of many 2007-2010 System Improvement Plan (SIP) strategies and other system improvement efforts. Many of the innovative practices that Stanislaus County's Child and Family Services program was known for have ended as a result. See the Attachments Section (page 59). The SIP strategies for the coming 3 year period are centered on training, practice change, or community partnerships that do not require funding.

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youth and the results a particular foster agency, group home, etc may have had with those types of youth. Youth with specific treatment needs (i.e. sex offenders, arsonist, mental health, etc) continue to be placed accordingly; however, most probation placement youth come with a variety of issues and often do not have singular treatment milieu. With the introduction of a validated assessment tool, it is recommended that placement decisions are directed, in part, by the assessment. Furthermore, it was recommended that the Probation Department develop a method of measuring success rates for currently utilized foster/group homes and to track the data to create a baseline to compare against for future analysis of specific types or levels of facilities.

- Family Engagement

The PQCR process identified that placement stability is being affected, in part, on the success of the Probation Department's ability to engage families throughout the youth's placement episode. Focus on parent reunification services and follow-through on concurrent planning by utilizing relative and non-relative placements needs to be increased. As a result, those families/youth still receiving reunification services will be directed by the Court and held accountable by Probation to actively participate in the programs/services with focus on transitioning of the youth from group home/foster care back into the home with ancillary services to be provided to assist in making the transition successful (i.e. wraparound services, TBS, etc). Additionally, it was found from the interviews that concurrent planning was not regularly discussed in the context of a documented "plan". Case plan development will ensure the inclusion of the youth and his/her parents/guardians with focus on creating documented concurrent plans should the reunification services fail. Placement findings and orders will always reflect the expected concurrent plan in those permanency cases.

One activity currently in place that will impact the outcomes is the use of CWSOIP funds to support family engagement. With the 2010/2011 CSWSOIP allocation, Probation will provide parents and guardians with the financial support necessary to visit placed minors in California locations of significant distance from Stanislaus County. This will also include the families of minors currently placed in Pennsylvania, Arizona, and Nevada. This will also support meeting the goals of each minor's reunification plan.

Another potential impact on the outcomes is the apparent lack of placement matching tools available for utilization. Probation will be seeking technical assistance to meet this need.

**CHILD & FAMILY SERVICES/PROBATION  
SIP MATRIX**

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SIP Component Template

<b>Outcome/Systemic Factor:</b> <b>NO RECURRENCE OF MALTREATMENT – CHILD AND FAMILY SERVICES</b>					
<b>County's Current Performance:</b> According to the Quarter 2, 2009 Outcome and Accountability Report (review dates 7/1/08 – 12/31/08), 92.0% of children with a substantiated incident of abuse or neglect did not have a subsequent substantiated allegation within the following six months. The rate of no recurrence had improved as of Quarter 4 2009 (1/1/09 – 12/31/09) to 94.2 percent, just below the National Standard (94.6%) for this measure. The overall trend has been improving over the past several years. Analysis of Quarter 4 data shows that recurrence is worse for those children who are victims of neglect (93.9%) and physical abuse (93.8%), although 88% of the allegations were for neglect and only 3% were for physical abuse. For those children most vulnerable, that is 0 to 5 years of age; children 1-2 years of age did not have repeat maltreatment in 90.2% (120 of the 133) of the cases. The children under 1 and those between 3 and 5 years did not have repeat maltreatment 95% of the time, thereby meeting the National Standard. For those 1 to 2 year olds, all repeat occurrences were the result of neglect. Children between 6 and 10 yrs (93.9%) and 11-15 yrs (94.1%) had better outcomes than the smaller children but still did not meet the goal of 94.6%. All other age groups are meeting the National Standard for this measure.					
<b>Improvement Goal 1.0</b> Increase the percentage of children ages 1 – 2 years of age who do not experience a recurrence of neglect from 90.2% to 94.6%					
<b>Strategy 1. 1</b> Management Review of repeat maltreatment cases.		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale</b> Children 1 – 2 years of age are most likely of the 0 – 5 age group to experience repeat maltreatment. Since services for children 0 to 5 through Differential Response continue, some of the community safety net remains in place and can support children at home.		
<b>Milestone</b>	<b>1.1.1</b> Obtain case lists for children 1 – 2 years that are victims of repeat maltreatment.	<b>Timeframe</b>	November 2010	<b>Assigned to</b>	Data Analyst/ Researcher
	<b>1.1.2</b> Complete case analysis of specific cases to determine factors that contributed to the repeat maltreatment.		January 2011		Janette Newberry, Mgr III System Improvement & Adoptions
	<b>1.1.3</b> Make recommendations to leadership team regarding training, policies or service gaps that might have prevent these occurrences.		March 2011		Management Team
	<b>1.1.4</b> Update policies and procedures and/or schedule recommended training		May 2011		Management Team

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<p><b>Strategy 1. 2</b> Use Motivational Interviewing Techniques to engage families in services and substance abuse treatment.</p>		<input type="checkbox"/> CAPIT	<p><b>Strategy Rationale</b> Motivational Interviewing is an evidenced based practice that has been proven successful in engaging even substance abusing individuals. As the vast majority of our families have substance abuse issues, this skill will improve our engagement. Given that the availability of substance abuse services has declined, and sober living is no longer a service funded by CFS, the successful engagement of families is critical. Since Differential Response to children 0 to 5 and their families continues due to the Children and Families Commission funding, Family Resource Centers will continue to be involved in preventative services.</p>		
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		<input type="checkbox"/> N/A			
<b>Milestone</b>	1.2.1 Train Social workers, Public Health Nurses and Family Resource Center outreach workers in Motivational Interviewing	<b>Timeframe</b>	March 2011	<b>Assigned to</b>	Behavioral Health & Recovery Services (BHRS) Regional Training Academy Adoption Supervisor/Staff Developer System Improvement Manager
	1.2.2 Update/create agency policies that reflect the value and practice of motivational interviewing.		May 2011		System Improvement Manager
	1.2.3 Provide Supervisor support to staff for use of these skills.		ongoing		Supervisors
<p><b>Strategy 1. 3</b> For those referrals regarding 0 to 5 year olds, whose risk and safety assessment indicates a 10 day referral is appropriate, increase the percentage that are referred for a Path 2 joint response with Family Resource Centers from 23% to 40%.</p>		<input type="checkbox"/> CAPIT	<p><b>Strategy Rationale</b> Differential Response has been demonstrated to be an evidence based practice and recurrence of maltreatment has declined since implementation. In 2009/2010, joint Path 2 visits declined to 23% from a previous 52-65% range for 0-5 year olds. Examination of data and report from FRCs indicates that some social workers conduct joint visits more than half the time, while some do so significantly less or not at all. While DR with Family Resource Centers is ending for 6-17 year olds due to budget constraints (funding for runaway teens and parent child conflicts continues with Hutton House at least through 2010), Prop 10/Children and Families Commission will continue to fund DR for 0-5 years. Since 1-2 year olds experiencing general</p>		
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		<input type="checkbox"/> N/A			



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				neglect have the greatest chance of repeat neglect, this is a targeted focus of our SIP.	
<b>Milestone</b>	<b>1.3.1</b> Update policies and procedures for DR to include joint visits on Path 2 cases of neglect for 0 – 5 years.	<b>Timeframe</b>	October 2010	<b>Assigned to</b>	Emergency Response Supervisors and Manager
	<b>1.3.2</b> Train social workers and FRCs on the new procedures.		November 2010		Emergency Response Supervisors and Manager
	<b>1.3.3</b> Supervisors will monitor for joint visit appropriateness and compliance.		Ongoing		Emergency Response Supervisors
	<b>1.3.4</b> Business Objects reports quarterly to Supervisors and Manager to monitor progress		Quarterly		System Improvement Manager

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<b>Improvement Goal 2.0</b>					
Increase the percentage of children between the ages of 6 and 15 years who do not experience a recurrence of abuse or neglect from 93.9% and 94.1%, respectively, to 94.6%					
<b>Strategy 2. 1</b>		<input type="checkbox"/> CAPIT	<b>Strategy Rationale</b> More cases of child abuse have collateral issues of domestic violence which impact the safety and wellbeing of children. Stanislaus County has been in process of implementing a Family Justice Center which will bring together services to address family violence in one central location.		
Implement the Family Justice Center in Stanislaus County to collaboratively address family violence, including domestic abuse, physical and sexual abuse.		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		<input type="checkbox"/> N/A			
<b>Milestone</b>	<b>2.1.1</b> Partner with the District Attorneys Office and other partners to establish policies and procedures for the Family Justice Center	<b>Timeframe</b>	2011	<b>Assigned to</b>	Assistant Director, Emergency Response Manager and CAIRE Center Supervisor
	<b>2.1.2</b> Co-locate CAIRE Center at the Family Justice Center		2011		Assistant Director, Emergency Response Manager and CAIRE Center Supervisor
<b>Strategy 2. 2</b>		<input type="checkbox"/> CAPIT	<b>Strategy Rationale</b> Many formal services have been cut by Child and Family Services due to extraordinary budget deficits. Services are limited or unavailable for children with extraordinary medical, developmental and behavioral needs, teens, etc. Respite services at Children’s Crisis Center (CBCAP) for children ages 6 – 9 are insufficient to meet community need. Services to runaway teens are increasingly in demand and are presently inadequate to serve the need. Funding for these services is at risk. Because CFS cannot afford to pay for more formal supports for families, outreach to the Faith and other community partners to coordinate efforts to support families may put into place the informal supports that help families be successful. (CBCAP funding is not targeted for faith partners, but rather Respite services. Faith partner collaboration is not a funded activity but rather a collaboration effort.)		
Partner with Faith-based and other Community partners to provide supportive services to children and families at risk of abuse and neglect, e.g. Respite (Children’s Crisis Center), etc. Due to confidentiality, information will be provided to families regarding available services and supports so that they can self-select those which will help their family.		<input checked="" type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		<input type="checkbox"/> N/A			

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<b>Milestone</b>	<b>2.2.1</b> Outreach to Faith-based and other community organizations and churches.	<b>Timeframe</b>	December 2010		<b>Assigned to</b>	System Improvement Manager
	<b>2.2.2</b> Facilitate Meeting with Faith and other Community partners to determine available services and supports that they can provide.		February 2011			System Improvement Manager
	<b>2.2.3</b> Create a Directory of Faith and other Community Partners and the resources/supports that they can provide to families.		March 2011			System Improvement Manager
	<b>2.2.4</b> Communicate regularly with Faith and other community members to facilitate partnership		May 2011			System Improvement Manager
<b>Strategy 2.3</b> Improve social worker and community partner awareness of supportive services in the community, such as parenting, support groups, AA/NA, food closets, respite services, latchkey, etc.		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale</b> Services in Stanislaus County are limited primarily due to budget cuts and financial stresses. Many services that exist are limited in capacity while others are unknown to the child welfare agency and therefore not formally referred by CFS, such as parenting classes, support groups, food closets, respite services, latchkey, etc. Because community based services are constantly changing, social workers are not always aware of these services. Family Resource Centers, faith community members and other public or private agencies may be aware of services that we are not tapping into for our CFS families.			
<b>Milestone</b>	<b>2.3.1</b> Outreach to Family Resource Centers, United Way, Health Services Agency and other community partners to gather resource information.	<b>Timeframe</b>	November 2010		<b>Assigned to</b>	System Improvement Manager CFS Supervisors
	<b>2.3.2</b> Generate/update local databases and information for social workers and community partners to distribute to families		February 2011			System Improvement Manager CFS Supervisors
	<b>2.3.3</b> Update Information Quarterly		May 2011			System Improvement Manager CFS Supervisors

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<p><b>Strategy 2.4</b> Child Abuse Prevention Committee (CAPC) will outreach to community regarding abuse and neglect prevention, including Differential Response for 6 – 17 year olds, CAPC program expansion outreach, relative caregiver services &amp; supports, and homeless teens.</p>		<input type="checkbox"/>	<b>CAPIT</b>	<p><b>Strategy Rationale</b> Differential Response to 6 – 17 year olds with the Family Resource Centers has been eliminated, with the exception of services to runaway teens who are served through December 2010. These services, though present at Hutton House, are inadequate to meet local needs (CBCAP). Additionally, relatives care for children without juvenile court involvement. Services to these caregivers, predominantly grandparents, are insufficient to meet community needs. Leadership outreach and prevention campaign to new targeted communities regarding abuse and neglect prevention.</p>	
		<input checked="" type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<p><b>2.4.1</b> Child Abuse Prevention Committee (CAPC) will identify areas of need to target for outreach efforts, e.g. Ethnic groups</p>	<b>Timeframe</b>	October 2010	<b>Assigned to</b>	Assistant Director, CAPC Coordinator and CAPC committee
	<p><b>2.4.2</b> Agency leadership and CAPC leadership will contact and meet with various community groups to develop relationship and basis for education</p>		February 2011		Assistant Director, CAPC Coordinator and CAPC committee
	<p><b>2.4.3</b> Provide training and Education as determined by the Partnership.</p>		FY 2011/12		Assistant Director, CAPC Coordinator and CAPC committee

**Describe any additional systemic factors needing to be addressed that support the improvement plan goals.**

The elimination of important services and supports due to budget challenges in Child and Family Services may hinder continued progress toward meeting goals in this area. The elimination of programs such as Families in Partnership, Differential Response (for 6-17 year olds), sober living, and other best practices such as Team Decision Making (TDM) meetings will seriously undermine the safety net for children.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.**

Training on Motivational Interviewing, an evidence based practice, will be an important skill set for social workers and Family Resource Centers during these times of shrinking resources. The elimination of substance abuse counselors as part of the team has many social workers feeling powerless to positively impact families. By learning additional skills to motivate families, they may become less reliant on substance abuse experts for successfully engaging substance abusing families.

**Identify roles of the other partners in achieving the improvement goals.**

The Regional Training Academy will provide the training. The Child Abuse Prevention Counsel will partner with Child and Family Services on community education. They are already doing so through various efforts, such as the Child Abuse Calendar and Shaken Baby Syndrome campaign but will continue to establish more efforts for community awareness and education. The Child and Family Services Division will partner with faith based organizations and other community groups to provide support for children and families at risk of child abuse and neglect.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**

N/A



SIP Component Template

<b>Outcome/Systemic Factor:</b> <b>TIMELY REUNIFICATION – CHILD AND FAMILY SERVICES</b>					
<b>County's Current Performance:</b> According to the Quarter 4 Outcomes Summary, of those children that exited to Reunification between 1/1/09 to 12/31/09, 69.2% did so within 12 months of entering foster care, short of the National Standard of 75.2%. Children between the ages of 0 and 5 years reunified within 12 months 78% of the time, thus meeting the outcome. For children 11-15 years, 67% reunified with 12 months, where as 6 – 10 year olds only reunified with 12 months 57% of the time. There were 7 children reunified between the ages of 16 and 17 years, of whom on 43% (3 children) reunified within 12 months. An additional 7 children needed to reunify in less than 12 months in order to meet the standard. For those children who entered foster care for the first time, 20.4% exited to reunification within 12 months, less than half of the National Standard of 48.4%. Stanislaus must double the number of first entries that reunify within 12 months to meet this measure. Stanislaus County's median time to reunification is 9.3 months, greater than the National Standard of 5.4 months. Children re-enter foster care 8.7% of the time, which is better than the National Standard of 9.9%.					
<b>Improvement Goal 3.0</b> Increase the number of children who enter foster care for the first time, who reunify within 12 months from 20.3% to 30.5%.					
<b>Strategy 3.1</b> Use Motivational Interviewing Techniques to engage families in services and substance abuse treatment.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	<b>Strategy Rationale</b> Motivational Interviewing is an evidenced based practice that has been proven successful in engaging even substance abusing individuals. As the vast majority of our families have substance abuse issues, this will improve our engagement. Given that the availability of substance abuse services has declined, and sober living is no longer a service funded by CFS, the successful engagement of families is critical.		
<b>Milestone</b>	<b>3.1.1</b> Train Social workers, Public Health Nurses and Family Resource Center outreach workers in Motivational Interviewing	<b>Timeframe</b>	March 2011	<b>Assigned to</b>	Regional Training Academy Adoption Supervisor/Staff Developer System Improvement Manager
	<b>3.1.2</b> Update/create agency policies that reflect the value and practice of motivational interviewing.		May 2011		System Improvement Manager
	<b>3.1.3</b> Provide Supervisor support to staff for use of these skills.		ongoing		Supervisors
<b>Strategy 3.2</b>		<input type="checkbox"/> CAPIT	<b>Strategy Rationale</b>		

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Implement the practice of "Icebreaker Meetings" to assist birth parents and foster parents to develop a cooperative relationship		<input type="checkbox"/>	<b>CBCAP</b>	Parents are more successful in reunification when they have a positive relationship with the caregiver of their children. When children are placed in a foster home or FFA home, the parents do not know the caregiver and often fear for the wellbeing of their children and that the caregiver just wants to take the child away. During the Icebreaker meeting the birth parent and caregiver exchange information about the child, such as bedtime routine, eating preferences, routines, and preferences. Icebreakers also work to stabilize placements and prevent unnecessary disruption. Both county and FFA social workers/supervisors recommended this strategy.	
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>3.2.1</b> Update current Icebreaker Policy	<b>Timeframe</b>	November 2010	<b>Assigned to</b>	Court/Reunification Managers Supervisors
	<b>3.2.2</b> Train social workers and FFAs on Ice Breaker philosophy and procedure		January 2011		Manager & Supervisors
	<b>3.2.3</b> Social workers from CSA or FFA will implement Icebreaker meetings between the birth parent and substitute caregiver.		March 2011		Agency & FFA social workers
<b>Strategy 3. 3</b> Enhance Visitation between birth parents/guardians and children		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Research indicates that one of the most important factors in successful reunification is visitation between parent and child. The Court is presently ordering visitation weekly for every child, regardless of parents' participation in services. This poses challenges due to limited resources to support visitation, foster parent schedules, social worker caseloads, etc. During SIP strategy workgroups many FFAs indicated that this was an area that they can assist.	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>3.3.1</b> Participate with the Court in Visitation subcommittee	<b>Timeframe</b>	ongoing	<b>Assigned to</b>	Manager Court/FR Supervisors
	<b>3.3.2</b> Partner with FFAs, Faith Community, Friends Outside, United Way to support more meaningful visitation between parents and		November 2010		Manager Supervisors FFAs

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	children during the reunification process.				
	<b>3.3.3</b> Update policies and procedures on visitation		January 2011		Manager Supervisors
	<b>3.3.4</b> Train Social workers and FFAs on Purposeful Visitation		July 2011		Regional Training Academy



<b>Strategy 3.4</b> Enhance linkages partnership with StanWORKs for reunification families.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Per AB429, Welfare to Work families may be eligible for services funded through CalWORKs. This was not previously pursued for families also involved with Child and Family Services. Due to the elimination of sober living and other services because of Child and Family Services funding, it is necessary to reconsider this as a potential strategy.		
		<input type="checkbox"/>	<b>CBCAP</b>			
		<input type="checkbox"/>	<b>PSSF</b>			
		<input type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>3.4.1</b> Review AB429 regulations to determine how to provide otherwise unavailable services through Welfare to Work (WTW) funding.	<b>Timeframe</b>	December 2010		<b>Assigned to</b>	Assistant Director Linkages Manager
	<b>3.4.2</b> Review policies and procedures from other linkages counties.		February 2011			Assistant Director Linkages Manager
	<b>3.4.3</b> Meet with StanWORKs to discuss AB429 and how to link WTW families to services funded through Linkages.		June 2011			Assistant Director Linkages Manager
<b>Strategy 3.5</b> Partner with the faith and other community partners to provide supportive services to children & families during and after the reunification process.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Many formal services have been cut by Child and Family Services due to extraordinary budget deficits. Because CFS cannot afford to pay for more formal supports for families, outreach to the Faith and other community partners to coordinate efforts to support families may put into place the informal supports that help families be successful. Due to confidentiality, service options will be provided to families for them to self-select which partners to engage in supporting their own family.		
		<input type="checkbox"/>	<b>CBCAP</b>			
		<input type="checkbox"/>	<b>PSSF</b>			
		<input type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>3.5.1</b> Outreach to Faith-based and other community partners.	<b>Timeframe</b>	December 2010 & ongoing		<b>Assigned to</b>	System Improvement Manager
	<b>3.5.2</b> Facilitate meeting with Faith and other community partners to determine available		March 2011			System Improvement Manager

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services and supports they can provide		
<b>3.5.3</b> Create a Directory of Faith and other community partners and the resources/supports that they can provide to families. Provide this information to families so they can self select which services will benefit them.	May 2011	System Improvement Manager
<b>3.5.4</b> Create policies & procedures for staff.	May 2011	System Improvement Manager
<b>3.5.5</b> Communicate regularly with Faith and community partners to facilitate partnership	May 2011 & on-going	System Improvement Manager

**Describe any additional systemic factors needing to be addressed that support the improvement plan goals.**

Staffing reductions and funding reductions may result in significant challenge in the timely reunification of families. Services, such as sober living and SafeCourt (Dependency Drug Court) have enabled Child and Family Services to return children whom are at high risk to their parents in a supervised and safe living situation while participating in treatment. Without these services, in combination with significant housing issues in the county, children may be delayed in returning home while parents make significant progress in services and obtain suitable housing.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.**

Purposeful visitation training provided by the Regional Training Academy

**Identify roles of the other partners in achieving the improvement goals.**

FFA social workers are an important part of achieving the reunification goals as so many children/youth are placed in their agency's homes.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**

N/A

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SIP Component Template

<b>Outcome/Systemic Factor:</b>					
<b>PLACEMENT STABILITY – CHILD AND FAMILY SERVICES</b>					
<b>County's Current Performance:</b>					
According to the Quarter 4 2009 Outcomes Report, Stanislaus County Child and Family Services is meeting the National Standard (65.4%) for placement stability for children in care for 12 to 24 months, with 67.7% of children having 2 or fewer placements. When evaluated by age, children between 11 and 15 years are not meeting the goal with only 50% experiencing minimal moves. For children in foster care from 8 days to 12 months we are falling short of the National Standard (86.0%) with 82.8% of our children having 2 or fewer placements. Only children between 6 and 10 years of age are meeting this standard at 92%, with only 64% of 11 – 15 year olds having 2 or fewer placements. For those children who have been in care 24 months or more, only 29.8% of children have been in 2 or fewer placements during their entire stay in foster care. That is significantly short of the National Standard (41.8%). Our performance is poorest with respect to children ages 11 – 15 years, for whom only 21% have two or fewer placements. Children in this age range are most stable when placed with relatives, with 39% experiencing stability. In order to meet the National Standard on this measure, 25 more children would need to experience greater stability in foster care placements.					
<b>Improvement Goal 4.0</b>					
Increase the percentage of children in foster care for 24 months or more who have two or fewer placements from 29.8% to 35%.					
<b>Strategy 4.1</b>		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	<b>Strategy Rationale</b>		
Implement Wraparound Program			Wraparound has demonstrated promising research evidence for improving placement stability. Our self assessment and PQCR both indicated challenges with stabilizing placements due to behavior problems. Stanislaus has not had a wraparound program in place but is in the process of implementation.		
<b>Milestone</b>	4.1.1 Release Request for Proposal (RFP)		<b>Timeframe</b>	August 2010	<b>Assigned to</b>
	4.1.2 Implement Contracts with service providers		January 2011	Manager – CSA Permanency Unit	
	4.1.3 Train CFS & Wraparound providers	March 2011	Manager – CSA Permanency Unit & Contract Division Wraparound Steering Committee Manager – CSA Permanency Unit		
<b>Strategy 4.2</b>		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	<b>Strategy Rationale</b>		
Train social workers and FFA staff on Grief and Loss			Our PQCR process indicated that social workers are not consistently addressing issues of grief and loss with their children/youth in placement. It is assumed to be the mental health clinicians' role, and is thus not addressed when a child is stabilized enough to be closed to mental health.		

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<b>Milestone</b>	<b>4.2.1</b> Provide Training to County Social Workers	<b>Timeframe</b>	July 2010		<b>Assigned to</b>	Regional Training Academy
	<b>4.2.2</b> Update policies and procedures to make any needed policy changes to incorporate knowledge into practice		October 2010			Managers & Supervisors
	<b>4.2.3</b> Provide training to FFA social workers		July 2011			Regional Training Academy
<b>Strategy 4. 3</b> Explore models of orientation/training for youth entering foster care to facilitate their adjustment / transition into care.			<input type="checkbox"/> <b>CAPIT</b>	<b>Strategy Rationale</b> Our foster youth report confusion about foster care and what to expect. This contributes to their instability in care and tendency to runaway. Youth recommended that some type of training and orientation for youth entering care be explored and implemented. Expand discussion.		
			<input type="checkbox"/> <b>CBCAP</b>			
			<input type="checkbox"/> <b>PSSF</b>			
			<input type="checkbox"/> <b>N/A</b>			
<b>Milestone</b>	<b>4.3.1</b> Research models of youth orientation to foster care	<b>Timeframe</b>	November 2010		<b>Assigned to</b>	Youth Advisory Council
	<b>4.3.2</b> Review models and make recommendations for implementation including resourcing the effort		March 2011			Manager Supervisor Youth Advisory Council
	<b>4.3.3</b> Test recommended model contingent upon approval and resource availability		June 2011			Manager Supervisor Youth Advisory Council
<b>Strategy 4. 4</b> Team meetings for children/youth with 3 or more placement disruptions in a quarter. Attendees to include the caregiver, birth parent, youth, social worker and service providers.			<input type="checkbox"/> <b>CAPIT</b>	<b>Strategy Rationale</b> Stanislaus County has used TDM meetings, facilitated by a dedicate facilitator, since 2003 to stabilize placements and/or make placement decisions. Due to budget reductions, staffing dedicated to TDMs has been eliminated. A team process has been demonstrated and is a promising evidence based practice related to placement stability.		
			<input type="checkbox"/> <b>CBCAP</b>			
			<input type="checkbox"/> <b>PSSF</b>			
			<input type="checkbox"/> <b>N/A</b>			
<b>Milestone</b>	<b>4.4.1</b> Update policies & procedures to reflect this new recommended practice	<b>Timeframe</b>	November 2010		<b>Assigned to</b>	System Improvement Manager



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	<b>4.4.2</b> Train social workers on team decision meeting facilitation		July 2011		Regional Training Academy
<b>Strategy 4.5</b> Provide training to social workers regarding cultural issues and their impacts on placement.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Information learned in the PQCR process indicates that social workers, county and FFA, are not consistently aware of the impact of culture on placement and may inadvertently make placements that result in conflicts due to this.	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>4.5.1</b> Provide training on culture and the impact on placement.	<b>Timeframe</b>	June 2011	<b>Assigned to</b>	Regional Training Academy
	<b>4.5.2</b> Make needed changes to policies & procedures as indicated by this training.		July 2011		Managers
<b>Strategy 4.6</b> In partnership with Foster Family Agencies (FFAs), a child social history form will be developed to assist agency and FFA social workers in finding a placement family for a child.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Foster Family Agencies and county social workers expressed challenges in effectively matching children to a foster home. When children are new to foster care, or even to the social worker, they lack the needed information to help a potential placement determine if the child would be a good match for the home.	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>4.6.1</b> Review sample tools at FFA Quarterly meeting.	<b>Timeframe</b>	September 2010	<b>Assigned to</b>	Supervisors Foster Family Agency staff
	<b>4.6.2</b> Formulate and approve final questionnaire		December 2010		Supervisors Foster Family Agency staff
	<b>4.6.3</b> Modify/develop agency policies and procedures		February 2011		Supervisors Foster Family Agency staff
	<b>4.6.4</b> Train county and FFA social workers in the use of the questionnaire		May 2011		Supervisors Foster Family Agency staff
<b>Strategy 4.7</b> Partner with Foster Family Agency (FFA) to coordinate and facilitate pre-placement visits for children/youth prior to a		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Placements are more successful when children have the opportunity to visit foster homes temporarily to evaluate for	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		

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placement change.		<input type="checkbox"/>	N/A	suitability for child's needs. Due to the emergency nature of most placements and the limited placement resources, there is often insufficient time to for pre-placement visits prior to the placement move must occur.	
<b>Milestone</b>	4.7.1 Using the Plan.Do.Study.Act (PDSA) methodology, test out possible strategies of pre-placement visits with FFAs.	<b>Timeframe</b>	November 2010	<b>Assigned to</b>	FFA social workers County social workers Supervisors
	4.7.2 Develop policies and procedures or suggested practice guides to inform staff of successful strategies for pre-placement visits.		January 2011		Manager Supervisor FFA
	4.7.3 Train social workers on procedures		March 2011		Manager Supervisor FFA

**Describe any additional systemic factors needing to be addressed that support the improvement plan goals.**

Foster Parent recruitment and training has long been a challenge for the county given the large number of Foster Family Agencies (FFAs) operating within the county. FFAs offer greater financial support to foster parents, as well as weekly social worker support. Most of the foster parents being licensed by the county were preferring adoption with little risk of reunification. Babies and small children are the preference of county homes. As a result, and due to the elimination of the foster parent recruiter trainer position, Stanislaus County will rely more heavily on Foster Family Agencies for young children and those without behavioral challenges.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.**

Wraparound Consultation, Grief and Loss Training, Cultural issues and the impact on placement.

**Identify roles of the other partners in achieving the improvement goals.**

Foster Family Agencies (FFAs) are significant partners in the placement and stabilization of children in foster care.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**

N/A

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SIP Component Template

<b>Outcome/Systemic Factor:</b> <b>PERMANENCY THROUGH ADOPTION, GUARDIANSHIP OR LIFE LONG CONNECTION</b>					
<b>County's Current Performance:</b> Per the Quarter 4 2009 Outcomes Report, between 1/1/2009 and 12/31/2009 only 18.2% of children in foster care for 24 months or more exited to some form of permanency, significantly less than the National Standard of 29.1%. Of those children who emancipated during that same time period, 48.8% had been in foster care for 3 or more years. Analysis of data through business objects indicates that only 34.6% of children in placement have a concurrent plan. Supervisors also report an increase in the number of children transferring through the system without an identified concurrent plan should reunification not be successful.					
<b>Improvement Goal 5.0</b> Increase the percentage of children with a concurrent plan of adoption or guardianship from 34.6% to 50%.					
<b>Strategy 5. 1</b> Joint Assessment Meetings (JAM) will be revised and expanded to include FFAs in identifying permanent homes for children.		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale</b> Joint Assessment Meetings (JAM) were an internal process developed to identify concurrent homes for children in foster care. Typically, county licensed foster/adoptive homes would be considered and FFAs or private agencies would be explored only when internal resources were insufficient. During the Self Assessment it was learned that FFAs are not being searched for concurrent homes upfront in the process, but rather when no alternatives present themselves and reunification efforts fail.		
<b>Milestone</b>	<b>5.1.1</b> Revise policy and procedures for JAMs.	<b>Timeframe</b>	November 2010	<b>Assigned to</b>	Adoption Supervisor Court/FR Supervisors Manager
	<b>5.1.2</b> Train staff and implement policy changes		January 2011		Adoption Supervisor Court/FR Supervisors Manager
	<b>5.1.3</b> Meet at least quarterly with FFA and private adoption agency leadership to discuss adoptions progress and any additional changes, strategies or supports.		November 2010		Adoption Supervisor Manager

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	<b>5.1.4</b> Explore strategies to monitor effectiveness of FFAs on outcomes.		March 2011		Data Analyst Researcher System Improvement Manager
<b>Strategy 5. 2</b> Increase Guardianship awareness as an acceptable permanent plan.		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale</b> Agency culture has been so strongly in favor of adoption that guardianship is not often considered as an acceptable permanent alternative for children.		
<b>Milestone</b>	<b>5.2.1</b> Update policies and procedures to ensure that guardianship is articulated as an acceptable form of permanency	<b>Timeframe</b>	October 2010	<b>Assigned to</b>	Data Analyst Researcher System Improvement Manager
	<b>5.2.2</b> Train social workers on policies and procedures and explaining Guardianship to caregivers.		November 2010		Data Analyst Researcher System Improvement Manager



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<b>Improvement Goal 6.0</b>					
Increase the percentage of children placed with a relative from 18.5% to 35%.					
<b>Strategy 6. 1</b> Relative Placement Committee will be formed to examine policies, practices, attitudes and develop strategies to improve the placement of children with relatives.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> In our most recent outcome report, only 18.5% of children are placed with relatives. There are a number of reasons presented, such as criminal background check, family finding difficulties, ease of placement with foster parents, etc. The workgroup will assess the various factors to determine what training is needed, if any, what education about values and polices should occur, and to problem solve obstacles and identify potential solutions.	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>6.1.1</b> Convene monthly meeting with supervisors and staff.	<b>Timeframe</b>	November 2010	<b>Assigned to</b>	Manager
	<b>6.1.2</b> Brainstorm barriers and provide needed policy modifications/clarifications and or training.		February 2011		Manager
	<b>6.1.3</b> Facilitate modifications, training or monitoring of the family finding database to improve use.		May 2011		Manager Supervisors

**Describe any additional systemic factors needing to be addressed that support the improvement plan goals.**

There has been a value from some agency and/or FFA staff that the primary "client" or customer is the adoptive parent for whom we are "finding a child." In reality the priority is really the child for who as home is being sought.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.**

*Recommended training for staff would include relative approval procedures and the criminal background exemption process.*

**Identify roles of the other partners in achieving the improvement goals.**

Foster Family Agencies, both those with Adoption agencies and those without, and Private Adoption Agencies are important in the identification of a permanent home for our county's foster children.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**

N/A

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<b>Outcome/Systemic Factor: STANISLAUS COUNTY PROBATION</b>			
<p><b>County's Current Performance:</b> The Probation Department collaborated with Child Welfare Services (CWS), community stakeholders, and internal staff to conduct the Self Improvement Plan (SIP). This included participation in outcomes meetings with CWS staff and focus groups with staff and community stakeholders. This process started in the fall of 2009, when the Probation Department participated in the Peer Quality Case Review (PQCR) and then the County Self Assessment (CSA) in the spring of 2010. Placement Stability has been identified as the Probation Department's focus area due to the number of placement changes experienced by children placed through the Probation Department. A review of the research literature indicates that placement stability is greatly affected by the type of placement (i.e. matching the minor's needs) and the number of placement settings experienced. Based on the findings of the PQCR and CSA, there is a need to improve upon the methods in which minors are being properly initially and, when applicable, subsequently placed. During the PQCR and CSA, it was evident that the probation cases indicated a theme of utilizing case management and documentation of monthly visits, contact with minors and follow up with mental health and behavioral health professionals. Probation officers regularly reviewed case plans with youth and received their feedback. Additionally, low case loads allowed officers to maintain contact with group homes and provide them with updated health and education information. However, it was also found in the areas of youth assessment and placement matching that a validated assessment tool was not utilized in making initial or subsequent placement decisions. Furthermore, even though case documentation may be up-to-date, the anecdotal information or experiences probation officers have with minors is sometimes lost when cases are transferred between officers unless they are clearly noted in the file.</p>			
<p><b>Improvement Goal 7.0</b> Improve placement stability by better matching the minor to placement through the use of a placement matching tool. Proper placement matching is critical toward helping to ensure a minor's success.</p>			
<b>Strategy 7.1</b> Research placement matching tools and implement tool		<b>Strategy Rationale</b> Use of a validated assessment tool increases the likelihood that with proper initial placement, that stability will be increased.	
<b>Milestone</b>	<b>7.1.1</b> Key participants convene	<b>Timeframe</b>	October 2010
	<b>7.1.2</b> Research and identify tools currently utilized to match minors with placements		January 2011
		<b>Assigned to</b>	Juvenile Division Director Placement Supervisor
			Placement Supervisor Placement Unit Deputy Probation Officers

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	<b>7.1.3</b> Train staff on matching tool and implement		February 2011		Placement Unit Deputy Probation Officers
<b>Improvement Goal 8.0</b> Measure success rates of currently utilized foster care/group homes to better determine continued placement and for future rating against matching tool.					
<b>Strategy 8.1</b> Develop an evaluation tool (i.e. Lickert scale) to track Group Home/FFA's success rates for currently utilized or used in the future so that this information can be used in conjunction with the matching tool to properly place minors.			<b>Strategy Rationale</b> Utilizing Group Homes/FFAs with higher success rates, when coupled with a proper placement match, will increase placement stability		
<b>Milestone</b>	<b>8.1.1</b> Key participants to convene	<b>Timeframe</b>	October 2010	<b>Assigned to</b>	Juvenile Division Director Placement Supervisor
	<b>8.1.2</b> Identify ways to measure and create evaluation tool		January 2011		Placement Supervisor Placement Unit Deputy Probation Officers
	<b>8.1.3</b> Implement Evaluation Tool		February 2011		Placement Unit Deputy Probation Officers
	<b>8.1.4</b> Analyze data from Evaluation tool		October 2011		Placement Supervisor

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<p><b>8.1.5</b> Rate/Rank Group Homes/FFAs based on data analysis</p>	<p>January 2012</p>	<p>Juvenile Division Director Placement Supervisor</p>
<p><b>Strategy 9.0</b> Improve placement stability and increase potential for reunification by improving family engagement through active participation in the development of case plans and/or determining a minor's permanent placement (concurrent plan) should reunification fail</p>		<p><b>Strategy Rationale</b> Through increased parental, guardian or extended family participation in the placement process, coupled with proper placement matching and use of higher quality Group Homes/FFA, the potential for reunification should increase for those identified cases. For those cases in permanency, placement stability should increase when family or extended family members are engaged the development of the minor's permanent plan.</p>
<p><b>Milestone</b></p> <p><b>9.1.1</b> Key participants to convene</p> <p><b>9.1.2</b> Identify ways to increase family participation in the development of case plans and/or in developing a minor's concurrent plan.</p> <p><b>9.1.3</b> Identify baseline engagement data. Implement family engagement plan</p>	<p><b>Timeframe</b></p> <p>October 2010</p> <p>November 2010</p> <p>January 2011</p>	<p><b>Assigned to</b></p> <p>Juvenile Division Director Placement Supervisor</p> <p>Placement Supervisor Placement Unit Deputy Probation Officers</p> <p>Placement Supervisor Placement Unit Deputy Probation Officers</p>



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<p><b>9.1.4</b> Evaluate progress as compared to baseline data</p>	<p>October 2011</p>	<p>Placement Supervisor Placement Unit Deputy Probation Officers</p>
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**Describe systemic changes needed to further support the improvement goal.**

Presently, the Probation Department does not have access to CWS/CMS for placement-related data entry/tracking. Currently when a child enters an out-of-home placement the information is submitted to the Community Services Agency foster care unit to then be entered into CWS/CMS. The Probation Department utilizes an internal web-based Integrated Criminal Justice System (ICJIS-PB) to keep track of a minor's demographics, court referrals, placement changes, status reviews, and placement contacts. Presently, the ICJIS-PB system is also used to create hard copy reports (e.g. SOC158a) that are submitted to the county welfare eligibility team who enters this information into CWS/CMS. With access to data entry/tracking within CWS/CMS, it is hoped that future outcomes can be reported using that system that can help evaluate our goals.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.**

As of March 2011, the probation department will have limited access to CWS/CMS for data entry. Training dates have yet to be determined for Stanislaus County.

**Identify roles of the other partners in achieving the improvement goals.**

TBD

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**

None.

**Child Welfare Services Outcome Improvement Plan (CWSOIP)  
NARRATIVE**

**Child and Family Services:**

The majority of CWSOIP funds available for the coming fiscal year to the Child and Family Services Division are going to support staffing in order to maintain positive, preventative practices such as Family Maintenance. A small amount will be apportioned to training and travel related expenses to enable staff to participate in Regional Training Academy sessions held outside of Stanislaus County.



**ATTACHMENTS**

**Stanislaus County Child & Family Services  
2007-2010 System Improvement Plan (SIP)  
Strategy Update**

	<b>RECURRENCE OF MALTREATMENT</b>	
<b>Strategy 1.1</b>	<p><b>Quality Assurance Review Team (QART)</b> Review all instances of repeat maltreatment for children 0-5 years &amp; make recommendations re: practice, policy, training, etc (Implemented 2007)</p> <ul style="list-style-type: none"> <li>Eliminated due to elimination of Staff Developer position FY 2009-10 &amp; System Improvement Supervisor position FY 2010-11</li> </ul>	<b>ELIMINATED</b>
<b>Strategy 1.2</b>	<p><b>Family Engagement Meetings (FEM)</b> Facilitated meeting with bio-family prior to case closure when risks remain, family not engaged in services, but children are safe so case not petition able (Implemented 2007)</p> <ul style="list-style-type: none"> <li>TDM facilitator positions eliminated FY 2010-11</li> <li>TDM Supervisor position eliminated FY 2010-11</li> <li>TDM scheduler (ADCII) position eliminated FY 2010-11</li> </ul>	<b>ELIMINATED</b>
<b>Strategy 1.3</b>	<p><b>Comprehensive Assessment Tool (CAT)</b> Standardized safety &amp; risk assessment throughout the life of a case (Implemented 2006)</p> <ul style="list-style-type: none"> <li>Report/monitoring capacity reduced due to budget reductions.</li> </ul>	<b>CONTINUED</b>
<b>Strategy 2.1</b>	<p><b>Differential Response (DR)</b> Three response paths to allegations of abuse and neglect in partnership with Family Resource Centers (FRCs) (implemented 2005)</p> <ul style="list-style-type: none"> <li>6 AmeriCorps members eliminated FY 2009-10 due to budget reductions</li> <li>Services for children 6 – 17 years eliminated due to funding FY 2010-11.</li> <li>DR for 0 – 6 funded by Prop 10 (Children &amp; Families Commission)</li> </ul>	<b>ELIMINATED (6 – 17 yrs); CONTINUED for 0- 5 yrs</b>
<b>Strategy 2.2</b>	<p><b>Substance Abuse Prevention &amp; Early Intervention</b></p> <ul style="list-style-type: none"> <li>Meth Task Force Participation continues (Implemented 2008)</li> <li>Sober living funding eliminated as not a mandated service FY 2010-11</li> </ul>	<b>REDUCED</b>

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<p><b>Strategy 2.3</b></p>	<p><b>AmeriCorps Members / Family Advocates</b> Former birth parent or parent mentors serving with AmeriCorps to support and facilitate growth &amp; development of current CPS clients (implemented 2005)</p> <ul style="list-style-type: none"> <li>• 1 Parent mentor in Family Reunification eliminated FY 2008-09 due to budget reductions</li> <li>• 2 Parent mentors in Family Maintenance &amp; Families In Partnership eliminated FY 2009-10 due to budget reductions</li> <li>• AfterCare worker in Families in Partnership eliminated FY 2010-11 due to budget reductions</li> </ul>	<p><b>ELIMINATED</b></p>
<p><b>PLACEMENT STABILITY</b></p>		
<p><b>Strategy 3.1</b></p>	<p><b>Training for Foster Parents, Relative Caregivers &amp; Social Workers</b> Joint training provided to social workers, foster parents &amp; relative caregivers. Relatives connected to the Family Partnership Center (KSSP) for on-going services</p> <ul style="list-style-type: none"> <li>• Staff Developer position eliminated FY 2009-10</li> <li>• Foster Parent Recruiter &amp; Trainer Position eliminated FY 2010-11</li> <li>• Permanency Specialist position eliminated FY 2010-11</li> </ul>	<p><b>REDUCED</b></p>
<p><b>Strategy 3.2</b></p>	<p><b>Placement Team Decision Making (TDM) meetings</b> Facilitated meeting with youth, parent, caregiver, social worker, CASA, family, child's attorney and important others to make decisions about placement for children in foster care (implemented placement TDMs Feb. 2003, removal TDMs Sep 2004)</p> <ul style="list-style-type: none"> <li>• TDM Facilitator positions eliminated FY 2010-11</li> <li>• TDM Supervisor position eliminated FY 2010-11</li> <li>• TDM scheduler (ADCII) position eliminated FY 2010-11</li> </ul>	<p><b>ELIMINATED</b></p>
<p><b>Strategy 3.3</b></p>	<p><b>Foster Parent &amp; Placement Support</b> Family to Family Initiative implemented in 2002 including the Foster Parent Recruitment, Development &amp; Support strategy.</p>	<p><b>REDUCED</b></p>

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	<ul style="list-style-type: none"> <li>Recruitment of Foster/Adoptive Families limited due to the elimination of the Foster Parent Recruiter Trainer position FY 2010-11</li> <li>Coordination &amp; Deliver of specialized training for caregivers reduced due to the elimination of the FP recruiter trainer</li> <li>Implementation of Specialized Care Rate proposal to reduce foster care costs reduced due to the elimination of the FP Recruiter/trainer</li> </ul>	
	<b>RE-ENTRY AFTER REUNIFICATION</b>	
<b>Strategy 4.1</b>	<p><b>Exit Team Decision Making (TDM) meetings</b> TDM meeting held prior to reunification of children with parents to develop a plan of support with the family (Implemented 2007)</p> <ul style="list-style-type: none"> <li>TDM Facilitator positions eliminated FY 2010-11</li> <li>TDM Supervisor position eliminated FY 2010-11</li> <li>TDM scheduler (ADCII) position eliminated FY 2010-11</li> </ul>	<b>ELIMINATED</b>
<b>Strategy 4.2</b>	<p><b>Connect Families to Community Support</b> Community Partners invited to TDMs (implemented Feb 2007)</p> <ul style="list-style-type: none"> <li>TDM Facilitator positions eliminated FY 2010-11</li> <li>TDM Supervisor position eliminated FY 2010-11</li> <li>TDM scheduler (ADCII) position eliminated FY 2010-11</li> </ul>	<b>ELIMINATED</b>
<b>Strategy 4.3</b>	<p><b>Quality Assurance Review Team (QART)</b> Review instances of foster care re-entry following reunification &amp; make recommendations re: practice, policy, training, etc (Implemented 2008)</p> <ul style="list-style-type: none"> <li>Eliminated due to elimination of Staff Developer position FY 2009-10 &amp; System Improvement Supervisor position FY 2010-11</li> </ul>	<b>ELIMINATED</b>

**ADDITIONAL CHANGES THAT MAY IMPACT OUTCOMES**

<b>LEAST RESTRICTIVE LEVEL OF CARE</b>	
<p><b>1695 Placements at Removal</b> The Permanency Specialist completes many ER relative placements resulting in double the # of first relative placements</p> <ul style="list-style-type: none"> <li>• Permanency Specialist position Eliminated FY 2010-11</li> </ul>	<b>REDUCED</b>
<p><b>Family Finding Database</b> The Permanency Specialist coordinates with a dedicated Application Specialist from IS to conduct family finding research at the moment of removal for 100% of children. The database is updated annually to ensure the most current and accurate information is available to ongoing workers. PQCR indicated that this was already limited.</p> <ul style="list-style-type: none"> <li>• Permanency Specialist position Eliminated FY 2010-11</li> </ul>	<b>REDUCED</b>
<p><b>Dedicated Foster Parent Recruiter / Trainer</b> A social worker dedicated to the recruitment and training of County foster parents, including 30 hours of pre-licensure training that prepares them to care for Dependent children. Training offered continuously year round enabling the licensure of families for foster care and adoptions.</p> <ul style="list-style-type: none"> <li>• Foster Parent Recruiter / Trainer position eliminated FY 2010-11</li> </ul>	<b>ELIMINATED</b>
<p><b>Foster Parent Support</b> A small amount of funds designated to assist the Foster Parent Association in funding activities for foster families and foster children, e.g. Harvest Festival, Easter Event, etc.</p> <ul style="list-style-type: none"> <li>• Fund was foster care savings and was eliminated FY 2010-11</li> </ul>	<b>REDUCED</b>
<b>FOSTER CARE, FIRST ENTRIES</b>	
<p><b>Removal Team Decision Making (TDM) meetings</b> Includes parents, relatives, community &amp; youth in determining if the safety factors warrant removal and/or a safety plan can be put into place to prevent foster care entry.</p> <ul style="list-style-type: none"> <li>• TDM Facilitator positions eliminated FY 2010-11</li> <li>• TDM Supervisor position eliminated FY 2010-11</li> <li>• TDM scheduler (ADCII) position eliminated FY 2010-11</li> </ul>	<b>ELIMINATED</b>
<p><b>FAMILIES IN PARTNERSHIP (FIP)</b> Multidisciplinary team including social workers, substance abuse counselors, public health nurses, domestic violence specialists, probation officer, mental health clinician, and family services specialist who working collaboratively with families at high risk of abuse and/or neglect to maintain children safely at home and prevent foster care entry.</p> <ul style="list-style-type: none"> <li>• Substance abuse counselors, public health nurses,</li> </ul>	<b>ELIMINATED</b>

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<p>domestic violence specialist, mental health clinician &amp; probation officer positions unfunded and redirected back to home agency FY 2010-11</p> <ul style="list-style-type: none"> <li>• FIP disbanded and social workers integrated into a second family maintenance unit FY 2010-11</li> </ul>	
<b>ADOPTIONS/EXITS TO PERMANENCY</b>	
<p><b>Dedicated Adoptions Social Workers</b> Social Workers dedicated to home finding, the home studying of potential adoptive parents, and the finalization of adoptions in a timely manner to reduce number of children in foster care awaiting adoption finalization.</p> <ul style="list-style-type: none"> <li>• Adoptions unit reduced from 7 SW in 2008/09 to 6 in 2009/10</li> <li>• Adoptions unit reduced to 4 SW in 2010/11 due to budget reductions</li> </ul>	<b>REDUCED</b>
<b>NO MALTREATMENT IN FOSTER CARE</b>	
<p><b>Dedicated Foster Parent Recruiter / Trainer</b> A social worker dedicated to the recruitment and training of County foster parents, including 30 hours of pre-licensure training that prepares them to care for Dependent children.</p> <ul style="list-style-type: none"> <li>• Foster Parent Recruiter / Trainer position eliminated FY 2010-11</li> </ul>	<b>ELIMINATED</b>
<b>TIMELY REUNIFICATION</b>	
<p><b>SafeCourt</b> Dependency drug court with one dedicated social worker and one substance abuse counselor to work closely with families at high risk of abuse or neglect and facilitate a timely yet safe return of children to their parents. Funded by Children and Families Commission (First 5).</p> <ul style="list-style-type: none"> <li>• Funding for program ended June 30, 2010</li> </ul>	<b>ELIMINATED</b>
<p><b>Sober Living</b> Sober living residences, funded by Child and Family Services, where parents can live, often with their children, while participating in AOD treatment, often for 12 or more months. Ensures a safe place with supervision for children at risk of abuse or neglect to live with parents rather than placement in foster care.</p> <ul style="list-style-type: none"> <li>• Funding for all reunification families with children in placement or those ineligible for Welfare to Work (WTW) services eliminated FY 2010-11.</li> </ul>	<b>ELIMINATED For non- Welfare to Work eligible families</b>
<b>OUTCOMES FOR TRANSITION AGED YOUTH</b>	
<p><b>Dedicated ILSP and Aftercare Social Workers</b> Two social workers dedicated to the provision of Independent Living Skills services to Dependent &amp; Probation ILP aged and after care youth.</p> <ul style="list-style-type: none"> <li>• Social workers time reduced by 50% to this function and 50% to case management of Permanent Placement youth.</li> </ul>	<b>REDUCED</b>

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<p><b>ILP Interviewers</b> Two Independent Living Skills Interviewers who assist the Independent Living Skills coordinated in completing Ansell Casey life skills assessments and ILP planning with foster youth.</p> <ul style="list-style-type: none"> <li>• ILP Interviewers eliminated FY 2010-11</li> </ul>	<p><b>ELIMINATED</b></p>
<p><b>QUALITY ASSURANCE/DATA ENTRY</b></p>	
<p><b>SafeMeasures</b> Software program that extracts data from Child Welfare Services/Case Management System at county, program, unit or caseworker level to facilitate data analysis and compliance review.</p> <ul style="list-style-type: none"> <li>• SafeMeasures contract ended June 30, 2010 due to budget.</li> </ul>	<p><b>ELIMINATED</b></p>

*\*The above reflects changes to strategies and outcome improvement efforts that were implemented by the Child and Family Services Division in order to improve outcomes for children and families. It does not reflect the status of mandated services required by regulation and/or court order.*

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**SYSTEM IMPROVEMENT PLAN (SIP) WORKGROUP  
7/6/2010 Attendees**

**Name / Agency**

Janette Newberry, CSA- Program Manager  
Narinder Kaur, Children Crisis Center- Case manager  
Lizette Guzman, Sierra Vista Child and Family Services  
Christine Soeth, CSA- ER Manager  
Sheelah Grant, CSA- FR/Court Manager  
Keith Sours, California Foster Families, Inc.  
Gina Saenz, California Foster Families, Inc.  
Gary Boyd, CSA- Court Social Worker  
Chris Plasencia, CSA- FR Supervisor  
Jeff Davis, CSA- Court Supervisor  
Richard Allen, CSA- FR Supervisor  
Phil Reilly, CSA- PP/3015 Supervisor  
Sandra Genova, Aspiranet  
Bergen Filgas, CSA- FM Manager

**7/7/2010 Attendees**

**Name / Agency**

Janette Newberry, CSA- Program Manager  
Jean Little, CSA- ILSP/Aftercare Supervisor  
Nenita Dean, CSA- ILP/Foster Care/PP Manager  
Baby Castro, ILSP  
Ariel, ILSP  
Sharon Salaiz, Aspiranet  
Agnes Perez, Families First  
Jayne Hardy, Sierra Vista Child & Family Services  
Cheryl Youngblood, Agape Villages  
Mark Morrison, CSA- PP Social Worker  
Steve Ashman, CASA  
Sheelah Grant, CSA- FR/Court Manager  
Elizabeth Moon, Probation  
Donna Newman, Safe Harbor Family Services  
Scott Ball, Probation  
Dave Chapman, Probation  
Chris Plasencia, CSA- FR Supervisor  
Phil Reilly, CSA- PP/3015 Supervisor  
Dayy Payne, CSA- ILP Interviewer  
Bill Meenk, Safe Harbor Family Services  
Sue Rodgers, Koinonia Family Services



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Bergen Filgas, CSA- FM Manager  
Sal Perez, CSA- Aftercare Social Worker

**7/9/2010 Attendees**

**Name / Agency**

Janette Newberry, CSA- Program Manager  
Evelina McDowell, Health Services Agency- Public Health Nurse  
Narinder Kaur, Children Crisis Center- Case manager  
John Sims, Children & Families Commission  
Christine Soeth, CSA- ER Manager  
Karen Servas- Community member  
Shareen Singh, StanWORKs- Supervisor (for Jennifer Valencia)  
Julian Wren, CSA- FM Supervisor  
Oscar Contreras, CSA- FM Supervisor  
Taryn Muralt, Center for Human Services  
Holly Holmes, CSA- ER Supervisor  
Tiffany Vanderpool, CSA- ER Social Worker  
Jan Viss, CSA- Assistant Director  
George Medina, CSA- ER Supervisor  
Sheelah Grant, CSA- FR/Court Manager

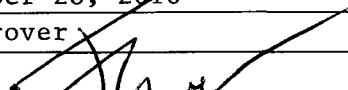
**Child Abuse Prevention Council (CAPC)  
8/5/2010**

(See Attachment pg. 85)

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<b>CAPIT/CBCAP/PSSF Contact and Signature Sheet</b>	
<b>Period of Plan:</b>	9/28/2010 – 9/28/2013
<b>Date Submitted:</b>	
<b>Submitted by:</b> Board of Supervisor Designated Public Agency to Administer CAPIT/CBCAP/PSSF programs	
<b>Name &amp; title:</b>	Christine Applegate, Director
<b>Signature:</b>	<i>Christine Applegate</i>
<b>Address:</b>	P.O. Box 42 Modesto, CA 95358
<b>Fax:</b>	(209) 558-2558
<b>Phone &amp; E-mail:</b>	(209) 558-2500
<b>Submitted by:</b> Child Abuse Prevention Council (CAPC) Representative	
<b>Name &amp; title:</b>	Jan Viss, Assistant Director
<b>Signature:</b>	<i>Jan Viss</i>
<b>Address:</b>	P.O. Box 42 Modesto, CA 95358
<b>Fax:</b>	(209) 558-2558
<b>Phone &amp; E-mail:</b>	(209) 558-2500
<b>Submitted by:</b> Parent Consumer/Former Consumer (Required if the parent is not a member of the CAPC)	
<b>Name &amp; title:</b>	N/A
<b>Signature:</b>	
<b>Address:</b>	
<b>Fax:</b>	
<b>Phone &amp; E-mail:</b>	

**CAPIT/CBCAP/PSSF Contact and Signature Sheet (continued)**

<b>Submitted by:</b>	<b>PSSF Collaborative Representative, if appropriate</b>
<b>Name &amp; title:</b>	<b>N/A</b>
<b>Signature:</b>	
<b>Address:</b>	
<b>Fax:</b>	
<b>Phone &amp; E-mail:</b>	
<b>Submitted by:</b>	<b>CAPIT Liaison</b>
<b>Name &amp; title:</b>	<b>Bergen Filgas, Manager III</b>
<b>Address:</b>	<b>P.O. Box 42 Modesto, CA 95358</b>
<b>Fax:</b>	<b>(209) 558-2558</b>
<b>Phone &amp; E-mail:</b>	<b>(209) 558-2057</b>
<b>Submitted by:</b>	<b>CBCAP Liaison</b>
<b>Name &amp; title:</b>	<b>Bergen Filgas, Manager III</b>
<b>Address:</b>	<b>P.O. Box 42 Modesto, CA 95358</b>
<b>Fax:</b>	<b>(209) 558-2558</b>
<b>Phone &amp; E-mail:</b>	<b>(209) 558-2057</b>
<b>Submitted by:</b>	<b>PSSF Liaison</b>
<b>Name &amp; title:</b>	<b>Bergen Filgas, Manager III</b>
<b>Address:</b>	<b>P.O. Box 42 Modesto, CA 95358</b>
<b>Fax:</b>	<b>(209) 558-2558</b>
<b>Phone &amp; E-mail:</b>	<b>(209) 558-2057</b>
<b>Board of Supervisors (BOS) Approval</b>	
<b>BOS Approval Date:</b>	September 28, 2010
<b>Name:</b>	Jeff Grover
<b>Signature:</b>	

**CAPIT/CBCAP/PSSF PLAN**

### **County SIP Team Composition**

Stanislaus County's SIP team consisted of Child and Family Social Workers, Supervisors, Managers, FFA Social Workers and leadership, Juvenile Probation, Members of the CAPC Committee, Children and Families Commission (Prop 10), CalWORKs, and other key community partners.

### **CAPC**

On February 19, 2002, the Stanislaus County Board of Supervisors established the Child Abuse Prevention Council (CAPC) as a subcommittee of the Stanislaus Children's Council. Though the CAPC was a subcommittee, it always functioned independently of the council in its efforts of bring awareness of child abuse in the community. The 2005-2008 3-year plan restructured the CAPC in that it no longer functioned as a subcommittee, but as an independent entity as required under W&I Code Section 18983.5 Furthermore, the Stanislaus County Board of Supervisors approved the Child Abuse Prevention Council (CAPC) by-laws under Welfare and Institutions Code Chapter 12.5, Section 18980.

The Child Abuse Prevention Council of Stanislaus County provides a local forum for interagency cooperation and coordination of services in the areas of prevention, intervention, and treatment as it relates to child abuse and neglect. The Council is made up of a broad array of community-based organizations, and public agencies. The membership roster as specified in W& I code section 18970(c) is maintained and published through Board of Supervisors action. CAPC carries out the function of the PSSF collaborative. The participation in CAPC is voluntary, and therefore no funds are utilized to support attendance of meetings.

Funding of the Children's Trust Fund (CTF) is overseen by the CAPC and is utilized for community based non-profit agencies that provide parenting classes, substance abuse treatment, and counseling. The population served by these agencies includes the designated underserved populations identified through the SIP process. All actions regarding provision and planning of services funded through the Children's Trust Fund brought to the CAPC for input and discussion. Final approvals for contract awards are submitted to the Stanislaus County Board of Supervisors.

The CAPC is a collaborative body which is community-driven and serves as a forum for program and community collaborative sharing, service planning, and perpetuating the philosophy of agencies and communities working together for the most positive, productive, and safe outcomes for children and families. All members adhere to the purpose of the council which is to coordinate the

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community's efforts to prevent and respond to child abuse and neglect (W&I Code, chapter 12.5, 18982)

The CAPC has always maintained at least one parent representative. The parent is an appointed voting member of the council and shares an equal role with other members of the council which may include developing RFPs and oversight of CTF funding. In an effort to promote parent participation and leadership training, and possible monetary support may be considered. The parent member, as well other council members, takes an active part in our child abuse prevention efforts and campaigns.

Stanislaus County Child and Family Services and the CAPC have always enjoyed a close working partnership. CAPC in coordination with Child and Family Services are responsible for contract monitoring, integration of local services, fiscal compliance, data collection, amendments, reports, and outcome evaluations. They have learned from experience, that better outcomes for children in our community are achieved only when both government and community based organizations work collaboratively. All actions regarding provision of services for community-based services funded through CTF including proposal review, training opportunities and additional services are brought before the CAPC collaborative bodies for discussion and input. Final approvals for contract awards are submitted to the Stanislaus County Board of Supervisors. It is the CAPC liaison that ensures that all reporting requirements are done so in a timely manner and has regular communication through out the County and with the Office of Child Abuse and Prevention regarding CAPC activities.

#### **CAPIT/CBCAP/PSSF/CTF Fiscal Narrative**

Stanislaus County has strived to meet all fiscal requirements of the funding entrusted to us. All CAPIT/CBCAP/PSSF/CTF contractors are required to submit monthly statistical and expenditures reports and an annual report detailing how goals were accomplished. Monthly reports mirror the format required by the California Department of Social Services (CDSS), Office of Child Abuse Prevention (OCAP). CSA already tracks separately all service providers' expenditures, services provided and the demographic information regarding individual/families served. The annual report OCAP continues to be the model for data collection. Current CAPIT/CBCAP/PSSF contractors submit data electronically to CSA. This standard practice will continue for all future contractors.

The CAPIT/PSSF Coordinator/Liaison is responsible for insuring that the monitoring plans are carried out, contractors are in compliance with program guidelines, goals and outcomes are achieved and reporting meets the

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demographic requirements established by OCAP and CSA. This includes families that have come to attention of Child Welfare due to issues of abuse and neglect.

Monthly invoices are desk audited by our Contracts Administration staff prior to reimbursement. Desk auditing procedures include verification that costs invoiced are consistent with the contract and are allowable under all applicable Office Management and Budget (OMB) circulars and guidelines. Back-up documentation is attached and matches the invoices. Invoices are be routed to the CAPIT/CBCAP/PSSF/CTF coordinator to verify that services are appropriate, meet the intent of the program, and have been provided. Contractors will be required to submit annual independent audits no later than 120 days following the end of the contractor's fiscal year. Audits are reviewed by Contracts staff utilizing a standardized audit checklist. Agencies whose audits are found to contain findings related to or impacting the provision of CAPIT/CBCAP/PSSF/CTF services shall be required to submit a Corrective Action Plan. Agencies failing to comply with this requirement shall be subject to termination of their contracts. Successful completion of a required Corrective Action Plan will be a consideration for continued or additional funding under CAPIT/CBCAP/PSSF/CTF.

The funding received from CAPIT/CBCAP/PSSF/CTF funding streams is utilized in service provider contracts and are reviewed quarterly to determine the maximum level of services are provided. Funding is leveraged through management by CSA which ensures annual funds are used first and funds which can roll forward to sustain future services are retained. The attached worksheets represent the annual CAPIT/PSSF/CBCAP Service Goals and Expenditure Plan Summary. The expenditure plan lists the percentage of the funds that are allotted to provide these services.

### **Budget Impacts**

Stanislaus County has always valued supporting community based organizations and their work with our County's children and families. Since 2001, the Stanislaus County Community Services Agency (CSA) has combined the CAPIT/PSSF funding with CTF and CBCAP in the development of its RFPs. This was done in an effort to provide broad based community support, continuity of services, streamline the bidding process, eliminate duplication of services by reviewing all proposals at one time, and improve efficiency by having one panel review the proposals. This consolidated process was also intended to simplify the process for bidders where one proposal could be considered in multiple funding categories.

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Recent budget realities have caused a shift of PSSF and CAPIT funding internally in order to meet the federal and state mandates for children and families known to the Child Welfare system. Furthermore, Differential Response services is no longer being offered to youth ages 6-17 and the only contract identified to support youth ages 13-17 is that of the Hutton House services through the CTF funding.

To continue to demonstrate our support of child abuse prevention in the community and potentially meet some of the gaps created as a result of budget impacts a recommendation was taken to the Stanislaus County Board of Supervisors to extend the current CTF contracts until the end of this fiscal year. In addition an RFP process will be conducted to identify agencies within our community that can potentially meet some of the unmet needs of children ages 6-17 through both CTF and CBCAP funding.

RFP process

Stanislaus County has developed a tradition of using the competitive bid process for its contracts and upcoming RFP will be no exception. It will use the competitive bid process that is outlined in the RFP section IX, A-E. Based on the instruction in the RFP, this process will include the following: 1) RFP invitation is sent, 2) RFP is reviewed by an independent review committee/panel made up of representatives from various community agencies who are aware of the needs of the community, 3) Panel will make recommendations based on the wide spectrum of services in various geographical areas paying special attention to avoid duplication of services, 4) Proposers will be notified in writing of the panel's recommendations and will be provided with an opportunity to respond or to file a grievance, 5) Recommendations will be brought to the CAPC, and 6) Final award approval for RFP will go to Stanislaus County Board of Supervisors.

This RFP process will give priority to private, nonprofit agencies whose prevention programs serve children who are at risk of abuse and neglect. Agencies are required to provide services which are culturally and linguistically competent. They must comply with federal requirements that anyone who has or will be awarded funds has not been suspended or debarred from participation in an affected program. They shall demonstrate the existence of a 10 percent in-kind match. The population served will include minorities and children ages 6-17 years of age and under. Special attention will be given so that services are not duplicated, are in line with our SIP, and avoid supplantation. Engagement, short term, immediate, and long term outcomes will be built into the scope of work or the RFP as well as a discussion regarding the usage of a peer review process for CBCAP funded activities. Training and technical assistance will be provided to these agencies and communication will be available both written and electronically.



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Development of this RFP process is scheduled for November 2010 and is projected to take 4-6 months. We anticipate the focus of services to be Differential Response, ages 6-17. Currently we only have one service provider offering DR to this age group and they are focused on youth 13-17 that experience ongoing conflict with their caretaker. Prior to fiscal year 2010/2011, the Family Resource Centers provided DR for ages 6-17 and their families. Currently their focus is serving children 0-5 and their families. The FRC's are located in Central/South Modesto, North Modesto/Salida, Ceres, Hughson and the Eastside communities, Turlock, and the Westside (Newman/Crows Landing, Grayson/Westley, and Patterson), and Hutton House is located in Modesto.

### **Service Array**

Stanislaus County implements an array of services for children and families in an effort to meet the needs of the family in the area of safety, well-being, and permanency. Initial contact with the Child Welfare system is frequently through the emergency response hot line. The intake social worker completes the Comprehensive Assessment Tool (CAT) assessment and will either provide resources to the caller or assign for Differential or traditional emergency response investigation. Path 1 Differential Response services are provided solely by the community partners, whereas with Path 2 and 3 a determination is made about the best service delivery modality, either community services or child welfare services.

The Differential Response program is an alternative, intake, assessment and service delivery structure that allows a child welfare agency to respond in a more flexible manner to referrals of child abuse or neglect. There are three paths of response which may include an agency social worker and a community partner.

Path 1 is for families with low or no risk of abuse/neglect, as assessed at Intake, and referred to a community organization, typically a Family Resource Center (FRC), for a strength-based assessment, case management, parenting and other supportive services as determined by the family in partnership with the FRC. The referral is closed at the Intake hotline with no further child welfare involvement.

Path 2 is families with moderate risk of abuse/neglect, as screened at Intake, are assessed by a child welfare social worker in partnership with a community partner. The risk and safety assessment guides the decision about the appropriate level of service, that is, further child welfare involvement or community partner service delivery.

Path 3 is a child abuse and neglect report that indicates children are unsafe and/or at high risk of abuse or neglect and are immediately assessed by a child welfare social worker. If a differential response community partner has been working with the family, they may accompany the social worker. Families are

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served whether through the traditional child welfare systems of voluntary services or court, but if they have zero to low safety/risk factors, they may be served by a community partner.

The Differential Response Family Resource Centers service areas are based on zip codes in Stanislaus County. Our partners include: Ceres Partnership for Healthy Children; Westside Family Resource Network - Newman Healthy Start, Westside Resource Center, and Grayson/Westley Family Resource Center; Parent Resource Center Sierra Vista Drop In Center, Airport Neighbors United; Hughson Family Resource Center; Turlock Family Resource Center. Differential Response program also serves some targeted groups: Hutton House which works with teenagers and their parents; and Health Services Agency, Public Health for substance exposed infants.

Community Partners providing Differential Response services, such as the Family Resource Centers, offer strength-based assessment, case management, parenting education and support, depression screenings, linkages to other health services and developmental screenings. Effective July 1, 2010, Differential Response services are solely funded by the Children and Families Commission (First 5/Prop10) and available to families with children 0 to 5 years of age. Differential Response is no longer funded for children 6 to 17 years, with the exception of Hutton House for teens. Efforts are currently being made to identify community based or faith based services that will potentially provide prevention services to these youth.

When an allegation of sexual abuse is being investigated children may be interviewed at the CAIRE center when appropriate. The County of Stanislaus, in partnership with the District Attorney, all local law enforcement agencies, child protection agencies, the mental and medical health community, schools, and others concerned with the care and protection of children, seek to protect child victims and witnesses who are exposed to abuse, is the mission statement of the Child Abuse Interviews, Referrals, and Evaluation (CAIRE) Center. It is child friendly, providing a single point of access for forensic interviews, medical examinations and therapeutic services to young victims of crime. The CAIRE Center is located in Modesto, California adjacent to a Sheriff's substation. A trained forensic interviewer interviews the child while professionals associated with the case are informed and present behind a one-way mirror, listening to the child's report. Observers can ask questions via an earpiece in the interviewer's ear, enabling information to be shared without further traumatizing the child. The CAIRE Center interview, in most cases, will be the final interview of the child, thereby minimizing further trauma to the child. The family is also introduced to Mental Health Clinicians who can provide therapy and support until the family gets connected with an ongoing therapist.

Law enforcement, an attorney from the district attorney's office, and an emergency response social worker observe the interview. An advocate from the Haven Women's Center and a representative of the District Attorney's Victim

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Witness program are available. Short term mental health counseling and case management are also available while families are linked to on-going services. The Haven Women's Center is our county's domestic violence program whose goal is to empower victims of domestic violence to act as their own advocates for safety for themselves and for their children.

To determine the best match of services for family, the Emergency Response social worker utilizes a multidisciplinary team decision process. They will either engage a voluntary services worker to conduct a joint assessment of the families needs and program capability or utilize a Team Assessment Planning meeting (TAP) for discussion of other options for the family. If the social worker's assessment indicates that children are unsafe and removal should be considered, a TDM was scheduled and decision with the family made. Team Decision Making (TDM) meetings were discontinued effective July 16, 2010 due to budget cuts. Other multidisciplinary meetings occur throughout the Child Welfare system such as Differential Response Multidisciplinary Team (MDT), Joint Assessment Meetings (JAM), Interagency Resource Committee (IRC), Interagency Placement Committee and Coordinated Case Planning in an effort to continue to promote these ideals.

When a family engages with pre-placement preventative services the children are usually in the home, however voluntary placements can be utilized in an effort to expedite treatment.

Family Maintenance provides pre-placement preventative services to families who have been assessed by ER to need continued services as a result of a substantiated CPS investigation. Family arrangements or voluntary placements enable resources to be implemented while children can remain in a safe and stable environment. In addition, some PSSF funding has been designated to Family Maintenance staff to support case management and resource/referral.

Child Welfare has a contract based encumbrance system to provide community services to children and families, including:

- Kinship Supportive Services which offers respite, support groups, tutoring, counseling, medical support, and legal support
- Local parenting programs
- Linkages
- In-patient and outpatient drug treatment programs
- Family Unification Program, Section 8 Certificates

If it is determined that the children and family's needs would be better served through Court intervention the following services are available to families and children when children are in out of home care:

- Parenting
- Substance abuse treatment
- Mental health treatment

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- Family Unification Program, Section 8 Certificates

Of these services Substance Abuse has been identified as a key component within families that are brought to the attention of Child Welfare services and are in need of ongoing services. The abuse of substances and the subsequent lifestyle that leads to child neglect and endangerment is a cornerstone of most cases within Stanislaus County. Due to current budget constraints funding for alcohol and drug (AOD) treatment is limited. To meet this unmet need PSSF/CAPIT funding is being utilized to contract with treatment providers. By offering this intervention parents have the opportunity to gain sobriety and develop the skills to ameliorate the issues that impeded meeting their children's basic needs.

When children are removed from their parents/caretakers the **Court** unit presents the information to the Juvenile Court as well as provides services to families and children when allegations of child abuse and neglect are found as defined by Welfare and Institutions Code Section 300(a-j). A *Court Worker* provides information and resources to the parents while Placement Specialists focuses on the children's needs while they are in foster care or relative placement.

After the court sustains a petition and develops a case plan, the family is transferred to **Family Reunification** for up to 18 months. A social worker provides resources and monitors the parent's progress with their court ordered case plan, while supporting the children and their needs in foster care. In the event a child is unable to reunify, a permanent plan is established. In addition to the Family Reunification program there are areas that target the specific needs of youth. Through a partnership with Behavioral Health and Recovery Services (county mental health department), the Children System of Care provides mental health assessments and services to dependent children.

For youth who are unable to reunify and do not have a permanent plan for guardianship or adoption the **Permanent Placement** unit provides ongoing case management services and facilitation of life long connections. **Independent Living** skills for youth 16 and older and **Aftercare** services for youth transitioning/transitioned from dependency to adulthood are also provided by social workers.

Stanislaus County is currently participating in the California Connected by 25 Initiative (CC25I). The California Connected by 25 Initiative is a strategy helping public child welfare agencies and their communities to build comprehensive supports and services for transitioning foster youth. The goal of the initiative is to connect foster youth to opportunities, experiences and supports that will enable them to succeed throughout adulthood. As part of this initiative Stanislaus County developed the following three programs:

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Transitional Housing for Foster Youth (THP Plus) with employment services: The Host Family Model or a Lifelong Connection model of transitional housing with employment services (My Home THP+): This is a caregiver model of transitional housing which provides financial assistance for housing to foster youth between the ages of 18 and 24 to enable them to reside with adult connections who have committed to provide emotional permanency, or lifelong caring and emotional support, for the youth. The youth contributes to the cost of room and board in gradually increasing amounts. The scattered site model of transitional housing was implemented in 2007. This model provides youth the opportunity to live independently in an apartment close to their school and job. Youth who have been successful in Host Family Model can move into the scattered site model. Supportive Services are provided to ensure that the youth successfully completes the program and becomes a responsibly adult.

Gateway Bridge Project: The Gateway Bridge Project is a partnership with Modesto Junior College with linkages to California State University, Stanislaus and a partnership with Alliance Worknet (Formerly department of Employment and Training). The goal is to link former foster youth to post-secondary education with job training and employment opportunities. The Gateway Bridge Project is a learning community program with MJC that offers one semester of 12 college units. The classes are a combination of former foster youth and other disadvantaged youth and adults that are eligible for Extended Opportunity Program Services (EOPS). The former foster youth are provided wraparound case management services by a CSA aftercare social worker. In addition there are counselors in the classroom, tutoring is available and ongoing academic support from their teachers and financial support and services through EOPS. Once the youth completes the one semester of Bridge they are supported and encouraged to continue their education by choosing a vocational and/or career path offered through MJC.

The Individual Development Accounts (IDA) was implemented in year 2, 2006/2007. The IDA is a goal oriented savings account for emancipated foster youth 18-24 years of age. The accounts are held at a financial institution. Contributions are matched for qualifying purchases (\$1-\$1 match) up to \$2000 during a 24-month period. The program will serve up to 20 foster youth. By continuing our commitment to community collaboration between agencies, CSA made and entered into an agreement with Center for Human Services to provide Asset Management services to our youth who enroll in the IDA program. CSA also entered into a partnership with Bank of the West who holds the matching monies in their financial institution.

When a child is placed in foster care a concurrent plan is established to ensure that a child has an alternative if the parents are unable to reunify. **Adoption** is the most permanent of these plans. Adoption Social Workers screen, train, and conduct home studies of concurrent homes prior to placement. They monitor

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perspective adoptive homes and guide the children through the adoption process.

**Other unique programs or special prevention services provided include:**

Stanislaus County Family Justice Center

The Stanislaus County Family Justice Center (StanFJC) is a one-stop center for families experiencing domestic violence, sexual assault, child abuse and elder abuse. The StanFJC utilizes a multi disciplinary team approach with partners from the District Attorney's office, Community Service Agency, County Board of Supervisors, the Haven Women's Center, local law enforcement, Behavior Health and Recovery Services, and medical services.. Crisis intervention, counseling, victim advocacy, medical services, basic assistance are available on site

Drug Endangered Child/Elder Dependent Adult Multidisciplinary Team is a collaborative between the Community Services Agency, Stanislaus County Health Services Agency, Stanislaus County Drug Enforcement Agency, California Multijurisdictional Methamphetamine Enforcement Team, and Stanislaus County District Attorney's Office. They provide a coordinated response to families involved in clandestine manufacturing, sales, and/or possession of controlled substances when children, elderly, and/or dependent adults are expected to be present.

Haven's Women's Center: Domestic Violence

The Haven's Women's Center Advocacy Program's goal is to empower victims of domestic violence to act as their own advocates for safety. The broader goal of this program is to protect children and adults who are at risk and to reduce the recurrence of child abuse and/or neglect.

Parents United

Parent's United of Stanislaus County is a non-profit agency in the community that provides individual and group counseling for victims of sexual abuse. It also provides treatment for family members as well as the offender.

Aspira Foster and Family Services: Pro-Family Program

This program is an intensive family reunification program that utilizes a short-term paraprofessional mentoring component. Services include family-centered service planning, crisis counseling, transportation, home visitation and parent specific education. The service population is families that have had children removed from their care and are in the process of reunification. Referrals are made by social workers from the Stanislaus County Community Services Agency Child Family Services Division. The service site will be at the home of the family being served. Although funding was originally cut during this year's budget due to the utilization of PSSF funding the contract was reconsidered.

Parent Resource Center: Adult Parenting Program

The mission statement of the Parent Resource Center is to build stronger, healthier families by offering volunteer in home mentoring and education support services to parents who are at risk for child abuse and neglect. This program provides two weekly 20-week parenting support and education classes, four classes a year including two Spanish speaking classes. The program provides case management and referral services to 80 parents annually and provides in-home volunteer mentors to 20 high-risk parents annually offering emotional support/parent education.

Children's Crisis Center: Respite Child Care Program

The Children's Crisis Center is the only shelter service for abused, neglected and at-risk children in Stanislaus County. It is a safe place for parents to bring their children when they need a "break" from parenting. The Center focuses on prevention, intervention and crisis counseling through the Respite Childcare Program, the Family Nurturing Program, FamilyLINE and the Family Advocacy Program. It also provides crisis counseling and case management support services to families needing child abuse prevention/intervention services.

**The service array linked with Child Welfare spans past the completion of services. The following resources are available to families and youth that have participated in the Child Welfare System:**

Mental health and Family Maintenance services for adoptive families.

Adoption support group, Adoption Assistance Program (AAP) and MediCal. The Adoption Assistance Program is available to both relative and non-relative families who adopt children from foster care. AAP reduces financial barriers to the adoption of children who might otherwise remain in foster care. Eligibility is not based on family income, but rather on the eligibility of the child. The AAP rate is negotiated with each family, and is based on the child's basic and special needs and the circumstances of the family.

**CAPIT/CBCAP/PSSF funded programs**

**Intensive Family Reunification Services**

**Aspira Foster and Family Services: Pro-Family Program**

This program is an intensive family reunification program that utilizes a short-term paraprofessional mentoring component. Services include family-centered service planning, counseling, transportation, home visitation and parent specific education. This program fits two federal outcomes: 1) Reduce the recurrence of child abuse and/or neglect and 2) Reduce time in foster care to reunification without increasing re-entry. The service populations are families that have had children removed from their care and are in the process of reunification.

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Referrals are made by social workers from the Stanislaus County Community Services Agency Child Family Services Division. The service site will be at the home of the family being served. Staff provides transportation and support to medical, treatment and housing appointments to facilitate attendance, comprehension, and follow through. Due to caseload and resource availability without this service there would be an unmet need that would create a barrier to reunification.

### **Drug Treatment**

#### **Adult Residential Treatment Program**

- **Stanislaus Recovery Services**
- **Nirvana**

As previously mentioned substance abuse has been identified as main contributor to the abuse and neglect of children. The abuse of substances and the subsequent lifestyle that leads to child neglect and endangerment is a contributing factor to most cases within Stanislaus County. Due to current budget constraints funding for alcohol and drug (AOD) treatment is limited. To meet this unmet need PSSF/CAPIT funding is being utilized to contract with treatment providers. These programs include social model residential treatment and recovery programs, using a phase-based approach. Admission, placement and length of time in the program are determined by individual need. They are voluntary programs specializing in treating individuals who have relapsed and/or been resistant to other types of treatment. Services include parent education and support, case management, and information and referral. Day Treatment, Intensive Outpatient Programs and Relapse prevention services are also available. Treatment can be 'stepped' down or up depending on an individual's need. Adults referred have priority because their children are being served by Child and Family Services and are as high risk of abuse and neglect. Services are offered in both Spanish and English, and are culturally competent. A specialized program for dually diagnosed clients who also suffer from co-occurring mental health issues is available.

#### **Counseling Services and Adoption Support**

##### **Sierra Vista Counseling**

Sierra Vista is a counseling organization that offers individual group counseling regarding issues of anger management, trauma, mental health, and school age issues. They have services to address the special needs of children who are not successful in a regular day school including an ADHD clinic. Priority for services is given to children who are at high risk, including children who are being served by the county welfare departments for being abused and neglected, pre adoptive families, and other children who are referred for services by legal, medical, or



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social services agencies. Individual and group counseling services for adults and children to help break the cycle of abuse and children receive individual and group counseling to help heal the wounds and increase their personal safety. Domestic violence treatment, anger management treatment and Spanish speaking services are available. Parenting is offered individually, in a group, parent child labs and activities that expedite and support the adoption process.

**Drug Treatment and Parenting**

**Sierra Vista First Step**

First Step is a drug and alcohol treatment program for pregnant, postpartum and parenting women and their children. Priority for services is given to children who are at high risk, including children who are being served by the county welfare departments for being abused and neglected and other children who are referred for services by legal, medical, or social services agencies. The goal of the program is to assist and support women in developing positive parenting skills while learning to live a healthy, drug-and alcohol free lifestyle.

Women with children who are under the age of 18 can participate in group and individual alcohol and drug treatment services. While attending treatment, the Child Development Center is available for care of children age five and under. The year-long program is designed in a multi-phase model offered in both English and Spanish. Advancement in the program is contingent upon meeting specific treatment goals, completion of assignments, and maintaining abstinence of drug and alcohol use at each phase.

**Adoption Support Group**

An adoption support group is held monthly for perspective and adoptive parents. It is facilitated by a mental health clinician who guides the families through issues that may impact the adoption process and successful adoptive homes. Resource and referral is also available to participants.

**Crisis Center: Respite Child Care Program**

The Children's Crisis Center is the only shelter service for abused, neglected and at-risk children in Stanislaus County. It is a safe place for parents to bring their children when they need a "break" from parenting. The Center focuses on prevention, intervention and crisis counseling through the Respite Childcare Children's Program, the Family Nurturing Program, FamilyLINE and the Family Advocacy Program. It also provides crisis counseling and case management support services to families needing child abuse prevention/intervention services.

**Hutton House: Respite Teen Program**

Hutton House is a state licensed temporary shelter for runaway, homeless and youth in crisis who are ages 13-17. It provides services in a residential setting for 8 youth at a time for a maximum of 15 days. Day services are available for youth and their families. Crisis line is available 24 hours a day. Assessment of client needs, individual, group and family counseling, substance abuse assessments and education, drop-in counseling services, information and referrals, and advocacy, parent support and education are also available

**ATTACHMENTS**

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**CAPC MEMBERS ADDRESSES**

LAST NAME	FIRST NAME	ADDRESS
Ahyou	Kristie	Stanislaus County Coroner's Office 1010 – 10 <sup>th</sup> Street Modesto, CA
Ball	Scott	Probation 2215 Blue Gum Ave Modesto CA 95358
Currie	Rachelle	Haven Women's Center 618 – 13 <sup>th</sup> Street Modesto CA 95354
Dickinson	Robin	Valley Mountain Regional Center 1820 Blue Gum Ave Modesto CA 95358
Fisher	Nancy	Community Partner 830B Scenic Drive Modesto CA 95350
Fontana	Vicki	Hughson Family Resource Center 2413 – 3 <sup>rd</sup> Street Hughson CA 95326
Garcia	Colleen	Children's Crisis Center 1244 Fiori Ave Modesto CA 95350
Junker	Harald	Bank of the West 3801 Pelandale Ave – Ste C Modesto CA 95356
McDowall	Evelina	Health Services Agency 830B Scenic Drive Modesto, CA
Muralt	Taryn	Center for Human Services 1700 McHenry Ave – Ste11 Modesto CA
Palombi	John	Parent Representative 1017 Woodrow Ave Modesto CA 95367
Parman	Nelda	Sierra Vista Child & Family Services 912 Sierra Drive Modesto CA 95351
Rolichcheck	Belinda	Haven Women's Center 618 – 13 <sup>th</sup> Street Modesto CA 95354
Salaiz	Sharon	Aspiranet 151 E. Canal Drive Turlock CA 95380
Servas	Karen	Community Partner

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Shipley	Carol	District Attorney's Office Victim Services 832 – 12 <sup>th</sup> Street – Ste 300 Modesto CA 95326
Wood-Hiatt	Kim	Sierra Vista Child & Family Services 100 Poplar Ave Modesto CA 95354

**WORKSHEETS**

**THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY  
PROPOSED EXPENDITURES  
WORKSHEET 1**

(1) COUNTY: Stanislaus		(2) PERIOD OF PLAN: 9/18/10 thru 6/30/11				(3) YEAR: 1		(4) FUNDING ESTIMATES —		CAPIT: \$165,980		CBCAP: \$69,400.00		PSSF: \$460,297.00		OTHER:	
Line No.	Title of Program / Practice	SIP Strategy No., if applicable	Name of Service Provider, if available	CAPIT	CBCAP				PSSF					OTHER SOURCES	NAME OF OTHER	TOTAL	
				Dollar amount that will be spent on CAPIT Direct Services	Dollar amount that will be spent on CBCAP Direct Services	Dollar amount that will be spent on CBCAP Infra Structure	Dollar amount that will be spent on Public Awareness, Brief Information or Referral Activities	Dollar amount of CBCAP allocation to be spent on all CBCAP activities — sum of columns F1, F2, F3	Dollar amount of PSSF allocation that will be spent on PSSF activities — sum of columns G2, G3, G4, G5	From Column H				Dollar amount that comes from other sources	List the name(s) of the other funding source(s)	Total dollar amount to be spent on this Program / Practice — sum of columns E, F4, G1, H1	
A	B	C	D	E	F1	F2	F3	F4	G1	G2	G3	G4	G5	H1	H2	I	
									\$ -							\$ -	
2	Drug Treatment		Nirvana						\$ 114,128	\$ 40,668	\$ 73,460	\$ -				\$ 114,128	
3	Counseling Services		Sierra Vista	\$ 90,125				\$ -	\$ 90,259				\$ 90,259			\$ 180,384	
4	Drug Treatment		Stanislaus Recovery Services					\$ -	\$ 120,210	\$ 96,540	\$ 23,670					\$ 120,210	
5	Adoption Support		Adoption Support Group					\$ -	\$ 1,800				\$ 1,800			\$ 1,800	
6	Counseling		First Step	\$ 75,855				\$ -	\$ 37,950	\$ 37,950						\$ 113,805	
7	Drug Treatment and parenting	2.4		\$ -				\$ -	\$ -							\$ -	
8	Hutton House		Hutton House		\$ 36,252			\$ 36,252	\$ -							\$ 36,252	
9	Children's Crisis Center		Children's Crisis Center		\$ 33,148			\$ 33,148	\$ -							\$ 33,148	
1	Intensive Family Reunification Services	N/A	Aspira Pro-Family						\$ 95,950			\$ 95,950				\$ 95,950	
Totals				\$ 165,980	\$ 69,400	\$ -	\$ -	\$ 69,400	\$ 460,297	\$ 175,158	\$ 97,130	\$ 95,950	\$ 92,059	\$ -	\$ -	\$ 695,677	

**THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY  
PROPOSED EXPENDITURES  
WORKSHEET 1**

(1) COUNTY: Stanislaus			(2) PERIOD OF PLAN: 7/1/11 thru 6/30/13				(3) YEAR: 2 and 3									
(4) FUNDING ESTIMATES —			CAPIT: \$165,980	CBCAP: \$33,148.00	PSSF: \$460,297.00	OTHER:										
Line No.	Title of Program / Practice	SIP Strategy No., if applicable	Name of Service Provider, if available	CAPIT	CBCAP				PSSF					OTHER SOURCES	NAME OF OTHER	TOTAL
				Dollar amount that will be spent on CAPIT Direct Services	Dollar amount that will be spent on CBCAP Direct Services	Dollar amount that will be spent on CBCAP Infra Structure	Dollar amount that will be spent on Public Awareness, Brief Information or Referral Activities	Dollar amount of CBCAP allocation to be spent on all CBCAP activities — sum of columns F1, F2, F3	Dollar amount of PSSF allocation that will be spent on PSSF activities — sum of columns G2, G3, G4, G5	From Column H					Dollar amount that comes from other sources	List the name(s) of the other funding source(s)
A	B	C	D	E	F1	F2	F3	F4	G1	G2	G3	G4	G5	H1	H2	I
								\$0								
2	Drug Treatment		Nirvana					\$0	\$114,128	\$ 40,668	\$ 73,460	\$ -				\$114,128
3	Counseling Services		Sierra Vista	\$90,125				\$0	\$90,259				\$ 90,259			\$180,384
4	Drug Treatment		Stanislaus Recovery Services					\$0	\$120,210	\$ 96,540	\$ 23,670					\$120,210
5	Adoption Support		Adoption Support Group					\$0	\$1,800				\$ 1,800			\$1,800
6	Counseling		Sierra Vista					\$0	\$37,950	\$ 37,950						\$37,950
7	Drug Treatment and parenting pending RFP		First Step	\$75,855				\$0	\$0							\$75,855
			pending RFP		\$33,148			\$33,148	\$0							\$33,148
1	Intensive Family Reunification Services	N/A	Aspira Pro-Family					\$0	\$0							\$0
								\$0	\$95,950			\$ 95,950				\$95,950
<b>Totals</b>				\$165,980	\$33,148	\$0	\$0	\$33,148	\$460,297	\$175,158	\$97,130	\$95,950	\$92,059	\$0	\$0	\$659,425



**THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY  
CAPIT PROGRAMS, ACTIVITIES AND GOALS  
WORKSHEET 2**

(1) COUNTY: Stanislaus		(2) YEAR: 2010-2011																
Line No.	Title of Program/Practice	Unmet Need	CAPIT Direct Service Activity														Other Direct Service Activity (Provide Title)	Goal
			Family Counseling	Parent Education & Support	Home Visiting	Psychiatric Evaluation	Respite Care	Day Care/Child Care	Transportation	MDT Services	Teaching & Demonstrating Homemakers	Family Workers	Temporary In Home Caretakers	Health Services	Special Law Enforcement	Other Direct Service		
A	B	C	D1	D2	D3	D4	D5	D6	D7	D8	D9	D10	D11	D12	D13	D14	E	F
7	Drug Treatment and Parenting	Substance abuse treatment and parent education pg. 33		X				X										Families Are Free from Substance Abuse and Mental Illness
3	Counseling	Counseling pg. 33	X	X		X												Families Are Strong and Connected

**THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY  
CBCAP PROGRAMS, ACTIVITES AND GOALS  
WORKSHEET 3**

(1) COUNTY: Stanislaus		(2) YEAR: 2010-2011																		
Line No.	Title of Program/Practice	Unmet Need	Public Awareness, Brief Information or Information Referral	CBCAP Direct Service Activity							Other Direct Service Activity (Provide Title)	Logic Model Exists	Logic Model Will be Developed	EBP / EIP (Identify Level)					County has documentation on file to support Level selected	Goal
				Family Support Program	Family Resource Center	Respite Care	Parent Mutual Support	Parenting Program (Classes)	Voluntary Home Visiting	Other Direct Service				Well Supported	Supported	Promising Programs & Practices Emerging & Evidence Informed Programs & Practices	Program Lacking support			
A	B	C	D	E1	E2	E3	E4	E5	E6	E7	F	G1	G2	H1	H2	H3	H4	H5	I	J
8	Hutton House	Respite services and family support for children ages 13-17 pg. 37					x	x				x					x			Communities Are Caring And Responsive
9	Children's Crisis Center	Respite services and family support for children 6-12 pg. 35					x	x				x								Vulnerable Communities Have Capacity to Respond

**THREE-YEAR CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY  
PSSF PROGRAMS, ACTIVITIES AND GOALS  
WORKSHEET 4**

(1) COUNTY: Stanislaus		(2) YEAR: 2010-2011																													
Line No.	Title of Program/Practice	Unmet Need	PSSF Family Preservation							PSSF Family Support Services (Community Based)								Time Limited Family Reunification Services					Adoption Promotion and Support Services			Other Direct Service Activity (Provide Title)	Goals				
			Preplacement Preventive Services	Services Designed for Child's Return to their Home	After Care	Respite Care	Parenting Education & Support	Case Management Services	Other Direct Service	Home Visitation	Drop-In Center	Parent Education	Respite Care	Early Development Screening	Transportation	Information & Referral	Other Direct Service	Counseling	Substance Abuse Treatment Services	Mental Health Services	Domestic Violence	Temporary Child Care/ Crisis Nurseries	Services / Activities	Transportation to / from	Other Direct Service			Pre-Adoptive Services	Post-Adoptive Services	Activities to Expedite Adoption Process	Activities to Support Adoption Process
A	B	C	D1	D2	D3	D4	D5	D6	D7	E1	E2	E3	E4	E5	E6	E7	E8	F1	F2	F3	F4	F5	F6	F7	G1	G2	G3	G4	G5	H	I
1	Aspira Pro-Family	Intensive Family Reunification pg. 36-39					X			X								X					X								Children and Youth Are Nurtured, Safe and Engaged
2	Nirvana	Drug treatment pg. 33	X				X	X				X				X															Families Are Free from Substance Abuse and Mental Illness
3	Sierra Vista	Counseling pg. 89																						X		X	X				Families Are Strong and Connected
4	Stanislaus Recovery Services	Drug treatment pg. 33	X				X	X				X				X															Families Are Free from Substance Abuse and Mental Illness
5	Adoption Support Group	Group Counseling pg. 45																							X						Identified Families Access Services and Supports