



County of Los Angeles  
DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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PHILIP L. BROWNING  
Interim Director

September 13, 2011

The Honorable Board of Supervisors  
County of Los Angeles  
383 Kenneth Hahn Hall of Administration  
500 West Temple Street  
Los Angeles, CA 90012

**ADOPTED**

BOARD OF SUPERVISORS  
COUNTY OF LOS ANGELES

#16 SEPTEMBER 13, 2011

*Sachi A. Hamai*  
SACHI A. HAMAI  
EXECUTIVE OFFICER

Board of Supervisors  
GLORIA MOLINA  
First District  
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Third District  
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MICHAEL D. ANTONOVICH  
Fifth District

Dear Supervisors:

**DEPARTMENT OF CHILDREN AND FAMILY SERVICES: REQUEST  
AUTHORIZATION TO SUBMIT THE LOS ANGELES COUNTY SYSTEM  
IMPROVEMENT PLAN TO THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES  
(ALL DISTRICTS ) (3 VOTES)**

**SUBJECT**

Approve and delegate authority to the Interim Director of the Department of Children and Family Services (DCFS) and the Chief Probation Officer to submit the Los Angeles County System Improvement Plan (SIP) report (Attachment) to the California Department of Social Services (CDSS or State) in order to comply with California's Outcomes and Accountability System (COAS) that monitors the quality of services provided on behalf of foster youth and their families and maximize compliance with federal regulations for the receipt of federal Title IV-E and Title-B funds.

**JOINT RECOMMENDATION WITH THE CHIEF PROBATION OFFICER THAT YOUR BOARD:**

1. Find the Los Angeles County System Improvement Plan (SIP) suitable for submission to the CDSS.
2. Approve and delegate authority to the Interim Director of DCFS and the Chief Probation Officer of the Probation Department to submit the SIP to CDSS.
3. Stamp signature the attached CDSS required forms for submission:
  - a. CDSS SIP Cover Sheet;
  - b. Board of Supervisors Notice of Intent; and
  - c. CAPIT/CBCAP/PSSF Contact and Signature Sheet.

### **PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION**

The purpose of the recommended action is to obtain approval to submit the SIP to CDSS. The SIP is one of the principal components of COAS, which is used to monitor and assess the quality of services provided by both DCFS and Probation.

The SIP is the operational agreement between the County and the State which outlines a child welfare services improvement plan under the supervision of DCFS and Probation. The findings from the County Self-Assessment (CSA)<sup>1</sup> guide the development of the SIP. The SIP includes improvement goals that the County proposes to achieve within the three year term of the plan (2011-2014).

### **FISCAL IMPACT/FINANCING**

There are no direct county funds required to complete the SIP process. However, the SIP is required to comply with federal regulations for the release and receipt of federal Title IV-E and Title IV-B funds.

### **FACTS AND PROVISIONAL/LEGAL REQUIREMENTS**

Assembly Bill 636 (Steinberg), Chapter 678, Statutes of 2001, enacted the Child Welfare System Improvement and Accountability Act of 2001. This law requires CDSS to establish COAS. The COAS commenced in January 2004, with implementation instructions provided to local child welfare services and probation agencies through issuances of ACL 04-05. The COAS operates on a philosophy of continuous quality improvement, interagency partnerships, community involvement, and public reporting of programs outcomes. Principal components of the COAS include: (1) Outcome and Accountability County Data Reports, which are provided on a quarterly basis by University of California Berkeley's Center for Social Services Research Center; (2) County Peer Quality Case Reviews (the last one was completed in November 2010); (3) County Self-Assessment (Board Approved June 28, 2011); (4) County System Improvement Plan (which is the current attached plan); and (5) State Technical Assistance and Monitoring.

### **IMPACT ON CURRENT SERVICES**

The SIP defines specific action steps to achieve programmatic, operational and process improvements to ultimately provide improved quality, accessibility, and availability of services for children and families supervised by DCFS and Probation.

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<sup>1</sup> Approved by your Board on June 28, 2011

**CONCLUSION**

In order to move forward with the steps necessary to comply with COAS, the attached SIP and supporting documents require Board approval and signature stamp before submission to CDSS.

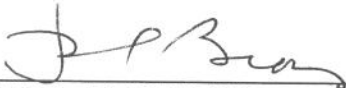
Through the continued implementation of COAS, DCFS, Probation, and our wide array of stakeholders are committed to work collaboratively in an effort to improve service delivery outcomes for the children of Los Angeles County that are at-risk, or are currently residing in out-of-home care.

It is requested that the Executive Officer/Clerk of the Board send one copy of the Adopted Board action to each of the following:

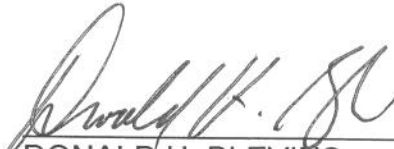
Department of Children and Family Services  
Philip L. Browning, Interim Director  
425 Shatto Place, Room 600  
Los Angeles, CA 90020

Probation Department  
Donald H. Blevins, Chief Probation Officer  
9150 East Imperial Highway  
Downey, CA 90242

Respectfully submitted,



PHILIP L. BROWNING  
INTERIM DIRECTOR



DONALD H. BLEVINS  
CHIEF PROBATION OFFICER

PLB/DHB:CMM  
MHM:TG:LCM

Attachments (4)

c: Chief Executive Officer  
County Counsel  
Executive Officer, Board of Supervisors

Los Angeles County Department of Children and Family Services  
Los Angeles County Probation Department

# Los Angeles County System Improvement Plan 2011-2014





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## Attachments

### Part I

- Attachment I: Peer Quality Case Review
- Attachment II DCFS County Self-Assessment Executive Summary
- Attachment III: Probation County Self-Assessment Executive Summary
- Attachment IV: System Improvement Plan Membership
- Attachment V: Current Services and Program Activities
- Attachment VI System Improvement Plan (SIP) Stakeholder Meeting Summary

### Part II-

- Attachment A1 List of Inter-agency Council on Child Abuse and Neglect (ICAN) members
- Attachment B1: List of Child Abuse Prevention Council (CAPC) members
- Worksheet 1: Proposed Expenditures
- Worksheet 2: CAPIT Programs, Activities and Goals
- Worksheet 3: CBCAP Programs, Activities and Goals
- Worksheet 4: PSSF Programs, Activities and Goals

## References

**Los Angeles County**

**System Improvement Plan: Part I**

**2011 to 2014**





## The System Improvement Plan

California Department of Social Services (CDSS) established the California Outcomes and Accountability System (COAS) and implemented it in January 2004. The purpose of COAS is to strengthen the accountability system used in California to monitor and assess the quality of child welfare services. COAS is based upon principles of on-going quality improvement, interagency partnerships, community involvement, and program outcomes.

The System Improvement Plan (SIP) is one of five components that make up COAS. The other four components include: Outcome and Accountability County Data Reports; Peer Quality Case Reviews (PQCR); County Self-Assessment (CSA); and State Technical Assistance and Monitoring. The SIP incorporates data received from the PQCR and the CSA in an operational agreement between the County and State. Strategies towards the improvement of child welfare services are identified in the agreement. Los Angeles County Department of Children and Family Services (DCFS) and Probation Department (Probation) collaborate in the development of the County's SIP. While public child welfare services delivery is the sole focus of DCFS in Los Angeles County, Probation and DCFS are active partners sharing many of the same Federal, State and County mandates and outcomes for foster youth.

The SIP documents a commitment to specific measurable improvements in performance outcomes, within in a defined timeframe, currently three years. The SIP is updated annually, thus becoming one method through which the County reports on progress towards meeting improvement goals. This is Los Angeles County's third COAS series and it's third System Improvement Plan, the first two being completed in 2004 and 2008 respectively.

## Methodology

### Qualitative Data

The PQCR and CSA are the initial steps in building a System Improvement Plan. In addition, the County held a SIP Stakeholder event on June 2, 2011, in which approximately 161 DCFS and Probation staff, public and private agency partners, community representatives and child welfare service consumers provided input into the development of the SIP. The PQCR summary findings (Attachment I), DCFS CSA summary findings (Attachment II), Probation CSA summary findings (Attachment III), and SIP Stakeholder summary findings (Attachment VI) are integrated into this report. The topic areas that were presented at the SIP Stakeholder meeting were selected from the PQCR recommendations and from areas of challenges and barriers highlighted in the CSA, for example improving the Relative/Non-Relative Caregiver process for Probation and improving data tracking systems and sharing information for both Probation and DCFS.

The PQCR, through a week long interviewing process, provides qualitative data about a chosen topic area. Los Angeles County's general area of focus for its third PQCR was permanency for Transition Aged Youth<sup>1</sup>. The PQCR participants provided feedback to the County regarding services, resources, child welfare system strengths and challenges. Participants identified the strength of practices such as team decision making meetings and specialized youth permanency units. Staff commitment, as well as family finding practice, was seen as beneficial to Transition Aged Youth. Identified challenges included workers and agency partners' inability to share information between systems, combined with limitations in data systems sharing information. PQCR participants shared that staff and clients lack up-dated information regarding current services and resources available through different systems; and that fiscal constraints have put limitations on some resource availability.

The CSA, like the PQCR, includes qualitative data gathering through a number of focus group opportunities, advisory teams, and for DCFS, Bureau convenings. Participant input highlighted the abundance of opportunities in place for DCFS and Probation to team with service providers and clients. In addition participants expressed the value in collaboration between County departments, the community, service providers, and clients in order to increase communication and leverage resources. CSA qualitative data feedback overall included the following suggestions as opportunities to enhance child welfare services:

- Engage all parties in effective strategies of partnerships and collaboration;
- Improve collaboration with external partners by establishing clearly defined responsibilities;
- Enhance and build resource availability and knowledge of resources;
- Provide cultural and linguistic competency training for DCFS, Probation and Service Providers;
- Develop consistent best practice model approaches; and
- Service providers developing mental health service models for DCFS, Probation and Service Providers that guide service delivery.

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<sup>1</sup> Federal Measure C3.3 "Of all children in foster care during the year who were either discharged to emancipation or turned 18 while still in care, what percentage had been in foster care for three years or longer."

## Quantitative Data

In addition to qualitative data, the CSA examines quantitative data, primarily from State Child Welfare Services/Case Management System (CWS/CMS). CWS/CMS Outcome Measures are organized under areas of County Participation Rates, Safety Outcomes, Permanency Outcomes, and Well-being Outcomes. Although Probation has access to CWS/CMS, data input is limited so there is not adequate information to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure.

Child welfare measures found in the CWS/CMS Dynamic Reporting System web-site include, but are not limited to, categories of Safety, Reunification Composite, Adoption Composite, Long Term Care Composite, Placement Stability Composite, Siblings, and Service Delivery. Data trends (performance directions) discussed in this section, consider 18 of the measures that have National standards and include quarter 2 information captured from the CWS/CMS Dynamic Reporting System. The data source for information included in the *Choosing System Improvement Goals* section below is the official California Department of Social Services Quarterly Report for quarter 2 (Q2), 2007, 2008, 2009 and 2010.

Since July 2007, DCFS has shown greatest performance improvement<sup>2</sup> toward the National Standard in six of the 18 measures<sup>3</sup>:

- C 1.3. Reunification within 12 months (19.4% increase);
- C 2.3. Adoption within 12 months<sup>4</sup> (46.2% increase);
- C 2.4. Legally free within 6 months (33.3% increase);
- C 2.5. Adoption within 12 months (legally free) (21.1% increase);
- C 3.1. Exits to Permanency (24-months in care) (38.5% increase); and
- C 3.3. In care 3 years or longer (Emancipated/Age 18) (9.6% decrease).

Other improvements in performance for measures with no National Standard include *Timely Dental Exams* (10.0% increase), which is a measure of children's dental exams completed in Child Healthy and Disability Prevention (CHDP) recommended timeline.

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<sup>2</sup> 10% or more improvement in performance

<sup>3</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, C., & Peng, C. (2009). *Child Welfare Services Reports for California*. Retrieved [April, 4, 2011], from University of California at Berkeley Center for Social Services Research website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare) Quarter 2 data.

<sup>4</sup> In care for 17 continuous months or longer and were not legally freed for adoption on the first day of the period, who then became legally freed w/in the next 5 months.

The County performed above the National Standard, on two of the performance measures:

- C 2.5. Adoption within 12 months (legally free) (21.1% increase); and,
- C 4.2. Placement Stability (12 to 24 months in care) (-7.8% decrease).

### Choosing System Improvement Goals<sup>5</sup>

Los Angeles County exhibited performance below National Standards for outcome measures documented below. Consideration was given to each measure by DCFS’ Executive team and System Improvement plan members, as the county considered areas for improvement of child welfare services for children and their families<sup>6</sup>. While performance national standards are held as a goal for child welfare agencies the county also considers performance trends and practices plans in establishing improvement goals. The county has chosen to focus system improvement plan goals on Reunification (re-entry component), placement stability and permanency measures. It is expected that strategies that successfully address a few outcome measures, will also have a positive impact on other performance measure.

<b>S1.1 No Recurrence of Maltreatment</b>					
<b>Of all children who were victims of a substantiated maltreatment allegation during the first 6 months of the year, what percent were not victims of another substantiated allegation within the next 6 month period.</b>					
	2 <sup>nd</sup> Qtr 2007	2 <sup>nd</sup> Qtr 2008	2 <sup>nd</sup> Qtr 2009	2 <sup>nd</sup> Qtr 2010	National Standard or Goal
Los Angeles	93.4	93.5	93.5	93.4	94.6
<b>S2.1 No Maltreatment in Foster Care</b>					
<b>Of all children served in foster care during the year, what percent were not victims of a substantiated maltreatment allegation by a foster parent or facility staff member.</b>					
	2 <sup>nd</sup> Qtr 2007	2 <sup>nd</sup> Qtr 2008	2 <sup>nd</sup> Qtr 2009	2 <sup>nd</sup> Qtr 2010	National Standard or Goal
Los Angeles	99.82	99.59	99.58	99.46	99.68
<b>Currently S1.1 and S1.2 performance outcomes are below the National Standard. Safety monitoring is embedded in each SIP goal and strategy chosen. It is expected that by working towards performance improvement on other chosen measures, that S1.1 and S1.2 outcomes will be positively impacted.</b>					

<sup>5</sup> Data source for outcome measure information comes from California Department of Social Services official Quarterly reports for Quarter 2, 2007, 2008, 2009 and 2010. (<http://www.childsworld.ca.gov/res/CtyReport/Jan11/Jan11LosAngeles.pdf>).

<sup>6</sup> DCFS Executive team decisions are made at weekly executive team meetings. SIP stakeholders participate in, quarterly, yearly events and provide input to on-going system improvement strategies. See Attachment IV SIP membership.

<b>C1.1 Reunification within 12 months (Exit Cohort)</b> Of all children discharged from foster care to reunification during the year who have been in foster care for 8 days or longer, what percent were reunified in less than 12 months from the date of the latest removal from home.					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	60.8	62.1	63.9	66.9	75.2
<b>C 1.2 Median Time to reunification (Exit Cohort)</b> Of all children discharged from foster care to reunification during the year who have been in foster care for 8 days or longer, what was the median length of stay (in months) from the date of latest removal from home until the date of discharge to reunification.					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	8.2	8.3	8.1	7.6	5.4
<b>C1.3 Reunification within 12 months (Entry Cohort)</b> Percentage of all children entering foster care for the first time in a 6 month period who remained in foster care for 8 days or longer who discharged from foster care to reunification in less than 12 months from the date of latest removal from home.					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	37.8	43.8	48.5	47.4	48.4
<b>Although C1.1, C1.2 and C1.3 are below the National Standard, the County is showing continuous improvement in these measures.</b>					
<b>C1.4 Re-entry Following Reunification (Exit Cohort)</b> Percentage of all children discharged from foster care to reunification during the year, who re-entered foster care in less than 12 months from the date of discharge.					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	10.2	10.6	10.8	12.4	9.9
<b>Although the County consistently makes strides to reunify children with parents, there is an ongoing increase in the rate of re-entry into foster care. Efforts to address this area are discussed on pages 67 and 68 of the 2011 County Self-Assessment. This is also a focus area for the SIP.</b>					

<b>C2.1 Adoption Within 24 Months (Exit Cohort)</b>					
Percentage of all children discharged from foster care to a finalized adoption during the year, who were discharged in less than 24 months from the date of the latest removal from home.					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	24.6	23.2	22.8	23.8	36.6
<b>C2.2 Median Time to Adoption (Exit Cohort)</b>					
The median length of stay (in months) from the date of latest removal from home until the date of discharge to adoption of all children discharged from foster care to a finalized adoption during the year.					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	33.6	33.0	32.7	32.9	27.3
<b>C2.3 Adoption Within 12 Months (17 months in care)</b>					
Of all children discharged from foster care to a finalized adoption during the year, what was the median length of stay (in months) from the date of latest removal from home until the date of discharge to adoption.					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	13.7	16.5	18.2	20.9	22.7
<b>C2.4 Legally Free within 6 months (17 Months in Care)</b>					
Of all children in foster care for 17 continuous months or longer and not legally free for adoption on the first day of the year, what percent became legally free within the next 6 months.					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	4.9	7.2	7.2	6.8	10.9
<p>The county has focused attention on permanence and most specifically on permanence for older youth. Older youth who find permanence through adoption often spend more time in foster care which contributes the length of stay baseline, thus impacting outcome measures C2.1, C2.2, and C2.3. The county will continue to focus on permanence efforts i.e.; youth permanence units, recruitment efforts for resource families while monitoring C2 outcomes.</p>					

<b>C3.1 Exits to permanency (24 months in Care)</b> Of all children in foster care for 24 months or longer on the first day of the year, what percent were discharged to a permanent home by the end of the year and prior to turning 18.					
	2 <sup>nd</sup> Qtr 2007	2 <sup>nd</sup> Qtr 2008	2 <sup>nd</sup> Qtr 2009	2 <sup>nd</sup> Qtr 2010	National Standard or Goal
Los Angeles	17.7	23.1	24.4	25.9	29.1
<b>C3.2 Exits to permanency (Legally free at Exit)</b> Of all children discharged from foster care during the year who were legally free for adoption, what percent were discharged to a permanent home prior to turning 18.					
	2 <sup>nd</sup> Qtr 2007	2 <sup>nd</sup> Qtr 2008	2 <sup>nd</sup> Qtr 2009	2 <sup>nd</sup> Qtr 2010	National Standard or Goal
Los Angeles	96.7	96.2	97.1	96.7	98.0
<b>C3.3 In-care 3 years or Longer (Emancipated/Age 18)</b> Of all children in foster care during the year who were either discharged to emancipation or turned 18 while still in care, what percent had been in foster care for 3 years of longer?					
	2 <sup>nd</sup> Qtr 2007	2 <sup>nd</sup> Qtr 2008	2 <sup>nd</sup> Qtr 2009	2 <sup>nd</sup> Qtr 2010	National Standard or Goal
Los Angeles	64.2	64.1	61.1	60.2	37.5
<b>Measure C3.1 trends towards the national standard. Measure C3.2 has remained fairly consistent, but is still below the national standard. Measure C3.3 (discussed on page 15 of this report) will be one of the focus areas of the SIP.</b>					

<b>Measure C4.1 Placement Stability (8 Days to 12 Months in Care)</b> <b>Of all children served in foster care during the year who were in foster care at least 8 days but less than 12 months, what percent had two or fewer placement settings.</b>					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	87.1	86.2	85.7	85.6	86.0
<b>Measure C4.3 Placement Stability (At Least 24 Months in Care)</b> <b>Of all children served in foster care during the year who were in foster care for at least 24 months, what percent had two or fewer placement settings?</b>					
	<b>2<sup>nd</sup> Qtr 2007</b>	<b>2<sup>nd</sup> Qtr 2008</b>	<b>2<sup>nd</sup> Qtr 2009</b>	<b>2<sup>nd</sup> Qtr 2010</b>	<b>National Standard or Goal</b>
Los Angeles	39.9	39.8	39.8	38.7	41.8
<b>The trends in outcome measures C4.1 and C4.3 has drawn the department to focus on placement stability in order to support more positive direction in these outcome areas. Placement stability outcome measures are included in the System Improvement Plan as an area of focused attention in order to prevent any further decline in performance.</b>					

### Emergency Response Referrals over 60 Days-Backlog

Beginning mid-year 2008, Los Angeles County Department of Children and Family Services began to experience increased public attention to child welfare Emergency Response (ER) policies and procedures. In response, DCFS began a review process of Emergency Response, considered options and areas for change, and implemented efforts to enhance the ER referral investigation process. In early 2009, DCFS experienced an increase in child abuse referrals, the highest number in a three year span of time and by June of 2009, it was apparent that the department needed to address a rise in ER referral investigations that were remaining open longer than 60 days. A workgroup was established and an analysis was completed to identify contributing factors in the ER referral backlog. A plan was developed to consolidate and later sustain the progress made in safely reducing the backlog numbers.

Efforts to address the ER over 60 days backlog included, but were not limited to, the following:

- Management review and oversight of key points that have the potential to affect caseload growth and ER referral backlog (i.e.; Child Protection Hotline (CPH) referral and acceptance rates, Emergency response Command Post (ERCP) carry-over response to DCFS office ER units and Continuing Services to ER referrals);
- Developed policy to streamline ER workload and clarify and strengthen the core of ER practice from a qualitative standpoint at key decision points;



- Implementation of temporary and re-assigned staff allocated to DCFS offices based on percentage of ER over 60 backlog. Process began in the fall of 2009, with additional staffing changes in April and then August of 2010;
- On-going implementation of an enhanced training unit model that redesigned training unit composition, field day activities, academy curriculum and integrated early performance measures for new hires;
- Integrated supervision training to articulate and affirm what quality, confident, competent consultation supervision and decisions-making looks like when done to a standard in ER at key decision points;
- Completion of ER workload survey to determine parameters for caseload size that are conducive to child safety, sound case practice and workload equity;
- Implementation across DCFS offices of a Management Randomized Case Review that focuses on case documentation to enhance sufficiency and quality of case practice process and to assess for compliance with Structured Decision Making; and
- Utilization of data tracking to guide decision-making with regarding to ER practice and resource needs.

On August 3, 2010, the California Department of Social Services (CDSS) granted Los Angeles County DCFS request for a waiver of the 30-day calendar timeframe to a period of 60 calendar days to close investigations and demonstrate system change efforts to engage parents and children with case plan development. The extension was based on DCFS providing CDSS with specific details about the investigation and case plan enhancement. DCFS is currently operating according to waiver timeframes. The department has observed a reduction in the ER over 60-day backlog and is utilizing current strategies to continue in the reduction trend, while keeping an eye on ER referral investigation closure within 30 days.

Although not a direct SIP strategy, DCFS will continue to monitor performance in this area and apply lessons learned from the ER Over 60 backlog to other performance areas.

## Department of Children and Family Services

Los Angeles County DCFS has chosen the following outcome measures as the focus of the SIP:

- Measure C1.4: Re-entry Following Reunification:
- Measure C4.2: Placement Stability (12-24 Months in Care)
- Measure C3.3: In Care 3 Years or Longer (Emancipated/Age 18)

### **Measure C1.4: Re-entry Following Reunification:**

Percentage of all children discharged from foster care to reunification during the year, who re-entered foster care in less than 12 months from the date of discharge.

Since the last COAS cycle, Los Angeles County has significantly increased the percentage of children who are reunified with their parents or caregivers. One challenge with increased reunification is the potential for increased re-entry into foster care. Using CDSS' quarterly reports<sup>7</sup>, performance comparisons for re-entry between Q2 2007 (10.2%) and Q2 2010 (12.4%) indicate that 21.6% more children re-entered the system within 12 months following reunification. The ten year trend for this measure indicates that the rate of re-entry has increased by 206.7% since 2000 (Needell et al, Dynamic Report). There seems to be a correlation between increased re-entry rates and the County's increase in reunification rates. Since 2000, the rate of reunification of children in the child welfare system within 12 months (exit cohort) has increased by 196.4% and the rate of reunification of children within 12 months (entry cohort) has increased by 93.4% (Needell et al, Dynamic Report).

### **Using Composite Planner**

By January of 2014, DCFS' re-entry rate will move from 12.4% to achieve the National Standard of 9.9%.

The goal established for the Re-entry outcome measure, takes into consideration the current performance. Using a baseline number of 6,901 children that reunify in a given year approximately 851 children (12.4%) will re-enter

<sup>7</sup> Data source for outcome measure information comes from California Department of Social Services' official Quarterly reports for Quarter 2, 2007 and 2010. (<http://www.childsworld.ca.gov/res/CtyReport/Jan11/Jan11LosAngeles.pdf>).

foster care within 12 months of reunifying. Los Angeles County has chosen as a goal to move re-entry outcomes to the National Standard of 9.9%. Meaning, if the County reunifies the same number of children in a given year (6,901) instead of 851 children re-entering, 680 children will re-enter. This is a reduction by 171 children and moves re-entry outcomes measure for that quarter to 9.9%. A reduction of 171 children per quarter, spread over 19 DCFS offices, is approximately 9 children per office.

### **PQCR, CSA, SIP Stakeholder Meeting**

Feedback from the PQCR, CSA, and SIP Stakeholder meeting identified that programs are in place to support reunification (i.e.; Family Preservation, Team Decision Making, Community Programs, and Wraparound expansion). Participants suggested utilizing programs and practices already in place and building on them to improve the re-entry outcome measure. Other suggestions included a need for improved communication and teamwork between agencies, as well as a need for more complete understanding of cultural differences, family stressors, the challenges of timelines for parents and the unique struggles for those families involved with substance use and/or abuse. Suggested next steps included; increased visitation in order to build stronger relationships between parent and child, building parent capacity to protect the child, having increased family and community supports in place, prior to reunification.

### **Literature Review**

Literature reviews show a correlation between re-entry and certain types of case allegations, specifically substance abuse and general neglect. (Barth 2007; Kimberlin 2008; Los Angeles County-Outcomes and Accountability Section 2009; Mateo County 2006; Osterling 2009; Terling 1999) In addition, re-entry is more likely to occur when the family is not ready for reunification, if there is a lack of sustainable support or if the child has behavioral or psychiatric issues that require special parenting skills. Literature suggests that re-entry is more likely for families with higher numbers of children and when unanticipated family changes occur. (Barth 2007; Kimberlin 2008; Osterling 2009; Terling 1999).

### **System Improvement Plan 2008-2011 to System Improvement Plan 2011-2014**

In an effort to reduce Re-entry rates, during the 2008-2011 System Improvement Plan time period, Los Angeles County included SIP strategies such as a Wraparound Service survey, increased access to Up-Front Assessments and intensive home services. In addition, an analysis and in-depth review of re-entry cases and successful reunification cases was completed, with key findings suggesting that accurate assessment of family needs and

services, dual diagnosis (substance abuse and mental health), family size and special needs of children, impact the likelihood of re-retry. The Wraparound program survey provided a good response and from the survey it was determined that additional slots were needed for Up-Front assessments. Intensive Home-based mental health services are currently in place in the form of Intensive Treatment Foster Care (ITFC) and Multi-Dimensional Treatment Foster Care (MTFC) services and have supported stabilization of children with specialized care needs allowing for moves in time to least restrictive environments. Re-entry rates continue to increase even as support strategies have been implemented. Overall, the outcome measure was not been impacted as anticipated and therefore the county has chosen to further expand and enhance Wraparound services to meet the reunification needs of children and families; re-direct funding from drug testing to screening, assessments and treatment; utilize readiness measures for families with substance abuse risk factors; build on the reunification Team Decision Making processes and evaluate the efficacy of Up-Front Assessments.

### **Current Activities Supporting Successful Reunification<sup>8</sup>**

- Dependency Drug Court
- Family Preservation
- Parent In Partnership
- Project SAFE
- Team Decision Making Meeting
- Time Limited Family Reunification Services
- Up Front Assessment

### **New Activities**

DCFS will focus efforts on enhancing programs and practices already in place. One new activity included in the 2011-2014 improvement plan for re-entry is the proposed shift of substance testing funds to assessment and treatment.

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<sup>8</sup> See Current Activities and Programs attachment for further details.

**Measure C4.2: Placement Stability (12-24 Months in Care)**

Los Angeles County's outcome for placement stability measures, which are designed to measure the number of placements a child experiences while in foster care, indicate that the County has made improvements in two of the three measures designed to gauge performance. On measure C4.1 Placement Stability (8 days to 12 months in care), Los Angeles County's performance has declined by 1.7% between Q2 2007 (87.1%) and Q2 2010 (85.6%)<sup>9</sup>. The ten-year performance trend for this measure indicates a performance improvement of 1.6%. This represents a performance of 0.2% below the National standard. Comparisons to the State-wide performance indicate that Los Angeles County is 2.9% above the State-wide figures.

For measure C4.2 Placement Stability (12 to 24 months in Care), Los Angeles County had a 7.2% decline in performance since 2007 (Quarter 2, 2007 [71.8%] - Quarter 2, 2010 [66.6%]) (CDSS Quarterly Data) and the ten year performance trend shows 0.4% improvement in performance. For the same measure, Los Angeles County is approximately 20% above the state-wide performance. The performance has prompted the county to focus system improvement efforts on this measure, to be proactive in stabilizing children in placement and preempt any further decline. This measure (C4.2) is one of the county's SIP focus measures. Efforts to stabilize placement at the 12-24 month timeframe may impact performance in measure C4.3 which monitors placement stability of children in out-of-home care 24 months or more.

Measure C4.3<sup>10</sup>, designed to monitor placement stability for children in care for 24 or more months, indicate that Los Angeles County has made a 1.0% reduction in performance on this measure since Q2 2007. The County has met and exceeded the National standard by 8.0%, while performing 1.8% above the state-wide performance. Long term trends for this measure indicate that since FY 2000-01, County performance declined by 31.7%. This might translate into the presumption that children who have deeper service needs tend to stay longer in the system and tend to have more placements due to their service needs.

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<sup>9</sup> Data source for outcome measure information comes from California Department of Social Services official Quarterly reports for Quarter 2, 2007 and 2010 (<http://www.childsworld.ca.gov/res/CtyReport/Jan11/Jan11LosAngeles.pdf>)

<sup>10</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, C., & Peng, C. (2009). *Child Welfare Services Reports for California*. Retrieved [April, 4, 2011], from University of California at Berkeley Center for Social Services Research website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare) Dynamic Report Quarter 2 data, 2007, 2008, 2009, 2010.

The most current figures available from DCFS' Family-to-Family report (local DCFS data source) for fiscal year 2009 -10, for placement stability vs. time-in-care, indicate that 86% of children experienced less than two placements within 12 months and 14% of children experienced more than two placements. Looking at longer timeframes for this stability measure indicate that for children in care 12-24 months, 67% experienced two or fewer placements, while 33% experienced more than two placements. The percentages jump for children in placement for more than 24 months; 39% for two or less placements and 61% for more than two placements. The above figures indicate that the longer children stay in the system, the more likely they are to experience less stability in placement.

### **Using Composite Planner**

By January of 2014, DCFS will increase stability of placement (children in care 12-24 months) from 66.6% to 72.0%

The goal established for the placement stability outcome measure, takes into consideration current performance. Using the current quarter baseline number of 5,957 children in placement 12-24 months, approximately 4,032 (66.6%) have been in 2 or fewer placements. Los Angeles County has chosen as a goal for this measure to improve placement stability outcomes to 72.0% which is close to the County's previous quarter 2 of 2007 performance level. Meaning, if the same number of children are in placement 12-24 months in a quarter (5,957) then 4,290 of them would have 2 or fewer placements. This is an increase in stability for an additional 158 children. Increased stability of 158 children per quarter, spread over 19 DCFS offices, is between 8 and 9 children per office.

### **PQCR, CSA, SIP Stakeholder Meeting**

Feedback from the PQCR, CSA, and SIP Stakeholder meeting identified that Kinship placements are able to offer more stability for youth and the ability to support relative placements through service provision will help maintain children in the home of a relative foster parent. Participants identified that older youth struggle with placement instability. Wraparound services have been instrumental in securing more stable placement. Improved family engagement and in-home services may help maintain a child when there is a request for removal. Participants suggested that focus be placed on trying to maintain placements and suggested that additional support be provided to a youth when a placement change occurs. Feedback included that placement instability has a noteworthy impact on youth in their education performance, especially if the youth experiences multiple school transfers. Next steps included suggested: development of a youth centered workgroup in order to get feedback regarding placement instability, establish consistency in placement protocols so that foster parents and relative caregivers are prepared for their role, work to ensure that youth assessments follow the child no matter what department

completed the document. SIP strategies will include focus on relative placement and a study of placement stability. Also, included will be strategies that engage parents with caregivers and additional collaboratives and evaluation of those services or programs that are aligned with mental health needs of youth.

### **Literature Review**

Literature reviews identified age, as well as behavioral and emotional problems as the most prevalent risk factors related to placement instability. (Crum 2009; Koh 2009) Teens in foster care are more prone to placement instability than younger children. (Osterling 2009; Webster 2000) Furthermore, those who age out of foster care are likely to experience some of the highest rates of placement instability. Emotional and behavioral issues are a common reason for foster parents to request the removal of a child from their care. Children with multiple placements may experience an increased sense of rejection and impermanence as well as a decrease in their ability to form emotional ties with their caregivers. Effective programs and interventions that help foster parents and caregivers deal with child behavioral problems have help with placement stabilization. Placement type is a strong predictor of placement stability. Children placed with kin have been found to experience fewer moves, have less behavioral problems, are more likely to remain in their neighborhood and school and with siblings. (Koh 2009; Scott 2009; Webster 2000) The growth of kinship placements is believed to lead to more positive outcomes for children because of less disruption in the life of the child.

Literature also suggests that there is a correlation between the characteristics of the caregiver and social worker, and worker retention on placement stability. Osterling (2009) Caregivers who are trained and well prepared for their role as foster parents are able to provide a more stable home. In addition, a caregiver with a strong social support system can better maintain the child in placement. Crum (2009) The educational level of the social worker is noted as impacting placement outcomes. Children whose cases were managed by social workers with a master's degree, spent fewer months in foster care, thus reducing the likelihood of placement changes. Also, a child with fewer worker changes faired better in placement stability.

### **Current Activities-Supporting Placement Stability**

- D-rate Program
- Ice breaker Program
- Kinship Care Services
- Relative Placement

- Wraparound Services

### **New Activity**

In achieving system improvement goals, DCFS will focus efforts on enhancing programs and practices already in place. A new activity included in the 2011 - 2014 improvement plan for placement stability is the proposed Expedited Response Pilot. This pilot is a collaborative effort between DCFS, the Department of Mental Health and the Psychiatric Mobile Response team staff, which focuses work on youth with mental health needs.

## **Self-Sufficiency**

### **Measure C3.3: In Care 3 Years or Longer (Emancipated/Age 18)**

Of all children in foster care during the year who were either discharged to emancipation or turned 18 while still in care, what percent had been in foster care for 3 years or longer?

Outcome measure C3.3 considers the percentage of youth in care for three years or longer who are emancipating or age 18. The County has made improvements by lowering the number of children in care three years or longer by 9.6% for the time period Q2 2007 to Q2 2010. For the same measure, Los Angeles County has performed 1.0% better than State-wide performance for the same time period. However, Los Angeles County remains 62% below the National standard performance of 37.5%. Long-term trends for this measure indicates that since 2000, Los Angeles County's performance has declined by 2.3%.

### **Using Composite Planner**

By January 2014, DCFS will reduce the percentage of youth in care three years or longer by 10% (emancipating/age 18)

The goal established for the "In care three years or longer" outcome measure, takes into consideration current performance. Current performance shows nearly 60% of all emancipating youth or age 18 youth as being in care for three years or longer. Los Angeles County's target is to reduce the percentage by 10%. This would be reflected in an outcome measure of approximately 54% of emancipating youth/age 18 having been in care 3 years or longer. In other words, if given a baseline number of 1,359 emancipating youth/or age 18 young adults leaving



care, current performance would have 815 (60%) in care 3 years or longer. The county goal of a 10% improvement in performance would manifest itself in 81 less youth in care three years or longer.

### **PQCR, CSA, SIP Stakeholder Meeting**

Feedback from the PQCR, CSA, and SIP Stakeholder meetings identified that there is a need to build alternative placement resources. Participants suggested that focus be placed on engaging the family up front in order to reunify if possible, engage the father as a possible viable placement, continue with on-going family finding, and consistently apply concurrent planning to cases. Positive programs and practices that were identified by stakeholders included team decision making meetings, youth permanency units and the Permanency Partners Program (P3).

### **Literature Review**

Timely permanency for children in out-of-home care is a primary goal for DCFS. In particular, the permanency outcome measure (C3.3) related to emancipating youth and age 18 young adults exiting the child welfare system, who have been in care for three years or longer, focuses attention on the need for permanency. Research has shown that youth who emancipate from foster care face disproportionately higher rates of unemployment, lower educational attainment, incarceration, dependence on public assistance, substance abuse, and non-marital childbirth. (Dettlaff 2010; Places to Watch 2006; Stott, 2009) Foster youth while in care, often times move from placement to placement, coping with school changes and facing challenges of maintaining relationships with others. Supportive, trusting, long-term relationships with a caring adult are noted in literature to support improved outcomes for transition age youth. Establishing methods to secure housing, employment and medical care are also noted as leading to greater likelihood of attaining or sustaining self-sufficiency for youth. African American youth are disproportionately represented in child welfare (Addressing Racial Disproportionality in Child Welfare, 2011; Dettlaff 2010; Marts, et al., 2008; Places to Watch, 2006).

### **System Improvement Plan 2008-2011 to System Improvement Plan 2011-2014**

The 2008-2011 System Improvement Plan for Los Angeles County, included efforts to address permanency: measure C3.3: In Care 3 Years or Longer (emancipated/age 18). The strategies included expanding family finding and engagement activities through the Team Decision Making process. Outcomes for measure C3.3 show that the County has decreased the percentage of emancipated youth/age 18 in care for three years or longer from 64.2% to 60.2%. However, the County still remains above the National Standard (37.5%) for this measure. In the current

SIP, the County has included strategies to improve data tracking, conduct mental health screenings and assessments; complete comprehensive needs assessments enter into the federal California Partners for Permanency (CAPP) grant that highlights efforts to address permanency needs for our African American youth in care.

### **Current Activities-Supporting Youth Self-Sufficiency and Permanency**

- Concurrent Planning
- Coordinated Service Action Team (CSAT)
- Education Liaison
- Family Finding
- Multi-disciplinary Assessment Team (MAT)
- Mental Health Screening and Assessment
- Team Decision Making (TDM)
- Transitional Housing (Has direct impact on the well-being of this population; may not directly impact the outcome measure.)
- Wraparound Programs
- Youth Permanency Units

### **New Activity**

In achieving system improvement goals, DCFS will focus efforts on enhancing programs and practices already in place. The one new activity included in the 2011-2014 improvement plan for self-sufficiency/permanency is the work included in the California Partners for Permanency Grant (CAPP)

## **Outcome/Systemic Factor: Enhanced Organizational Performance**

**Goal: Stakeholder feedback will identify improvement in teaming, communication, and managing for results.**

**Strategy: Managing for Results – Data-driven Decision Making**

Child welfare agencies have been collecting data for years, but it has not been until more recently that child welfare agencies are discovering the power of data for promoting practice improvement. Data-driven decision making goes beyond required data reporting into using data to develop and implement strategies that will impact performance outcomes and support department strategic priorities.

As such, DCFS is instituting a business process, that will foster and strengthen the Department's ability to manage towards a set of consistent and prioritized data; create opportunities at the office, bureau, and department levels to discuss challenges, and share best practice opportunities. Full development and the institution of this process will take place over the next three to five years. The development of a data dashboard to highlight specified key indicators pertaining to safety, permanence, and well-being will be designed.

The DCFS data-driven decision making process will consider the integration of a model that incorporates both quantitative and qualitative data. By doing so, DCFS staff will be better equipped to understand, discuss, and act upon data trends and analysis. A data-driven decision making process will assist the department in achieving system improvement goals. The soft launch of the implementation is scheduled by end of calendar year 2011. A fully customized data dashboard, which includes indicators for child welfare services and support programs, is planned for end of year 2013.

**Disparity and Disproportionality**

**Disparity:** Unfair or unequal treatment of one racial or ethnic group as compared to another racial or ethnic group.

**Disproportionality:** A particular racial or ethnic group is represented at a rate or percentage higher than their representation in the general population.

Los Angeles County as a whole is focusing efforts on eliminating disparity and disproportionality for African-American children in care. The current development of a System Improvement Plan (SIP) for county child welfare services for both DCFS and Probation creates an opportunity for both departments to pledge commitment within the SIP to utilize quantitative data and qualitative data in efforts to address systemic evidence of disparity and disproportionality. Data evidence such as numbers and percentages displayed in Table 1 and Table 2 below, shows both disparity and disproportionality in the child welfare system.

African American children are disproportionately represented in caseloads, referrals, substantiated referrals, and removals from home in Los Angeles County’s child welfare system. (Table 1) DCFS Family-to-Family data from FY 2009 - 2010, shows African American children represented 9.0% (266,415) of the overall child population in Los Angeles County. However, they represent 27% of children receiving child welfare services. (Table 2) Twenty percent of child abuse/neglect referrals generated involved African American children and they represent 33% of children in out-of-home placement.

**Table 1<sup>11</sup>**

DCFS	Los Angeles County Population		Referrals		Substantiated Referrals		Removals	
Hispanic	1,760,140	61%	86,569	60%	19,029	61%	6,373	57%
White	581,616	20%	17,802	12%	3,852	12%	1,476	13%
African Amer.	266,415	9%	28,759	20%	6,719	22%	3,077	27%
Amer. Indian	6,054	0%	344	0%	97	0%	43	0%
Asian	292,433	10%	3,884	3% <sup>2</sup>	1,069	3%	279	3%
Other			7,053	5%	436	1%	21	0%
Total	2,906,658	100%	144,411	100%	31,202	99%	11,269	100%

DCFS Family to Family data source July 2009 through June 2010.

**Table 2<sup>12</sup>**

DCFS	Los Angeles County Population		Children Receiving Child Welfare Services		Children in out-of home placement Foster Care Caseload		Exits from Foster Care <sup>13</sup>	
Hispanic	1,760,140	61%	30,555	57%	8,038	52%	6,727	56%
White	581,616	20%	6,424	12%	1,880	12%	1,530	13%
African Amer.	266,415	9%	14,691	27%	4,997	33%	3,423	29%
Amer. Indian	6,054	0%	213	0%	93	1%	40	0%
Asian	292,433	10%	1,577	3%	347	2%	264	2%
Other			144	0%	34	0%	11	0%
Total	2,906,658	100%	53,604	99%	15,389	100%	11,995	100%

In 2005, DCFS started work to reduce disparity and disproportionality as part of the Family-to-Family Initiative, California Disproportionality Project and the Los Angeles Prevention Initiative Demonstration Project. While efforts have been concentrated within select offices, in three Services Bureaus, DCFS is now working to incorporate successfully demonstrated policies and practices throughout the department. Los Angeles DCFS has established an Eliminating Racial Disparities and Disproportionality (ERDD) Steering Committee, charged with providing leadership to this effort.

DCFS is working to address the issue of disproportionality through programs such as faith-based initiatives and Eliminating Racial Disparity and Disproportionality (ERDD) strategies. The Pomona DCFS office, has demonstrated marked improvements in addressing disproportionality through the implementation of ERDD strategies. Key elements and efforts to address ERDD include engaging DCFS office staff and executive level staff through trainings and workgroups, continued focus on data, and research on effective programs and practices. An example of an effective practice developed is a Pomona Action Group that provides advocacy for families during TDM meetings and conducts monthly case conferences for African American Families. Due to the success of ERDD in the Pomona office, DCFS executives and senior managers are coordinating expansion across the Department. ERDD is embedded in the values included in the county shared Core Practice Model.

DCFS is one of four counties selected to participate in the federally funded California Partners for Permanency (CAPP) grant. Through work with the grant, DCFS plans to develop a practice model to ensure permanency for African American youth who are impacted by disparity and disproportionality. Three DCFS offices are participating in the CAPP grant.

<sup>12</sup> DCFS Family to Family data source July 2009 through June 2010.

<sup>13</sup> Includes all types of exits from foster care.

While targeting reunification, adoption, and guardianship, it is anticipated that the grant work will flow "upstream" to removals, substantiations and case openings.

Probation began tracking general Probation/delinquency data based on race/ethnicity and has reported this data to the Corrections Standards Authority (CSA) as a part of a Disproportionate Minority Contact (DMC) Grant. The general data is in alignment with national data indicating that African American youth are disproportionately represented in juvenile justice system along different contact points. It is anticipated that data related to Probation foster youth will be tracked and reported in the annual SIP report of 2012.

## **Probation Department**

### **System Improvement Plan 2008-2011 to System Improvement Plan 2011-2014**

For the SIP 2008-2011, Probation focused on strengthening the case assessment and case planning process, enhancing services and resources for youth and their families and training. Since the last SIP cycle, Probation has provided quarterly trainings to Placement Officers through the Department's experts as well as utilizing the UC Davis Extension-Resource Center for Family Focused Practice, which has enhanced knowledge and increased reunification. Additionally, a Cross-Systems Assessment was developed and implemented in Juvenile Hall to decrease placement in out-of-home care and increase placement back in the home with Evidence-Based programs. Probation was able to expand Evidence-Based programs such as Functional Family Therapy and Multi-Systemic Therapy and was able to add the Evidence-Based program, Functional Family Probation, which has directly increased the timelines to reunification. Lastly, Probation began the process of obtaining foster homes for Probation youth and partnered with DCFS' Recruitment and Adoption section to finalize the first delinquency media-based recruitment in the state.

Through the use of the information from the PQCR case reviews and focus groups, the analysis of gathered feedback and information from the CSA and the feedback, insight and recommendations from the SIP Stakeholder Meeting, the following systemic factors have been chosen as the focus for the SIP:

**Outcome/Systemic Factor 1:** Timeliness to Reunification/Agency Collaborations

**Goal:** Improve Collaborative Efforts Across Systems

**Strategy:** Cross-Systems Training and Exploration of New and Existing Resources

## **Probation PQCR, CSA, and SIP Stakeholder Feedback**

One of the key concerns revealed in the PQCR findings was that, although improved, there is still not effective and consistent collaboration and sharing of information taking place on every case that crosses from DCFS to Probation. The result is that many youth are slipping through the cracks and information is being lost; thereby, disrupting the case planning process causing huge delays in permanency and terminating and denying resources and funding necessary for the success of the youth and the family. Based on this feedback by Stakeholders, Probation selected the outcome systemic factor of timeliness to reunification and the goal of improving collaborative efforts across systems.

### **Current Activities**

- Probation/DCFS Permanency Collaboration Committee—this group meets monthly to discuss all cases referred to Probation’s Permanency Unit. A key goal of this committee is to ensure that due diligence to find and engage birth parents has been completed on each case. Many times parents are reunified with their children after periods of separation.
- Multi-Disciplinary Team (MDT) Pilot Program with Group Home Provider—these meetings bring professionals together from all disciplines at critical points in each child’s case such as educators, mental health providers, Group Home staff, Transition Coordinators, Placement Officers, medical staff, relatives and parents. The purpose of the meetings is reunify the child with his parents, if possible, or with a permanent home as quickly as possible with the necessary services in place to ensure success; thereby promoting reunification.

### **New Activities**

- Cross-system training with and for agencies which would begin with forming a steering committee to include representatives from various county departmental agencies and external stakeholder agencies. The purpose of the committee would be to initially assess the needs and develop curriculum.
- New resources for Probation foster children such as recruitment of foster homes and foster/adoptive families
- Expanding and enhancing existing resources for Probation foster children such as Evidenced-Based Programs (EBP) and DCFS media and routine recruitment activities and events.
- Identifying areas of disproportionality and disparity of treatment and resources for Probation foster children

**Outcome/Systemic Factor 2: Increasing Placement Stability****Goal:** Improving upfront and ongoing Assessment and Case Planning**Strategy:** Revision of case plan and court report documents to increase compliance with mandates, develop upfront cross-systems assessment process, expand EBPs and increase Placement Officer safety.**Probation PQCR, CSA, and SIP Stakeholder Feedback**

Although Probation does not have current data to reveal the trend for placement instability of foster children, internal data reveals that many Probation foster children have more than 2 placements during their stay and have a high runaway rate. For example, in January 2011, there were 217 foster care referrals ordered by delinquency court into out-of-home care. Of those, 154 were first time entries (placements) and 63 were re-entries (replacements). In January 2011, there were 75 youth that had documented runaway incidents; 5 of those youth had repeat incidents in the same month.

Throughout the PQCR, stakeholders as well as outside county partners revealed the need for better front end assessment to ensure appropriate initial placement. Effectively matching the child's needs with the setting they are placed in will result in increased placement stability. SIP Stakeholder feedback suggested that services need services and resources must be made available to all youth, regardless of what system they are in. Stakeholders also suggested that concurrent planning training and implementation of the practice needs to happen between DCFS and Probation.

**Current Activities**

- Compliance and Court Report Training related to State and Federal mandates enhanced through ongoing annual compliance training by Placement Permanency & Quality Assurance (PPQA)
- Expansion of Evidenced Based Programs (EBP)
- Purchase of Placement Officer Safety Vests including safety training and training on the use of Oleoresin Capsicum (Pepper Spray)



**New Activities**

- Develop Upfront Cross-Systems Assessment process for youth with new placement orders in order to increase placement stability
- Development of 3-phase Multi-Disciplinary Team (MDT) process along with better utilization of Placement Authorization Utilization Review (PAUR) Unit
- Expansion of Placement Assessment Center (PAC) process through the Request For Statement Qualification (RFSQ)
- Continued Expansion of EBP
- Revision of Case Plan and Court Reports with AOC assistance to revise court reports and case plans for quality, consistency and accuracy

**Outcome/Systemic Factor 3:** Reducing Timelines to Permanency through Adoption, Legal Guardianship and Life Long Connections

**Goal:** Increased permanency efforts and self-sufficiency for children without connections

**Strategy:** Development of resources for Transition Aged Youth (TAY), obtaining foster homes for Probation foster children, recruiting adoptive families for freed children and improving the relative/NREFM approval and funding process.

**Probation PQCR, CSA, and SIP Stakeholder Feedback**

The PQCR report summarizes the feedback provided by youth through a survey. Some of the consistent responses from both DCFS and Probation TAY were related to belonging and permanent connections as follows: a stable home for me to live in after I graduate from college”, “family”, “good moral support”, “an amazing caring family”, “love and companionship”, “A loving family (true unconditional bond and connection)”, “more time with Grandmother” and “more loving from caregivers”. The SIP Stakeholder feedback suggested that Probation foster children need foster homes where they will not be viewed or treated as criminals. They also pointed out the need to address disproportionality and disparity related to permanency issues. In March 2011, there were 140 cases that had been referred to the Permanency Unit. Of those referrals, 49% were African American and 39% were Hispanic. It is clear that strategies must be implemented to reach into the communities of these youth to find families and connections in order to decrease reliance on out-of-home care and reduce timelines to permanency.

**Current Activities**

- Probation/DCFS Permanency Collaboration Committee, which is an interagency monthly meeting reviewing all Probation permanency cases. These agencies include County Counsel, DCFS and Probation.
- DCFS/Probation Permanency and Recruitment Unit Collaboration, specifically involving the Due Diligence Recruitment grant awarded to DCFS. This grant provides 2 million dollars over a five year period for active recruitment for African American youth, Latino youth, Deaf youth, Probation youth and the Lesbian, Gay, Bi-Sexual, Transgender and Questioning (LGBTQ) youth.
- Ongoing compliance training with Placement Supervisors in monthly meetings to review compliance statistics related to Division 31 regulations along with corrective action

**New Activities**

- Development of workgroup including Transition Age Youth to improve timeliness to permanency
- Gaining full access to LIVE-SCAN for Probation Foster Home Consultants to receive immediate results to caregiver criminal history, which expedites approval and funding process
- Obtain foster homes for Probation foster children

**Outcome/Systemic Factor 4: Data Collection Utilization**

**Goal:** Utilize Data Driven Decision Making Process

**Strategy:** Analyze all data elements to be collected and tracked and create a dynamic process to share and utilize data to improve outcomes and positively effect disproportionality and disparity.

**Probation PQCR, CSA, and SIP Stakeholder Feedback**

Due to the fact the entire C-CFSR process is based on revealing child welfare trends and improving outcomes, it is necessary to have data on Probation foster youth in order to produce meaningful results and create strategies to move the trends in a positive direction. Therefore, it is imperative that Probation explore all options to improve in this area while waiting for CWS/CMS to become fully useful for this very purpose. SIP Stakeholder feedback asserted that data is to be used to indicate what went wrong and direct the Department to improve reunification and aftercare decisions.

Furthermore, there was continued emphasis in the PQCR, CSA and SIP Stakeholder process for increased sharing and utilization of data to effect change.

**Current Activities**

- Probation inputting limited data into CWS/CMS
- Public Health Nurses inputting limited data into CWS/CMS
- Data successfully inputted on Transition Age Youth (TAY)

**New Activities**

- Development of workgroup to analyze all data elements to be collected and tracked to improve outcomes for children and families
- Develop a plan for interpretation, utilization and sharing of data
- Convene a cross-section of internal and external stakeholders representative of all child welfare agencies and partners to discuss sharing and utilization of data

## State Program Improvement Plan (PIP) and County System Improvement Plan (SIP)

The California Department of Social Services (CDSS) is the agency authorized to establish regulations, policies and procedures that guide Los Angeles County in its work in child welfare. The State's child welfare system is focused on ensuring safety, permanence and well-being for children and families. The CDSS, in its commitment to improving outcomes for children and families, engages in a Program Improvement Plan (PIP). The PIP uses strategies and initiatives to address safety, permanence and well-being outcomes. Current PIP strategies include:

- Expanded use of participatory case planning strategies;
- Sustain and enhance permanency efforts across the life of the case;
- Enhance and expand caregiver recruitment, retention, training and support efforts;
- Expand options and create flexibility for services and supports to meet the needs of children and families;
- Sustain and expand staff/supervisor training; and
- Strengthen implementation of the statewide safety assessment system.

Los Angeles County, in partnership with CDSS, has developed the County SIP in alignment with PIP strategies to improve safety, permanence and well-being. Throughout the County SIP, activities within strategies include the use of Team Decision Making meetings. This is in line with the PIP strategy of expansion of case planning through active engagement of families as a part of a team. Further, SIP strategies related to placement stability include family engagement, especially engagement of the father, which is also included in the PIP. Placement Authorization Review Teams will work to evaluate best practice efforts of Functional Family Therapy, Functional Family Probation, Family Preservation services, and Multi-System Therapy all a part of improved family engagement.

Los Angeles County has chosen the self-sufficiency/permanency outcome measure as one area of focus in the SIP. Los Angeles County completed its PQCR on Transition Aged Youth (TAY) and is focusing effort on permanency through the California Partners for Permanency (CAPP) Grant, TAY workgroups, permanency training for staff, collaboration between agencies, and enhanced data tracking (corrected font size). As in the PIP, family finding is a key component of County SIP strategies related to improving permanency for youth.

PIP strategies related to expanding caregiver recruitment, retention and training are also included in Los Angeles County SIP. Enhancing support for Kinship caregivers is a focus area, as well as recruitment of resource families, especially for

African American youth. Probation strategies of reducing timelines to permanency include obtaining Foster Family Agency homes for Probation youth and recruiting for adoptive families, as well as improving relative and non-relative extended family member placement approval process.

The County SIP includes a variety of strategies related to services. The evaluation of efficacy of Up Front Assessments, expansion of Wraparound services and current resources, while exploring new resources are all in line with PIP strategies of expanding options and creating flexibility of services. Substance abuse assessment, education and service provision, as well as mental health assessment and service provision are included in the County SIP. This mimics PIP highlights areas in service strategy. As the County completes service contract re-design, opportunity may arise for enhanced coordination of services to better meet child and family needs.

PIP strategies related to sustaining and expanding staff and supervisor training can be found throughout the SIP. The introduction of a Department Core Practice Model and Data-driven Decision Making process for DCFS includes a strong component of on-going mentoring through supervision and creating an environment of continuous learning. Probation has multiple strategies which include staff training and frequent strategies which include cross-training between County departments.

Los Angeles County has an on-going effort to address timeliness to Emergency Response referral investigation in line with PIP strategies related to safety. DCFS has developed a practice model document, specifically for Emergency Response case work. A variety of training opportunities for staff in the form of specialized academy training around emergency response and specialized supervisor training are in place. On-going strategies surrounding randomized review of compliance and use of Structured Decision Making tools have been implemented in emergency response. This supports PIP strategies of strengthening implementation of statewide safety assessment and utilization of safety, risks, strengths, and needs assessment.

# **Los Angeles County System Improvement Plan Matrix**

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure C1.4 Re-entry Following Reunification (Exit Cohort)</b>					
<b>County's Current Performance:</b> Performance trends from Q2 2007 to Q2 2010 indicate that 15.9% more children re-entered the system within 12 months following reunification. The ten year trend for this measure indicates that the rate of re-entry has increased by 206.7% since Q2 2000 in Los Angeles County.					
<b>Improvement Goal 1.0</b> By January of 2014, DCFS' re-entry rate will decrease from 12.4% to achieve the National Standard of 9.9%.					
<b>Strategy 1. 1</b> Los Angeles County DCFS Drug and Alcohol Testing Program (Testing Program) funds will be re-directed to substance abuse screening, assessments and, where needed, treatment.		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale</b> This approach addresses the correlation between substance abuse allegations and re-entry and focuses efforts on treatment as well as reunification readiness and prevention. By redirecting Testing Program funds to substance abuse screening, assessments and where needed treatment, child welfare in collaboration with others, looks to support sustainable substance abuse recovery. DCFS staff and external partners (Juvenile Dependency Court and County Counsel) will receive specialized training and assistance from substance abuse experts in making decisions regarding substance abuse/use, including the need for treatment and testing, thereby improving collaboration for families that are involved with multiple agencies.		
<b>Milestone</b>	<b>1.1.1</b> Develop timeline of activities	<b>Timeframe</b>	March 2011 to November 2011	<b>Assigned to</b>	Bureau of the Medical Director
	<b>1.1.2</b> Begin training and pilot implementation in two DCFS SPA offices		November 2011 to March 2012		Bureau of the Medical Director DCFS Training Section
	<b>1.1.3</b> Continue with staggered implementation across all DCFS Service Planning Areas (SPAs)		Full implementation by January 1, 2013 with continued monitoring and evaluation through July 1, 2014		Bureau of the Medical Director DCFS Training Section
	<b>1.1.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting.		August 2011-August 2014		Bureau of the Medical Director DCFS Training Section Office of Strategy Management
Collaborate with the Department of Public Health Substance Abuse Prevention and Control (SAPC); Convene committees to address the development of policies, procedures and guidelines, including an Oversight Committee, Advisory Committee and Subtopic Committees. The latter on funding, training and data; Receive ongoing technical assistance from the National Center on Substance Abuse and Child Welfare (NCSACW), a federally funded entity with expertise in cross-systems (i.e. substance abuse and child welfare) collaborations.					

<p><b>DCFS</b>  <b>Outcome/Systemic Factor:</b>  <b>Measure C1.4 Re-entry Following Reunification (Exit Cohort)</b>  <b>Strategy 1. 1 (Continued)</b></p>
<p>DCFS and SAPC will coordinate the training of child welfare staff and substance abuse treatment providers identified to participate in the pilot phase as well as Court personnel (i.e. hearing officers and attorneys); DCFS and SAPC to convene its committees on an ongoing basis to address programmatic issues as they arise.</p>
<p>DCFS and SAPC will continue to coordinate training for child welfare staff as the proposed program rolls out countywide; DFS and SAPC will work with the NCSACW to monitor the proposed program and evaluate outcomes.</p>
<p>The DCFS Drug and Alcohol Testing Program will no longer be available. Rather DCFS line staff will have the assistance of substance abuse experts to make decisions regarding a client’s substance abuse/use, including the need for treatment and testing. In addition, our external partners, Juvenile Dependency Court and County Counsel, will not have access to testing as currently exists and the evidence of test results that they consider vital in the judicial process.</p>



<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure C1.4 Re-entry Following Reunification (Exit Cohort)</b>					
<b>County's Current Performance:</b>					
Performance trends from Q2 2007 to Q2 2010 indicate that 15.9% more children re-entered the system within 12 months following reunification. The ten year trend for this measure indicates that the rate of re-entry has increased by 206.7% since Q2 2000 in Los Angeles County.					
<b>Improvement Goal 1.0</b> By January of 2014, DCFS' re-entry rate will decrease from 12.4% to the National standard of 9.9%.					
<b>Strategy 1.2</b>	<input checked="" type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Through increased utilization of reunification TDMs, it is anticipated that the family and other family supports involved will be better able to support and build upon the child and family strengths and needs. Reunification TDMs, that follow the model of the practice, will allow for parent and supports involved in the case, to discuss the level of the parent' protective capacity and readiness for reunification, while, offering the opportunity for teaming in the coordination of family and community supports and after care services. Reunifications that are built on strong parent readiness with sustainable supports will be more successful and thus decrease re-entry. The tracking of Time Limited Family Reunification service will specifically focus on servicing those family involved with substance use and/or abuse issues; coordinating timelines for treatment and reunification services. Additional support of cases involving substance with clarity of timelines is in line with the correlation between re-entry and cases with substance allegations.		
Increase utilization of reunification Team Decision Making (TDM) process.	<input type="checkbox"/>	<b>CBCAP</b>			
	<input checked="" type="checkbox"/>	<b>PSSF</b>			
	<input type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>1.2.1</b> Measure rate of Reunification TDM use for all cases at the time of reunification.	<b>Timeframe</b>	November 2011-December 2013	<b>Assigned to</b>	Resource Management Division
	<b>1.2.2</b> Establish methodology for review of reunification TDM impact on re-entry.		January 2012- December 2012		Business Information Systems (BIS)
	<b>1.2.3</b> Time limited FR Services will complete an evaluation of tracking systems related to reunification efforts		January 2012- December 2012		Community Based Support Division (CBSD)
	<b>1.2.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting.		August 2011-August 2014		Resources Management Division, BIS, CBSD, Office of Strategy Management(OSM)
Establish base line measure of current use of reunification TDMs. Document not only increase use of TDM but include development of methodology for measuring efficacy of reunification TDM on successful reunification and re-entry rates. Maintain model fidelity in TDM process. Use Time limited FR Service evaluation as applicable to enhance and support effective decision making in reunification TDMs.					

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure C1.4 Re-entry Following Reunification (Exit Cohort)</b>					
<b>County's Current Performance:</b>					
Performance trends from Q2 2007 to Q2 2010 indicate that 15.9% more children re-entered the system within 12 months following reunification. The ten year trend for this measure indicates that the rate of re-entry has increased by 206.7% since Q2 2000 in Los Angeles County.					
<b>Improvement Goal 1.0</b>					
By January of 2014, DCFS' re-entry rate will decrease from 12.4% to the National standard of 9.9%.					
<b>Strategy 1.3</b>		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> The results of the evaluation will create an opportunity for illumination of strengths of the Upfront Assessment model. DCFS will be able to discern those families that benefit most from the UFA services. By aligning the most appropriate families with services, Family Preservation Agency staff will be able to make more informed case decisions, which in turn will lead to appropriate and supported reunifications. As reunifications are more successful, children will remain safely in their homes and this will positively impact re-entry rates.	
Initiate evaluation of the efficacy of Up-Front Assessments, conducted by Family Preservation Program providers, on re-entry rates.		<input type="checkbox"/>	<b>CBCAP</b>		
		<input checked="" type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
		<b>Milestone</b>		<b>Timeframe</b>	<b>Assigned to</b>
1.3.1. Convene a workgroup to identify variables and indicators to be explored.		July 2011 -December 2011	Community Based Support Division		
1.3.2 Draft preliminary report		January 2012-May 2012	Community Based Support Division		
1.3.3 Draft final report and consider next steps		June 2012-August 2012	Community Based Support Division		
1.3.4 Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014	Community Based Support Division, OSM		

<p><b>DCFS</b>  <b>Outcome/Systemic Factor:</b>  <b>Measure C1.4 Re-entry Following Reunification (Exit Cohort)</b></p>					
<p><b>County's Current Performance:</b>                  Performance trends from Q2 2007 to Q2 2010 indicate that 15.9% more children re-entered the system within 12 months following reunification. The ten year trend for this measure indicates that the rate of re-entry has increased by 206.7% since Q2 2000 in Los Angeles County</p>					
<p><b>Improvement Goal 1.0</b>                  By January of 2014, DCFS' re-entry rate will decrease from 12.4% to the National standard of 9.9%.</p>					
<p><b>Strategy 1.4</b>                  Continued expansion of Wraparound access and service options.</p>		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<p><b>Strategy Rationale</b>                  Wraparound is a process that supports the youth and family achieve safety, permanency and well being. Through the Wraparound planning process, children/youth with multiple, complex and enduring mental and emotional needs develop a team that will support them in the community for successful reunification and self sufficiency. Wraparound focuses on the strengths of the youth, the family and the community to ensure community informal and formal connection and support needed to sustain the child in the home. Sustainable reunification will reduce the rate of re-entry.</p>		
<b>Milestone</b>	1.4.1 Completion of workgroup recommendation	<b>Timeframe</b>	July 2011-December 2011	<b>Assigned to</b>	Resource Management Division;
	1.4.2 Complete the contract statement of work proposal		January 2012-April of 2013		Resource Management Division;
	1.4.3 Implement new contract with enhancements; monitor following statement of work.		April 2014-on-going		Resource Management Division;
	1.4.4 Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		Resource Management Division

<p><b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b> There are no other systemic factors to be addressed at this time.</p>
<p><b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b> On-going technical assistance from CDSS' Outcomes and Accountability and Office of Child Abuse Prevention sections will be significant to achieving improvement goals. Technical assistance from NCSACW related to work with cases involving substance abuse and re-entry strategies. Input, education, feedback from internal and external stakeholders through quarterly reviews and updates. Work with DCFS research on methodology for measuring wraparound contract enhancements.</p>
<p><b>Identify roles of the other partners in achieving the improvement goals.</b> In addition to general partners, strategies related to the re-entry measure will include special partnerships with the Department of Public Health and Dependency Court, as well as Family Preservation agencies who do Up-Front Assessment, partners engaged in reunification TDMs and those partners who work in Wraparound Services.</p>
<p><b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</b> None identified at this time.</p>

<b>DCFS</b>			
<b>Outcome/Systemic Factor:</b>			
<b>Measure C4.2 Placement Stability for children in care for 12 to 24 months.</b>			
<b>County's Current Performance:</b>			
Placement stability figure for children in care 12 to 24 months indicates a decline of 7.8% from Q2, 2007 to Q2 2010. Ten year trend observation for this measure (since Q2 2000) indicates 0.4% improvement.			
<b>Improvement Goal 2.0</b>			
By 2014 increase stability of placement for children in placement for 12 to 24 month from 66.6% (Q2 2010) to 72.0%.			
<b>Strategy 2.1</b>		<input type="checkbox"/> <b>CAPIT</b>	<b>Strategy Rationale</b> Through appropriate, relevant and supported placement with relatives, risk of disruption is reduced and placement stability will be positively impacted.
Expand placement with relatives on first and second episode placements, where appropriate.		<input type="checkbox"/> <b>CBCAP</b>	
		<input type="checkbox"/> <b>PSSF</b>	
		<input checked="" type="checkbox"/> <b>N/A</b>	
		<b>Milestone</b>	
2.1.1 Analyze first time relative placement data for African American population.		August 2011-June 2012-	Kinship Division
2.1.2 Pilot a relative placement support practice for Emergency response relative placements.		July 2012-Dec. 2013	Kinship Division
2.1.3 Expand formal and informal community partnerships across the community and County at the time of initial relative placement		January 2013-Dec. 2014	Kinship Division
2.1.4 Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014	Kinship Division OSM
To further describe milestone 2.1.2 the pilot, site test disruption prevention model in small office ER Unit. Determine support needed to safely place in relative care. Develop and analyze a work flow process. Data comparison and summary of findings.			

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure C 4.2 Placement Stability for children in care for 12 to 24 months.</b>					
<b>County's Current Performance:</b>					
Placement stability figure for children in care 12 to 24 months indicates a decline of 7.8% from Q2, 2007 to Q2 2010. Ten year trend observation for this measure (since Q2 2000) indicates 0.4% improvement.					
<b>Improvement Goal 2.0</b>					
By 2014 increase stability of placement for children in placement for 12 to 24 month from 66.6% (Q2 2010) to 72.0%.					
<b>Strategy 2.2</b>		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> The Ice Breaker meetings have been piloted in units of Services Bureau 1 South County and Torrance Offices and have anecdotally positively impacted the rate and frequency of visits between parents and children. Ice Breaker meetings have proven effective in improving communication and cooperation between birth parents and resource families. Improved communication helps in building rapport, trust and respect. Roles are clarified and information is shared about the child. Completing training of staff, implementation and learning from the process will create the opportunity for expansion so as to benefit other children, families and caregivers.	
Continue with training and implementation of Ice Breaker Meeting		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input checked="" type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>2.2.1</b> Continue and complete training CSWs and SCSWs in the Ice Breaker Series in South County and Torrance offices.	<b>Timeframe</b>	July 2011-December 2011		<b>Assigned to</b>
	<b>2.2.2</b> Create lessons learned recommendations related to next steps for Ice Breaker Series.		January 2011-Dec 2012		
	<b>2.2.3</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		
		Training			
		Services Bureau 1 South County Torrance			
		Services Bureau 1 South County Torrance. OSM			

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure C 4.2 Placement Stability for children in care for 12 to 24 months.</b>					
<b>County's Current Performance:</b>					
Placement stability figure for children in care 12 to 24 months indicates a decline of 7.8% from Q2, 2007 to Q2 2010. Ten year trend observation for this measure (since Q2 2000) indicates 0.4% improvement.					
<b>Improvement Goal 2.0</b>					
By 2014 increase stability of placement for children in placement for 12 to 24 month from 66.6% (Q2 2010) to 72.0%.					
<b>Strategy 2.3</b>		<input type="checkbox"/> <b>CAPIT</b>	<b>Strategy Rationale</b> Behavioral and emotional problems impact placement stability. Collaborative interventions and increased awareness of mental health issues of children involved with child welfare increase opportunity to align caregivers with support services, provide interactions with children welfare, mental health, and medical staff with expertise and service access. Team efforts can improve decision making impacting child safety and maintenance of placement.		
Implement County-wide Expedited Response pilot		<input type="checkbox"/> <b>CBCAP</b>			
		<input type="checkbox"/> <b>PSSF</b>			
		<input checked="" type="checkbox"/> <b>N/A</b>			
<b>Milestone</b>	<b>2.3.1</b> Expand the county-wide Expedited Response Pilot process by which DCFS, the, Department of Mental Health, and Psychiatric Mobile Response Team staff can identify DCFS-involved children, obtain necessary information and coordinate services to mutual clients.	<b>Timeframe</b>	July 2011-December 2011	<b>Assigned to</b>	Child Welfare Mental Health Services
	<b>2.3.2</b> Formally develop DCFS and DMH policies and procedures, training, and tracking system.		July 2011-December 2011		Child Welfare Mental Health Services
	<b>2.3.3</b> Evaluate and monitor pilot through record keeping and tracking of benefits and outcomes.		December 2011-December 2012		Child Welfare Mental Health Services
	<b>2.3.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		Child Welfare Mental Health Services, OSM
The pilot is a collaborative effort between DCFS, DMH and Psychiatric Mobile Response Team (PMRT), when decision-making is needed with mutual clients. Currently, PMRT provides crisis response services to approximately 200 DCFS children each month. This pilot is expected to increase collaboration, increase and expedite service access, improve decision making and outcomes for children.					

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure C 4.2 Placement Stability for children in care for 12 to 24 months.</b>					
<b>County's Current Performance:</b>					
Placement stability figure for children in care 12 to 24 months indicates a decline of 7.8% from Q2, 2007 to Q2 2010. Ten year trend observation for this measure (since Q2 2000) indicates 0.4% improvement.					
<b>Improvement Goal 2.0</b>					
By 2014 increase stability of placement for children in placement for 12 to 24 month from 66.6% (Q2 2010) to 72.0%.					
<b>Strategy 2.4</b>			<input type="checkbox"/>	<b>CAPIT</b>	
Evaluate the D-rate program			<input type="checkbox"/>	<b>CBCAP</b>	
(See Current Activities and Program attachment for description of D-Rate program)			<input type="checkbox"/>	<b>PSSF</b>	
			<input checked="" type="checkbox"/>	<b>N/A</b>	
<b>Strategy Rationale</b> Through evaluation of D-rate program, areas of improvement and sustainability will be identified, further ensuring that the child's special needs are met and caregiver home meets the needs of the child leading to increased placement stability.					
<b>Milestone</b>	<b>2.4.1</b> Project team will develop the logic model for evaluation	<b>Timeframe</b>	August 2011-June 2012		<b>Assigned to</b>
	<b>2.4.2</b> Complete program review		July 2012-December 2013		
	<b>2.4.3</b> Implement recommendations		December 2013-December 2014		
	<b>2.4.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		
Program evaluation allowing for development of effective way to assess and manage child/youth mental health needs. Mental health assessment and alignment with support services for child/youth and caregiver.					



<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure C 4.2 Placement Stability for children in care for 12 to 24 months.</b>					
<b>County's Current Performance:</b>					
Placement stability figure for children in care 12 to 24 months indicates a decline of 7.8% from Q2, 2007 to Q2 2010. Ten year trend observation for this measure (since Q2 2000) indicates 0.4% improvement.					
<b>Improvement Goal 2.0</b>					
By 2014 increase stability of placement for children in placement for 12 to 24 month from 66.6% (Q2 2010) to 72.0%.					
<b>Strategy 2.5</b>		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Placement stability is impacted by multiple factors; age, placement type, characteristics of caregiver, social worker and child. Additionally data reflects counting of placement moves without the context of the move. Therefore, positive or negative of placement change is not measured. A more in depth study of placement stability will help highlight factors impacting placement change and contextualize data related to placement moves.	
Complete analytical study of Placement Stability		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input checked="" type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>2.5.1</b> Convene a workgroup related to the study	<b>Timeframe</b>	August 2011-January 2012		<b>Assigned to</b>
	<b>2.5.2</b> Develop study outline and work plan process		January 2012-July 2012		
	<b>2.5.3</b> Complete study, finalize report and present recommendations to executive management. Determine next steps based on Executive team decision.		August 2012-January 2013		
	<b>2.5.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		
		Out of Home Care Management			
		Out of Home Care Management			
		Out of Home Care Management			
		Out of Home Care Management, OSM			

<p><b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b>                  There are no other systemic factors to be addressed at this time.</p>
<p><b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b>                  On-going technical assistance from CDSS' Outcomes and Accountability and Office of Child Abuse Prevention sections will be significant to achieving improvement goals. Input, education, feedback from internal and external stakeholders through quarterly reviews and updates. For Expedited Response Pilot, specific staff will need to be in place. Staffing will need to be in place to coordinate coverage to receive incoming calls.</p>
<p><b>Identify roles of the other partners in achieving the improvement goals.</b>                  In addition to general partners, strategies related to the placement stability measure will include special partnerships with the Department of Mental Health and Psychiatric Mobile Response Team for Expedited Response Pilot. As the process is a joint effort, project management will need to be established in order to coordinate the development of policy, procedures, training, quality assurance and tracking system. Placement agencies involved with Out-of Home care and Kin caregivers will be involved in assisting with placement stability study and D-rate evaluation. Specialists who</p>
<p><b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</b>                  None identified at this time.</p>

<p><b>DCFS</b>  <b>Outcome/Systemic Factor:</b>  <b>Measure: 3.3 Permanency: Children in care for 3 years or longer (Emancipation/Age 18)</b></p>					
<p><b>County's Current Performance:</b>                  Los Angeles County's performance since Q2 2007 has declined by 1.0% and the ten year performance since Q2 2000 has declined by 31.7%</p>					
<p><b>Improvement Goal 3.0 Permanency:</b>                  By January of 2014, DCFS will reduce the percentage of youth in care three years or longer (Emancipating or age 18) by 10 %. (From Quarter 2, 2010 performance 60.2%: to a level of 54.2%).</p>					
<p><b>Strategy 3.1</b>                  Improve current data tracking systems and reporting process for youth.</p>		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<p><b>Strategy Rationale:</b> The progress, needs, and services for youth will be more accurately identified, improving service delivery for youth which will lead to reduced time in care, increased permanency, and improved well-being. Current limitations to data collection and reporting prevent maximum alignment of service with needs. Improved assessment will allow for more appropriate placement, supports for family and caregiver, engage the youth in services applicable to unique needs, and strengthen self-sufficiency.</p>		
<b>Milestone</b>	3.1.1 Complete analysis of Exit Outcome reporting accuracy	<b>Timeframe</b>	August 2011-March 2012	<b>Assigned to</b>	Bureau of Strategic Management (BSM) Youth Development Services
	3.1.2 Develop and begin to Implement strategies to improving Exit Outcome reporting accuracy.		April 2012- July 2012		BSM, Youth Development Services, BIS
	3.1.3 Complete re-evaluation of Exit Outcome reporting accuracy and determine next steps.		July 2012- Dec 2012		BSM, Youth Development Services, BIS
	3.1.4 Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		BSM, Youth Development Services, BIS

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure: 3.3 Permanency: Children in care for 3 years or longer (Emancipation/Age 18)</b>					
<b>County's Current Performance:</b>					
Los Angeles County's performance since Q2 2007 has declined by 1.0% and the ten year performance since Q2 2000 has declined by 31.7%					
<b>Improvement Goal 3.0</b>					
By January of 2014, DCFS will reduce the percentage of youth in care three years or longer (Emancipating or age 18) by 10 %. (From Quarter 2, 2010 performance 60.2%: to a level of 54.2%).					
<b>Strategy 3.2</b>		<input type="checkbox"/>	<b>CAPIT</b>		
Continue Mental Health Screening and Assessment *		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input checked="" type="checkbox"/>	<b>N/A</b>		
<b>Strategy Rationale</b> Through Mental Health Screening and Assessment, children will be screened and/or assessed for unmet mental health needs. The result will be tracked and monitored. Those children who have a positive mental health screen will be referred and linked to mental health services. Once an unmet mental health need is identified, staff will further evaluate the child's needs if necessary, identify the best program available and link the child (and family if necessary) to a mental health provider that offers the identified program. Doing so, will lead to a more comprehensive means of delivering all services to children and families in need, leading to the reduction of time in care.					
<b>Milestone</b>	<b>3.2.1</b> Sustain rate of referral and mental health services at 98% through use of current practice and policy.	<b>Timeframe</b>	July 2011-July 2012	<b>Assigned to</b>	Child Welfare Mental Health Services
	<b>3.2.2</b> Reduce the time it takes for mental health screening to one day		July 2011-Jan 2013		Child Welfare Mental Health Services
	<b>3.2.3</b> Fully integrate Coordinated Services Action Team (CSAT) in all DCFS offices so that CQI (CQI page 131 of 2011 County Self-Assessment) findings show on-going improvement in service delivery.		July 2011-December 2014		Child Welfare Mental Health Services
	<b>3.2.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		Child Welfare Mental Health Services, OSM

\* Strategies, assessments and programs efforts are tracked by internal Coordinated Services Action Team (CSAT)/Referral Tracking System (RTS). Discussed on page 118 of the 2011 County Self-Assessment

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b>					
<b>Measure: 3.3 Permanency: Children in care for 3 years or longer (Emancipation/Age 18)</b>					
<b>County's Current Performance:</b>					
<b>Los Angeles County's performance since Q2 2007 has declined by 1.0% and the ten year performance since Q2 2000 has declined by 31.7%</b>					
<b>Improvement Goal 3.0</b>					
By January of 2014, DCFS will reduce the percentage of youth in care three years or longer (Emancipating or age 18) by 10 %. (From Quarter 2, 2010 performance 60.2%: to a level of 54.2%).					
<b>Strategy 3.3</b>		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> By providing comprehensive needs assessment services to newly detained youth, improved and appropriate services and service referrals for youth will be indentified leading to reduced time in care. Assessment information is utilized per department policy to develop and implement applicable case plans and coordinate services delivery.	
Newly detained children receive comprehensive needs assessment *		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input checked="" type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>3.3.1</b> MAT will sustain 92 to 100 percent rate of referral, through use of current practice and policy.	<b>Timeframe</b>	August 2011-December 2012		<b>Assigned to</b>
	<b>3.3.2</b> Complete a program evaluation of Coordinated Services Action Team (CSAT)		December 2013-January2015.		
	<b>3.3.3</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		
				Child Welfare Mental Health Services	
				Child Welfare Mental Health Services	
				Child Welfare Mental Health Services	

\* Strategies, assessments and programs efforts are tracked by internal Coordinated Services Action Team (CSAT)/Referral Tracking System (RTS). Discussed on page 118 of the 2011 County Self-Assessment

<p><b>DCFS</b>  <b>Outcome/Systemic Factor:</b>  <b>Measure: Permanency-3.3 Children in Foster Care for 3 years or longer (Emancipating/Age 18)</b></p>					
<p><b>County's Current Performance:</b>                  Los Angeles County's performance since Q2 2007 has declined by 1.0% and the ten year performance since Q2 2000 has declined by 31.7%.</p>					
<p><b>Improvement Goal 3.0</b>                  By January of 2014, DCFS will reduce the percentage of youth in care three years or longer (Emancipating or age 18) by 10 %. (From Quarter 2, 2010 performance 60.2%: to a level of 54.2%).</p>					
<p><b>Strategy 3.4</b>                  Utilization of California Partners for Permanency (CAPP) Grant</p>		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<p><b>Strategy Rationale</b>                  Through the use of CAPP grant, reduce the number of African American children in long-term foster care, remove barriers to permanency and improve child well-being.</p>		
<b>Milestone</b>	<p><b>3.4.1</b> In the Pomona and Torrance offices complete an Institutional Analysis of the child welfare system barriers to permanency for African-American youth.</p>	<b>Timeframe</b>	June 30, 2011-June 2012 Note: contingent upon DCFS Exec Team and CDSS CAPP project management Wateridge will conduct an Institutional Analysis in December 2011.	<b>Assigned to</b>	LA County CAPP Project Manager
	<p><b>3.4.2</b> Work with CDSS (lead grantee) to develop an integrated child and family case practice model.</p>		June 2011-December 31, 2011		LA County CAPP Project Manager
	<p><b>3.4.3</b> Install, implement, refine, test and evaluate the practice model in the Pomona, Torrance and Wateridge offices</p>		December 2011-September 2015: 3 office CAPP practice model implementation (October 1, 2012) CAPP practice model expansion to other DCFS offices (October , 2014)		LA County CAPP Project Manager; Office RAs; DCFS Exec Team;
	<p><b>3.4.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting</p>		August 2011-August 2014		LA County CAPP Project Manager; Office RAs; DCFS Exec Team; OSM

<p><b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b> There are no other systemic factors to be addressed at this time.</p>
<p><b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b> On-going technical assistance from CDSS' Outcomes and Accountability and Office of Child Abuse Prevention sections will be significant to achieving improvement goals. Input, education, feedback from internal and external stakeholders through quarterly reviews and updates. Extensive work with CDSS CAPP Grant Lead on work related to the grant.</p>
<p><b>Identify roles of the other partners in achieving the improvement goals.</b> In addition to general partners, strategies related to the Self-Sufficiency / Permanency measure will include special partnerships with the CDSS in CAPP Grant work. Mental health screenings and work related to C-SAT evaluation will include participation of partners who engage in screening and subsequent service delivery.</p>
<p><b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</b> None identified at this time.</p>

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b> <b>Enhanced organizational performance</b>					
<b>County's Current Performance:</b> Current qualitative feedback indicates strong efforts towards collaboration, challenges in ability to team, internal and external communication, and analysis of performance data and program effectiveness.					
<b>Improvement Goal 4.0</b> Stakeholder feedback received during annual SIP membership meeting will identify improvement in teaming, communication, and managing for results.					
<b>Strategy 4.1</b> Complete contract re-design		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale:</b> The streamlined process proposed in the contract redesign will support families' accessing services along an integrated and coordinated service continuum, thereby improving service efficiency, program effectiveness, and family outcomes.		
<b>Milestone</b>	<b>4.1.1</b> Draft Statement of Work,	<b>Timeframe</b>	January 2011-July 2011	<b>Assigned to</b>	Community Based Support Division
	<b>4.1.2</b> Engage community stakeholders and share contract framework and design; receive input for consideration/incorporation		July 2011-Sept. 2011		Community Based Support Division
	<b>4.1.3</b> Solicit for services; Evaluate submitted proposals; Implement new contracted services		March 2012- June 2013		Community Based Support Division
	<b>4.1.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		Community Based Support Division, OSM



<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b> <b>Enhanced organizational performance</b>					
<b>County's Current Performance:</b> Current qualitative feedback indicates strong efforts towards collaboration, challenges in ability to team, internal and external communication, and analysis of performance data and program effectiveness.					
<b>Improvement Goal 4.0</b> Stakeholder feedback received during annual SIP membership meeting will identify improvement in teaming, communication, and managing for results.					
<b>Strategy 4.2</b> Develop and utilize a DCFS Core Practice Model (Page 131 of 2011 County Self-Assessment)		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale:</b> A Core Practice model will enhance collaboration efforts and implement a consistent approach to child welfare services. The model delineates staff roles in five key practice domains and identifies core practice values and principles. It is believed that a consistent approach will enhance team work; the leadership aspect of the model will build strong staff and guide critical thinking in case practice.	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input checked="" type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>4.2.1</b> Finalize and consolidate the Core Practice Model	<b>Timeframe</b>	August 2011-January 2012		<b>Assigned to</b>
	<b>4.2.2</b> Integrate in and align current training with Core Practice Model components		January 2012- December 2014		
	<b>4.2.3</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011-August 2014		
Incremental steps will be embedded in the finalization and consolidation of the Core Practice Model. Practice Models unique to staff roles will be included in the development of the full model. Progress will be monitored through quarterly updates.					

<b>DCFS</b>					
<b>Outcome/Systemic Factor:</b> <b>Enhanced organizational performance</b>					
<b>County's Current Performance:</b> Current qualitative feedback indicates strong efforts towards collaboration, challenges in ability to team, internal and external communication, and analysis of performance data and program effectiveness.					
<b>Improvement Goal 4.0</b> Stakeholder feedback received during annual SIP membership meeting will identify improvement in teaming, communication, and managing for results.					
<b>Strategy 4.3</b> Implement Data-driven Decision Making Process (Page 132, 2011 County Self-Assessment)	<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale:</b> Data-driven decision making uses qualitative and quantitative data and relevant department background information, to inform decisions related to the development, planning, and implementation of strategies aligned with department priorities. The process includes the development of a data dashboard that will include key indicators focused on safety permanence and well-being. Data analysis will be supported by business process and liaison work that will enhance "Data literacy" at the executive, bureau, office, unit and individual worker levels; meaning that DCFS staff will possess a basic understanding of how data can be used to inform work in child welfare. It is expected that enhanced understanding of data, consistency in practice and work effort will impact overall department practice and performance on identified performance indicators, while improving communication among staff.		
	<input type="checkbox"/>	<b>CBCAP</b>			
	<input type="checkbox"/>	<b>PSSF</b>			
	<input checked="" type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>4.3.1</b> Expand the scope and membership of the Data Partnership workgroup	<b>Timeframe</b>	August 2011- December 2011	<b>Assigned to</b>	Office of Strategy Management Business Information Systems (BIS)
	<b>4.3.2</b> Develop plan to integrate qualitative components to the process		December 2011- December 2012		Office of Strategy Management BIS, Data Partnership Group
	<b>4.3.3</b> Create a customized dashboard for support programs		August 2011- December 2013		Business Information Systems
	<b>4.3.4</b> Complete quarterly SIP update discussion or participation in SIP membership meeting		August 2011- August 2014		Office of Strategy Management Business Information Systems

<p><b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b> There are no other systemic factors to be addressed at this time.</p>
<p><b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b> On-going technical assistance from CDSS' Outcomes and Accountability and Office of Child Abuse Prevention sections will be significant to achieving improvement goals. Input, education, feedback from internal and external stakeholders through quarterly reviews and updates. Technical assistance from external partners working with Data Partnership Committee.</p>
<p><b>Identify roles of the other partners in achieving the improvement goals.</b> In addition to general partners, strategies related to enhanced organizational performance measure will include partnership and continued collaboration with Casey Family Programs, Western Pacific Implementation Center and the National Research Center (NRC) (for technical assistance as necessary).</p>
<p><b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</b> None identified at this time.</p>

<p><b>PROBATION</b>  <b>Outcome/Systemic Factor 1: Timeliness To Reunification/Agency Collaborations</b></p>					
<p><b>County's Current Performance:</b>                  Currently, Probation does not have data to analyze reunification outcomes and has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. Placement managers' internal data tracking does not yet capture this information.</p>					
<p><b>Improvement Goal 1.0: Improve Collaborative Efforts Across Systems</b>                  By implementing the set forth strategies, Probation will form at least 2 new collaborative efforts focused on education and permanency and will establish liaisons for each to ensure that collaborative efforts stay on track. The achievement of this goal will be evident in that case information and resources will be shared across systems ensuring that children's permanency track is maintained. Quarterly meetings with collaborative partners will ensure success, and a quality assurance process will be implemented to gain feedback from stakeholders regarding the effectiveness across all milestones.</p>					
<p><b>Strategy 1. 1</b>                  Probation will develop a Cross-systems training plan to include all partnering agencies, as well as internal and external stakeholders, with a quality assurance process implemented to ensure effectiveness of training.</p>		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<p><b>Strategy Rationale:</b> As opposed to departments operating in silos or occasional cross-systems collaboration, a systemic and purposeful training conducted throughout the year will place departments in an effective and continuous collaboration that will develop and enhance continuity of care and produce better outcomes for all foster children and their families.</p>		
<b>Milestone</b>	<p><b>1.1.1</b> Develop training plan including Probation, Department of Children and Family Services (DCFS), Department of Mental Health (DMH), Public Health, Los Angeles County Office of Education (LACOE), Law Enforcement, etc. focused on legislation, confidentiality, policies, practices and procedures</p>	<b>Timeframe</b>	<p>September 2011-2012</p>	<b>Assigned to</b>	<p>Probation Staff Training                  Howard Wong                  Dave Mitchell                  Jeannette Aguirre                  Placement Permanency Quality Assurance (PPQA)</p>

<p><b>1.1.2</b> Develop training plan for Out-Of-Home Care Investigations &amp; Monitoring cross-training for Community Care Licensing (CCL), DCFS, Association of Community Human Service Agencies (ACHSA) and Probation</p>	<p>September 2011-2013</p>	<p>Probation Staff Training                  Lisa Campbell-Motton                  Pamela Pease                  PPQA</p>
<p><b>1.1.3</b> Develop training plan for Permanency partners across DCFS, Probation, including Youth Development Services (YDS), ACHSA, UC Davis Extension Resource Center for Focused Family Practice, Group Homes/Foster Family Agencies and Commercially Sexually Exploited Children (CSEC) partners and committee.</p>	<p>September 2012-2014</p>	<p>Probation Staff Training                  Art Mayfield                  Lisa Campbell-Motton                  Michael Verner                  Alma Vicente                  Jed Minoff                  Michelle Guymon                  Hania Cardenas                  PPQA</p>

<p><b>PROBATION</b>  <b>Outcome/Systemic Factor 1: Timeliness To Reunification/Agency Collaborations</b></p>			
<p><b>County's Current Performance:</b>                  Currently, Probation does not have data to analyze reunification outcomes and has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. Placement managers' internal data tracking does not yet capture this information.</p>			
<p><b>Improvement Goal 1.0: Improve Collaborative Efforts Across Systems</b>                  By implementing the set forth strategies, Probation will form at least 2 new collaborative efforts focused on education and permanency and will establish liaisons for each to ensure that collaborative efforts stay on track. The achievement of this goal will be evident in that case information and resources will be shared across systems ensuring that children's permanency track is maintained. Quarterly meetings with collaborative partners will ensure success, and a quality assurance process will be implemented to gain feedback from stakeholders regarding the effectiveness across all milestones.</p>			
<p><b>Strategy 1. 2</b>                  Exploration of the availability of new resources for all children related to family reunification, adoption and legal guardianship with emphasis on increasing resources for communities with a high population of African American foster children and their families consistent with studies on disproportionality and disparity.</p>		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Strategy Rationale:</b>                  In alignment with the Title IV-E Waiver goal, the Department is to provide more preventive services as well as increase number and array of services to allow more children to remain safely in their homes. In addition, the System Improvement Plan (SIP) Stakeholder feedback revealed that disproportionality and disparity must be reduced by increasing collaborative efforts and resources between DCFS and Probation.</p>
<b>Milestone</b>	<p><b>1.2.1</b> Develop a work group including but not limited to DCFS, Probation, Faith Based Community Partners, Education, Vocation, Foster Youth, Parents, Mentors, DMH, Caregivers, ACHSA, Group Homes/Foster Family Agencies and Commercially Sexually Exploited Children (CSEC) partners and committee.</p>	<b>Timeframe</b>	<p>June 2011-June 2012</p>
		<b>Assigned to</b>	<p>Placement Managers                  Placement Program Analysts                  Placement Special Assistant</p>

<p><b>1.2.2</b> Work group will convene, explore possibilities and develop plan</p>	<p>June 2012- June 2013</p>	<p>Placement Managers Placement Program Analysts Placement Special Assistant</p>
<p><b>1.2.3</b> Implementation of plan to tap into and share new resources, with quality assurance process implemented to ensure effectiveness of plan</p>	<p>June 2013- June 2014</p>	<p>Placement Managers Placement Program Analysts Placement Special Assistant PPQA</p>

<p><b>PROBATION</b>  <b>Outcome/Systemic Factor 1: Timeliness To Reunification/Agency Collaborations</b></p>										
<p><b>County’s Current Performance:</b>                  Currently, Probation does not have data to analyze reunification outcomes and has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. Placement managers’ internal data tracking does not yet capture this information.</p>										
<p><b>Improvement Goal 1.0: Improve Collaborative Efforts Across Systems</b>                  By implementing the set forth strategies, Probation will form at least 2 new collaborative efforts focused on education and permanency and will establish liaisons for each to ensure that collaborative efforts stay on track. The achievement of this goal will be evident in that case information and resources will be shared across systems ensuring that children’s permanency track is maintained. Quarterly meetings with collaborative partners will ensure success, and a quality assurance process will be implemented to gain feedback from stakeholders regarding the effectiveness across all milestones.</p>										
<p><b>Strategy 1. 3</b>                  Exploring options for and enhancing existing resources such as Placement Assessment Centers (PAC), Aftercare Programs, Mentors, Faith Based Community, Employment, Housing, Child Care, higher education network and Transportation for parents/children, as well as surveying Group Homes for existing/untapped resources.</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td><b>CAPIT</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td><b>CBCAP</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td><b>PSSF</b></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><b>N/A</b></td> </tr> </table>	<input type="checkbox"/>	<b>CAPIT</b>	<input type="checkbox"/>	<b>CBCAP</b>	<input type="checkbox"/>	<b>PSSF</b>	<input checked="" type="checkbox"/>	<b>N/A</b>	<p><b>Strategy Rationale:</b>                  In alignment with the Title IV-E Waiver goal, the Department is to provide more preventive services as well as increase number and array of services to allow more children to remain safely in their homes. Additionally, the Department’s goal is to reduce the length of children’s stay in congregate care while ensuring that individualized case planning and appropriate community alternatives and services are in place prior to child returning home to ensure successful and permanent reunification. SIP Stakeholder feedback supported this by stating that the Department must add and fund alternative response services especially after reunification to ensure its success.</p>
<input type="checkbox"/>	<b>CAPIT</b>									
<input type="checkbox"/>	<b>CBCAP</b>									
<input type="checkbox"/>	<b>PSSF</b>									
<input checked="" type="checkbox"/>	<b>N/A</b>									



Milestone		Timeframe		Assigned to
	<p><b>1.3.1</b> Develop a work group including but not limited to DCFS, Probation, Faith Based Community, Education, Vocation, Foster Youth, Parents, Mentors, DMH, Caregivers, ACHSA and Group Home Provider partners</p>		<p>October 2011-July 2012</p>	<p>Placement Managers Placement Program Analysts Placement Special Assistant</p>
	<p><b>1.3.2</b> Work group will convene, explore possibilities and develop plan</p>		<p>July 2012-July 2013</p>	<p>Placement Managers Placement Program Analysts Placement Special Assistant</p>
	<p><b>1.3.3</b> Implementation of plan to tap into and share existing resources, with quality assurance process implemented to ensure effectiveness of plan</p>		<p>July 2013- July 2014</p>	<p>Placement Managers Placement Program Analysts Placement Special Assistant PPQA</p>

<p><b>Probation</b>  <b>Outcome/Systemic Factor 2: Increasing Placement Stability</b></p>										
<p><b>County's Current Performance:</b>                  Currently, Probation has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. However, each manager has an internal data tracking system reported to Placement Administration on a monthly basis. This internal data tracking has been useful in identifying strengths, areas of non-compliance, areas achieving substantial improvement, areas needing increased training, necessary development of policies and protocols and areas needing the use of the State wide automated system, CWS/CMS.</p>										
<p><b>Improvement Goal 2.0: Improving upfront and ongoing Assessment and Case Planning</b>                  As a result of achieving this goal, the monthly Case Review Compliance statistics will increase and remain consistent in four areas: Case Plan, Parent Visitation, Compelling Reasons and Concurrent planning. In addition to this, the Placement Authorization and Utilization Review (PAUR) team will produce statistics revealing the increased capacity and utilization of the Evidenced-Based programs and practices as well as Family Preservation and Wrap Around services.</p>										
<p><b>Strategy 2. 1</b>                  Improve report compliance through revision of current court reports and case plan, which will include training and enhancing current monitoring system, with a quality assurance process implemented to ensure effectiveness.</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td><b>CAPIT</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td><b>CBCAP</b></td> </tr> <tr> <td><input type="checkbox"/></td> <td><b>PSSF</b></td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td><b>N/A</b></td> </tr> </table>	<input type="checkbox"/>	<b>CAPIT</b>	<input type="checkbox"/>	<b>CBCAP</b>	<input type="checkbox"/>	<b>PSSF</b>	<input checked="" type="checkbox"/>	<b>N/A</b>	<p><b>Strategy Rationale:</b>                  In alignment with the Title IV-E Waiver goals, strategies and initiatives, the Department will enhance Cross-system case assessment and case planning. Additionally, improved and timely case planning will fulfill the Departmental goal of reducing reliance on out-of-home care through the provision of intensive, focused and individualized services. It is imperative that the Department reduce the length of children's stay in congregate care while ensuring that individualized case planning and appropriate community alternatives and services are in place prior to child returning home to ensure improved outcomes and permanent reunification. The System Improvement Plan (SIP) Stakeholder feedback promoted the fact that it is imperative that each child leave the system with a comprehensive plan that involves all stakeholders in their life.</p>
<input type="checkbox"/>	<b>CAPIT</b>									
<input type="checkbox"/>	<b>CBCAP</b>									
<input type="checkbox"/>	<b>PSSF</b>									
<input checked="" type="checkbox"/>	<b>N/A</b>									

Milestone		Timeframe	Assigned to
	<p><b>2.1.1</b> Case Plan &amp; Judicial Review revisions and training in concert with Administrative Office of the Courts (AOC), with emphasis on improving Concurrent Planning.</p>	<p>June 2011-September 2013</p>	<p>Administrative Office of the Courts                      Lisa Campbell-Motton                      Frank Imperial                      Dave Mitchell                      PPQA</p>
	<p><b>2.1.2</b> Develop training for Needs &amp; Service Plan (NSP) and Serious Incident Reporting (SIR) guidelines with DCFS, CCL and ACHSA</p>	<p>July 2011-July 2012</p>	<p>PPQA</p>
	<p><b>2.1.3</b> Develop Group Home monitoring system for NSPs/Case Plans related to Family Reunification outcomes and effectiveness of treatment and services, with additional monitoring to ensure Public Health Nurse (PHN) information is incorporated into the case planning process.</p>	<p>July 2012-February 2013</p>	<p>Pamela Pease                      Residential Based Services                      Public Health Nurses                      PPQA</p>

<b>Probation</b>					
<b>Outcome/Systemic Factor 2: Increasing Placement Stability</b>					
<b>County's Current Performance:</b> Currently, Probation has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. However, each manager has an internal data tracking system reported to Placement Administration on a monthly basis. This internal data tracking has been useful in identifying strengths, areas of non-compliance, areas achieving substantial improvement, areas needing increased training, necessary development of policies and protocols and areas needing the use of the State wide automated system, CWS/CMS.					
<b>Improvement Goal 2.0: Improving upfront and ongoing Assessment and Case Planning</b> As a result of achieving this goal, the monthly Case Review Compliance statistics will increase and remain consistent in four areas: Case Plan, Parent Visitation, Compelling Reasons and Concurrent planning. In addition to this, the Placement Authorization and Utilization Review (PAUR) team will produce statistics revealing the increased capacity and utilization of the Evidenced-Based programs and practices as well as Family Preservation and Wrap Around services.					
<b>Strategy 2. 2</b> Enhance and expand upfront cross-system assessment through increased Placement Assessment Centers (PACs), development of assessment team and collaboration with partners such as DMH, LACOE and DCFS.		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale</b> Although Probation does not have data to show trends of placement instability for Probation foster children, there is internal data that reveals that many children have more than two placements prior to exiting the system. Therefore, there is a great need to increase stability of the youth's placement and provide services and resources to the family while increasing timeliness to family reunification.		
<b>Milestone</b>	<b>2.2.1</b> Obtain contracts with existing Providers to increase the PAC program	<b>Timeframe</b>	June 2011-October 2012	<b>Assigned to</b>	Michelle Guymon Lisa Campbell-Motton
	<b>2.2.2</b> Develop a plan and timeline for implementation of upfront Cross-Systems		June 2011-June 2013		Michelle Guymon

<p>Assessments, including a plan for the inclusion of health and education information</p>		<p>Jennifer Kaufman Adam Bettino Public Health Nurses</p>
<p><b>2.2.3</b> Convene collaborative group to meet quarterly to ensure progress and enhance the assessment process and implement quality assurance process to ensure effectiveness</p>	<p>June 2013-January 2014</p>	<p>Michelle Guymon Dave Mitchell Jewell Shaw-Bowen Public Health Nurses</p>

<p><b>Probation</b>  <b>Outcome/Systemic Factor 2: Increasing Placement Stability</b></p>					
<p><b>County's Current Performance:</b>                  Currently, Probation has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. However, each manager has an internal data tracking system reported to Placement Administration on a monthly basis. This internal data tracking has been useful in identifying strengths, areas of non-compliance, areas achieving substantial improvement, areas needing increased training, necessary development of policies and protocols and areas needing the use of the State wide automated system, CWS/CMS.</p>					
<p><b>Improvement Goal 2.0: Improving upfront and ongoing Assessment and Case Planning</b>                  As a result of achieving this goal, the monthly Case Review Compliance statistics will increase and remain consistent in four areas: Case Plan, Parent Visitation, Compelling Reasons and Concurrent planning. In addition to this, the Placement Authorization and Utilization Review (PAUR) team will produce statistics revealing the increased capacity and utilization of the Evidenced-Based programs and practices as well as Family Preservation and Wrap Around services.</p>					
<p><b>Strategy 2.3</b>                  Expand Evidence-Based Programs (EBP) and practices such as Functional Family Therapy (FFT), Functional Family Probation (FFP) and Multi-Systemic Therapy (MST) as well as Family Preservation (FP) and Wrap Around (WRAP) services. Develop and implement use of Team Decision Making and Multi-Dimensional Team (MDT) processes to enhance the use of all services at strategic points in each child's case.</p>		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input checked="" type="checkbox"/> PSSF <input type="checkbox"/> N/A	<p><b>Strategy Rationale:</b>                  In alignment with the Title IV-E Waiver goals, initiatives and strategies, the Department will expand Evidenced Based Programs and practices and develop and utilize the Placement Authorization and Utilization Review (PAUR) Unit. The Department will also reduce recurrence of maltreatment through a combination of case load reduction and Evidence-Based case management and intervention.</p>		
<b>Milestone</b>	<p><b>2.3.1</b> Continue and improve utilization of PAUR unit across all assessment points and produce overall statistics of unit's work and progress, as well as developing and implementing quality assurance process to ensure effectiveness</p>	<b>Timeframe</b>	<p>January 2012-January 2013</p>	<b>Assigned to</b>	<p>Jennifer Kaufman                  Dave Mitchell                  Adam Bettino</p>

<p><b>2.3.2</b> Increase program services and referrals for EBPs, FP and WRAP.</p>	<p>July 2011-June 2013</p>	<p>Hania Cardenas Dave Mitchell Jennifer Kaufman</p>
<p><b>2.3.3</b> Develop and implement full 3-phase MDT process for initial, mid and transitional phase of all children’s cases. In addition, develop a quality assurance process that will ensure effectiveness and fidelity to the model.</p>	<p>January 2012-January 2014</p>	<p>Dave Mitchell Frank Imperial Jewell Shaw-Bowen Andy Greene</p>

<p><b>Probation</b>  <b>Outcome/Systemic Factor 2: Increasing Placement Stability</b></p>			
<p><b>County’s Current Performance:</b>                  Currently, Probation has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. However, each manager has an internal data tracking system reported to Placement Administration on a monthly basis. This internal data tracking has been useful in identifying strengths, areas of non-compliance, areas achieving substantial improvement, areas needing increased training, necessary development of policies and protocols and areas needing the use of the State wide automated system, CWS/CMS.</p>			
<p><b>Improvement Goal 2.0: Improving upfront and ongoing Assessment and Case Planning</b>                  As a result of achieving this goal, the monthly Case Review Compliance statistics will increase and remain consistent in four areas: Case Plan, Parent Visitation, Compelling Reasons and Concurrent planning. In addition to this, the Placement Authorization and Utilization Review (PAUR) team will produce statistics revealing the increased capacity and utilization of the Evidenced-Based programs and practices as well as Family Preservation and Wrap Around services.</p>			
<p><b>Strategy 2.4</b>                  In order to promote increased activity in the community to raise the compliance statistics for Probation Placement Officers serving dual roles, there is a need for increased protection in order to increase safety. Therefore, safety protocol including training and equipment (cell phones, safety vests, Oleoresin Capsicum (OC) Spray, handcuffs/mechanical restraints) will be explored for the feasibility of implementation. In addition to increasing safety to support Placement Officers, there will be exploration of and consideration given to ways to retain and reduce the turnover of Placement Officers.</p>	<input type="checkbox"/>	<b>CAPIT</b>	<p><b>Strategy Rationale</b>                  In alignment with the Title IV-E Waiver goal, the Department will decrease timelines to reunification by supporting and promoting Placement Officer’s ability to spend more time in the community serving youth and their families. Additionally, with the expansion of EBP and other family/community based programs, as well as a higher referral rate for caregiver home assessments and permanency planning, there is an increased need for safety of the Probation Officer acting in dual roles such as therapist/interventionist, foster home consultant, parent visitation and permanency planners. It is also critical to increasing timelines to reunification by exploring ways to promote the retention of seasoned Placement Officers with specialized knowledge base and experience.</p>
	<input type="checkbox"/>	<b>CBCAP</b>	
	<input type="checkbox"/>	<b>PSSF</b>	
	<input checked="" type="checkbox"/>	<b>N/A</b>	



Milestone		Timeframe	Assigned to
	<p><b>2.3.1</b> Work with Camp Community Transition Program (CCTP) &amp; Community Detention Program (CDP) to explore dual supervision cases with youth coming out of Camp on Suitable Placement orders</p>	<p>October 2011-October 2012</p>	<p>Alma Vicente Stan Ricketts Residential Based Services Howard Wong</p>
	<p><b>2.3.2</b> Work closely with Camp Community Placement to develop a process that will identify children residing in camp with no family in order to expedite permanency</p>	<p>January 2012-January 2013</p>	<p>Alma Vicente Arthur Mayfield Charles Trask/Camp Intake Unit</p>
	<p><b>2.3.3</b> Develop and implement safety training for all Placement field officers serving dual roles, along with the impact on child welfare and therapeutic interventions</p>	<p>January 2012-January 2013</p>	<p>Walter Mann Howard Wong Hania Cardenas Alma Vicente Probation Staff Training</p>

<b>Probation</b> <b>Outcome/Systemic Factor 3: Reducing Timelines to Permanency through Adoption, Legal Guardianship and Life Long Connections</b>					
<b>County's Current Performance:</b> N/A					
<b>Improvement Goal 3.0:</b> Increased permanency efforts and self-sufficiency for children without connections The achievement of this goal will be evidenced with the increase of adoptions and legal guardianships by 30% for all Probation foster children, specifically Transition Aged Youth (TAY) without connections.					
<b>Strategy 3. 1</b> Increase self-sufficiency through the development of resources and housing for TAY youth such as education, employment, housing, permanency options (adult adoptions), mentors and life long connections.		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale:</b> In alignment with the Title IV-E Waiver goal, the Department will reduce timelines to permanency through increased and enhanced Family Finding efforts, Adoption and Legal Guardianship. In alignment with the County goal, the Department will promote self-sufficiency while increasing the likelihood that every child leaves the system with a permanent connection. SIP Stakeholder feedback suggested the importance of comprehensive transition planning and that all Departments support an effective work re-entry program for their graduates.		
<b>Milestone</b>	<b>3.1.1</b> Develop work group of TAY youth to explore all options to increase self-sufficiency and permanency	<b>Timeframe</b>	July 2011-January 2012	<b>Assigned to</b>	Youth Development Services PPQA Foster Youth Group Home Providers
	<b>3.1.2</b> Convene work group and obtain feedback which will include issues, solutions and plan to produce better outcomes for TAY youth and their families		January 2012-January 2013		Youth Development Services PPQA Foster Youth Group Home Providers

	<b>3.1.3</b> Implement solutions and plan to increase self-sufficiency and permanency for TAY youth, with quality assurance process implemented to ensure effectiveness of plan		January 2013-June 2014		Youth Development Services PPQA Foster Youth Group Home Providers
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<b>Probation</b> <b>Outcome/Systemic Factor 3: Reducing Timelines to Permanency through Adoption, Legal Guardianship and Life Long Connections</b>			
<b>County's Current Performance:</b> N/A			
<b>Improvement Goal 3.0: Increased permanency efforts and self-sufficiency for children without connections</b> The achievement of this goal will be evidenced with the increase of adoptions and legal guardianships by 30% for all Probation foster children, specifically Transition Aged Youth (TAY) without connections.			
<b>Strategy 3. 2</b> Obtain Foster Family Agencies/Foster Homes for Probation foster children and recruit adoptive families for freed youth.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Strategy Rationale</b> In alignment with the Title IV-E Waiver goal, the Department will reduce timelines to permanency and increase timeliness to adoption through the use of effective alternative options to out-of home care, including but not limited to foster homes and recruitment of adoptive families through DCFS Recruitment Unit.
<b>Milestone</b>	<b>3.2.1</b> Obtain contract for FFA for Probation foster Children	<b>Timeframe</b>	July 2011-October 2012  Lisa Campbell-Motton Michelle Guymon DCFS Contracts
	<b>3.2.2</b> Increase collaboration of youth permanency units across systems with the development of a core group to represent all systems, with quality assurance process implemented to ensure effectiveness of collaboration		January 2012-June 2013  PPQA Residential Based Services Tiffany Collins
	<b>3.2.3</b> Obtain at least 2 adoptive families through the Diligent Recruitment grant as well as exploration of recruitment options in the Faith Based Community while enhancing partnerships with ongoing collaboration		January 2012-June 2014  Arthur Mayfield Lisa Campbell-Motton Sari Grant
		<b>Assigned to</b>	

<b>Probation</b> <b>Outcome/Systemic Factor 3: Reducing Timelines to Permanency through Adoption, Legal Guardianship and Life Long Connections</b>					
<b>County's Current Performance:</b> N/A					
<b>Improvement Goal 3.0: Increased permanency efforts and self-sufficiency for children without connections</b> The achievement of this goal will be evidenced with the increase of adoptions and legal guardianships by 30% for all Probation foster children, specifically Transition Aged Youth (TAY) without connections.					
<b>Strategy 3.3</b> Improve Relative/Non-Related Extended Family Member (NREFM) approval process and funding.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Strategy Rationale:</b> In alignment with the Title IV-E Waiver goal, the Department will reduce timelines to permanency through increased and enhanced Family Finding efforts, Adoption and Legal Guardianship. In alignment with the County goal, the Department will promote self-sufficiency while ensuring that every child leaves the system with a permanent connection.		
<b>Milestone</b>	<b>3.3.1</b> Cross-systems training for Placement staff, Foster Home Consultants and caregivers, with quality assurance process implemented to ensure effectiveness of training	<b>Timeframe</b>	January 2012-June 2012	<b>Assigned to</b>	Probation Staff Training PPQA Mariesha Collins Demetra Sullivan Lisa Campbell-Motton Howard Wong
	<b>3.3.2</b> Probation Foster Home Consultants will obtain full access to LIVE-SCAN		June 2011-June 2012		Lisa Campbell-Motton Michelle Guymon DCFS BIS
	<b>3.3.3</b> Explore and develop plan for possible for legislative change related to funding requirements for relative caregivers		June 2012-June 2014		Lisa Campbell-Motton Michelle Guymon Scott Stickney

<b>Probation</b>			
<b>Outcome/Systemic Factor 4: Data Collection Utilization</b>			
<b>County's Current Performance:</b> Currently, Probation has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. However, each manager has an internal data tracking system reported to Placement Administration on a monthly basis. This internal data tracking, although useful, has been cumbersome, prone to human error and limited in identifying strengths, areas of non-compliance, areas achieving substantial improvement, areas needing increased training, necessary development of policies and protocols and areas needing the use of the State wide automated system, CWS/CMS.			
<b>Improvement Goal 4.0 Using Data Driven Decision Making Process</b> By implementing the set forth strategies, Probation will develop data through internal systems and CWS/CMS and be able to manage for results and improved outcomes for Probation foster children and their families, which will include accountability across all operations.			
<b>Strategy 4. 1</b> Analyze all data elements to be collected and tracked, which includes identifying areas of disproportionality and racial disparity, and develop a plan for creating a data driven decision making process. The plan will include child welfare outcomes, current performance, national standards and plan for improving outcomes, including the decrease of disproportionality and disparity in all areas.		<input type="checkbox"/> <b>CAPIT</b> <input type="checkbox"/> <b>CBCAP</b> <input type="checkbox"/> <b>PSSF</b> <input checked="" type="checkbox"/> <b>N/A</b>	<b>Strategy Rationale:</b> In light of the fact that all Title IV-E Waiver Goals require data driven management, the Department must develop a plan to improve current data collection and tracking system. This plan must include collection of data, compilation and interpretation of data and utilization of data to improve outcomes for children and their families, while impacting disproportionality and disparity. Additionally, SIP Stakeholder feedback asserted that data is to be used to indicate what went wrong and direct the Department to improve reunification and aftercare decisions.
<b>Milestone</b>	<b>4.1.1</b> Develop a work group including but not limited to DCFS, Probation, Public Health Nurses, Probation Internal Service Department (ISD), and DCFS Business Information Systems (BIS).	<b>Timeframe</b>	September 2011-September 2012
		<b>Assigned to</b>	Howard Wong Fred Nazarbegan Sharon Harada Dave Mitchell Placement Managers Public Health Nurse Management

<p><b>4.1.2</b> Work group will convene, explore possibilities and develop plan.</p>	<p>September 2012-September 2013</p>	<p>Howard Wong Fred Nazarbegian Sharon Harada Dave Mitchell Placement Managers Public Health Nurse Management</p>
<p><b>4.1.3</b> Implementation of plan to improve child welfare outcomes, including the decrease of disproportionality and disparity in all areas, with quality assurance process implemented to ensure effectiveness of plan</p>	<p>September 2013-September 2014</p>	<p>Howard Wong Fred Nazarbegian Sharon Harada Dave Mitchell Placement Managers Public Health Nurse Management PPQA</p>

<b>Probation</b> <b>Outcome/Systemic Factor 4: Data Collection Utilization</b>						
<b>County's Current Performance:</b> Currently, Probation has limited data input in CWS/CMS, which is not enough to formulate meaningful outcomes. In order to achieve meaningful outcome data, Probation will need to fully utilize the system from case initiation through case closure. However, each manager has an internal data tracking system reported to Placement Administration on a monthly basis. This internal data tracking, although useful, has been cumbersome, prone to human error and limited in identifying strengths, areas of non-compliance, areas achieving substantial improvement, areas needing increased training, necessary development of policies and protocols and areas needing the use of the State wide automated system, CWS/CMS.						
<b>Improvement Goal 4.0 Using Data Driven Decision Making Process</b> By implementing the set forth strategies, Probation will develop data through internal systems and CWS/CMS and be able to manage for results and improved outcomes for Probation foster children and their families, which will include accountability across all operations.						
<b>Strategy 4. 2</b> Create a dynamic process to share data and gain internal and external stakeholder feedback regarding the use of the data.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale:</b> In light of the fact that all Title IV-E Waiver Goals require data driven management, the Department must develop a plan that includes utilization of data to improve outcomes for children and their families, while impacting disproportionality and disparity. SIP Stakeholder feedback requested that the Department make the necessary data accessible and create a process for how it will be utilized.		
		<input type="checkbox"/>	<b>CBCAP</b>			
		<input type="checkbox"/>	<b>PSSF</b>			
		<input checked="" type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>4.2.1</b> Convene a cross-section of internal and external stakeholders representative of all child welfare agencies and partners	<b>Timeframe</b>	June 2014-Ongoing		<b>Assigned to</b>	Probation Administrators
	<b>4.2.2</b> Stakeholders will analyze and provide the Department with valuable feedback		January 2014-Ongoing			Probation Administrators
	<b>4.2.3</b> Feedback will be utilized to improve outcomes, with quality assurance process implemented to ensure effectiveness of plan		January 2014-Ongoing			Probation Administrators PPQA



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

There are no other systemic factors to be addressed at this time.

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

Technical assistance from the State through consistent feedback and insight into progress and barriers will be critical to achieving improvement goals. Probation will need continued updates and technical assistance on the revisions and enhancements to the C-CFSR process as Probation completes annual updates and prepares for the next C-CFSR process. All other educational/training needs will be covered by Probation’s internal and external stakeholders. Probation will also need comprehensive training on CWS/CMS for Placement Officers, Public Health Nurses, Permanency Officers and Child Abuse Investigations in order to ensure detailed data from case initiation through case closure.

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

DCFS Recruitment Unit, Permanency Unit, Out of Home Care Management and BIS will have primary roles in assisting Probation achieve its goals. Additionally, Public Health Nurses, LACOE, DMH, Law Enforcement and DCFS will be critical in assisting probation conduct cross-systems training.

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

In order to fully accomplish improvement in the approval/funding process for relative/NREFM caregivers, a legislative change will be required regarding eligibility of relative funding based on biological parents employment and cooperation. This may be a barrier to fully achieving this goal. In order for Probation’s Foster Home Consultants to obtain full access to LIVE-SCAN, there will need to be a regulatory change and possibly Administrative involvement to achieve this goal. Lastly, Public Health Nurses must be incorporated more effectively and collaboratively into assessment processes to ensure complete data is entered into CWS/CMS on all Probation foster children.

### **Child Welfare Services Outcome Improvement Project (CWSOIP) Funds**

CWSOIP funds are intended to support county efforts to improve safety, permanency and well-being for children and families by providing counties with additional resources for activities.

In Los Angeles County, CWSOIP funds are utilized by DCFS to support the following activities:

- Community Based Child Abuse Prevention Programs;
  - Alternative Response Services (ARS)
- Providing Special training to staff, caregivers and community providers;
- Improving coordination between public and/or private agencies;
- Implementing permanency and youth transition practice improvement;
- Enhancing and/or expanding family finding efforts;
- Improving internal communication and information sharing; and
- Improving oversight of social workers.

Allocations are made to applicable child welfare services and programs (listed above) based on need. Identified need is gleaned through results of Children Service Worker (CSW) time studies, which are completed by CSWs four times per year. CWSOIP funds also support all DCFS Alternative Response Services (ARS). County contracted, Family Preservation Agencies provide billing statements related to ARS that were provided to families in lieu of opening cases with the Department.

CWSOIP funds are utilized by Probation to support the following activities:

- Expansion of Evidenced-Based Programs Functional Family Therapy (FFT), Functional Family Probation (FFP) and Multi-Systemic Therapy (MST)
- Functional Family Therapy Interventionist Program and Supervisor Training
- System Improvement Plan Stakeholder activities
- Equipment and resources for Placement Officers to increase timelines to reunification

- Providing special training and conferences for staff and providers
- Enhancing and expanding family finding and permanency efforts
- Supporting Transition Aged Youth (TAY) self-sufficiency efforts and programs

# **Los Angeles County**

## **System Improvement Plan: Part II**

**2011 to 2014**

**County SIP Team Composition:** Los Angeles County conducted a Child Welfare Self Assessment and designed its System Improvement Plan (SIP), which identified strengths and needs for the future. Public forums and meetings were held to which key stakeholders, such as youth, parents, consumers, and community based organizations, were invited.<sup>14</sup>

**Approvals:** The Contact and Signature Sheet included in the cover sheet portion of this document contain the signatures of the lead agency, Los Angeles County Department of Children and Family Services (DCFS), the Child Abuse Prevention Council (CAPC), and the parent/consumer representative.

Attached is the Notice of Intent that identifies the Los Angeles County Department of Children and Family Services (DCFS) as the lead public agency responsible for administering the CAPIT/ CBCAP/PSSF/ Plan. The notice provides confirmation that the County of Los Angeles intends to contract services with public or private nonprofit agencies to provide services.

## **Inter-Agency Council on Child Abuse and Neglect (ICAN)/Child Abuse Prevention Council (CAPC)/Promoting Safe and Stable Families (PSSF) Collaborative Bodies**

### **Inter-Agency Council on Child Abuse and Neglect (ICAN)**

The Inter-Agency Council on Child Abuse and Neglect (ICAN) was established in 1977 by the Los Angeles County Board of Supervisors (Board) as the official County agency to coordinate the development of services for the prevention, identification and treatment of child abuse and neglect. The Board also designated ICAN as the official child abuse council to provide recommendations to the Board on funding priorities and processes. ICAN is responsible for conducting needs assessments, developing funding guidelines and recommending funding priorities for Child Abuse Prevention Intervention and Treatment (CAPIT) funds and the County Children's Trust Fund monies.

The mandate for much of ICAN's work comes from the ICAN Policy Committee, which includes 32 County, City, State and Federal agency heads as well as representatives from the University of California at Los Angeles (UCLA), the Children's Council of Los Angeles County, Police Chiefs' Association and five private sector individuals appointed by the Board. Los Angeles County Sheriff Lee Baca chairs the ICAN Policy Committee.

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<sup>14</sup> See Appendix IV SIP Membership

ICAN's work is conducted through the ICAN Operations Committee, which includes designated child abuse specialists from each member agency. ICAN has numerous standing and ad hoc committees comprised of both public and private sector professionals with expertise in child abuse. These committees address a host of critical issues such as: review of child fatalities, including child and adolescent suicides; children and families exposed to family violence; development of systems designed to promote better communication and collaboration among agencies; prenatally substance affected infants; pregnant and parenting adolescents; abducted children and grief and loss issues for children in foster care and siblings of children who are victims of fatal child abuse; and a new effort to ensure that foster youth in Los Angeles County are provided with mentors. ICAN also produces two annual reports, The ICAN Child Death Review Team Report, and The State of Child Abuse and Neglect in Los Angeles County. These reports provide visibility to data about child fatalities and child abuse in Los Angeles County and are used in the development of policies and programs for children and families. County Children Trust Fund information is published on Department of Children and Family Services Website (<http://www.ladcfcs.org>).

In addition, 12 Community Child Abuse Prevention Councils (CAPCs) interface with ICAN and provide valuable information and community-based efforts regarding child abuse related issues. ICAN has received national recognition as a model for inter-agency coordination for the protection of children.<sup>15</sup>

### **Los Angeles Community Child Abuse Prevention Councils (CAPCs)**

The Los Angeles Community Child Abuse Prevention Councils (CAPCs) consist of 12 community-based, multidisciplinary councils throughout Los Angeles County. The mission of the CAPCs is to reduce the incidence of child abuse and neglect, and to raise public awareness of child abuse and family violence issues. The membership of the CAPCs is made up of professionals working in the fields of child welfare, education, law enforcement, health and mental health as well as parents and anyone concerned about the problems of child abuse and family violence. Four of the 11 councils address special needs populations including: hearing impaired and deaf children, children with disabilities, the Asian Pacific Community and the GLBT Community. The other seven councils are geographically based and cover most areas of Los Angeles County.

The Los Angeles Community Child Abuse Councils Coordination Project (LACCACCP) facilitates the joint projects of the 11 CAPCs. Since the CAPCs are volunteer organizations, and most members have full time jobs apart from their involvement with the councils, it is important that projects can be implemented easily and quickly. The Coordination

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<sup>15</sup> See Attachment Part 2-A1 for a list of ICAN members

Project also serves the CAPCs by providing technical assistance and professional education, advocating for children issues, and networking with other councils and agencies on behalf of the CAPCs.

The Coordination Project has been in existence since 1987, and has been a non-profit corporation since March 1998. The Coordination Project acts as contractor with DCFS and the California Department of Social Services (CDSS) Office of Child Abuse Prevention (OCAP) to provide services to benefit the 12 CAPCs in their efforts to prevent child abuse. The CAPCs are involved in the following 10 major projects: (1) Networking meetings with other children's collaboratives in Los Angeles County and California; (2) Coordination of the April Child Abuse Prevention Campaign; (3) Publication of the "Children's Advocate" Newsletter; (4) Coordination of the Report Card Insert Project; (5) Establishment and maintenance of the CAPCs' Website: [www.childabusecouncils.org](http://www.childabusecouncils.org); (6) Training and technical assistance to the Community Child Abuse Councils; (7) Special projects for individual councils; (8) Partnership with the ICAN Child Death Review Team, and (9) Public awareness materials and training for non-mandated reporters who may witness child abuse.

All of these projects promote public awareness of child abuse and neglect and awareness of available resources for intervention and treatment.<sup>16</sup>

Fund	Dollar Amount
CAPIT Los Angeles Community Child Abuse Counsel	90,000

The Inter-Agency Council on Child Abuse and Neglect (ICAN) is duly appointed by the Los Angeles County Board of Supervisors as the Commission that makes funding recommendations for the Children's Trust Fund. The local CAPCs are funded through the Los Angeles Community Child Abuse Councils Coordination Project (LACCACCP) which is funded by a CAPIT program contract in the amount of \$90,000.00 through Assembly Bill 2994 (AB2994).

**PSSF Collaborative:** Los Angeles County Department of Children and Family Services (DCFS) is the agency designated to carry out the functions of the Promoting Safe and Stable Families (PSSF) Program. DCFS worked with service providers, which acted as the collaborative to conduct the needs assessment (CSA) related to prevention services in Los Angeles County and identify strategies to address unmet prevention needs and the use of CAPIT/CBCAP/PSSF funds. As a result, Los Angeles County uses PSSF funding to support Adoption, Promotion, and Support Services, Family Preservation, Family Support, Child Abuse Prevention and Intervention Treatment and Time-Limited Family Reunification programs.

<sup>16</sup> See Attachments Part 2-B1 for a list of CAPC members..

**CCTF Commission:** Please refer to ICAN section above.

**Parent Consumers:** Parent consumers have been an integral part of the California Children and Family Services Review (C-CFSR) process and have been included in all aspects of it. Their input is highly valued in identifying parent needs specific to provision of Child Welfare Services and Probation services. Specifically, during the CSA process parents took an active role in participating in focus groups to discuss the needs of the Department and future contract development. Also, input is consistently received as parents are members of the CAPCs and they meet on a regular basis to discuss concerns regarding problems of child abuse and family violence.

The contract with the community based agencies requires that the contractor “*hold Community Advisory Council (CAC) meetings quarterly to discuss and review community services*”. The contract defines the CAC “*as a group of community representatives, stakeholders, parents/caregivers, and residents from the community who conduct ongoing reviews of the services offered by the agency*”. There is no requirement on the part of the agency to provide financial assistance or stipends for the parents’ participation.

CAPIT parent participation and leadership for activities and trainings is provided through the Quality Assurance Quarterly Meetings that each agency conducts quarterly. It is during these meetings that parents state their experiences, concerns and recommendations for the improvement of agency programs. This input helps agencies plan funding and program changes. In PSSF programs participation/involvement is provided through exit interviews and follow-up phone calls to clients who have completed services and surveys are given to program clients. No program financial support is provided to these parents who participate in these meetings or for their completion of surveys.

**Designated Public Agency:** On July 2, 2003, Los Angeles County, Board of Supervisors delegated authority to the Director of the Department of Children and Family Services to provide CAPIT services. The Director of the Department of Children and Family Services was delegated authority on July 26, 2005 for Community-Based Child Abuse Prevention (CBCAP) funds, and Promoting Safe and Stable Families (PSSF) funds. The role of Director of DCFS is to monitor subcontractors, integrate local services, monitor fiscal compliance, data collection, prepare amendments to the county plan, prepare annual reports and outcomes evaluation.

**Role of the CAPIT/CBCAP/PSSF Liaison:** The Department of Children and Family Services has a designated Division Chief who serves as the liaison to ensure that all program, fiscal, and statistical requirements are met in a timely manner. The oversight of all the programs except Adoption Promotion and Support Services are within the Department’s



Community Based Support Division. The oversight of the Adoption Promotion Support Services Program is under the Department's Adoption and Permanency Resources Division. Each program has a designated Program Manager to work with the liaison on day to day operational program issues.

Contact Information:

DCFS Community Based Support Division, Division Chief  
Department of Children and Family Services  
425 Shatto Place, Los Angeles, CA 90020  
E-mail: garrma@dcfs.lacounty.gov

The Division Chiefs are responsible for compiling data. In Los Angeles County Department of Children and Family Services (DCFS) this is achieved by social work and administrative staff using reports generated from CWS/CMS to track compliance. Additionally, information about services provided to parents and children, as part of the Alternative Response Services (ARS [PSSF]) and Family Preservation services (FP [PSSF]), is tracked in the Family Centered Services billing system<sup>17</sup>.

The Department of Children and Family Services (DCFS) tracks services provided to parents as part of the Time Limited Family Reunification (TLFR [PSSF]) and the Adoption Promotion and Support programs (APSS [PSSF]). All CAPIT/CBCAP/PSSF services are provided within the larger case-planning context and include routine opportunities for case conferencing with the families and others involved in the case. Data on CAPIT/CBCAP/PSSF services are aggregated for the purposes of internal program monitoring and reporting to OCAP.

DCFS will provide an annual progress report in a timely manner, using a format provided by OCAP.

DCFS will provide quarterly reports and expenditure data on the County Expense Claim.

DCFS will keep data based on all contracts for each fiscal year, and will keep the corresponding record in accordance with the records retention schedule developed by the Department. DCFS will also submit a list of email addresses to OCAP for all agencies that have a CAPIT/CBCAP/PSSF contract with DCFS. Additionally, OCAP will be notified within 30 days if there are any changes in the liaison.

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<sup>17</sup> Web-based system developed in (year) where agencies can submit their billing and both agency and DCFS can track spending.

**Fiscal Narrative:** The County maintains fiscal accountability through reporting requirements of subcontractors and internal Department checks and balances. Community providers receiving CAPIT/CBCAP/PSSF funds are under contract with the County and are obligated to comply with fiscal and program requirements including monthly submission of invoices and submission of any other information or report requested.

The Contract Accounting Section in the Accounting Services Division is in charge of establishing encumbrances for each agency based on the authorized contract awarded by the County Board of Supervisors. Each agency is paid according to the terms and conditions stated in the contract. In addition, the County Fiscal Manual and other guidelines issued by County Auditor-Controller's Office provide internal control tools to satisfy future audits that are required. The Encumbrance and Payment process contains a multi-level approval system, which is as follows:

Each payment requires review and approval by Program Manager and at least one accounting supervisor on the actual invoice. The payment will be data entered into the County on-line payment system with approval from two additional accounting supervisors or managers.

The accounting staff reconciles the expenditure reports on a monthly basis. All payments are processed through on-line Countywide Accounting and Purchasing System (CAPS) and the invoices and payment records are stored in a designated storage space by fiscal year.

DCFS CAPIT/CBCAP/PSSF program analysts monitor the monthly expenditures/ invoices for each program and inform contract agencies via meetings, telephone, and written correspondence in the event that there are program under or over expenditures. The DCFS Accounting staff process all invoice payments through the Countywide Accounting and Purchasing System (CAPS) and the invoices and payment records are stored in a designated storage space by fiscal year for five (5) years and then archived. Effective July 1, 2005, CAPS began electronically storing fiscal data was renamed Electronic County Accounting and Purchasing (E-CAPS).

Due to the multiple funding sources (i.e., Federal, State, and net County cost) allocated to community-based agencies to provide PSSF services, DCFS established specific cost centers to ensure fiscal accountability. In addition, community-based agencies will submit invoices to DCFS and DCFS will submit County Expense Claims to CDSS, using the Program Codes (i.e., 515 Family Preservation, 516 Family Support, 675 Adoption Promotion and Support, and 676 Time-Limited Family Reunification) as instructed in County Fiscal Letter (CFL) No. 01/02-37.

As required by CDSS and federal legislation, Los Angeles County plans to achieve and maintain compliance with the federal spending requirement, which allocates a minimum of 20 percent of the total PSSF funding to the four (4) service categories. By clearly delineating the distribution of funds in the service contracts, Los Angeles County will ensure compliance with federal spending guidelines for PSSF. The County maximizes funding by leveraging and investing county funds (Net County Cost) into the community based, contracted network service delivery system. In the Family Preservation Program contracts the Net County Cost funds are used for both Alternative Response Services (ARS) and Family Preservation Services. Additionally, the County uses, as part of its Title IV-E Waiver Demonstration Capped Allocation Project Plan, dollars to leverage and invest in the community based contracted services.

**Local Agencies- Request for Proposal:** The Department of Children and Families Services (DCFS) followed the requirements for funding eligibility as outlined in Welfare and Institutions Code Section 18961. DCFS, as the designated public agency to provide CAPIT/CBCAP/PSSF programs, provides the following assurances:

1. A competitive process was used to select and fund programs.
2. Priority was given to private, nonprofit agencies with programs that serve the needs of children at risk of abuse or neglect and that have demonstrated effectiveness in prevention or intervention.
3. Agencies eligible for funding provided evidence that demonstrates broad-based community support and that proposed services are not duplicated in the community, are based on needs of children at risk, and are supported by a local public agency.
4. The project funded shall be culturally and linguistically appropriate to the populations served.
5. Training and technical assistance shall be provided by private, nonprofit agencies to those agencies funded to provide services.
6. Services to minority populations shall be reflected in the funding of projects.
7. Projects funded shall clearly be related to the needs of children, especially those 14 years of age and under.
8. County complied with federal requirements to ensure that anyone who has or will be awarded funds has not been suspended or debarred from participation in an affected program.
9. Non-profit subcontract agencies have the capacity to transmit data electronically.
10. Priority for services shall be 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.
11. Agency funded shall demonstrate the existence of a 10% case or in-kind match, other than funding provided by the CDSS.

## Community-Based Child Abuse Prevention Program (CBCAP) Outcomes

Community-Based Child Abuse Prevention Program (CBCAP) funding was granted to Los Angeles County to increase community awareness of existing prevention services and to strengthen community and parental involvement in child abuse prevention efforts. Los Angeles County expends these funds for their Alternative Response Services (ARS) Program. The ARS Program provides services to families with inconclusive findings of child abuse/neglect, but who remain at risk and are in need of preventive services. ARS is designed to provide families with Family Preservation (FP) services, which focus on the needs and functioning of the family unit. Parents actively participate in their case plan via a case conference to determine what services are needed to assist families to function at their optimum level. Services are delivered in a comprehensive and coordinated manner that allows for restructuring based on the client's needs. Parents have an integral part in the implementation of services as this program promotes open communication between the families and their service providers so services can be tailored as needed.

Upon conclusion of ARS, families are offered the opportunity to complete a client satisfaction survey. The FP program manager reviews the surveys to improve accountability, service delivery and effectiveness based on qualitative criteria and data collection. The County's Children's Social Workers and community based Family Preservation Program providers use a web based system to request, extend and terminate services. This system allows the County to pull data on the number of clients served, services rendered and outcome indicators for families. Further, the County has recently begun an evaluation of all Family Preservation providers with a goal of determining the efficacy of the various service delivery models in relation to performance outcomes and cost effectiveness. Stage 1 of the evaluation is targeted to be completed by December 2011 with further stages to be completed by October 2012. The first stage of the evaluation will include both a qualitative and quantitative component. The qualitative component will be accomplished by conducting surveys of Children's Social Workers and Supervising Children's Social Workers that includes, but not limited to, questions regarding agency interaction with families and access to services. The quantitative component will look at outcomes for families receiving Family Preservation Program services. The County currently has a secondary data system, which the County will review in the next quarter, to see if the current data entry fields sufficiently track intermediate and Short-term or Engagement outcomes. Additionally, the County will work with the providers over the next year to enhance and/or develop another mechanism to track intermediate and Short-term or Engagement outcomes as needed. Further, the providers currently offer the client a satisfaction survey to complete, which also captures these outcomes.

The main goal of ARS, as part of the Family Preservation Program, is to target the child welfare outcomes of Safety, S1.1 No Recurrence of Maltreatment.

**Peer Review:** The Department of Children and Families (DCFS) continues its process of remodeling its contracting model for CAPIT/CBCAP/PSSF programs to integrate the programs into one service delivery system. As currently outlined, the model includes a governance board that includes community partners to help direct DCFS in the service delivery process. Peer review will be considered as part of that governance board. Currently DCFS conducts technical reviews of contracted community based providers, which includes a review of case files.

DCFS utilizes a Steering Committee and a monthly meeting with contracted agencies as a venue for contractors to provide input on their service delivery. The Department convenes a monthly contractor meeting the third Thursday of every month. The Steering Committee is comprised of one contractor representative from each of the eight Los Angeles County Service Planning Areas (SPA) and a representative from the contracted agency serving the Native American population.

Facilitated by DCFS the contractors discuss practice issues and provide each other suggestions on best practices. This information is then shared at the larger monthly contractor forum for input from the larger body of contracted agencies. For example, best practice for clinical supervision of In-Home-Outreach Counseling was discussed as well as how the various contractors deliver services under the Substitute Adult Role Modeling contract service deliverable.

**Service Array**

The Department of Children and Family Services’ programs funded through the CAPIT/CBCAP/PSSF are provided through out the county. The description, funding source, target population and services array for each program is listed in Table 1.

**Table 1: Description of CAPIT/CBCAP/PSSF funded services.**

STRATEGY	Adoption Promotion and Support Services (APSS)
FUNDING	PSSF and NCC, allocation divided by SPA, and provided to 8 contracted agencies holding a total of 12 contracts.
TARGET POPULATION	Children and families going through adoption process; adopted families. This is a resource available to all children's social workers where the issue is permanence.
DESCRIPTION	The specific goal of the APSS Program is to increase permanency for children in Los Angeles County. Contracted APSS agencies provide support to children and adoptive families to nurture lifetime commitments, to ensure permanency for children, to expedite the adoption process, and to reduce disruption of adoption. Case management services ensure a service plan designed to strengthen and preserve the child and/or family.
SERVICE ARRAY	<p><u>Individual, Group and Family Therapy:</u> This is therapy for families who are either matched with a child or have a child placed in their home. Clinical issues to be addressed include issues of loss, rejection and abandonment, guilt and low self-esteem, anger and resentment, split loyalty, embarrassment, transference and projection, sabotage, birth parent involvement, trust and attachment issues, adjustment difficulties, redefining boundaries and relationships, and understanding why "traditional" parenting does not often work with children of abuse and neglect, and guidance regarding successful parenting.</p> <p><u>Adoptive Parent Mentor Program:</u> This program provides mentoring to parents who have adopted children.</p> <p><u>Support and Discussion Groups:</u> These groups shall be provided in both English and Spanish for: (1) prospective and new adoptive parents (including kin-adopt parents); (2) children (including children who have an alternative permanent plan of adoption) to discuss concerns, issues, frustrations, experiences, and successes related to everyday family life and child rearing.</p> <p><u>Case Management Services:</u> These services include determining which service is needed and available to address the families needs, developing in partnership with the family a written individualized service plan, conducting ongoing case reviews, documenting the family's progress, and providing follow-up services, when appropriate.</p> <p><u>Linkage Services:</u> These are services, which include, but are not limited to the following: Childcare services; health care services; mental health services; physical and developmental services; Regional Center services; educational services; special educational services; income support services; and transportation services.</p>

STRATEGY	<b>Alternative Response Services (ARS)</b>
<b>FUNDING</b>	CBCAP, allocation divided by SPA, and provided to 40 contracted agencies with a total of 75 contracts and located in 64 delivery sites countywide.
<b>TARGET POPULATION</b>	Families with inconclusive findings of child abuse/neglect, but who remain at risk and are in need of preventive services.
<b>DESCRIPTION</b>	Provides Family Preservation services to families with referrals where the investigation resulted in inconclusive or substantiated findings of child abuse/neglect, with an SDM score of low-to-moderate risk. Also, the family is in need of preventative services in order to avoid promoting the referral to a case.
<b>SERVICE ARRAY</b>	Please refer to the Family Preservation Service Array section.

STRATEGY	<b>Child Abuse Prevention, Intervention and Treatment (CAPIT)</b>
<b>FUNDING</b>	State funding through AB 1733 and AB 2994. Allocation is divided by Supervisorial Districts to 40 contracted agencies holding a total of 83 contracts.
<b>TARGET POPULATION</b>	Services provided to families who are identified as high risk, including families who are being serviced by the Department for being abused and neglected and other families who are referred to services by legal, medical, or social services agencies.
<b>DESCRIPTION</b>	This program derives from two legislative initiatives - AB 1733 and AB 2994 (Statutes of 1982). AB 1733 authorizes state funding for child abuse prevention and intervention services offered by public and private nonprofit agencies. CAPIT has established the following goals: Identify and provide services to isolated families, particularly those with children five years and younger; provide high quality home visiting programs based on research-based models of best practice; deliver services to child victims of crime; and, support Child Abuse Councils in their prevention efforts.

STRATEGY	Child Abuse Prevention, Intervention and Treatment (CAPIT) cont'd
SERVICE ARRAY	<p><u>Individual, family and group counseling:</u> Counseling may take place in the home, at a center, or other location that provides best access for the child and family. Counseling includes psychosocial assistance to help raise awareness and understanding, solve problems, develop insight, change behaviors, become knowledgeable about available community resources, and, ultimately, strengthen the family to nurture and care for itself. Counseling is prevention focused, with the goal of assisting families to avoid entry into the public child protective services and dependency court systems.</p> <p><u>Parenting education and support groups:</u> These groups provide interactive parenting skills instruction. A professional level instructor trained in the prevention of child abuse and neglect and parenting techniques facilitate the groups. Agencies must demonstrate how the parenting groups meet the particular needs of the agency's families. Parenting groups are for a minimum of 20 sessions conducted over a period of no less than 20 weeks. Parents receive instruction and training on anger management, impulse control, building self-esteem, cultural differences in child rearing practices, communication skills, child and adolescent development, human sexuality, positive discipline, and age appropriate expectations. Agencies must administer a pre and post test to the parent, and evaluate the skills and knowledge gained by the parent.</p> <p><u>In-home services, including counseling, crisis response, and teaching and demonstrating homemaking instruction:</u> This service recognizes several basic tenets:</p> <ol style="list-style-type: none"> <li>1. Families' problems occur at all hours and many isolated families are more reachable and favorably inclined to assistance when it occurs in their own homes.</li> <li>2. Visiting with a family in the home provides an opportunity for important observations that might be missed in a clinic setting.</li> <li>3. At-risk families often lack child care and transportation resources that would allow them to access services outside the home in a timely manner.</li> <li>4. Visits assist the visitor to be familiar with the neighborhood and community in which the family lives.</li> </ol> <p><u>Teaching and demonstrating</u> homemaking instruction involves instruction and assistance relative to the safe care and nurturing of the child and adequate maintenance of the home. It may include modeling appropriate play with children, assistance with organizing daily chores and shared responsibilities of members of the household, etc. Assisting a family to deal with a crisis, as well as non-crisis counseling, includes problem solving with the family, reviewing available resources and arranging/providing further help.</p> <p><u>Case management services:</u> These services involve assessment of the needs of the child and family, referral to appropriate resources and follow-up and documentation to assure that clients receive needed services. Agencies must agree to be the fixed point of responsibility for coordinating all child abuse prevention services required by the family.</p> <p><u>Twenty-Four (24)-hour telephone availability to agency's clients:</u> This service involves an "on call" system whereby clients served by a community agency can access agency staff 24 hours a day.</p> <p><u>Outreach to promote child safety, empower families and identify at risk families:</u> Outreach services may include activities and collaborations with schools, medical facilities, housing projects, youth recreation facilities, and other appropriate venues where children and families needing services may be identified. Such services are particularly important in identifying isolated families and strengthening communities to better serve all families.</p>



<b>STRATEGY</b>	<b>Family Preservation (FP)</b>
<b>FUNDING</b>	Title IV-E, PSSF, NCC, State FP, AB2994, & Kidsplate, allocation divided by SPA, and provided to 40 contracted agencies with a total of 75 contracts and located in 64 delivery sites countywide.
<b>TARGET POPULATION</b>	Families who have an open case with the Department or Probation who need services to keep their families intake or to assist in the reunification of children to their parents/guardians.
<b>DESCRIPTION</b>	(Also see Alternative Response) A comprehensive group of community-based networks and services to protect children while they remained within their homes. Services are provided for six (6) months; can be extended to one (1) year. Services are categorized into two groups of core and supplemental services.
<b>SERVICE ARRAY</b>	<p><u>Core Services:</u> These services consist of providing families with four (4) in-home outreach counseling sessions each month, developing the multidisciplinary services plan, and providing clinical supervision.</p> <p><u>Description of FP Supplemental Services/PSSF</u></p> <p><u>Child Focused Activities:</u> These are age-appropriate activities (i.e., parenting and/or anger management classes) designed to enhance a child's growth and development and are provided at the same time the parents are receiving FP services.</p> <p><u>Child Follow Up Visit:</u> This is a subsequent visit provided to a family whenever one of their children is absent during an In-Home Counseling Session.</p> <p><u>Counseling Services:</u> These are face-to-face meetings/interventions by a counselor with an individual, couple, family, or group to: (1) help identify and assist in solving family problems; (2) identify substance abuse and refer for treatment; (3) address and treat domestic violence or anger management issues; and (4) help identify personal, vocational or educational goals.</p> <p><u>Drug Testing:</u> This service involves drug testing of urine samples for parents or primary caregivers whose drug use/abuse has contributed to their inability to care for their children.</p> <p><u>Emergency Housing:</u> This is temporary housing that is provided for a family up to four (4) days.</p> <p><u>Parenting Training Services/Fatherhood Program:</u> These are services that support and enhance parenting skills through training in areas such as: (1) anger management; (2) impulse control; (3) child development; and (4) alternative discipline.</p> <p><u>Substance Abuse Assessment and Treatment:</u> These are services provided for alcohol and drug treatment recovery services to eligible clients.</p>

STRATEGY	Family Preservation (FP) cont'd
SERVICE ARRAY	<p><u>Substitute Adult Role Model Services:</u> These are services in which trained adult mentors are paired with children and youth to: (1) foster positive behavior through the mentor's example; and (2) broaden the children's recreational, social, and educational dreams through shared experiences.</p> <p><u>Teaching and Demonstrating Homemaker Services:</u> These are services in which a worker demonstrates and teaches primary caregivers the skills to successfully manage and maintain a home, including, but not limited to, home safety, cleanliness, meal planning, and budgeting.</p> <p><u>Transportation Services:</u> This is a service to provide transportation to families to a specific service site by means of agency passenger vanpool, private vendor, or bus fare/pass.</p> <p><u>Linkage Services:</u> These are services, which include, but are not limited to, connecting families with the following: alcohol and substance abuse treatment services; mental health services; childcare services; educational services; employment/training services; health care services; Healthy Start support services; housing services; income support services; Partnership for Families Initiative; physical and developmental services; Regional Center services; self-help/family support groups; special education; and PSSF services.</p>

STRATEGY	Family Support (FS)
FUNDING	PSSF and NCC, allocation divided by SPA, and provided to 13 contracted agencies holding a total of 18 contracts.
TARGET POPULATION	Children and families in the community and who have open cases with the Department.
DESCRIPTION	Family Support services are coordinated, multi-disciplinary, community-based services to promote the well-being of children and families. Family Support is designed to increase the strength and stability of families (including adoptive, foster and extended families), to increase parents' confidence and competence in their parenting abilities and afford children a stable and supportive family environment. These services are to prevent to the extent possible, the out-of-home placement of children by DCFS by providing parenting, family activities and assistance to families at risk.

STRATEGY	Family Support (FS) continued
SERVICE ARRAY	<p><u>Emergency Basic Support Services:</u> These services assist families with daily life necessities, such as, vouchers to purchase clothing, utilities, food, furniture, household items, or school items, transportation services, housing assistance, and minor home/car/appliance repair and gasoline.</p> <p><u>Structured Parent-Child and/or Family-Centered Activities:</u> These are group activities to improve parent-child and/or family relationships. These activities are designed to teach families how to: spend quality time together, facilitate positive parent-child and family interaction, share, and interact with the community. These activities will also include recreational and social activities such as field trips, parent-child or family dinners, recreational activities, holiday gatherings, etc.</p> <p><u>Employment Services:</u> These services are designed to improve a family's ability to obtain employment to meet their basic needs. These services include, but are not limited to, remedial education, career and vocational counseling, employment preparation and job training, and assistance with finding employment.</p> <p><u>Health, Parenting, and/or Other Education Programs:</u> These are services to help families attain and maintain optimal functioning and family health including, but not limited to, parenting skills, problem solving and communication skills, coping with stress, family literacy, household management and budgeting, and meal planning and food preparation.</p> <p><u>Case Management Services:</u> These services include determining which service is needed and available to address the families needs, developing in partnership with the family a written individualized service plan, conducting ongoing case reviews, documenting the family's progress, and providing follow-up services, when appropriate.</p> <p><u>Linkage Services:</u> These are services, which include, but are not limited to, connecting families to the following: alcohol and substance abuse treatment services; childcare services; domestic violence services; health care services; housing services; mental health services; Regional Center services; and special education services.</p>

STRATEGY	Time Limited Family Reunification Services (TLFR)
FUNDING	PSSF
TARGET POPULATION	Parents who are in need of substance abuse treatment services with an open DCFS family reunification case whose children have been placed in out-of-home care 15 months or less, and not eligible for other funding sources for substance abuse treatment services.
DESCRIPTION	DCFS entered into a Memorandum of Understanding (MOU) with Department of Public Health (DPH) Substance Abuse Prevention and Control (SAPC) for the enhancing of, through funding, the access and availability of alcohol and drug assessment and treatment services for DCFS families who are eligible to receive PSSF Time-Limited Family Reunification services. The intent of the MOU is to connect DCFS families with timely, intensive and responsive drug and alcohol treatment and recovery services in order to shorten the time it takes for them to reunite with their children.

STRATEGY	Time Limited Family Reunification Services (TLFR) continued
<p><b>SERVICE ARRAY</b></p>	<p>Eight Community Assessment Service Center agencies (CASC) with 19 CASC assessment sites provide Substance Abuse Assessment &amp; Referral Services to ten treatment provider agencies that have 40 treatment facility sites throughout Los Angeles County.</p> <p>Substance Abuse Treatment (residential/outpatient) services include: case management, treatment planning, coordinate with DCFS, provide parenting training, individual and group counseling, nutrition counseling, job skill training, family sessions, grief and loss, live skills, relapse prevention, domestic violence counseling if necessary, provide reports to the courts, and drug testing.</p>

## Attachment I

# Peer Quality Case Review (PQCR) Summary

The Peer Quality Case Review (PQCR) process provides opportunities for examining county child welfare system through a focused area of social work practice. The PQCR gathers qualitative data through the experiences and expertise of peer county child welfare, probation staff and community stakeholders. Interviews and focus group sessions provided information on the strengths and areas needing improvement of county child welfare and probation child welfare, service delivery and practices.

From June 7-11, 2010, Los Angeles County Department of Children and Family Services (DCFS) and Probation Department (Probation) in collaboration with California Department of Social Services (CDSS), conducted its PQCR, where dependency and delinquency child welfare representatives from nine peer counties across the state, participated in looking at policies and practice regarding the chosen topic area. The topic area chosen for the PQCR was permanency for Transitional Aged Youth defined as: "Of all children in foster care during the year who were either discharged to emancipation or turned 18 while in care, what percentage had been in foster care for three years or longer." Fifty cases, 36 from DCFS and 14 from Probation, were reviewed throughout the process. Fifty individual staff interviews were conducted and 16 focus group sessions were completed as part of the PQCR process.

## Findings

### Practice Strengths

Information gathered throughout the PQCR process identified some supports and practices, which have helped youth, find permanency; one of which is Family Finding. Family Finding consists of specialized work in the area of identifying important people in a youth's life, making a connection, and exploring a permanent, committed relationship. Another is Team Decision Making (TDM) meetings. TDMs occur in both DCFS and Probation child welfare systems. The PQCR participants found that mentoring is also a good support for transitional aged youth.

Throughout PQCR interviews and within focus group sessions, the commitment of passion and creativity of DCFS and Probation staff was highlighted as a plus in supporting youth and effectively matching services to their needs. It was noted that staff worked with the youth to coordinate Transitional Housing and Wraparound services, both of which were identified as positive practice resources. DCFS Youth Permanency (YP) units and Probation Permanency units were included in noted positive practices. The permanency units are comprised of children social workers who have a reduced caseload and specialize in family finding and engagement strategies. Focus for the units are placed on older foster youth

## **Attachment I**

with limited or no family connections, who also have identified behavioral, substance, or mental health concerns. Probation's On-Site Program with Group Homes was seen as an effective and promising practice. The On-Site Deputy Probation Officer is stationed at the Group Home and their caseload is comprised of the youth residing at the home.

### Practice Challenges

The PQCR identified challenges for transitional age youth, in the areas of housing, employment, and education. Basic needs were highlighted as a challenge as well as finding adoptive and guardianship placements for the youth. Furthermore, it was noted that a lack of documentation and communication between parties in the case and across systems, led to a reduced understanding by DCFS and Probation staff of DCFS and Probation staff of where the youth was in the permanency continuum as well as services and resources available to support the youth. It was also noted that the concept of concurrent planning was unclear or misunderstood, which may directly impact timeliness to permanency. Some identified barriers to full utilization of supports were confidentiality, limitations in data systems and placement regulations. Qualitative data indicated that relatives struggle to meet State mandated placement eligibility requirements and become frustrated by circumstances beyond their control, which may influence permanency outcomes for transitional youth.

### Recommendations

Taking into consideration the information gathered through the PQCR process regarding strengths and challenges, the following recommendations were made:

- 1) Partnership: DCFS and Probation working together to enhance services and expand resources,
- 2) Training: Cross-systems training between agencies could include identification of communication options, knowledge of role and operation of each agency, elimination of confidentiality barriers to information sharing, and leveraging of resources for youth.
- 3) Permanency: Consideration of permanency options for youth, which includes foster homes for Probation foster youth, and strategies addressing barriers with regard to relative and foster home placements.
- 4) Practice: Further utilization of successful practices currently in place such as Transitional Housing, Youth Permanency Units and Wraparound programs.

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### 5) Relative Caregiver: Address systemic and policy issues regarding relative caregiver approval and funding.

Parties involved in the PQCR suggested that by building on a culture of acknowledgment and acceptance of children and youth from both departments as “our kids,” regardless of what system has primary responsibility, services and resources would be amplified. Partnerships among department staff, youth and caregivers, as well as public and private agencies, provide a strong support network for transitional youth. Additionally, the PQCR process highlighted the need to further utilize of successful practices currently in place such as Transitional Housing, Youth Permanency Units and Wraparound programs.

#### Outcome Impact

The PQCR process includes consideration of the impact of findings on child welfare outcome measures. The practice strengths identified impact permanency; therefore it would seem that Family Finding and Youth Permanency Units would have a direct impact on Federal measures that address permanence such as, Adoption Composite, Long Term Care Composite, and Permanency Connection with an Adult. It is likely that Wraparound programs have a positive impact on Least Restrictive Placements measure. Addressing noted challenges identified through the PQCR in areas of basic needs may affect outcomes in Federal measures of Individual Education Plan, high school education, employment, and housing.

Through the Peer Quality Case Review process, information was shared regarding the importance of communication between DCFS, Probation, stakeholders, and the community. Also, practice challenges demonstrated a noted need for greater awareness and understanding of all supports and services available for the youth in order to fully meet the needs of the identified focus population. A coordinated support and service effort by public and private entities would likely have positive impacts on multiple Federal Measure areas.

## Attachment II

# DCFS County Self-Assessment Executive Summary

The California Department of Social Services (CDSS) established the California Outcomes and Accountability System (COAS) in January 2004. The purpose of COAS is to strengthen the accountability system used in California to monitor and assess the quality of child welfare services. COAS is based upon principles of on-going quality improvement, interagency partnerships, community involvement, and program outcomes.

### County Self-Assessment (CSA):

The CSA, which is developed every three years, is a comprehensive review of each county's child welfare services system. It includes analysis of qualitative and quantitative data. Integrated into the CSA, is a needs assessment of Child Abuse Prevention, Intervention and Treatment (CAPIT), Community-Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) programs.

### Purpose

The purpose of the CSA is to analyze local programs and systemic factors and to examine their impact on child welfare outcomes. Included in the CSA, is information related to CAPIT/CBCAP/PSSF<sup>1</sup> funding sources aligned with services, basic criteria for those services, and analysis of the service provided. While public child welfare services delivery is the sole focus of DCFS in Los Angeles County, Probation and DCFS are active partners sharing many of the same Federal, State and County mandated and outcomes for foster youth. The two departments collaborate in the writing of the County Self-Assessment.

### Methodology

The County Self-Assessment includes both qualitative and quantitative data analysis. Qualitative data is captured through stakeholder engagement (e.g., meetings, focus groups, and convenings). Qualitative data is also captured through the Peer Quality Case Review which was held in June 2010 and had a general focus on permanency for Transitional Aged Youth.<sup>2</sup> Quantitative data is gathered primarily from the Child Welfare Services/Case Management System (CWS/CMS) as well as other local, County administered data systems.

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<sup>1</sup> Child Abuse Prevention, Intervention, and Treatment/ Community-Based Child Abuse Prevention Program/ Promoting Safe and Stable Families

<sup>2</sup> Federal Measure C3.3 "Of all children in foster care during the year who were either discharged to emancipation or turned 18 while still in care, what percentage had been in foster care for three years or longer."



## Attachment II

### Qualitative Information:

Qualitative information included County strengths:

- Youth and families have the necessary skills to navigate the DCFS system; and
- Providers partner with child or family throughout their involvement with child welfare.
- There are ample teaming opportunities; and
- Good relationships with external partners.
- Team Decision Making and Family Findings are supported by committed and passionate staff; and
- DCFS and Probation focus on permanence.

Qualitative information included County areas for possible improvement:

- Unrealistic expectation of client change in short timeframes;
- Private and public agency staff lacking linguistic ability and cultural understanding needed to meet the needs of the clients; and
- Agencies not having the capacity to meet the needs of special populations.
- There are ample teaming opportunities, but challenges in actual team work;
- In the process of collaboration there are barriers to full sharing of information between various County agencies and sharing with service providers; and
- Internal and external partners do not understand each others roles and responsibilities.
- Sharing of case specific information:
  - There are barriers to full sharing of information between workers and agency partners; and
  - Database systems have limitations to full sharing of information.
- Lack of resources: Staff and clients lack up-dated information regarding current services and resources available through different systems; fiscal constraints have put limitations on some resource availability.

### Quantitative Information

As indicated above, quantitative information is gathered primarily from the Child Welfare Services/Case Management System (CWS/CMS). Table 1 highlights a portion of child safety, permanency and well-being outcome measures which guide the CSA. The County has improved performance trends in several areas; percentage removals from home, reunification within 12 months, 8 days to 12 month placement stability and child well-being areas. Priority areas for focus identified in Table 1 include No maltreatment in

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DCFS foster care, Reunification/Re-entry component, and placement stability measures. Self-Sufficiency/Permanency measures of Youth in Care 3 years or longer, has shown consistent positive trends towards lessening the percentage of emancipating/age 18 youth who have been in foster care 3 years or longer. However, as a part of system improvement, the Department is focused on enhancing strategies to move the County percentage (60.2%) closer to the National standard (37.5%).

**Table 1<sup>3</sup>**

Outcome	Measure	Performance <sup>1</sup>	Baseline Q2 '07	Current Q2 '10	Change	Nat. Avg	National Standard
Improved Child Safety	Number of Child Referrals		14,014	14,697	4.9%	N/A	N/A
	Percent Removals from Home		3.2%	3.9%	5.4%	7.0%	N/A
	No Recurrence of Maltreatment for Child (S 1.1)		93.4%	93.4%	0%	93.3%	94.6%
	No Maltreatment in DCFS Foster Care (S 2.1)		99.81%	99.46%	-0.4%	99.52%	99.68%
Increased Permanency	Reunification within 12 months (C 1.1)		61.3%	66.9%	9.1%	69.9%	75.2%
	Adoption within 24 months (C 2.1)		24.6%	23.8%	-3.3%	26.8%	36.6%
	Exits to Permanency (Legally Freed at Exit) (C 3.2)		96.7%	96.7%	0%	96.8%	98.0%
	Youth in Care 3 Years or Longer (Emancipation/Age 18) (C 3.3)		66.6%	60.2%	-9.6%	47.8%	37.5%
	Re-entry following Reunification (C 1.4)		10.7%	12.4%	15.9%	15.0%	9.9%
	Placement Stability (8 Days to 12 Months Care) (C 4.1)		87.3%	85.6%	-1.9%	83.3%	86.0%
	Placement Stability (12 - 24 Months in Care) (C 4.2)		72.2%	66.6%	-7.8%	59.9%	65.4%
	Placement Stability (At least 24 Months in Care) (C 4.3)		39.1%	38.7%	-1.0%	33.9%	41.8%
Child Family Well-being	Timely Social Worker Visits with Child (2C)		92.1%	95.2%	3.4%	62.5%	90.0%
	Sibling Placement – All (4A)		47.4%	51.5%	8.7%	N/A	N/A
	Sibling Placement – Some or All (4A)		70.5%	72.6%	3.0%	N/A	N/A
	Timely Medical Visits 5B (1)		87.5%	90.5%	3.4%	N/A	N/A
	Timely Dental Visits 5B (2)		67.3%	74.0%	10.0%	N/A	N/A

<sup>3 3</sup> RED denotes negative performance trend; Yellow denotes either improved performance since the last CSA or current performance above the national standard; GREEN consistent performance improvement since the last CSA.

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In order to put performance outcomes into perspective information related to DCFS participation rates is helpful.

Table 2 shows that children, age five and younger represent the highest participation rates in each of the categories listed. As a vulnerable population, their involvement with child welfare services is aligned with the Department’s goals of safety, permanency and well-being for children, as well as strategies of early childhood intervention and building parent protective capacity. Due to the high representation of children age five and under, goals and strategies directed towards this segment of DCFS’ child population provide an opportunity for impact on outcome measures.

**Table 2:** Participation number and rate by age and area of child welfare (CY 2009 rate per 1,000)<sup>4</sup>

Age Group	Number and rate of Children with Referrals		Number and rate of Children with Substantiations		Number and rate of Children In-Care		Number and rate of Children In-Care with First Entry	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate
<b>Under 1</b>	7,621	52.0	2,976	20.3	1,710	11.7	1,687	11.5
<b>0-2</b>	13,406	47.1	3,666	12.9	1,667	5.9	1,459	5.1
<b>3-5</b>	20,362	47.1	4,773	11.0	1,822	4.2	1,480	3.4
<b>6-10</b>	33,820	45.7	7,242	9.8	2,368	3.2	1,805	2.4
<b>11-13</b>	35,053	43.8	7,090	8.9	2,317	2.9	1,578	2.0
<b>14-17</b>	12,929	36.4	2,344	6.6	813	2.3	536	1.5
<b>Total</b>	<b>123,191</b>	<b>44.7</b>	<b>28,091</b>	<b>10.2</b>	<b>10,697</b>	<b>3.9</b>	<b>8,545</b>	<b>3.1</b>

DCFS Participation Rates: Referrals, Substantiations, Entries, and Caseload:

UC Berkeley CWS/CMS Dynamic System data for the first two quarters of 2007 to 2010 reflect that DCFS has seen a gradual increase in referrals, substantiations and entry rates. (Table 3) The rate increases remain below state-wide outcome figures for the same measures. Referral rates as incidence per 1,000 have increased by 1.4% in Los Angeles County, while the state-wide performance for this measure decreased by 2.3%. Quarter 2 (Q2) 2007 to Q2 2010 figures for substantiation rates increased by 5.2% and entry rates increased by 5.4% in Los Angeles County. The state-wide performance for these measures show more than 13% decline rate. While the County has experienced increased volume of referrals, substantiation and entry rates, in-care rates in Los Angeles County have substantially decreased, 20% during this review period and by almost 49% since the year 2000.

Table 3	Q2 2007	Q2 2008	Q2 2009	Q2 2010
<b>Referral Rates</b>	44.1	45.8	46.1	44.6
<b>Substantiation Rates</b>	9.7	9.6	9.5	10.1
<b>Entry Rates</b>	3.7	3.9	3.6	3.9
<b>In Care Rates</b>	8.4	8.2	7.4	6.7

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**DCFS Child Welfare Work**

Considering child welfare work, information related to child abuse/neglect allegations in Los Angeles County assists with understanding DCFS staffing, service array, and strategies. During calendar years 2007, 2008, and 2009 DCFS has seen an increase in nearly every category of child abuse; the only exception being substantial risk (Table 4). Highest increases in the past three years are in allegations of Sexual Abuse (42.2%) and Emotional Abuse (34.5%). The highest percentages of allegations are found in the category of General Neglect, followed by At-Risk/Sibling Abused and Physical Abuse.

**Table 4:** Child abuse allegations (Data source CWS/CMS Dynamic Reporting System, UC Berkeley)

	Jan.-Dec. 2007		Jan.-Dec. 2008		Jan.-Dec. 2009		Percentage Difference Since the last CSA
<b>Sexual Abuse</b>	8,305	6.4%	11,230	8.7%	11,165	9.1%	42.2%
<b>Physical Abuse</b>	23,800	18.4%	26,442	20.5%	24,869	20.2%	9.8%
<b>Severe Neglect</b>	1,671	1.3%	1,621	1.3%	1,730	1.4%	7.7%
<b>General Neglect</b>	34,400	26.6%	38,327	29.8%	36,916	30.0%	12.8%
<b>Exploitation</b>	83	0.1%	61	0.0%	90	0.1%	0.0%
<b>Emotional Abuse</b>	10,922	8.4%	12,682	9.8%	13,861	11.3%	34.5%
<b>Caretaker Absence/Incap.</b>	3,796	2.9%	3,367	2.6%	2,663	2.2%	-24.1%
<b>At Risk Sib.</b>	23,188	17.9%	26,833	20.8%	28,094	22.8%	27.4%
<b>Substantial Risk</b>	23,314	18.0%	8,243	6.4%	3,803	3.1%	-82.8%
<b>Total</b>	129,479	100.0%	128,806	100.0%	123,191	100%	

**Service Array DCFS Child Welfare**

Child welfare services are provided on a continuum and aligned with the needs of the child and family. At various points during a child and family’s engagement with the County, from the time a referral is received through permanence, services are offered. Services vary in their purpose, the population being served and funding sources. Detailed information related to service array begins on page 136 of the full CSA.

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### Department of Children and Family Services Agency Characteristics

In order to address the safety, permanency and well-being needs of children and families, DCFS staff works in collaboration with other public and private entities.

The Department of Children and Family Services (DCFS) operates on a budget of \$1.8 billion. DCFS is comprised of 4 Services Bureaus, an Office of Medical Director, a Bureau of Strategic Management, an Executive Office, a Bureau of Finance and Administration and 19 DCFS Offices. Currently, DCFS has a workforce of 7,323 employees including 3,511 Children's Social Workers (CSW) and 410 Supervising Children's Social Workers (SCSW).

#### Staffing Characteristics

Since FY 2007-2008, DCFS has seen a trend towards increased staff stability. (Table 5) An attrition rate of under 4% in 2010 demonstrates that DCFS is nearer the current National turnover rate of 3.2% reported for February 2010, (Job Opening and Labor Turnover Survey (JOLTS) US Bureau of Labor Statistics, February 2010). However, DCFS is challenged more by staff transferring between DCFS offices than from attrition. Internal staff movement, leads to some DCFS offices having a higher percentage of inexperienced workers or more frequent worker change on child cases.

**Table 5:** DCFS staffing attrition

Fiscal Year	Overall Attrition Rates
2007-2008	7.29% (231)
2008-2009	3.76% (120)
2009-2010	4.67% (149)
2010-2011*	3.92% (125)

\*from July 2010 to December 2010

### Collaborations in Child Welfare

#### School Districts and Local Education Agencies:

DCFS and Probation have active partnerships with Los Angeles County Office of Education, Foster Youth Services (FYS) and the Los Angeles Unified School District (LAUSD), through Foster Youth Liaisons. DCFS has collaborative programs in the following school districts: Azusa, El Monte, Hacienda La Puente, Montebello and Pomona. Social workers are placed on campus at selected schools in these districts to provide stronger educational support to DCFS youth attending those schools.

#### Law Enforcement

DCFS has staff co-located in law enforcement settings and has established Law Enforcement Liaisons to help with efforts to investigate child abuse. In the future, DCFS

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plans to co-locate Children Social Workers 24 hours a day, 7 days a week at law enforcement agencies in neighborhoods with the highest volume of child abuse and neglect referrals. The following is the current list of law enforcement agencies in which staff is co-located:

- Los Angeles Police Department: Harbor, Hollenbeck, Mission, Newton, Police Administration Building (HQ), Rampart, Southeast, Southwest and Wilshire Divisions;
- Los Angeles Sheriff Department: Carson, Century, Compton, Industry, Lancaster, Norwalk, Pico Rivera and Walnut Stations; and
- Independent Police Agencies: Azusa, Baldwin Park, El Monte, Long Beach, Pomona and Whittier Stations.

DCFS also has a specialized team of social workers who assist law enforcement called Multi-Agency Response Team (MART). MART works in collaboration with law enforcement to provide emergency protective services to children identified in homes associated with high levels of illegal gang, firearm and narcotic activity; as well as investigation of other high profile child endangerment cases.

### County Agencies

The implementation of the Linkages Project in the County is an example of a partnership between DCFS and the Department of Public Social Services (DPSS) that is designed to provide comprehensive, individualized services to families. Linkages support families in achieving the goals of self-sufficiency and safety for their children when being served by DCFS and DPSS.

Medical assessments are completed on all newly detained children through Medical Hubs located in Department of Health Services (DHS) facilities throughout Los Angeles County. High-risk children and children from infancy to three years of age must be examined within the first 72 hours of their initial placement. All other children are to have their Initial Medical Examination within the first 30 days of their initial placement. Public Health Nurses (PHN) are co-located within each regional DCFS office to help assure that children's medical needs are met.

DCFS along with other County departments (e.g., Department of Mental Health [DMH], the Department of Health Services [DHS], Probation Department, and the Department of Public Social Services [DPSS]) collaborate to remove barriers to services and to assist children and families in receiving appropriate, timely support. Mental health issues within a family can be stressful to all involved. MAT assessments and Up-Front Assessment (UFA) focus on the psychological needs of children and families. Children System of Care (SOC), a collaborative effort between DMH, DCFS, and Probation, as well as school districts, parents, and communities, is an intensive, comprehensive and innovative program that works by preventing children from being removed from their families when faced with behavioral and emotional challenges.

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### Contracted Collaborations

Los Angeles County is dependent on interagency collaboration and resources in order to meet the child safety and well-being needs of children engaged with DCFS. Funding sources are aligned with types of services and often define criteria for services. Under CAPIT/CBCAP/PSSF<sup>5</sup> funding, not-for-profit contractors are utilized in the provision of prevention programs (e.g., CAPIT, Alternative Response Services). Under PSSF funding, Family Preservation, Family Support and Time-Limited Family Reunification services are provided, including Family Preservation services for Probation youth.

### Grants

In Los Angeles County, public and private sectors collaborate on child welfare services through a variety of grants. Currently, DCFS is working in collaboration with internal and external partners on nine grants. Four grants focus on outcomes related to child permanence and five grants have a focus on outcomes related to child well-being. The department's engagement in grants provides increased fiscal resources, staffing resources and service resources for children and families.

### **Quality Assurance**

The following data tracking systems and projects assist the department in quality assurance.

The Adoption and Foster Care Analysis and Reporting System (AFCARS): A Federally mandated data collection system intended to provide case specific information on all children covered by the protections of Title IV-B/E of the Social Security Act (Section 427).

Katie A. Implementation Plan: Describes the systematic process by which all children in new and currently open DCFS cases are screened for mental health needs, and if screened positive, are assessed for mental health services.

National Data Archive on Child Abuse and Neglect (NDACAN): A resource since 1988, NDACAN promotes scholarly exchange among researchers in the child maltreatment field.

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<sup>5</sup> Child Abuse Prevention, Intervention, and Treatment/ Community-Based Child Abuse Prevention Program/ Promoting Safe and Stable Families

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National Youth in Transition Database (NYTD): Los Angeles County, in cooperation with the State of California utilizes CWS/CMS for data input, to satisfy the Federal Department of Health and Human Services (DHHS) regulations requiring data collection and reporting for the Chafee National Youth in Transition Database (NYTD).

Residentially Based Services Demonstration Project: Los Angeles County participates in the State's group home reform effort. In May of 2010 a claim and payments tracking system was finalized which allows for quality controls of this project.

Title IV-E Waiver Demonstration Capped Allocation Project (CAP): DCFS is involved in the Waiver Project and began the first sequence of the project on July 1, 2007. The Waiver is scheduled to end on June 30, 2012. With the Waiver, DCFS builds upon existing innovative practices to create a more responsive and comprehensive array of services and supports. Probation utilizes the Waiver to engage in family-centered, evidence-based practices. Regular tracking of outcomes related to waiver initiatives and fiscal cost neutrality are monitored on a monthly basis.

County CAPIT/CBCAP/PSSF Program Accountability and Oversight: In the CAPIT/CBCAP/PSSF programs, DCFS program staff provides telephonic and on-site technical reviews to community-based agencies to ensure contract compliance. Quarterly CAPIT and Family Services (FS) Circle of Support meetings, monthly Family Preservation (FP) Roundtable meetings, and monthly/quarterly network meetings are conducted to provide the agencies with technical assistance from DCFS program staff. The meetings also provides the agencies with the opportunity to come together to share ideas, discuss program issues and enhance their existing community-based networks, and resolve identified problems.

Quality Assurance: Contractors: The DCFS staff of Family Preservation, CAPIT, and Family Support all performs Technical Reviews for quality assurance. Time Limited quality assurance is performed by the Department of Public Health for Substance Abuse Prevention and Control. This quality assurance relates to service deliverables.

To most effectively evaluate and support the CAPIT/CBCAP/PSSF programs in Los Angeles County, DCFS developed various methods in which to evaluate goals and outcomes.

- Site Visits, which include review of the goals and services as noted in the agency's statement of work, technical support, and encouragement toward program enhancements such as outreach activities;
- Regular Support Forums, which allow for networking among the various agencies, discussion of successes, and sharing of 'lessons learned'; thus enhancing knowledge which in turn aids in developing recommendations for further program and policy enhancement; and
- Client Satisfaction Surveys, which assess engagement, short-term, intermediate and long-term goals.



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### **Quality Assurance: Internal**

Core Practice Model: The Department of Children and Family Services has embarked on the development of a Core Practice Model which reflects the values, principles and standards to improve the consistency of the Department's approach to working with children and families.

Continuous Quality Improvement (CQI) Plan Do Study Act (PDSA): CQI is a quality assurance process that creates a forum in which managers, staff and invited others; engage in analysis and planning regarding office-based initiatives and practices. A component of CQI is the use of Plan Do Study Act (PDSA), which involves taking an idea about a need or area of focus, establishing a goal and developing a small pilot process from which analysis can be obtained. PDSAs are currently utilized in DCFS offices.

### Managing for Results-Data Driven Decision Making

Child welfare agencies have been collecting data for years, but it hasn't been until more recently that child welfare agencies are discovering the power of data for promoting practice improvement. Data driven decision making goes beyond required data reporting into establishing techniques to analyze the wealth of data available and subsequently applying gained knowledge to strategically plan and establish department priorities.

As such, DCFS is implementing a DCFS STAT process, in order to strengthen the Department's ability to manage towards a set of consistent and prioritized data; create opportunities at the office, bureau, and executive levels to discuss challenges, and share best practices. Two forms of data will be used in the STAT process; quantitative data gathered from various data tracking systems and qualitative data gathered through the Department's Quality Service Reviews (QSR) discussed below. By combining the qualitative and quantitative data DCFS staff will be better equipped to understand, discuss, and act upon data trends and analysis. Implementation of the "live" STAT process is scheduled by end of calendar year 2011.

### Quality Service Review (QSR)

Quality Service Review is a method for appraising the current status of persons receiving child welfare services. Case reviews are completed by engaging in record review and interviews with all parties involved in a child case. An established set of indicators measure the status of a child involved in a case, while other indicators measure the status of the child welfare system. The QSR process was implemented in Los Angeles County DCFS in late 2010 as part of the Department's exit criteria to document system performance improvement under the Katie A. Strategic Plan. The QSR process has been completed in five of the 19 DCFS offices, with a plan to complete a review of the additional offices throughout 2011 and early 2012.

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### Summary-DCFS Child Welfare

The County has demonstrated positive outcomes or performed above the National standard for the following measures:

- C 1.3. Reunification within 12 months (19.4% increase);
- C 2.3. Adoption within 12 months<sup>6</sup> (46.2% increase);
- C 2.4. Legally free within 6 months (33.3% increase);
- C 2.5. Adoption within 12 months (legally free) (21.1% increase); (Above the National Standard)
- C 3.1. Exits to Permanency (24-months in care) (38.5% increase); and
- C 3.3. In care 3 years or longer (Emancipated/ Age 18) (9.6% decrease).
- C 4.2. Placement Stability (12 to 24 months in care). (7.8% decrease but remains above the National Standard)

#### Permanency

In the past decade, the County has made significant strides in reunification and other permanency outcomes. The median time to reunification (C1.2) has been reduced by 65.3% since 2000 (from 8.2 months to 7.6 months) and 196.4% more children are now reunified within 12 months (C1.1). The Department is making concerted efforts to safely reunify children in a timely manner and the long term increase in this measure attests to the sustained efforts being made to continue reunifying children.

The Adoption and Permanency Resources Division (APRD) implementation of adoption data tracking of milestones has led to increases in performance in three of the adoption composite measures cited above. Milestone tracking allowed for practice changes to be implemented as challenges were identified. An example of this is when challenges were revealed in timeframes from Termination of Parental Rights (TPR) to the filing of TPR documents. Changes in the process were implemented that removed previous barriers. Continued data tracking is in place in order to sustain or improve on current levels.

Wraparound was able to meet the following two out of four Permanency Outcomes: The first being, 88% of children who have graduated from Wraparound are placed with their parent, legal guardians or other relatives at the time of their graduation; (88% did so) and the second being, 91% of children remain with their families six months after graduation from Wraparound.

Although current outcome measures show that during this period of review, the County has been able to reduce the number of children in care for three years or longer Los

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<sup>6</sup> In care for 17 continuous months or longer and were not legally freed for adoption on the first day of the period, who then became legally freed w/in the next 5 months.

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Angeles County remains well below the National standard performance of 37.5%. Further focus on this measure will include utilizing current prevention programs, building parent capacity, and family finding efforts.

### Safety

DCFS performs above the National standards in completing timely response on immediate and ten day referrals. Wraparound, Alternative Response Services, Family Preservation Services and Adoption Promotion support services were all able to show that more than 90% of participants in the programs did not have a reoccurrence of substantiated substance abuse during the time they were receiving services nor within 12 months following service ending. Child contacts for the Department show compliance rates regularly in the 90 percentile or above.

For the past two years, DCFS has been challenged by timely closure of Emergency Response referrals. In July of 2009, the Department began an internal review of the ER process and implemented a plan to enhance ER investigations. The enhanced ER investigation process included additional work requirements, which stalled timely closure of referrals. The Department developed strategies addressing barriers to ER referral closure adjusted staffing as needed to complete ER investigations. Currently the Department has seen a steady decrease in ER referrals remaining open for over 60 days.

### Well-being

Wraparound was able to achieve all of its well-being outcomes: 68% percent of children functioning at grade level or above from previous year; and 78% of children maintain at least 80% school attendance rate or better from the previous year.

### **Focus Areas for Improving Performance: System Improvement Plan**

On the following performance measures the County showed trends that prompt further review:

- C 1.4. Re-entries following reunification;
- C 3.3 In Care 3 Years or Longer (Emancipated/Age 18) (Self-Sufficiency)
- C 4.2 Placement Stability for children in care for 12 to 24 months; and
- C 4.3 Placement Stability (At Least 24 Months in Care)
- 8 A Exit Outcomes for Youth Aging Out of Foster Care (self-Sufficiency)

Guided by PQCR and CSA findings, as well as input from stakeholders, the four areas of focused improvement selected by DCFS for the upcoming System Improvement Plan (SIP) are detailed below. System improvement strategies and analysis for each outcome area will include examination of disproportionality, with emphasis on African American children and youth involved in child welfare.

#### **1. Reunification: Re-Entry Component:**

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Los Angeles County's outcome for the re-entry measure has declined by 15.9% since the last period of the County Self-Assessment review. One challenge with the County's increased performance in reunification outcomes is the possibility of increased re-entry into the child welfare system. Efforts to increase reunification, such as Up Front Assessments, Family 2 Family, Family Preservation, and Parents in Partnership, have all done their part to help with the County's performance. The next step is working to maintain reunification once it occurs.

Literature review shows that there is a correlation between re-entry and certain types of allegation, specifically substance abuse and general neglect. DCFS is currently involved in multiple programs and workgroups that are focused on matters related to substance abuse; Time Limited Family Reunification, DPH Substance Abuse Prevention and Control, and Dependency Court Family Substance Abuse treatment Program, to name a few. In addition, re-entry is more likely when the family is not ready for reunification, if there is a lack of sustainable support or if the child has behavioral or psychiatric issues that require special parenting skills. Literature also suggests that re-entry is more likely for families with higher numbers of children, and when unanticipated family changes occur.

The County's System Improvement Plan will focus on the following strategies:

- Redirect alcohol and drug testing funds to screening, assessments and treatment.
- Utilize readiness measures related to reunification for families with substance abuse risk factors to build parent protective capacities (factors).
- Build reunification TDM process inclusive of specific data analysis, readiness assessment and after care case planning.
- Sustain the use of Up Front Assessments (UFAs).
- Enhance Family Preservation Program Evaluation
- Continued Expansion of Wraparound

### **2. Self-Sufficiency/Permanency: Children in Foster Care for 3 years or longer (Self Sufficiency)**

Although current outcome measures show that during this period of review, the County has been able to reduce the number of children in care for three years or longer Los Angeles County remains well below the National standard performance of 37.5%. Further focus on this measure will include utilizing current prevention programs, building parent capacity, and family finding efforts.

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The County's System Improvement Plan will focus on the following strategies:

- Improve current data tracking systems and reporting process for youth
- Mental Health Screening and Assessment
- Newly detained children receive comprehensive needs assessment.
- Implementation of the California Partners for Permanency (CAPP) Grant

Another self-sufficiency performance area involves a measure with no National standard; 8A Exit Outcomes for Youth aging out of foster care specifically in the areas of completing a high school education/GED and securing employment. Education success is a part of the DCFS definition of child well-being. Young adults, readying themselves to leave foster care will need an education and employment opportunities to be self-sufficient. Los Angeles County has established a self-sufficiency workgroup to address this issue. Key to understanding the current status of youth exiting from foster care includes clarity related to data collected regarding the youth. DCFS is challenged in being able to provide comprehensive data related to exiting youth. The County's System Improvement Plan will address improved data collection, therefore leading to increased ability to meet exiting youth needs.

### **3. Placement Stability: Children in care for 12-24 months.**

Los Angeles County's performance regarding placement stability for children in care for 12 to 24 months has declined by 7.8% since the last County Self Assessment. Placement stability for those in care at least 24 months has decreased by 1.0%. The decreasing trends are cause for attention since placement stability has been the focus for key County programs, Katie A Implementation, and Wraparound efforts for DCFS.

In addressing placement stability, the Katie A. Implementation Plan has focused County attention on mental health service delivery for children and families. Current mental health assessment and service delivery rates for newly detained children are between 96% and 98%. Although a direct correlation is not possible, there is an expectation with the identification of needs and subsequent service delivery, there will be an increased ability to maintain a child at home or stable in placement. Wraparound efforts, especially with high risk, R12 and R14 level placements have been successful in reducing the number of Group Home placements and subsequent placement changes. Continued implementation of the Katie A. strategies and expansion of Wraparound services are planned for in the County's improvement plan.

Literature review identifies Kinship placement as being more stable than other types of out-of-home care. Currently approximately 49% of the County's children

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in out-of-home care are placed with relatives. There is room to increase the percentage of County placements with relatives. Other kin-placement areas for consideration are first time relative care placements and relative placements for American Indian/Alaskan Native (AI/AN) children. A decrease of 29.5% was seen during this period of review for first time relative placements and a decrease of 21.3% of AI/AN children being placed with relatives was seen during the same period of time. With the decrease in placement stability and the decreases in relative placements, combined with consideration of relative placement as being more stable, further review of kin-placement is planned for the County's improvement plan.

### Organizational Excellence

DCFS has a robust data tracking and reporting system currently in place. Through the Department's research unit, a number of outcome measures are tracked, and aggregate data is reported via the County's intra-net web-site or distributed to Departmental managers. The current challenge for the Department is in the interpretation and analysis of data received and subsequent use of data to consistently managing for results. Child welfare is increasingly looking at ways to measure effective service delivery. With that in mind, the County's system improvement plan will include within it, implementation of a DCFS STAT data analysis process that will look to integrate data with a supporting management plan.

- DCFS Stat process: DCFS is implementing a DCFS "comp stat" process, in order to strengthen the Department's ability to manage towards a set of consistent and prioritized data; create opportunities at the office, bureau, and executive levels to discuss challenges, and share best practices.
- Core Practice Model: It is expected that implementation of a DCFS Core Practice Model, with supporting practice guides for various social work roles (e.g., Hotline, Emergency Response, Continuing Services, and Adoptions and Permanence), will bring consistency to child welfare practice throughout the Department.

### Eliminating Racial Disparity and Disproportionality (ERDD):

Racial disparity and disproportionality, especially as it relates to African American Children in the child welfare system are observed during this current County Self-Assessment. While the African American segment of the population makes up eight percent (8%) of the population of Los Angeles County, nearly thirty percent (30%) of DCFS current active cases are African American children. DCFS has been working on addressing the issue of Disparity and Disproportionality through the Efforts to Reduce Racial Disproportionality and Disparity (ERDD) program and the Breakthrough Series Collaboratives (BSC). The Breakthrough Series, related to ERDD has shown success in addressing some of the disproportionality issues in the Pomona DCFS office and there are County policy efforts and department workgroups in place to focus efforts on addressing disparity and disproportionality throughout the department.

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**Probation County Self-Assessment Executive Summary**

Assembly Bill 636 enacted the Child Welfare Services Outcome and Accountability Act of 2001, which required the California Department of Social Services (CDSS) to establish the California Outcomes and Accountability System (COAS). The purpose of COAS, which was implemented in January 2004, is to strengthen the accountability system used in California to monitor and assess the quality of services provided to children and their families and improve outcomes. The COAS is based upon the principle of ongoing quality improvement, interagency partnerships, community involvement, and public reporting of program outcomes. Therefore, the California Child and Family Services Review was established to ensure implementation of the CAOS.

The C-CSFR consists of 5 components that are based on triennial cycle:

- 1) Outcome and Accountability County Data Reports
- 2) Peer Quality Case Review (PQCR)
- 3) County Self Assessment (CSA)
- 4) System Improvement Plan (SIP)
- 5) State Technical Assistance and Monitoring.

The purpose of the CSA Report is for Los Angeles County to analyze local program operations and systemic factors and to examine its impact on child welfare outcomes from 2008 through 2011. The first section of the CSA discusses CSA Membership, which are external and internal stakeholders who provide input, feedback and recommendations to the assessment process. This section also details Los Angeles County demographics, Service Planning Areas (SPAs) and Participation Rates. The youth that are the subject of this report are those residing in foster care, which for Probation foster youth is Group Homes and Relative/Non-Related Extended Family Member (NREFM) homes. Currently, we have 938 youth residing in Group Homes and 55 residing with relatives or NREFMs. This section also discusses Public Agency Characteristics, such as Probation's size and structure, staff turnover, private contractors, relationship with tribes, schools and law enforcement, emergency shelters, licensing and adoption agency.

The next section focuses on the PQCR process, findings and recommendations. The PQCR was conducted in June 2010, and the focus was foster youth age 17.5 and above in care three years or longer who were aging out of the system with no permanency connections. The overall recommendations made for DCFS and Probation were 1) Improved collaborative efforts; 2) Integration of and attainment of resources; 3) Cross-Systems Training and 4) Utilizing and building on ILP Services/Transitional Housing, Mentoring, Youth Permanency Units, Team Decision Meetings and the Wraparound program and 5) Improving and changing systemic/policy issues regarding relative caregiver approval and

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funding. These recommendations will feed into the SIP in alignment with Title IV-E Waiver Goals.

The third section is Child Welfare Outcomes, which Probation was only able to report on internal data collected for Probation foster youth. Currently, data is not being entered into PCMS or it is entered inaccurately (example, Indian youth are categorized as Hispanic or Black). Increased data training will be a focus of the SIP. The data extracted for this section comes from CWS/CMS in partnership with the University of California, Berkeley Center for Social Services Research. Currently, this information is inaccurate for Probation foster youth. Since we now have access to CWS/CMS, we will be able to report more comprehensively as more probation data is gathered in this system. This is an area of improvement that will be included in the SIP.

The child welfare outcome measures that Probation reported on are as follows:

**Safety: Children are, first and foremost, protected from abuse and neglect**

**S2.1 No Maltreatment in Foster Care**

All Probation Placement DPOs conduct monthly visits with each child placed in a group home or a relative/non-relative home. The average number of Probation officer visits, as appropriate, per child in placement or with an active child welfare case is one time per month (each 30 day period). According to the Placement Permanency and Quality Assurance (PPQA) database, the compliance rate for this measure is at a consistent average of 98%. The PPQA Group Home Monitoring Unit also plays a large part in this measure in that there are several layers of reviews and investigations that take place in group homes throughout the year:

**Probation Table 1: Child Abuse Investigations**

<b>Findings</b>	<b>Yearly Average</b>	<b>CY 2009</b>	<b>CY 2010</b>	<b>Percent Change CY 2009-10</b>
No. of Referrals	33	40	25	-37.5%
Substantiated	7	10	4	-60%
Inconclusive	4	6	4	-33%

Child Abuse Investigations: Completed any time there is an allegation of child abuse in a group home or relative/non-relative home and the allegation is reported to the County Child Abuse Hotline. A child abuse referral is created and routed to Probation. The investigation is immediately assigned to a PPQA



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monitor to investigate. The monitor conducts an investigation within 48 hours or sooner, depending upon the circumstances. Once the investigation has been completed and a finding made, a report is written and sent to the PPQA Group Home Monitoring supervisor for approval. The report is then sent to DCFS for entry into the CWS/CMS system and closure of the case. The referral remains open until Probation has conducted and completed the investigation.

Many times child abuse investigations turn into Group Home monitoring investigations due to potential Group Home contract or Title 22 State regulation violations. Violations requiring a corrective action plan by the group home are completed to further ensure the safety of each youth. The Group Home Monitoring Unit receives an average of 32.5 child abuse referrals per year, with an average of 7 referrals resulting in findings of substantiated and 4 resulting in findings of inconclusive. In 2009, there were 40 child abuse referrals, with 10 of those referrals resulting in findings of substantiated and 6 resulting in findings of inconclusive. In 2010, there were 25 child abuse referrals, with 4 of those referrals resulting in findings of substantiated and 4 resulting in findings of inconclusive. This decrease is directly related to the enhanced supervision of the Group Home Monitoring Unit regarding investigations and monitoring reviews beginning in 2010.

With Probations increasing access to CWS/CMS, the current system that DCFS has with Probation will change. PPQA Group Home Monitors who conduct the investigations will be trained and will ultimately enter into the system their completed investigation, which will be sent to the supervisor for approval. This process will not take place until the current MOU has been revised and all staff trained and issued tokens.

**Probation Table 2: Group Home Investigations**

<b>Findings</b>	<b>CY 2009</b>	<b>CY 2010</b>	<b>Percent Change CY 2009-10</b>
Number of Investigations	135	97	-28%
Substantiated	47	31	-34%
Inconclusive	20	8	-60%

Group Home Investigations: These investigations occur anytime there is an allegation that the Group Home violated the Group Home contract, Title 22 State regulations or Department policies and protocols. Once a group home has a substantiated claim, they are placed under a corrective action plan with a variety of corrective measures to bring their staff and their facility up to the standard and then are closely monitored to maintain that standard. In 2009, 135 Group Home

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Monitoring investigations were completed with 47 of those resulting in findings of substantiated and 20 of those resulting in findings of inconclusive. In 2010, 97 Group Home Monitoring investigations were completed with 31 of those investigations resulting in findings of substantiated and 8 resulting in findings of inconclusive. Anytime there is a negative finding, the Group Home is required to submit a comprehensive Corrective Action Plan, with the possibility of being placed on a “HOLD” status, which stops any placements of youth until the issues have been resolved. Additionally, the Group Home Monitoring Unit take a proactive approach with increased informal “follow-up” inquires when minor concerns arise. These “follow-up” inquiries have increased from 136 in 2009 to 217 in 2010, which has directly affected the decrease in Group Home Monitoring investigations.

Group Home Monitoring Reviews: As of July 2010, the Probation Department conducts annual monitoring reviews on each group home. The monitor uses several review tools, including youth interviews and review of all personnel files to ensure complete compliance with the Group Home Contract. At the end of the review, an Exit Conference is held to discuss all areas of deficiency and require a Corrective Action Plan in a timely manner. A follow-up visit is made by the monitor to ensure that all deficiencies have been corrected.

**Permanency: Children have permanency and stability in their living situations without increasing reentry to foster care.** Process Measure 2C – Timely Social Worker/ Probation Officer Visits with Child

Residential Based Services (RBS) Placement DPOs maintain a 98% compliance rate for monthly visitation of all youth in out-of-home care. The Placement Officers typically make initial contact with each child and their family within the first week of placement. The Placement Officer solidifies a concurrent plan within the first 30 days of the case and makes referrals for family finding and permanency as early as possible.

**Probation Table 3: Permanency Referrals**

Referrals	CY 2009	CY 2010	Percent Change CY 2009-10
Number of RBS Referrals	47	119	153%

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In 2010, the rate of referrals for permanency planning to PPQA increased significantly. In 2009, there were approximately 47 referrals made for family finding or permanency planning through adoption or legal guardianship. In 2010, there were approximately 119 referrals made. Therefore, the Placement DPOs are very concerned and prioritize finding a permanent and stable family for every youth they supervise. Creating hope for each youth assists with placement stability.

**Permanency Composite 2:**

- Measure C2.1 – Adoption within 24 Months (exit cohort),**
- Measure C2.2 – Median Time to Adoption (exit cohort),**
- Measure C2.3 -- Adoption within 12 Months (17 months in care),**
- Measure C2.4 – Legally Free within six Months (17 months in care),**
- Measure C2.5 – Adoption within 12 Months (legally free)**

**Probation Table 4: Permanency Cases**

<b>Case Count</b>	<b>Oct 2010</b>	<b>Feb 2011</b>	<b>Percent Change CY 2009-10</b>
Total Number of Cases	104	140	35%
Number undergoing Family Finding Searches		115	
Number involved in Media-Based Recruitment		3	
Number involved in Adoptive Planning		4	
Number planning for Legal Guardianship		18	

As the referral base for family finding, recruitment efforts, and adoptions grow, there will be more data to assist in determining performance outcomes and improvement in timeliness to permanency. Therefore, adoption with 24 months will be more realistic. Both adoptions completed by Probation were finalized within 24 months of their placement order; however, it had been much longer from the time they were removed from their home. There are 3 current cases where the youth is legally free and recruitment has begun, but again, the timeframe is well outside the measure from the time the youth was removed from their home. Due to the Permanency Collaboration Committee, these cases are coming to our attention much more quickly, increasing timeliness to permanency.

The PPQA Unit has had a significant increase of active cases that are at various stages of permanency (family finding, media-based recruitment, legal

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guardianship and adoption). In October 2010, the case count was 104, and as of February 2011, the case count is 140. Of those cases, 115 are undergoing family finding searches, including the utilization of search engines such as Lexis Nexus and U.S. Search, 3 are involved in Media-Based Recruitment, 7 are in adoptive planning and 18 are planning for legal guardianship. Each of the 6 Permanency Officers has an average of 23.33 cases. As a result of the collaborative permanency efforts by the Probation Department and DCFS, the third adoption, in the history of delinquency Court, for the Nation, was achieved on April 22, 2010. Probation has completed 2 adoptions and 5 home study processes. There is currently a case that is set for adoptive placement hearing in March 2010, with a perspective date of finalization by the end of 2011. This will be the fourth delinquency adoption in the Nation.

**Permanency Composite 3:** Measure 3 (C3.3) – In Care 3 Years or Longer (emancipation/age 18); **Permanency Composite 4:** Measure 8A — Children Transitioning to Self-Sufficient Adulthood

**Probation Table 5:** Youth Receiving Independent Living Program (ILP) Services

	<b>CY 2010</b>	<b>%</b>
Total No. of Youth Eligible	3,784	
No. Receiving Services (39% of Total No. Eligible)	1,466	100%
Unwed Mothers	293	20%
Unwed Fathers	52	3.5%
Completed HS Diploma/GED/Adult Education	218	15%
Currently enrolled in HS/GED/Adult Education	664	45%
Currently enrolled in college	63	4%
Obtained employment Full-time: 23    Part-time: 89	112	8%
Living independently of maintenance services	58	4%
Had at least one episode of homelessness	253	17%

In June 2010, Los Angeles conducted its third PQCR, which was focused on Transitional Youth in care 3 years or longer and aging out with no permanent connections. There is an average of 300 youth in Transitional Housing annually. In 2010, there were 3,784 youth who were eligible for ILP services. Of those who were eligible, 1,466 received services. Of the 1,466 eligible youth, 293 were

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unwed mothers of at least one child, and 52 were unwed fathers with at least one child. Two hundred eighteen probation foster youth completed their High School diploma/GED/Adult Education. Of the 1,466 eligible youth, 664 are continuing or currently enrolled in High School/GED/Adult Education, and 63 are enrolled in college. There were 112 youth who obtained employment; 23 obtained full-time employment and 89 obtained part-time employment. There were 58 youth living independently of maintenance services; however, there were 253 who had a least one episode of homelessness. This continues to be a challenge for our youth and evident of systemic issues and barriers.

With regard to children preparing to transition to Self-Sufficient Adulthood, Probation’s Youth Development Services has a Transitional Independent Living Plan team that meets with every youth with a pending disposition for or ordered into foster care. A Transitional Independent Living Plan (TILP) is completed for each youth. PPQA statistics and TILP Unit statistics reveal a consistent 99% compliance rate of completed TILPs.

**Permanency: The continuity of family relationships and connections is preserved for children.** Process Measure 4E – Rate of ICWA Placement Preferences

Placement DPOs continually assess all youth on their caseload for American Indian/Alaskan Native (AI/AN) heritage, every 6 months or more if new information surfaces. According to PPQA statistics, there is a 99% compliance rate that every youth is assessed for Indian heritage. In 2010, there were 6 youth that revealed American Indian heritage. It is felt that there are many more AI/AN youth within the Probation population, who under report due to various issues including identification with another race such as Hispanic or African American or embarrassment or fear of being identified as different from others.

**Well-being: Children receive services adequate to their physical, emotional, and mental health needs.** Process measure (3) 5F –Psychotropic Medications

**Probation Table 6:** Reports Written on Youth Receiving PMA from Court

Case Count	CY 2010	%
No. of Requests (Monthly Avg)	265	100%
For youth in Group Home Care	125	47%
For youth in Residential Treatment Camps	120	45%
For youth residing at home	9	3%
For youth in juvenile hall waiting for disposition	11	4%

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Unfortunately, there is no reliable tracking mechanism to provide the number of youth that are currently taking psychotropic medication; however, there is a tracking system in place for reports written on youth who have received a Psychotropic Medication Authorization (PMA) from the court. Placement Administrative Services (PAS) statistics reveal that there is an average of approximately 265 requests per month for PMAs from the court. Of those requests, 125 are for youth in group home care, 120 are for youth in residential treatment camps, 9 are for youth who are residing at home under the court's supervision and jurisdiction and 11 are for youth in juvenile hall who are waiting for disposition. There is an additional process in place that upon the court issuing a PMA, the Placement DPO must submit a progress report to the court within 30 days of that order. There is an average of 100 PMA reports submitted monthly to the delinquency courts. With access to CWS/CMS, Probation data is now being entered so that in the near future, there will be reliable data to show outcomes regarding youth on psychotropic medications.

The fourth section is Systemic Factors, which details and analyzes Relevant Management Information Systems, Case Review Systems, Foster/Adoptive Parent Licensing, Recruitment and Retention, Quality Assurance, Service Array, Staff/Provider Training and Agency Collaborations. What is noteworthy is that the last CSA pointed out barriers of high placement caseloads, Placement Officers not having remote access and Probation's inability to access the statewide automated system, CWS/CMS. All three areas have improved dramatically since the last SIP that was formulated 3 years ago.

Two new important processes highlighted in this section for Placement Officers are Multi-Dimensional Team (MDT) and Team Decision Making (TDM). This section also discusses the delinquency court structure and relationship to Placement as well as the use of Family Preservation, Wrap Around, Functional Family Therapy, Functional Family Probation and Multi-Systemic therapy in relationship to effective case planning. The Diligent Recruitment Grant, which is a \$2 million dollar grant over a 5-year period, is discussed in this section. This grant has been awarded to DCFS to actively recruit adoptive families for Probation youth as well as deaf, African American, Latin American and Lesbian, Gay, Bi-Sexual, Transgender and Questioning (LGBTQ) youth. In addition to this, Probation is also in the process of the obtaining foster homes for Probation foster youth in order to further increase timeliness to permanency.

The last section is the Summary Assessment, which analyzes and discusses areas needing improvement. Concurrent planning, which promotes permanency and timeliness to adoption and legal guardianship, continues to be area that needs further training and incorporation into all case planning processes. During the PQCR, there was consistent mention that the approval process of and the funding requirement for Relatives/NREFMs must be improved. Additionally,

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there is a need for more access to CAPIT/PSSF services, since Probation youth currently have access to only 14% of PSSF funds for one program, Family Preservation.

The following strategies will be utilized to make improvements, enhance processes across the continuum of the youth's case and obtain resources for Probation foster youth:

- Development and implementation of revised detention, investigative and foster care status reports with the assistance of the Administrative Office of the Courts (AOC);
- Completion of AB938 Notification of Relatives at Detention process;
- Requesting housing options and resources through the Request For Statement of Qualifications (RFSQ) process, which include Probation Foster Family Agencies (FFA), Emergency Care Shelters (ECS), Placement Assessment Centers (PAC) and group homes specializing in services for Developmentally Disabled youth and Commercially Sexually Exploited youth;
- Implementation of AB12 to improve outcomes for Transitional Youth still in need of residential care and increasing Kin Gap services and funding to Probation foster youth through intensive and consistent tracking of relative legal guardianship cases;
- Considering disproportionality and disparity in all recommendations; and
- Implementation of a 3-phase Multi-Dimensional Treatment (MDT) process and expansion of Evidence Based Practices (FFT, FFP, MST)
- Improved tracking of eligible Kin-Gap cases, in light of the changes brought about AB12, reducing the timeline for eligibility from 12 months to 6 months.

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<b>SIP Membership</b>			
<b>Required Core Representatives</b>	<b>Participant at SIP Stakeholder Meeting</b>	<b>Recommended Stakeholders to Consult</b>	<b>Participant at SIP Stakeholder Meeting</b>
Child Abuse Prevention Councils CAPC	3	Community Action Partnership	3
County Children's Trust Fund (CCTF) Commission or CAPC if acting as CCTF Commission	2	County Alcohol and Drug Department	
Designated Agency for CAPIT/CBCAP/PSSF	3	County Children and Family Commission	1
		Court	3
County Health Department	2	Court Appointed Special Advocates	2
County Mental Health Dept.	1	Department of Developmental Services (DDS) Regional Center	
CWS Administration; Managers and Social Workers	58	Domestic Violence Prevention Provider	1
Foster Youth	7	Early Childhood Education	
Juvenile Court Bench Officer (...may or may not participate on the team...)	1	Economic Development Agency	
Native American Tribes (United American Indian Involvement Inc. (UAI))	Invited did not attend	Education	3
Parents/Consumers	6	Faith-based Communities	
Probation Administrators, Supervisors and Officers	46	Fatherhood and Healthy Marriage Programs	
PSSF Collaborative (if applicable)	3	Foundations	2
Resource Families and other caregivers	10	Law Enforcement	3
		Public Housing Authority	
		Regional Training Academy	
		Representatives from Business	
		Service Providers	4
		Teen Pregnancy Prevention Service Providers	
		Workforce Investment Board (WIB)	



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<b>SIP Membership</b>			
<b>Required Core Representatives</b>	<b>Participant at SIP Stakeholder Meeting<sup>1</sup></b>	<b>Recommended Stakeholders to Consult</b>	<b>Participant at SIP Stakeholder Meeting</b>
<b>Child Abuse Prevention Councils</b>		<b>Community Action Partnership</b>	
Children's Council	1	Chief Executive Officer	1
<b>Children's Trust Fund Commission or CAPC</b>		<b>County Children and Family Commission</b>	
DCFS Trust Fund Division	1	Commission for Children and Families	1
<b>County Health Department</b>		<b>County Counsel</b>	
Department Public Health	2	County Counsel	1
<b>County Mental Health Department</b>		<b>Court</b>	
Department of Mental Health	1	Center for Juvenile Law and Policy	2
		<b>Education</b>	
<b>CWS Administration, Managers and Social Workers</b>		Los Angeles County Office of Education (LACOE)	2
DCFS	58	Los Angeles Unified School District (LAUSD)	1
Department of Public Social Services	2	<b>Foundations</b>	
		Annie E. Casey Foundation	2
<b>Foster Youth</b>		<b>Public Defender</b>	
		Public Defender's Office	1
		<b>Public Counsel</b>	
Foster Youth	7	Public Counsel	2
<b>Juvenile Court Bench Officer</b>		<b>Service Providers</b>	
Judge Donna Groman	1	Association of Community Human Service Agencies (ACHSA)	2
<b>Parents/Consumers</b>		Avina Family Children Services	1
Grandparents as Parents	2	Bayfront Youth and Family Services	1
Parents in Partnership (PIP)	3	Children's Bureau	1
		Crittenton Services	5

<sup>1</sup> Committee Participation numbers in this document, represent those SIP members who attended and participated in a System Improvement Plan Stakeholder Engagement meeting on June 2, 2011.

<b>SIP Membership</b>			
<b>Required Core Representatives</b>	<b>Participant at SIP Stakeholder Meeting<sup>2</sup></b>	<b>Recommended Stakeholders to Consult</b>	<b>Participant at SIP Stakeholder Meeting</b>
		<b>Service Providers (cont'd)</b>	
<b>Probation Administrators, Supervisors and Officers</b>			
Probation Department	46	Diamondale Adolescent Care Facility	1
<b>Resource Families and other Caregivers</b>		Dream Catcher Foundation	1
Friends of the Family	1	Ettie Lee Homes	1
		Helpline Youth Counseling	1
		Leroy Haynes Group Homes	1
		Loving Life Homes	1
		Pacific Lodge	1
		Partnership for Families	1
		Penny Lane Center	1
		Phoenix House	1
		Rancho San Antonio	1
		Rosemary Services	1
		San Gabriel Children's Center	1
		Shields for Families	2
		Spiritt Family Services	1
		South Bay Center for Counseling	1
		Starview Adolescent Center	1
		Teen n Homes	1

<sup>2</sup> Committee Participation numbers in this document, represent those SIP members who attended and participated in a System Improvement Plan Stakeholder Engagement meeting on June 2, 2011.

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**SIP Membership**

Los Angeles County has an on-going relationship with System Improvement Planning Members, through a variety of workgroups, committees and special engagement venues. Internal and external stakeholders engage in system improvement planning not only in a variety of group settings, but at different frequencies depending on the particular group. Monthly participation opportunities i.e.; DCFS Strategy Management Core Team (external and internal stakeholders) and the Strategy Management Steering Committee (DCFS internal stakeholders) are examples of SIP membership engagements. Los Angeles County plans to continue to engage internal and external stakeholders throughout the 2011-2014 plan; monthly for on-going committees, quarterly for enhanced committee meetings and annually in greater internal and external workshop venues. In collaboration with SIP members, DCFS and Probation will consider identified SIP strategies as to implementation, impact made, necessary adjustments and next steps.

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**Current Service and Program Activities: System Improvement Plan**

Child welfare services and programs are provided on a continuum and aligned with the needs of the child and family. At various points during a child and family’s engagement with the County, from the time a referral is received through permanence, services are offered. Service and program activities vary in their purpose, the population being served, and funding sources.

SERVICES/ PROGRAMS	DESCRIPTION
<b>Alternative Response Services (ARS)</b>	Provides Family Preservation services to families with referrals where the investigation resulted in inconclusive or substantiated findings of child abuse/neglect, with an SDM score of low-to-moderate risk. Offers preventative services in order to avoid promoting the referral to an active case. Expected use of ARS will reduce entry rate through increase in community supports for children and families. Re-entry (C1.4) Placement stability (C4.2) goals.
<b>Concurrent Planning</b>	A case management method that allows caseworkers to achieve the goal of permanence (family reunification, adoption or legal guardianship) in a timely manner. It emphasizes initiation and completion of permanency tasks, as soon as the child enters placement in order to resolve the child’s temporary status without delay. Prompts teaming around permanence Re-entry (C1.4) Placement stability (C4.2) goals.
<b>Coordinated Service Action Team</b>	An administrative and teaming network within each DCFS office to align and coordinate screenings and/or referrals and ensure mental health service linkage and service delivery. Networked Coordinated Services Action Team includes a variety of child welfare stakeholders, programs and Specialized Foster Care and Linkages co-located staff. Collaboration maximizes resources.
<b>D-Rate Program</b>	The D-Rate Program identifies and assesses children with special needs, and ensures that a caregiver’s home meets the child’s identified needs in accordance with the provisions of the <u>Katie A. Settlement Agreement</u> . The initial referral for a D-rate assessment of a child is made by the CSW. After processing the referral, the initial assessments are completed by the Department of Mental Health (DMH). DMH contracts with private providers (psychologists) to go to the home and assess the child and the situation. A team composed of people involved in the child’s treatment plan, develop a plan to determine the appropriate foster home, related requirements and expectations of the caregiver and treatment modalities responsive to the results of the D-rate assessment. Accurate assessment, appropriate services and informed caregivers assist in stability of children.
<b>Dependency Drug Court</b>	Uses a team approach to working with parents involved with substance abuse and whose children have been detained by the Court. The team are those individuals otherwise named who are providing assistance/services to the parent. All families who are referred to Dependency Drug Court must agree to participate in a one year substance abuse treatment program, which includes drug and/or alcohol testing. This approach supports department strategies related to re-entry.

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<b>SERVICES/ PROGRAMS</b>	<b>DESCRIPTION</b>
<b>Eliminating Racial Disproportionality and Disparity</b>	The County's work to address racial disparities and disproportionality has key focused attention in the LA Policy Workgroup on Disparity and Disproportionality and the Eliminating Racial Disparities and Disproportionality (ERDD) Steering Committee. The ERDD Steering Committee has established several key strategies, such as developing strong and supportive leadership county-wide and at executive levels; engaging broader child welfare systems (court, law enforcement, probation); focusing on improving outcomes for African-American children; raising and spreading awareness to staff regarding racial disproportionality and disparity; analyzing racial data and rates, and engaging community partners, birth parents, and youth to ensure collaboration in the critical decisions that affect DFCS children and families.
<b>(Education) Foster Youth Liaison</b>	DCFS and Probation have active partnerships with Los Angeles County Office of Education, Foster Youth Services (FYS) and the Los Angeles Unified School District (LAUSD), through Foster Youth Liaisons. FYS are available in all school districts, assisting DCFS with search and receipt of records, and providing direct educational support services to youth. DCFS has an Education Section to assist staff in oversight of educational needs of youth enrolled in the various schools throughout Los Angeles County. Support self-sufficiency/permanency goal and strategies.
<b>Family Finding</b>	Due diligent family search and engagement to connect or reconnect youth to siblings, parents, extended family members and adult mentors, and to restore or create permanent family connections. Targets high-need youth, who have no permanency resources, limited family connections, multiple placements, substance abuse and mental health issues, and runaway behavior. Specialized Youth Permanency Units and Permanency Partners Program (P3) are trained in search and engagement strategies.
<b>Family Preservation (FP)</b>	A comprehensive group of community-based networks and services with goals of child safety and family empowerment while children remain within their home. Family Preservation (FP) provides a continuum of services that include safety measures for children in their home and empowering families to resolve their own problems. Through this, FP enhances family functioning by building on family strengths and identifying problems early and supporting the resolution of problems. FP decreases the need for system resources over time and helps break multigenerational patterns of risk for families creating greater stability and reducing rates of re-entry.
<b>Ice Breaker Program</b>	Ice Breaker Program meetings engage the birth parents and foster parents to work together towards reunification by building rapport, trust, and respect, clarifying the role of the foster caregiver, sharing information on the child's needs, planning for visitation, and other ways to involve the birth parent(s) in parental responsibilities while their child is in foster care. By opening the lines of communication and promoting a good relationship between the birth parent and foster parent, it is expected that reunification efforts and placement stability will be stronger.
<b>Kinship Care Services</b>	In collaboration with DCFS and other community agencies, Kinship Care Services provides information, resources, services and support to relative caregivers as they provide out-of-home care. Children who reside in Kinship care home experience greater placement stability.

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<b>SERVICES/ PROGRAMS</b>	<b>DESCRIPTION</b>
<b>Kinship Resource Centers</b>	Provides linkage for relative care providers to public and private community-based resources. Services include: information and referral, family enhancement, permanency planning, support groups, transportation and respite recreation. In addition, Kin Assistant Training is available through Community and Senior Services, Kinship Education, Preparation and Support (KEPS) Training.
<b>Mental Health Screening and Assessment</b>	Provides screening and assessment to DCFS children with un-met mental health needs. Those children who have a positive mental health screen are referred and linked to mental health services. Once an unmet mental health need is identified, the co-located Department of Mental Health staff completes further evaluation as applicable, identifies the best program available to meet the child's mental health need, and links the child (and family if necessary) to a mental health provider that offers the identified program. Supports assessment and appropriate service alignment.
<b>Multidisciplinary Assessment Teams (MAT)</b>	An assessment conducted by a Multidisciplinary Assessment Team which typically includes a physical, psycho-social and developmental evaluation of the child, as well as an assessment of the family's ability to function and provide a safe home environment. The Multidisciplinary Assessment Team is comprised of professionals from medical, mental health, child welfare and legal disciplines. Multidisciplinary assessments are conducted on detained children to ensure that a child's needs are appropriately identified, to assist in appropriate placement and provide caregivers with needed information for a successful placement. Information is also obtained from parents and current caregivers to assess their ability to provide care for the child.
<b>Parent in Partnership (PIP)</b>	A team effort between DCFS and parents formerly involved with the Department and who successfully reunified with their children. PIP engages, educates, and empowers parents new to the system and assists parents and DCFS staff in overcoming communication barriers. PIP also provides hands-on instruction and support allowing parents to make meaningful progress in complying with court orders, successfully bringing children home in a timely manner.
<b>Project Safe</b>	Is a collaborative effort on a proposed plan between DCFS and DPH Substance Abuse Prevention and Control (SAPC) with technical assistance from the National Center on Substance Abuse and Child Welfare (NCSACW), to redirect DCFS Alcohol and Drug Testing Program's funds to a program of screening and assessment by experts in the field of substance abuse and referral to appropriate treatment.
<b>Team Decision Making Meetings (TDM)</b>	A collaborative meeting process designed to produce the best decision concerning a child's safety and placement through the joint contributions of family members, community partners, service providers, caregivers and other support networks.
<b>Time Limited Family Reunification Services (TLFR)</b>	A collaboration between DCFS and DHS Alcohol and Drug Program Administration (ADPA) for enhancing access and availability of alcohol and drug assessment and treatment services for DCFS families who are eligible to receive PSSF Time-Limited Family Reunification services. DCFS families are connected with timely, intensive and responsive drug and alcohol treatment and recovery services in order to shorten the time it takes for them to reunite with their children, who have been placed in out-of-home care.

**Attachment V**

<b>SERVICES/ PROGRAMS</b>	<b>DESCRIPTION</b>
<b>Transitional Housing</b>	Provides housing and supportive services to emancipated foster youth age 18 through 22 years old who are homeless or may potentially become homeless due to living in temporary unstable housing, and who have no other housing options (Youth must be admitted to the program before her/his 22 <sup>nd</sup> birthday).
<b>Up-Front Assessments</b>	Up-Front Assessments (UFA) provided when a child abuse/neglect referral is at high risk for Domestic Violence, Mental Health, and Substance Abuse. Goal is to prevent unnecessary out-of-home placement by creating a thorough investigation and assessment, and where detention is necessary, to provide information to allow for meaningful case plans development. Experts in the area of Mental Health, Substance Abuse, and Domestic Violence are utilized to provide comprehensive assessments and to connect families with treatment and ancillary services in the community.
<b>Wraparound Program</b>	The Wraparound Program is a strength and community-based team approach to helping families and children get their needs met so as to achieve permanency and stability in their living situation. The principles of the Wraparound process include family voice and choice, collaboration and shared responsibility for family success, and the delivery of culturally competent, individualized services. During the implementation of the Wraparound plan of care, the team meets regularly in order to review accomplishments, assess whether or not the plan is working to achieve the desired goals, adjust services/interventions that are not working, and assign new tasks to the Wraparound team members in order to move forward with the fulfillment of the team's mission. Wraparound services will also provide a transitional phase and a transition plan, where the team determines the follow-up options that will help and support the family in succeeding outside of the formal Wraparound structure leading to greater placement stability (C4.2) perhaps reducing the rate of re-entry (C1.4)
<b>Youth Permanency Units</b>	The Youth Permanency Units focus on high-needs youth who meet several or all of the following criteria: no or limited family connections; a history of multiple recent placements; heavy involvement with substance abuse; recent psychiatric hospitalization; and a repeated history of running away. Youth Permanency Units carry a smaller caseload and try to make as much family and extended family connections as possible helping reduce the length of stay for youth in care.

**Attachment A1**

**ICAN : Leadership and Staff**

**Deanne Tilton Durfee, ICAN Executive Director, NCFR Chair**

Executive Director, Inter-Agency Council on Child Abuse and Neglect (ICAN). Ms. Tilton Durfee has been a leader in the field of child welfare and child fatality review for more than twenty years. Under her leadership, ICAN coordinates services among public and private agencies for the identification, treatment and prevention of child abuse in Los Angeles County. She is the past Chairperson of the U.S. Advisory Board on Child Abuse and Neglect.

**Edie Shulman, Assistant Director**

**Sandy DeVos, Program Administrator**

Sandy DeVos has been with ICAN since 2008. She has primary responsibility for the Child Death Review Team annual report, the coordination of the State of Child Abuse in Los Angeles County annual report, and the Infants at Risk committee. Ms. DeVos also provides staff support to the Pregnant and Parenting Teen Task Force, the Child and Adolescent Suicide Review Team, and the Safe Sleeping Task Force. She has been with the Department of Children and Family Services since 1979 and is a Licensed Clinical Social Worker.

**Lidia Escobar, ICAN and NCFR Program Administrator**

Lidia Manetta Escobar, LCSW, has a Master's in Social Work from the University of Southern California; and Bachelors Degrees in Psychology and in Criminology from University of California, Irvine. She has been with LA County since 2000 where she has worked as a Social Worker, Dependency Investigator, Supervisor and Trainer.

**Cathy Walsh, Program Administrator**

Cathy Walsh has been with ICAN since 2002. She has primary responsibility for the Safely Surrendered Baby Law Program, the Nexus Training Conference, the Child Abduction Task Force, and the Community Child Abuse Councils. Ms. Walsh also contributes to the Multi-Agency Child Death Review Team report and provides staff support to the ICAN Commercial Sexual Exploitation Victim Services Committee, and the Cyber Crime Prevention Committee.



**Attachment A1**

**Teresa Rodriguez, Administrative Assistant**

Teresa has over 20 years of Los Angeles County service with a strong background in Finance. She coordinates numerous projects and activities with procurement, vendors and program managers. Teresa is currently working for her Bachelor's in Organized Leadership at Azusa Pacific University.

**Sabina Alvarez, Secretary IV**

**Lorraine Abasta, Secretary IV**

Ms. Abasta has worked a number of clerical positions for over thirty years at MacLaren Children's Center in El Monte. Since 2002 she has worked for the Inter-Agency Council on Child Abuse and Neglect (ICAN) as a Senior Secretary IV for the ICAN Executive Director. In addition, she provides secretarial support to ICAN Associates which is the non-profit organization that supports ICAN and the ICAN Program Administrator's.

**Michael Durfee, M.D., NCFR Chief Consultant**

Dr. Durfee, a child psychiatrist, began multi-agency child fatality review in 1975 and initiated the first team in Los Angeles County in 1978. He has published in the medical literature on child death, child sexual abuse, and grief and mourning in child in survivors of fatal/severe family violence .

**Paul Click, Training Coordinator**

Mr. Click was with the Los Angeles County Sheriff's Department for 25 years, including 12 years as a supervisor of child abuse criminal investigations. He specializes in networking and database design, and has built several databases for the LA County Sheriff 's Department and other agencies. Paul is in his seventh year with NCFR.

**Laurence Kerr, Graphic Designer and Technical Coordinator**

Mr. Kerr is a graduate of ITT Technical Institute, West Covina in the field of multimedia. He is the lead designer for ICAN/NCFR publications and the coordinator for technical assistance, and web maintenance and design.

**Kenneth Rios**

Mr. Rios is a graduate of California State Polytechnic University, Pomona, in the field of history with emphasis in specific topics related to the California Subject Examination for Teachers in Social Sciences. He is responsible for coordinating and tracking all NCFR Projects, including conferences, and managing the NCFR Library."

## ICAN | Policy Committee

<b>LEROY D. BACA, Chairperson</b>	Sheriff, Los Angeles Sheriff's Department
<b>CYNTHIA BANKS</b>	Director, Community and Senior Services
<b>Charlie Beck</b>	Chief, Los Angeles Police Department
<b>EDMUND G. BROWN JR.</b>	California Attorney General
<b>PHILIP L. BROWNING</b>	Director, Public Social Services
<b>SAL CASTRO</b>	Appointee, Board of Supervisors
<b>JOHN A. CLARKE</b>	Executive Officer/Clerk, Superior Court
<b>STEVE COOLEY</b>	District Attorney
<b>RAMON C. CORTINES</b>	Superintendent, LA Unified School District
<b>MARGARET DONNELLAN TODD</b>	County Librarian, Public Library
<b>JONATHAN FIELDING, MD, MPH</b>	Director, Department of Public Health
<b>P. MICHAEL FREEMAN</b>	Fire Chief, Forester and Fire Warden
<b>WILLIAM T FUJIOKA</b>	Chief Executive Officer
<b>RUSS GUINEY</b>	Director, Parks and Recreation
<b>NANCY HAYES, LCSW</b>	UCLA Medical Center
<b>ANTHONY HERNANDEZ</b>	Director, Department of Coroner
<b>MICHAEL P. JUDGE</b>	Public Defender

## ICAN | Policy Committee

<b>ROBERT E. KALUNIAN</b>	Acting County Counsel
<b>DAVE LAMBERTSON</b>	Director, Internal Services
<b>ALAN LANDSBURG</b>	Appointee, Board of Supervisors
<b>MICHAEL NASH</b>	Presiding Judge, Juvenile Court
<b>FRANCE NUYEN</b>	Appointee, Board of Supervisors
<b>THOMAS P. O'BRIEN</b>	U.S. Attorney
<b>JACKIE CONTRERAS, PH.D.</b>	Acting Director, Children and Family Services
<b>THOMAS M. REEVES</b>	Long Beach City Prosecutor County Prosecutors Association
<b>DARLINE P. ROBLES, PH.D.</b>	Superintendent, Office of Education
<b>SEAN ROGAN</b>	Executive Director, Community Development Commission
<b>L. SATHYAVAGISWARAN, M.D.</b>	Chief Medical Examiner-Coroner
<b>JOHN SCHUNHOFF, PH.D.</b>	Interim Director, Health Services
<b>TOM SONOFF</b>	Chief, Signal Hill Police Department Police Chiefs Association
<b>MARVIN SOUTHARD, D.S.W.</b>	Director, Mental Health
<b>ROBERT TAYLOR</b>	Chief Probation Officer

## **ICAN | Policy Committee**

<b>CARMEN TRUTANICH</b>	Los Angeles City Attorney
<b>JOHN WAGNER</b>	Director, California Department of Social Services
<b>BERNARD WARNER</b>	Chief Deputy Secretary, California Department Of Corrections and Rehabilitation

**Attachment B1**

**LOS ANGELES COMMUNITY CHILD ABUSE COUNCILS (July 2011)**

<b>Countywide Councils</b>	<b>Contact</b>	<b>Address</b>	<b>Phone</b>	<b>Fax - Email</b>
Advocacy Council for Abused Deaf Children	Jean Marie Hunter	760 West Mountain View Street Altadena, CA 91001	(626) 798-6793	<a href="mailto:JHunter@5acres.org">JHunter@5acres.org</a>
Asian and Pacific Islander Children, Youth and Family Council	Albert Ko Yasuko Sakamoto	767 N. Hill, #400 Los Angeles, CA 90012-2381 231 E. 3 <sup>rd</sup> Street, Suite G-104 Los Angeles, CA 90013	(213) 808-1701  (213) 473-3035	<a href="mailto:ako@cscla.org">ako@cscla.org</a> (213) 473-1601 <a href="mailto:yasuko_sakamoto@lts.org">yasuko_sakamoto@lts.org</a>
Family, Children, Community Advisory Council	Sandra J. Guine	600 S. Commonwealth Ave, St 800 Los Angeles, CA 90005	(213) 639-6443	(213) 637-8291 <a href="mailto:sguine@dhs.co.la.ca.us">sguine@dhs.co.la.ca.us</a>
LGBT Child Abuse Prevention Council <b>501c3</b>	Mark Abelson	P. O. Box 1042 South Pasadena, CA 91031-1042	(323) 646-2419	(323)257-2745 <a href="mailto:abelsson@earthlink.net">abelsson@earthlink.net</a>
<b>Geographically – Based Councils</b>				
Foothill Child Abuse and Domestic Violence Prevention Council	Sarah Jin	118 South Oak Knoll Ave. Pasadena, CA 91101	(626) 795-6907 x125	(626) 795-7080 <a href="mailto:sjin@foothillfamily.org">sjin@foothillfamily.org</a>
Eastside Child Abuse Prevention Council	Elvia Torres	2000 S. Tyler Ave. South El Monte, CA 91733	626) 442-1400	(626) 442-1144 <a href="mailto:elvia@spiritt.org">elvia@spiritt.org</a>
End Abuse Long Beach <b>501c3</b>	Paula Cohen  Yolanda Green	110 Pine Ave., #420 Long Beach, CA 90802	(562) 435-3501 x3842	(562) 435-7118 <a href="mailto:pcohen@lafla.org">pcohen@lafla.org</a> <a href="mailto:ygreen@csulb.edu">ygreen@csulb.edu</a>
San Fernando/Santa Clarita Valley Child Abuse Council	Deborah Davies	15350 Sherman Way, suite 140 Nan Nuys, CA 91406	((818) 988 - 4430	deborah@fofca.org
San Gabriel Valley CAPC	Lydia Sandoval Paula Jeppson	716 N. Citrus Covina, CA 91732	(626) 966-1755	(626) 859-0999 lydias @santaanitifamilyservice.org
Service Planning Area 7 Child Abuse Council	Norma Yoquez	13135 Barton Rd., Whittier, CA 90605	((562) 777-1410 Ext. 112	(562) 904-9593 <a href="mailto:normay@spiritt.org">normay@spiritt.org</a>
Westside Child Trauma Council	Jennifer Chen-Speckman	P.O. Box 7081 Santa Monica, CA 90406	(310) 2646645	(310) 9207934 <a href="mailto:jchenspeckman@gmail.com">jchenspeckman@gmail.com</a>
YES2KIDS - Antelope Valley Child Abuse Prevention Council <b>501c3</b>	Bob Broyles	P.O. Box 902345 Palmdale, CA 93590-2345	(661) 538-1846	(661) 538-1846 call first <a href="mailto:bobbroyles@sbcglobal.net">bobbroyles@sbcglobal.net</a>

Three-year CAPIT/CBCAP/PSSF Services and Expenditure Summary  
Proposed Expenditures  
Worksheet 1

(1) COUNTY: Los Angeles

(2) PERIOD OF PLAN: 7/1/11 thru 6/30/14

(3) YEAR: 1,2,3

(4) FUNDING ESTIMATES — CAPIT: \$ 9,334,806.00 CBCAP: \$ 1,127,076.00 PSSF: \$ 25,251,447.00

per year

Line No.	Title of Program / Practice	SIP Strategy No., if applicable	Name of Service Provider, if available	CAPIT	CBCAP				PSSF				
				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 of Column G1 that will be spent on Family Preservation	Dollar amount of Column G1 that will be spent on Family Support	Dollar amount of Column G1 that will be spent on Time-Limited Reunification	Dollar amount of Column G1 that will be spent on Adoption Promotion & Support
A	B	C	D	E	F1	F2	F3	F4	G1	G2	G3	G4	G5
1	CAPIT	1.2; 4.1	Please refer Service Array section on pages 84-89	\$9,336,000	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
2	Alternative Response Services (CBCAP)	1.2; 4.1	Please refer Service Array section on pages 84-89	\$0	\$1,170,000	\$0	\$0	\$1,170,000	\$0	\$0	\$0	\$0	\$0
3	Family Preservation (PSSF)	1.2; 1.3; 2.0; 2.3; 4.1	Please refer Service Array section on pages 84-89	\$0	\$0	\$0	\$0	\$0	\$5,050,289	\$5,050,289	\$0	\$0	\$0
4	Family Support (PSSF)	1.2; 4.1	Please refer Service Array section on pages 84-89	\$0	\$0	\$0	\$0	\$0	\$5,050,289	\$0	\$5,050,289	\$0	\$0
5	Time-Limited Reunification (PSSF)	1.2; 4.1	Please refer Service Array section on pages 84-89	\$0	\$0	\$0	\$0	\$0	\$8,345,559	\$0	\$0	\$8,345,559	\$0
6	Adoption Promotion & Support (PSSF)	4.1	Please refer Service Array section on pages 84-89	\$0	\$0	\$0	\$0	\$0	\$6,805,310	\$0	\$0	\$0	\$6,805,310
7								\$0	\$0				
8								\$0	\$0				
9								\$0	\$0				
Totals				\$9,336,000	\$1,170,000	\$0	\$0	\$1,170,000	\$25,251,447	\$5,050,289	\$5,050,289	\$8,345,559	\$6,805,310

\* Net County Cost

Three-year CAPIT/CBCAP/PSSF Services and Expenditure Summary  
Proposed Expenditures  
Worksheet 1

(1) COUNTY:

**OTHER:**    \$ 149,639,732.00

per year

Line No.	Title of Program / Practice	<u>OTHER SOURCES</u>	<u>NAME OF OTHER</u>	<u>TOTAL</u>
		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	H1	H2	I
1	CAPIT	\$9,585,000	AB2994	\$18,921,000
2	Alternative Response Services (CBCAP)	\$0	N/A	\$1,170,000
3	Family Preservation (PSSF)	\$130,124,994	NCC*, State Family Preservation, Title IV-E, Kids Plate	\$135,175,283
4	Family Support (PSSF)	\$5,971,282	NCC*	\$11,021,571
5	Time-Limited Reunification (PSSF)	\$0	NCC*	\$8,345,559
6	Adoption Promotion & Support (PSSF)	\$3,958,456	NCC*	\$10,763,766
7				\$0
8				\$0
9				\$0
<b>Totals</b>		\$149,639,732	\$0	\$185,397,180

\* Net County Cost

Three-year CAPIT/CBCAP/PSSF Services and Expenditure Summary  
 CAPIT Programs, Activities and Goals  
 Worksheet 2

(1) COUNTY: Los Angeles

(2) YEAR: 1,2,3

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
1	CAPIT	Please refer to Section III: Outcomes, pages 42-92.	X	X	X	X	X	X	X		X					X	Case Management, Child Sexual Abuse Abuse Treatment, Domestic Violence Treatment, Crisis Intervention	Communities Are Caring And Responsive
																		Children and Youth Are Nurtured, Safe and Engaged
																		Families Are Strong and Connected
																		Identified Families Access Services and Supports
																		Vulnerable Communities Have Capacity to Respond



Three-year CAPIT/CBCAP/PSSF Services and Expenditure Summary  
 CAPIT Programs, Activities and Goals  
 Worksheet 2

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



Three-year CAPIT/CBCAP/PSSF Services and Expenditure Summary  
 CBCAP Programs, Activities and Goals  
 Worksheet 3

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		EBP / EIP (Identify Level)					County has documentation on file to support Level selected	Goal
				Voluntary Home Visiting	Parenting Program (Classes)	Parent Mutual Support	Respite Care	Family Resource Center	Family Support Program	Other Direct Service		Logic Model Will be Developed	Logic Model Exists	Program Lacking support	Emerging & Evidence Informed Programs & Practices	Promising Programs & Practices	Supported	Well Supported		
A	B	C	D	E1	E2	E3	E4	E5	E6	E7	F	G1	G2	H1	H2	H3	H4	H5	I	J



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	Transportation to / from Services / Activities	Other Direct Service	Pre-Adoptive Services	Post-Adoptive Services	Activities to Expedite Adoption Process			Activities to Support Adoption Process	Other Direct Service
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
4	Family Support (PSSF)	Please refer to Section III: Outcomes, pages 42-92.								X		X			X	X	X														Children and Youth Are Nurtured, Safe and Engaged Families Are Strong and Connected Identified Families Access Services and Supports Families Are Free from Substance Abuse and Mental Illness Communities Are Caring And Responsive Vulnerable Communities Have Capacity to Respond
5	Time-Liminted Reunification (PSSF)	Please refer to Section III: Outcomes, pages 42-92.																X	X											Services include Assessment services, also residential and out patient counseling	Facilitate the reunification of the child, safely, appropriately and in a timely fashion
6	Adoption Promotion & Support (PSSF)	Please refer to Section III: Outcomes, pages 42-92.																						X	X	X	X	X		Individual, Group and Family Therapy, Adoptive Parent Mentor Program, Support and Discussion Groups, Case Management Services, Linkages	Move from foster care to adoption; Support adoptive placement; Prevent adoption disruption.



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Appendix D: BOS Notice of Intent

STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

NOTICE OF INTENT
CAPIT/CBCAP/PSSF PLAN CONTRACTS
FOR LOS ANGELES COUNTY

PERIOD OF PLAN (MM/DD/YY): 2011 THROUGH (MM/DD/YY) 2014

The undersigned confirms that the county intends to contract, or not contract with public or private nonprofit agencies, to provide services in accordance with Welfare and Institutions Code (W&I Code Section 18962(a)(2)).

In addition, the undersigned assures that funds associated with Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) will be used as outlined in statute.

The County Board of Supervisors designates Department of Children and Family Services as the public agency to administer CAPIT and CBCAP.

W&I Code Section 16602 (b) requires that the local Welfare Department shall administer PSSF. The County Board of Supervisors designates Department of Children and Family Services as the public agency to administer PSSF.

Please enter an X in the appropriate box.

- X The County intends to contract with public or private nonprofit agencies to provide services.
The County does not intend to contract with public or private nonprofit agencies to provide services and will subcontract with County to provide administrative oversight of the projects.

In order to receive funding, please sign and return the Notice of Intent with the County's System Improvement Plan:

California Department of Social Services
Office of Child Abuse Prevention
744 P Street, MS 8-11-82
Sacramento, California 95814


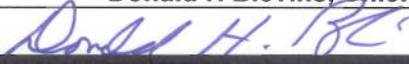

Handwritten signature of Mike Antonovich
County Board of Supervisors Authorized Signature

9/16/11
Date

MIKE ANTONOVICH
Print Name

MAYOR, County of Los Angeles.
Title

## California's Child and Family Services Review System Improvement Plan

<b>County:</b>	<b>Los Angeles</b>
<b>Responsible County Child Welfare Agency:</b>	Los Angeles County Department of Children and Family Services
<b>Period of Plan:</b>	2011 - 2014
<b>Period of Outcomes Data:</b>	Quarter ending: Quarter 2, 2010
<b>Date Submitted:</b>	2011
<b>County Contact Person for County System Improvement Plan</b>	
<b>Name:</b>	Teri Gillams
<b>Title:</b>	Children Services Administrator III
<b>Address:</b>	425 Shatto Place Los Angeles, CA 90020
<b>Phone &amp; E-mail</b>	Gillams@dcfs.lacounty.gov
<b>Name:</b>	Lisa Campbell-Motton
<b>Title:</b>	Probation Director
<b>Address:</b>	11701 So. Alameda St., 2 <sup>nd</sup> Floor, Lynwood, Ca. 90262
<b>Phone &amp; E-mail</b>	(323) 357-5545 Lisa.Campbell@probation.lacounty.gov
<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>	<b>Philip L. Browning, Interim Director</b>
<b>Signature:</b>	
<b>Submitted by:</b>	<b>County Chief Probation Officer</b>
<b>Name:</b>	<b>Donald H Blevins, Chief Probation Officer</b>
<b>Signature:</b>	
<b>Board of Supervisors (BOS) Approval</b>	
<b>BOS Approval Date:</b>	SEP 13 2011
<b>Name:</b>	 MIKE ANTONOVICH
<b>Signature:</b>	

## Appendix C: CAPIT/CBCAP/PSSF Contact and Signature Sheet

CAPIT/CBCAP/PSSF Contact and Signature Sheet	
Period of Plan:	
Date Submitted:	
<b>Submitted by:</b>	<b>Board of Supervisor Designated Public Agency to Administer CAPIT/CBCAP/PSSF programs</b>
<b>Name &amp; title:</b>	Philip L. Browning, Interim Director
<b>Signature:</b>	
<b>Address:</b>	425 Shatto Place, Los Angeles, CA 90020
<b>Fax:</b>	213-427-6125
<b>Phone &amp; E-mail:</b>	213-351-5600
<b>Submitted by:</b>	<b>Child Abuse Prevention Council (CAPC) Representative</b>
<b>Name &amp; title:</b>	DON PICKENS
<b>Signature:</b>	<i>Don Pickens</i>
<b>Address:</b>	338 E. FOREST AVE, ARCADIA, CA 91006
<b>Fax:</b>	(626) 599-8369
<b>Phone &amp; E-mail:</b>	(626) 429-8503 DLPICK@SBCGLOBAL.NET
<b>Submitted by:</b>	<b>Parent Consumer/Former Consumer (Required if the parent is not a member of the CAPC)</b>
<b>Name &amp; title:</b>	DON PICKENS
<b>Signature:</b>	<i>Don Pickens</i>
<b>Address:</b>	338 E. FOREST AVE, ARCADIA, CA 91006
<b>Fax:</b>	(626) 599-8369
<b>Phone &amp; E-mail:</b>	(626) 429-8503 DLPICK@SBCGLOBAL.NET

**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>Not Applicable</b>
<b>Signature:</b>	
<b>Address:</b>	
<b>Fax:</b>	
<b>Phone &amp; E-mail:</b>	
<b>Submitted by: CAPIT Liaison</b>	
<b>Name &amp; title:</b>	<b>Marilynne Garrison, Division Chief</b>
<b>Address:</b>	<b>425 Shatto Place, Los Angeles, CA 90020</b>
<b>Fax:</b>	<b>(213) 380-3634</b>
<b>Phone &amp; E-mail:</b>	<b>(213) 351-5715 / garrma@dcfs.lacounty.gov</b>
<b>Submitted by: CBCAP Liaison</b>	
<b>Name &amp; title:</b>	<b>Marilynne Garrison, Division Chief</b>
<b>Address:</b>	<b>425 Shatto Place, Los Angeles, CA 90020</b>
<b>Fax:</b>	<b>(213) 380-3634</b>
<b>Phone &amp; E-mail:</b>	<b>(213) 351-5715 / garrma@dcfs.lacounty.gov</b>
<b>Submitted by: PSSF Liaison</b>	
<b>Name &amp; title:</b>	<b>Marilynne Garrison, Division Chief</b>
<b>Address:</b>	<b>425 Shatto Place, Los Angeles, CA 90020</b>
<b>Fax:</b>	<b>(213) 380-3634</b>
<b>Phone &amp; E-mail:</b>	<b>(213) 351-5715 / garrma@dcfs.lacounty.gov</b>
<b>Board of Supervisors (BOS) Approval</b>	
<b>BOS Approval Date:</b>	SEP 13 2011
<b>Name:</b>	MIKE ANTONOVICH
<b>Signature:</b>	