

MOTION BY SUPERVISOR GLORIA MOLINA

May 22, 2012

The Department of Children and Family Services (DCFS) is responsible for the safety and well being of youth. The responsibility comes with a duty to do “whatever it takes” to ensure that every child has a safe place to live.

DCFS has been audited by the State of California regarding overstays at the Emergency Response Command Post (ERCP) and, as a result, DCFS has committed to this Board that actions are being taken to address all challenges preventing social workers from placing children in a timely manner and in the best placement available. Unfortunately, due to a number of institutional and legislative barriers, high numbers of children and youth continue to be placed at the Command Post.

Dr. Astrid Heger created the Children’s Village at the LAC+USC Medical Center. The Violence Intervention Program (VIP) is the main component of the Children’s Village—it provides medical, forensic, mental health, social, and legal services. The Children’s Village forensic and mental health hub operates 24 hours per day, seven days a week. This one-stop shop is an ideal location to comprehensively serve and shelter DCFS-supervised youth after hours as they await placement.

MOTION

Molina \_\_\_\_\_

Ridley-Thomas \_\_\_\_\_

Knabe \_\_\_\_\_

Antonovich \_\_\_\_\_

Yaroslavsky \_\_\_\_\_

I, THEREFORE, move that the Director of DCFS, Phillip Browning, work with the Department of Health Services and Dr. Astrid Heger to report back to the Board of Supervisors in two weeks, regarding an implementation plan that will clearly outline how the new Children's Village at the Medical Center can be used to serve as an outstation of DCFS' after-hour placement for detained children who require a comprehensive case management approach.

Additionally, the Director shall report back in two weeks with an implementation plan to overhaul the ERCP unit and processes to include the following:

1. An assessment of the types of children that come into ERCP, clearly identifying their issues and needs that must be addressed, in order to quickly identify the appropriate level of services and placement options; and
2. Develop and maintain a daily inventory of available placement options for detained children; and
3. Develop a unit that is dedicated to case management and develop a case management methodology for high risk, high profile youth that includes conducting assessments, and working with the Regional Offices to develop case plans and track trends of migration in and out of ERCP; and
4. Partner with the Department of Mental Health to implement the recommendations outlined in the DMH ERCP Observations and Recommendations Report; and
5. Amend contracts with Group Homes, Foster Family Agencies, and Licensed Foster Homes to include stipulation that homes must remain available 24 hours per day, seven days a week, for placements.

SC/FC