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To: Lindsey P. Horvath, Chair
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From: 
Brandon T. Nichols, Director
Department of Children and Family Services

REPORT BACK TO THE SEPTEMBER 26, 2023 BOARD MOTION (ITEM NO. 63-G) REGARDING MITIGATING FINANCIAL BARRIERS TO FAMILY REUNIFICATION IN LOS ANGELES COUNTY

On September 26, 2023, the Board of Supervisors (Board) adopted a motion authored by Supervisor Solis directing the Department of Children and Family Services (DCFS), in collaboration with the Department of Public Social Services (DPSS), Department of Mental Health (DMH), the Department of Health Services (DHS), Probation, the Department of Public Health (DPH), the Chief Executive Office (CEO), and, in consultation with other relevant stakeholders, including the Los Angeles Superior Court (the Court) and the Chief Information Office (CEO-CIO) to report back on the following:

1. The feasibility of paying for family reunification services;
2. Ensure that all parents in the juvenile dependency system are assessed for and assisted with enrollment in available public social services, including, but not limited to Medi-Cal, and that all available funding streams, including, but not limited to, CalAIM, are leveraged to fund family reunification services;
3. Explore models to ensure parent receive assistance in accessing services, including the possibility of staffing the Los Angeles County Juvenile Dependency Courthouses with dedicated staff who can provide enrollment assistance;

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4. Ensure there is adequate information sharing amongst relevant County departments as it relates to multi-system service delivery to families by assisting in the ongoing development of a provider registry and/or contracting with a centralized provider registry that identifies free or low-cost services and service providers, complete with availability information, to address the issues facing parents in the juvenile dependency proceedings, including, but not limited to, appropriate parenting, domestic violence, substance abuse, anger management, and mental health diagnoses; and
5. Retain a consultant, if needed, to help the DCFS implement a comprehensive reunification services program and to enter into non-financial agreements, as needed, to realize the above directives.

BACKGROUND

DCFS, like many child welfare agencies across the country, has embraced as a core value that children should live safely at home with their families. This core value is at the heart of the prevention work DCFS has engaged in for the last several years, including being a member and funder of the inaugural Prevention and Promotion Systems Governance Committee. As state and federal funding structures shift to place a greater focus on prevention and promotion, DCFS remains committed to supporting countywide efforts to build a system of community-based care that maintains children with their families and in their communities.

When a child cannot remain safely in their home, the Court orders DCFS to provide services to the family. In this scenario, parents¹ are legally entitled, with some exceptions, to receive services that are designed to address the reason(s) for the child's removal so that the family can safely reunify as soon as possible (also known as Family Reunification (FR) services). In some cases, DCFS articulates safety concerns that do not rise to the level of the child being removed from their home. In this scenario, the child remains in their home, but the Court may order the parents to participate in services that are designed to ensure the child can safely remain with their parents (also known as Family Maintenance (FM) services). In calendar year 2023, DCFS data reflects there were 5,249 open cases receiving FR services and 6,336 cases receiving FM services. Regardless of the scenario that results in the Court ordering a parent to participate in services, DCFS strives to ensure that children and their families receive trauma informed, person-centered services from social workers, behavioral health providers, community-based organizations, and other professionals who have the expertise to address each families' unique needs. Historically, this has been accomplished at the regional level by line staff who develop relationships with providers and community-based organizations in

¹ The words "parent" or "parents" is used in this report to broadly refer to parents, legal guardians, or any other individual who is legally entitled to services and is ordered to participate in services by the Court.

the communities they serve. DCFS' regional offices have worked to ensure families on their caseloads are connected to free and low-cost services and, much of the time, they succeed because they become experts on the services that are available in their communities. But this informal reliance on the resourcefulness of staff has not been flawless. When regional staff are new to the community and do not yet have those established relationships or, are met with issues such as the stretched capacity of community-based providers, the absence of a formal infrastructure may cause delays in service delivery to parents who are required to complete their court-ordered services within certain timeframes.

DCFS recognized the need to address this issue and, in the fall of 2023, DCFS' Director identified improving FR and FM services as a departmental priority. DCFS established internal workgroups (DCFS Workgroups) that focused on improving service accessibility and identifying funding for court-ordered services in four key service areas: mental health, substance use, domestic violence and parenting classes. The DCFS Workgroups met through the fall of 2023. Common themes and recommendations emerged from their collective work. The DCFS Workgroups identified key components for a department-wide infrastructure, including:

- A centralized staffing model within the DCFS organizational structure that is focused on parent services (i.e., a bureau, division, section, or unit) and has formal coordination channels with all DCFS regional offices
- Collaboration with other County departments that have expertise in the service areas most needed by DCFS families and/or departments that may serve the same families that are served by DCFS
- A digital platform (contracted or created) that functions as a closed-loop resource and referral directory and includes resources to address specialized needs articulated by families (i.e., unique mental health criteria, LGBTQ+ and culturally responsive service providers, after-hours support, etc.)
- A survey of line staff, parents and other stakeholders to understand current referral processes, nature of resources being utilized, access issues and gaps, and needs of families
- Maximization of funding streams that are available to DCFS families and alternative funding for individuals who do not qualify for established funding streams
- A process to evaluate programs and services on an ongoing basis to ensure families receive quality services

Just as the DCFS Workgroups prepared to move into an implementation phase, a new

state law—Assembly Bill 954 (AB 954)—moved DCFS’ work on providing free, quality parent services from a proactive departmental priority to a state law mandate. AB 954, which is now codified as Welfare & Institutions Code section 362.8, provides that the Court cannot make a legal finding that a parent is noncompliant with their case plan “when the court finds that the parent or guardian is unable to pay for a service or that payment for a service would create an undue financial hardship for the parent or guardian, and the social worker did not provide a comparable free service that was accessible and available to the parent or guardian to comply with the case plan.”

With free and accessible parent services becoming a State mandate, DCFS quickly established a “parent services implementation team” that is focused on implementing the state law and above-referenced directives from your Board.

DIRECTIVE 1: EXPLORE THE FEASIBILITY OF PAYING FOR FAMILY REUNIFICATION SERVICES

The feasibility of paying for parent services is contingent on a three-pronged approach:

- (1) the leveraging of existing contracts and resources through collaboration with other County departments that have expertise in the service areas most needed by parents and/or departments that may serve the same parents that are served by DCFS;
- (2) maximization of funding streams that parents can access if they are eligible and enrolled; and
- (3) establishing flexible funding for parents who do not qualify for established funding streams and/or those who need specialized services that are not covered by other funding streams. For example, some individuals may have boundaries around the qualifications they need from a mental health provider which are not available through paid-for providers. Or, an individual may need support for longer than the period covered by the identified funding stream. There are other unique circumstances that must be accounted for when establishing a flexible funding source.

Leveraging Existing Contracts and Resources through Collaboration with Other County Departments

As directed by your Board, DCFS engaged with DMH, DHS, Probation, DPH, and DPSS. DCFS held a kick-off meeting to organize all departments around your Board’s directives and to facilitate a discussion about each department’s services and contracts. DCFS then followed up with each department and requested responses to the following questions:

1. How does your department/agency identify parents receiving court-ordered services?
2. (a) What is the best way for DCFS to connect with your department/agency to

access services for our families and (b) does your department/agency have an existing resource through which we can connect our families to services (i.e., a digital platform, information on your website, etc.)?

3. (a) Is there criteria individuals must meet in order to access services through your department/agency; (b) Is there a cost associated with parents accessing court-ordered services through your department/agency; and (c) What funding streams are available to county residents through your department/agency that may be available to cover the cost of court-ordered services?
4. When a parent is identified as receiving court-ordered services, how does/will your agency engage in communication with DCFS to ensure services are coordinated?
5. What are current challenges/limitations that may impact your department/agency's ability to connect parents to court-ordered services?
6. How can your department further enhance collaboration with DCFS and other county departments to meet the needs of parents receiving court-ordered service?

The departmental feedback confirmed that resources are available for parents who are eligible and enrolled in Medi-Cal. Even though DCFS is aware of this resource and makes best efforts to leverage it, opportunities exist to maximize Medi-Cal, especially given recent expansions of the populations who are eligible to receive Medi-Cal services. Access to specialty mental health services through DMH may be limited due to eligibility criteria and more work is needed to understand the extent to which eligibility and capacity/workforce issues impact DCFS' ability to connect parents to mental health services. Additionally, at least one department highlighted the need to ensure that DCFS line staff know *how* to access services that are available to DCFS through direct service coordination with other county departments.

The information provided by each department can be summarized as follows:

DMH: DMH indicated that mental health services can be accessed through the DMH Helpline and that DMH has a "no wrong door" policy for accessing services. DMH services can be obtained by calling the DMH Helpline, 988, or walking into any DMH directly operated mental health clinic or contracted provider sites. Access to DMH's specialty mental health services is governed by applicable regulations that, as a baseline, require significant impairment or a "reasonable probability of significant deterioration in an important area of life functioning" due to either a diagnosed mental health disorder or a suspected mental health disorder that has not yet been diagnosed. Within the DMH network, a parent who has Medi-Cal does not need to pay additional costs for specialty mental health services but must meet the criteria outlined above to access specialty mental health services.

DHS: DHS generally advises that their role in child welfare services is limited to operation of the medical HUBS that provide medical screenings and services to youth in foster care, however, DHS can offer financial assistance and ensure free coverage for medical services if parents do not qualify for Medi-Cal or are otherwise uninsured or underinsured. Additionally, DHS indicated that its website lists all available services that DHS (LA Health Services) provides, including information on Primary and Specialty Care, Substance Use Disorder (SUD) Treatment, Mental Health, etc. Additionally, DHS (LA Health Services) offers its patients a digital platform, LA Health Portal, which is an immediate and safe way to communicate with their medical team, access health records, manage appointments, and medications.

Probation²: Probation indicated it has contracts with various community-based organizations as well as with Short-Term Residential Therapeutic Programs (STRTPs). STRTPs are placement and treatment facilities for children and youth, but do not serve parents who are ordered to participate in services. Probation also indicated that the department provides support to parents so they may attend Child and Family Team Meetings at the STRTPs and by referring them to services that are free through existing County contracts or through Medi-Cal. Probation also identified that the department has State funding that is utilized to promote family reunification and to support parents and youth.

Probation did not indicate whether services are available to DCFS parents who are also on probation via the adult criminal justice system. Probation did provide a list of “Approved 52 – Week Batterers’ Intervention Programs,” but Probation does not fund these services and indicated that it is a legal mandate for individuals to pay for these services as the cost associated with these programs is used to fund programs for victims/survivors.

DPH: DPH identified two areas within the department that are relevant to providing services to DCFS parents: the Domestic Violence Council (DVC) and the Substance Abuse Prevention and Control section (SAPC). The DVC is not a direct service provider, but convenes over 70 organizations, most of which are direct service providers working with victims/survivors of domestic violence. DCFS is invited to DVC meetings and workgroups, which DVC indicated offers an opportunity for DCFS to connect with the 70 member organizations, including service providers.

SAPC identified several referral pathways DCFS can access to refer clients to their services including the Substance Abuse Services Helpline, Client Engagement Navigation Services (CENS), and the Family Dependency Drug Court Program. DCFS has existing procedures in place that staff can follow to connect to CENS

² The Probation Department has a Probation Child Welfare Unit that provides FR Services to parents in the same way that DCFS does and the responses here reflect the services Probation offers to parents through their Probation Child Welfare Unit.

navigators. SAPC also indicated that DCFS social workers can make referrals directly to Substance Use Disorder treatment providers by utilizing the Service & Bed Availability Tool (SBAT), which is an online resource and referral system. SAPC services are available at no cost to individuals who are County residents, enrolled in Medi-Cal (or in the process of enrolling), or are participants in AB 109 through Probation, Drug Court, General Relief, CalWORKs, Juvenile Justice Crime Prevention Act programs, and/or the California Department of Health Care Services Women's and Children's Residential Treatment Services and are commercially insured or otherwise ineligible for Medi-Cal.

DPSS: DPSS has an established DCFS FR services referral process that is operationalized in an interdepartmental Memorandum of Understanding (MOU). DPSS has co-located staff at every DCFS regional office who link parents to DPSS services. A DPSS Linkages Liaison Directory is available for all DCFS staff to access. DCFS parents must be CalWORKs and GAIN eligible or former recipients of CalWORKs to qualify for services through DPSS. All DPSS services, including domestic violence programs for survivors/victims, substance use disorder treatment, and mental health services, are free of cost to the parent as DPSS pays contracted service providers directly using Welfare-to-Work funds.

Maximizing Funding Streams That Parents Can Access If They Are Eligible and Enrolled

As noted above, Medi-Cal has emerged as a critical resource that must be leveraged to the greatest extent possible. DCFS is aware that Medi-Cal is a resource and has relied on it as an avenue to connect parents to services. Nevertheless, opportunities remain to better utilize and maximize Medi-Cal. To that end, DCFS is in the process of onboarding a consultant who will, among other things, conduct an analysis of DCFS' current policies and practices around enrolling children and parents in Medi-Cal fee-for-service or Managed Care Plans and identify opportunities to better leverage these resources. The consultant will also conduct a clinical and financial opportunity analysis of benefits available through managed care, including Enhanced Care Management and Community Supports.

Similarly, DPSS' public social services are an ongoing resource that DCFS leverages and the two departments have an established MOU and co-located DPSS staff to extend these resources to as many parents as possible.

Identifying Flexible Funding For Parents Who Do Not Qualify For Established Funding Streams and/or Those Who Need Specialized Services That Are Not Covered By Other Funding Streams

DCFS is currently holding focus groups with case-carrying social workers to identify which resources they currently access and to identify areas where additional resources are needed. Additionally, DCFS is establishing a procedure through which line staff will

elevate the need to identify funding to pay for a specific service through their chain of command and up to executive-level staff, as needed, to ensure funding is identified on an urgent basis. This process will also provide DCFS with data that can be used to inform ongoing efforts to build services capacity and to identify flexible funding.

As of now, DCFS does not yet have a flexible funding pool available to cover costs that cannot be covered through other established funding streams. The Department is exploring the possibility of leveraging existing contracts, such as the DCFS Prevention & Aftercare (P&A), Child Abuse Prevention Intervention & Treatment (CAPIT), Family Preservation (FP), or Partnerships for Families (PFF) contracts. The Department is also considering funding streams that can be used on a one-time basis to fund urgent requests elevated by line staff. The one-time funds under consideration include State Block Grant or Family First Transition Act (FFTA) funds.

DCFS has also started to explore funding opportunities through the Care First Community Investment (CFCI) Advisory Body recommendation process. In Year 3 of the CFCI funding process, DCFS received the first-ever allocation of CFCI funds for expanding youth housing programs. DCFS is currently engaged in the program development phase with the Justice Care and Opportunities Department (JCOD) CFCI team.

The report that was the genesis to the County's work on alternatives to incarceration included a recommendation to "expand family reunification models and connect families to low-cost or no-cost parenting groups³." The report went on to state that "family reunification models and parenting groups should be evidence-informed and have demonstrated they are correlated with better outcomes for participants and their children. These resources should be provided by community organizations and there should be ready availability of resources tailored to the unique needs of cisgender women who identify as mothers as well as LGBTQ+ and TGI parents."

This recommendation resonates with the approach DCFS wants to take in the build-out of community-based parent services. Accordingly, DCFS is interested in exploring opportunities to access CFCI funding to implement a service deliver model that fulfills the vision outlined in the Alternatives to Incarceration report.

DIRECTIVE 2: ENSURE THAT ALL PARENTS IN THE JUVENILE DEPENDENCY SYSTEM ARE ASSESSED FOR AND ASSISTED WITH ENROLLMENT IN AVAILABLE PUBLIC SOCIAL SERVICES, INCLUDING, BUT NOT LIMITED TO MEDI-CAL, AND THAT ALL AVAILABLE FUNDING STREAMS, INCLUDING, BUT NOT LIMITED TO, CALAIM, ARE LEVERAGED TO FUND FAMILY REUNIFICATION SERVICES

As set forth above, DCFS and DPSS have a strong partnership that includes co-location

³https://ceo.lacounty.gov/wp-content/uploads/2020/10/1077045_AlternativestoIncarcerationWorkGroupFinalReport.pdf

of DPSS staff who help connect DCFS clients to all available public social services. DCFS and DPSS are currently exploring options to automate more of their joint processes. In particular, Linkages is a service coordination partnership between DCFS and DPSS. The current procedures entail DCFS and DPSS workers to manually generate referrals, submit them via email, and maintain the tracking of each referral in various spreadsheets. To enhance efficiency, a workgroup has convened to explore the possibilities of developing a dedicated Linkages application that can seamlessly manage and centralize all referral activities. The intent of this approach is to not only streamline the referral process, but also facilitate the identification of families already referred or accessing DPSS services. A dedicated Linkages application would position both departments to enhance service coordination and overall effectiveness in assessing and assisting families with enrollment in available public social services.

Additionally, DCFS is in the process of onboarding a consultant to assist with maximizing Medi-Cal and other funding streams, including CalAIM. DCFS expects to have the consultant formally on board by June 2024.

DIRECTIVE 3: EXPLORE MODELS TO ENSURE PARENT RECEIVE ASSISTANCE IN ACCESSING SERVICES, INCLUDING THE POSSIBILITY OF STAFFING THE LOS ANGELES COUNTY JUVENILE DEPENDENCY COURTHOUSES WITH DEDICATED STAFF WHO CAN PROVIDE ENROLLMENT ASSISTANCE

DCFS plans to implement a service delivery model in which there are multiple touch points for parents to receive assistance in accessing services, including:

- **Digital Platform**: This will either be an existing platform that is accessed through a contract or, one that is created for use by DCFS. The platform will serve as a resource directory and have the capacity to support a closed-loop referral process. DCFS is giving special attention to the breadth and scope of the resources in the directory to ensure that the platform includes resources to address specialized needs articulated by families (i.e., unique mental health criteria, LGBTQ+ and culturally responsive service providers, after-hours support, etc.). Ideally, the digital platform will be widely accessible to as many people as possible including to DCFS staff, county partners, service providers, parents, and other stakeholders.

As mentioned above, DCFS is in the process of conducting focus groups with case-carrying social workers to identify which resources they currently access and to identify areas where additional resources are needed. The focus group results will be used to help develop the solicitation for a DCFS digital platform. Additionally, DCFS has met with numerous stakeholders including individuals with lived experience and community-based stakeholders to develop a list of system requirements that will also inform the solicitation process. DCFS is working closely with the CEO-CIO to ensure that the platform DCFS ultimately puts into place is

compatible with other County systems that are being developed or are already in place.

Additionally, DCFS inquired as to the possibility of using platforms other County departments have contracted for and/or developed internally. This is a viable option, to an extent. For example, as mentioned above, DCFS has access to SAPC's bed availability tool (SBAT) and, DPSS and DCFS are working on a plan to automate DCFS' access to DPSS linkages tool. DCFS will continue to explore simplifying access to platforms and tools that are available through other departments; however, none of these provides a centralized provider registry that can serve as a "one-stop" registry for DCFS families, staff, and other stakeholders.

Lastly, DCFS explored, in detail, the possibility of using existing internal applications and databases. Unfortunately, all the internal options explored either were either outdated or too limited in their functionality.

- Court Partnership: DCFS is in the very early stages of collaborating with the Court, but the Department recognizes that partnership with the Court is an integral component of connecting parents to services. DCFS is interested in exploring a model in which staff are present at the Court in small numbers to perform discrete tasks. For example, a limited number of staff could potentially be assigned to "float" at the courthouse for the specific purpose of enrolling parents in Medi-Cal. Or, perhaps certain departmental staff could hold space at the courthouse on limited days and for limited hours. DCFS needs to work with the Court to have a better understanding of space issues, the volume of in-person hearings in light of the recent shift to remote online court appearances, and what would be most helpful to the Court and parents as far as County staffing support is concerned.
- Community Based Navigation: People often trust their community supports more than they trust courts or government agencies (no matter how well intentioned). DCFS is partnering with Casey Family Programs (CFP) on a demonstration project, in which a community-based organization will serve as the primary touch point for engaging parents in reunification services. The demonstration project seeks to show that families will experience better reunification outcomes if a community-based organization is engaged in a supportive role at the earliest possible stage of the family's interaction with DCFS and serves as a "hub" that connects parents to the services they are ordered to participate in by the Court. The project design is still in development, but it currently co-designed by a community-based organization, faith based organization, DCFS management and line staff, and CFP. The project components that have been elevated thus far include:
 - High quality Child and Family Team meetings that are led or co-led by a

- community-based organization
- Case plan design that is culturally relevant, centers the family, and offers an alternative to standard case plans
- Coaching parents in skill development
- Helping parents understand and navigate their case plan (including navigation to trusted services in the family's community)
- Fostering supportive birth and resource parent partnerships
- Leveraging CalAIM and Medi-Cal and potentially including community health workers, enhanced care management, and other benefits

Establishing multiple touch points for connections to services will better position DCFS to engage parents in a manner that works for them. Some parents work well with their social worker and welcome connection to services through DCFS. Others have grown up in a technological world and use of a digital platform to access services is comfortable to them. In addition, some need trusted community partners to be part of their journey from day one. There may be other touch points that need to develop as DCFS implements its parent services infrastructure. The Department will remain flexible and adapt to the greatest extent possible.

DIRECTIVE 4: ENSURE THERE IS ADEQUATE INFORMATION SHARING AMONGST RELEVANT COUNTY DEPARTMENTS AS IT RELATES TO MULTI-SYSTEM SERVICE DELIVERY TO FAMILIES BY ASSISTING IN THE ONGOING DEVELOPMENT OF A PROVIDER REGISTRY AND/OR CONTRACTING WITH A CENTRALIZED PROVIDER REGISTRY THAT IDENTIFIES FREE OR LOW-COST SERVICES AND SERVICE PROVIDERS, COMPLETE WITH AVAILABILITY INFORMATION, TO ADDRESS THE ISSUES FACING PARENTS IN THE JUVENILE DEPENDENCY PROCEEDINGS, INCLUDING, BUT NOT LIMITED TO, APPROPRIATE PARENTING, DOMESTIC VIOLENCE, SUBSTANCE ABUSE, ANGER MANAGEMENT, AND MENTAL HEALTH DIAGNOSES

As indicated above, establishing a digital platform rose to the surface as a priority from the DCFS Workgroups and the Department is gathering the information that will be used to develop a solicitation.

Additionally, on February 27, 2024, your Board passed a motion entitled "Investing in the Los Angeles County CareConnect Application" which included a directive that DCFS, among others, is to work with JCOD and CEO-CIO to "include basic information about their funded beds and service providers in CareConnect. This includes information on services provided, eligibility, application and referral process, and other core information needed to help navigate individuals to services." DCFS intends to

collaborate with JCOD, as instructed by the motion, and hopes to explore opportunities to streamline and leverage DCFS' ongoing digital platform development activities with those of JCOD and the CareConnect application.

DCFS supports all efforts that promote information sharing amongst County departments. DCFS will collaborate with JCOD as instructed by your Board and DCFS has been consulting with CEO-CIO as it explores implementation of a digital platform solution.

DIRECTIVE 5: RETAIN A CONSULTANT, IF NEEDED, TO HELP THE DEPARTMENT OF CHILDREN AND FAMILY SERVICES IMPLEMENT A COMPREHENSIVE REUNIFICATION SERVICES PROGRAM AND TO ENTER INTO NON-FINANCIAL AGREEMENTS AS NEEDED

DCFS is in the process of onboarding a consultant who will focus on expanding Medi-Cal enrollment and utilization, revenue maximization, and leveraging of other health-related funding streams.

DCFS is also considering partnering with a consultant to develop a community-based system of care for parent services. This possibility recently emerged as a means to coordinate the Department's prevention work with the Department's desire to develop a network of community-based touch points to engage parents in services.

RECOMMENDATIONS AND NEXT STEPS

DCFS' work to improve service delivery and ensure that FR and FM services are accessible to parents at no cost is one of its most pressing priorities. To that end, DCFS has identified concrete next steps, including:

- Issue guidance to staff regarding implementation of AB 954 that includes a process for submitting emergency funding requests for services that are not funded through existing resources.
 - Once that guidance is issued, DCFS will analyze all emergency funding request to identify service access gaps so that those areas can be prioritized as ongoing funding is established for FR and FM services.
- Conduct internal focus groups to identify services and resources that staff are successfully accessing for families on their caseloads, as well as which services staff are having difficulty accessing.
- Determine if collaboration with JCOD will provide a solution to DCFS' digital platform needs or, if a solicitation will be required for access to a digital platform.
- Finalize engagement of a consultant and begin work on improving Medi-Cal

utilization.

- Continue engagement with the Court and other partners to finalize a courthouse staffing model that will maximize court appearance as an opportunity to engage with parents who need services.

Finally, DCFS has had preliminary discussions with the Office of Child Protection (OCP) to seek OCP's assistance in establishing a forum for ongoing stakeholder engagement because DCFS recognizes that any established process will need ongoing monitoring and feedback to ensure that it continues to meet parents' needs as those needs change over time. DCFS also recommends that OCP's cross-agency coordination role be utilized to identify ways in which DCFS and all partner departments can improve the ease with which parents access services and resources across multiple departments.

If you have questions, please contact us at (213) 371-6236, or via email at bnichols@dcfs.lacounty.gov, or your staff may contact Veronica Pawlowski, via email at pawlov@dcfs.lacounty.gov.