# COUNTY OF LOS ANGELES Family and Social Services

FESIA A. DAVENPORT Chief Executive Officer



DATE:

TIME:

Wednesday, December 15, 2021 <mark>2:00 PM</mark>

THIS MEETING WILL CONTINUE TO BE CONDUCTED VIRTUALLY TO ENSURE THE SAFETY OF MEMBERS OF THE PUBLIC AND EMPLOYEES AS PERMITTED UNDER STATE LAW.

# TO PARTICIPATE IN THE MEETING, PLEASE CALL AS FOLLOWS: Teleconference Call-In Number: (323) 776-6996/ Conference ID: 599 009 090<u>#</u> <u>MS Teams Meeting Link</u> (Ctrl + click to follow link)

# <u>AGENDA</u>

Members of the Public may address agenda item. Two (2) minutes are allowed for each item.

- I. Call to Order
- II. Presentation/Discussion Items:
  - a. Department of Children and Family Services (DCFS): Contract Review Update.
  - b. Office of Child Protection: Quarterly Update.

#### III. Informational Items:

- c. DCFS: Request to Approve an Extension to the Current Sole Source Contract for the Pre-Employment Clinical Psychological Evaluation Services.
- **d.** Children Support Services Department: Request for Authorization to Terminate the Service of Process Contract with Sue Ya, Inc.
- IV. Items continued from a previous meeting of the Board of Supervisors or from a previous FSS Agenda Review meeting.
- V. Public Comment
- VI. Adjournment



COUNTY OF LOS ANGELES OFFICE OF CHILD PROTECTION

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JUDGE MICHAEL NASH (RET.) EXECUTIVE DIRECTOR

October 29, 2021

To: Supervisor Hilda L. Solis, Chair Supervisor Holly J. Mitchell Supervisor Sheila Kuehl Supervisor Janice Hahn Supervisor Kathryn Barger

Judge Michael Nash (Ret.) From: **Executive Director** 

# PROGRESS UPDATE ON THE WORK OF THE OFFICE OF CHILD PROTECTION

In the final report of the Los Angeles County Blue Ribbon Commission on Child Protection (BRCCP), <u>The Road to Safety for Our Children</u>,<sup>1</sup> two key recommendations were to "establish an entity to oversee one unified child protection system," and for it to create a strategic plan for the work it will focus on. On June 10, 2014, the Board adopted the recommendations contained within that BRCCP final report and took action to establish the Office of Child Protection (OCP) as a separate entity reporting directly to the Board and located within the Executive Office. In October 2016, the OCP submitted to the Board its Countywide Child Protection Strategic Plan, which categorizes the work across five goal areas: prevention, safety, permanency, well-being, and cross-cutting approaches. It has submitted quarterly updates on its progress since August 1, 2016; this is a report on its progress since the last update submitted on July 30, 2021.

<u>GOAL 1: PREVENTION</u> Provide children and families with the upfront supports and services they need to prevent them from entering the child welfare system and/or limit their involvement with the system once they are known to it.

In June 2017, the OCP released a <u>prevention plan</u>—written in collaboration with dozens of County departments, advocates, and community stakeholders—for enhancing prevention efforts across the county. Many successful initiatives came out of this work, moving us closer to the goal of providing primary prevention supports to families who want them (these efforts are highlighted in our annual prevention reports). More recently, additional endeavors have begun taking shape that hold the promise of moving this work to its next phase of implementation.

<sup>&</sup>lt;sup>1</sup> Unless otherwise noted, all reports mentioned in this document are available through the embedded links and on the Office of Child Protection website at <u>http://ocp.lacounty.gov/</u>.

From this point forward, we will report on our work through updates on these key initiatives, all of which include cross-departmental and cross-sector partnerships that are necessary for broadening the scope and deepening the foothold of prevention priorities in the future.

# • Supporting Los Angeles County's Transition to Prioritizing Well-Being

- Family First Prevention Services Act (FFPSA)—During the past quarter, the Department of Children and Family Services (DCFS), in partnership with Chapin Hall at the University of Chicago, the OCP, the Probation Department, the Department of Mental Health (DMH), and others, has been planning for FFPSA implementation through six workgroups: fiscal, practice, technology, continuous quality improvement (CQI), training, and communications, as well as through extensive advocacy and planning efforts outside of those workgroups with providers and other partners.
  - As of October 1, 2021, DCFS, DMH, and Probation officially launched Part IV implementation and are beginning to pursue short-term residential therapeutic program (STRTP) placements in line with state and federal qualified residential treatment program (QRTP) guidance. They continue to work directly with providers to problem-solve remaining accreditation concerns and to support them through this challenging process. They also continue to advocate on both the state and federal levels to address outstanding concerns regarding Institution for Mental Disease (IMD) determination assessments.
  - DCFS is planning and launching an initial learning site in Service Planning Area (SPA) 2 to focus on testing the integration of the evidence-based practice of motivational interviewing into standard procedures, and to track data for the family-maintenance population; the hoped-for goal is to draw down FFPSA funds to cover the cost of serving that population.
  - DCFS and the OCP are co-developing a process for building out community pathways to FFPSA services, kicking off initial conversations within practice, advisory, and leadership sectors as well as with peer departments and homevisiting system-change leaders. This process is a 'big lift' requiring tremendous cross-departmental coordination, and also represents one of the most innovative opportunities for Los Angeles to embrace its potential as a leader in FFPSA-related prevention implementation.
- Thriving Families, Safer Children (TFSC)—TFSC, a public/private partnership at the local, state, and national levels focused on strengthening child and family well-being, has launched its community engagement process. After integrating broad stakeholder input and feedback from Board deputies, the team contracted with three nonprofits (SHIELDS for Families, Para Los Niños, and Strength-Based Community Change) to facilitate community input and 'visioning sessions' throughout all SPAs and supervisorial districts in partnership with over 20 additional local organizations. These sessions with residents and grass-roots community-based organizations seek to understand their aspirations and strategies for

improving child and family well-being; their input will be used to align, invest in, and amplify community co-designed initiatives at the local, state, and national levels to create systems change in Los Angeles County and beyond.

- Anti-Racism, Diversity, and Inclusion (ARDI) Initiative—In line with recent Board directives, ARDI is preparing to launch a Prevention Task Force that will recommend an optimal governance structure for Countywide investments into prevention. The OCP has contributed \$500,000 to support this work, which includes a cross-departmental fiscal analysis so the County can better leverage monies across funding streams. This work represents a fundamental opportunity to re-align Countywide resources and activities to better support families in our communities.
- Information, Referral, and Connection System—The Chief Executive Office (CEO) and Chief Information Office (CIO) are collaborating with the OCP, County departments, and other stakeholders to include a TAY (Transition-Age Youth) Hub in the procurement of a new information and referral service to be integrated with an enhanced Los Angeles County Community Information Exchange (LACCIE) that will initially be rolled out to meet the needs of TAY. This new approach leverages and combines existing CIO platforms/resources with new information and referral services to create a new countywide Information, Referral, and Connection (IR&C) system. A County team composed of staff from the CEO, CIO, County Counsel, and others has convened to begin negotiations with the highest-ranked proposer; the anticipated timeframe to execute the contract for the IR&C system is the second quarter of 2022.

# • Ensuring That Community-Based Resources Thrive

- ♦ <u>Home Visitation</u>—Partners are working together to expand home-visiting programs to all mothers across the county who want to participate.
  - DCFS, OCP, First 5 LA, Los Angeles Best Babies Network (LABBN), and the Children's Data Network are mapping a process for integrating the FFPSA funding stream into home-visiting services in Los Angeles County and are working through fiscal questions foundational to the work. This represents a great opportunity to improve the sustainability and reach of our existing system and to think strategically about building targeted engagement pathways to ensure that community members who can benefit from preventive access to home-visiting resources can do so before an open DCFS case is needed.
    - Because FFPSA requires a 50% non-federal match, this group has completed a braided funding-stream analysis assessing all current service dollars for drawdown match capacity.
    - Group members have also developed lists of key questions to work through and key stakeholders who should be engaged in the systemschange process. They already partner with the FFPSA Practice Workgroup and will also include the Los Angeles County Home Visiting Collaborative Leadership Council, the Los Angeles County Perinatal and Early

> Childhood Home Visitation Consortium, and others to integrate stakeholder wisdom into the planning process. This change will require extensive cross-departmental collaboration.

- The County, First 5 LA, and other partners are revising a shared-leadership framework for home visiting facilitated by national expert Jeanna Capito. The resulting structure is anticipated to be ready in spring 2022.
- Prevention & Aftercare (P&A)—DCFS, OCP, DMH, the Children's Data Network, and other partners are exploring opportunities for FFPSA funding to augment current P&A funding streams, adding sustainability and capacity to our system of community supports. As mentioned, this planning includes testing the integration of motivational interviewing into the P&A process to allow FFPSA funds to support that work. Most excitingly, it also includes ways for P&A agencies to expand their role to include enhanced partnerships with DCFS to engage clients in communitybased services—building off the Hotline to Helpline model—plus enhanced partnerships with schools. This second component is ambitious: it both sets Los Angeles County apart as a leader in broadening FFPSA into a primary-prevention context, and it requires deep cross-departmental commitment.
- Early Care and Education (ECE)—The Department of Public Health's (DPH's) Office for the Advancement of Early Care and Education (OAECE) strengthens early care and education practice, policy, and systems across Los Angeles County. Recent OAECE activities and COVID-19 response statistics include:
  - The early care and education system is still in COVID-19 recovery, with only 80% of family child-care homes and 70% of early care and education centers being open.
  - To help stabilize the early care and education system, OAECE has partnered with the Los Angeles County Development Authority (LACDA) to use \$10 million of American Rescue Plan Act funding for operations grants to child care providers.
  - On a regular basis, OAECE convenes stakeholders through the Child Care Planning Committee and the Policy Roundtable for Child Care and Development. In September, the Child Care Planning Committee launched the Los Angeles County Early Care and Education Needs Assessment, a review conducted every five years that serves as a guide for early care and education planning at both the state and county levels.
  - In September 2021, OAECE received 1,621 applications from early educators for the Workforce Pathways LA Stipend Program, which offers financial incentives for their completing professional-development or college courses, obtaining a Child Development Permit, or earning a college degree.

#### • Measuring Our Impact

- Working with First 5 LA, DMH, DCFS, the Children's Data Network, the CEO, the CIO, DPH, the Department of Health Services (DHS), the Los Angeles County Office of Education (LACOE), and other data experts to develop a set of standardized measures of prevention to evaluate the effectiveness of prevention-plan implementation efforts
  - Engaging subject-matter experts and stakeholders to identify data indicators and sources for the next iteration of the Countywide Prevention Metrics (CPM). To date, the Department of Public Social Services (DPSS), LACOE, the OAECE, the DHS Office of Diversion and Re-Entry's Youth Diversion and Development unit, the CEO's Alternatives to Incarceration initiative, Probation, the Public Defender, the District Attorney, DPH's Substance Abuse Prevention and Control unit, and the Child Care Alliance of Los Angeles, among others, have discussed CPM data needs related to:
    - Early care and education
    - Chronic absenteeism
    - Juvenile-justice involvement
    - Substance use
    - Community health and well-being
  - Finalizing with partners the data dashboards and data stories related to child protective services involvement, preventable child injury and death, chronic absenteeism, high school graduation, disconnected youth, college and career readiness, juvenile-justice involvement, infant health (i.e., full-term births and infant mortality), children with healthy weights, youth development and mental health, maternal mental health, intimate partner violence, families experiencing financial insecurity and food insecurity, perceived social support among parents, families experiencing homelessness and housing insecurity, perceived community safety, and community assets. These dashboards will be included in the next iteration of the Countywide Prevention Metrics report scheduled to be released in the first quarter of 2022.

**<u>GOAL 2: SAFETY</u>** *Minimize, if not eliminate, the risk that a child known to one or more entities in our system will be harmed.* 

#### Implementation of Anthony A. Report Recommendations

On August 10, 2018, the OCP, DCFS, the Health Agency, DHS, and the Los Angeles Sheriff's Department (LASD) filed a joint response to the Board's motion to review the case that included the death of 10-year-old Anthony Avalos. The report contained eight recommendations for systems improvements. A <u>six-month follow-up report</u> on efforts to implement these recommendations was submitted to the Board on February 14, 2019. This past quarter's implementation efforts on those recommendations are below.

#### 1) Reevaluate DCFS's Voluntary Family Maintenance (VFM) process.

The revised VFM policy was released on August 3, 2020, and now governs how VFM cases should be handled.

#### 2) Improve the skills of staff interviewing children.

A training video on different aspects of interviewing was released in June 2020 and is now required for children's social workers (CSWs) and their supervisors (SCSWs) in both DCFS's emergency-response and continuing-services sections. Of the SCSWs and CSWs required to complete the training, 96% and 71%, respectively, have done so; full completion is targeted for December 31, 2021.

#### 3) Retrain social workers on the proper use of Structured Decision Making<sup>®</sup> (SDM).

See "Risk Assessment and System Improvement Recommendation Implementation" on page 9 for a full description.

#### 4) Increase collaboration between DCFS and law enforcement.

- DCFS and LASD continue to work together on the Antelope Valley Joint Response/Joint Investigation project. The project is currently focused on DCFS offices and LASD stations in Lancaster, Palmdale, and Santa Clarita.
- Meetings occurred in September with the Santa Clarita and Palmdale DCFS offices and LASD stations (the Lancaster meeting is scheduled for late October) addressing the following areas:
  - <u>Data Tracking</u> Santa Clarita and Palmdale have both seen increases in the number of child-abuse/neglect referrals and calls for services since August 2021, thus increasing the number of joint responses by DCFS and LASD. The group discussed strengthening data collection by tracking the numbers of Electronic Suspected Child Abuse Report System (eSCARS) reports received by LASD each month, the numbers of those reports for which LASD requests a DCFS joint response, and the results of those joint responses, including child detention status, parent arrest status, and referrals transferred to the DCFS's emergency-response unit for further investigation.
  - <u>Training</u> The first draft of the joint response/investigation training, including a glossary of child-abuse investigation terms, is complete. DCFS will incorporate feedback from each of the joint-response teams and share a revised draft of the training with OCP and the Los Angeles Police Department for additional input.
  - <u>Pilot Review and Areas for Improvement</u> The AV pilot teams report that joint response is the best way to investigate sensitive child-abuse eSCARS referrals. LASD deputies trained in child-abuse investigations are paired with more

experienced emergency-response CSWs to determine who will be interviewed, who will do the interviewing, and who will provide follow-up. They are able to share critical information with each other on-scene and confer regarding next steps. The pilot teams also conduct better investigations because they respond in a non-threatening manner and have special skills and experience in interviewing children and victims of crime.

- Pilot teams have identified areas for further consideration and improvements to DCFS and law enforcement joint response/investigation:
  - Create a specific child-abuse joint response/investigation deputy item for every LASD station.
  - Make eSCARS available on all County mobile phones used by LASD deputies and emergency-response CSWs.
  - Allocate appropriate equipment (e.g., slick/plain-wrap patrol vehicles equipped with mobile digital computers for LASD deputies conducting joint response/investigations with DCFS) to the joint response teams.
  - Explore developing an MOU between DCFS and LASD regarding serving DCFS removal orders and search warrants in Los Angeles County so there is consistency across LASD stations when it comes to assistance with serving those instruments.

#### 5) Improve the Medical Hub system.

See the "County Medical Hubs" section on page 18 for a full description.

# 6) Improve the investigation skills of social workers at the front end and beyond.

- During this past quarter, DCFS's Continuous Quality Improvement Division (CQID) established a consensus-building process to develop a common language/shared understanding of best practices for accurately documenting information in CQID quantitative and qualitative reviews. CQID also continued to lead work on the DCFS' Performance Improvement Plan (PIP) for the California Department of Social Services.
- CQID is now preparing to start Phase II of the DCFS Federal Measure P1 (permanency within 12 months) review. This includes qualitative interviews with assigned CSWs/SCSWs and secondary staff from units such as resource-family approval, adoptions, and the Permanency Partners Program (P3), on cases that fell short of the 12-month permanency goal and are now in the long-term category. A test run was completed on four cases, and a department-wide rollout of Phase II will begin during the fourth quarter of 2021.

- CQID is developing a case-review tool to support examining factors leading to the screening-in of referrals categorized as 'low risk' on the risk stratification model. It will be used to review referral samples meeting specific criteria, and findings will inform departmental efforts to reduce the disproportionate number of African-American children screened-in at the front end of the County's child welfare system. The release of the tool is slated for the fourth quarter of 2021.
- CQID is also developing a review tool to support Phase II of DCFS' internal State Audit Replication Study by focusing on Recommendation 12, an assessment of the quality of supervision provided to CSWs. The tool will identify what supports are most needed by supervisors as they review, evaluate, and approve the work of their staff. Its launch is scheduled for the fourth quarter of 2021.

# 7) Improve the capacity to assess needs and progress made throughout the span of the case.

- DPH's Substance Abuse Prevention and Control (DPH–SAPC) unit continues to fund two SUD-TIPS (Substance Use Disorder–Trauma-Informed Parent Support) Client Engagement and Navigation Services (CENS) navigators to assist in assessing and linking clients to substance-use disorder treatment programs. Since the program's reinstatement in October 2020, approximately 400 clients have been referred for linkage. DCFS and DPH are continuing to explore funding options, including FFPSA reimbursement, to sustain these services beyond December 2021.
- DCFS is exploring the possibility of using American Rescue Plan (ARP) provisions to fund two co-located domestic-violence experts/consultants at the Child Protection Hotline to better serve the public and partners who call in. The first step is to complete and submit a finalized program design—being agreed upon between DCFS and DPH—along with a justification form. The CEO is hosting monthly ARP meetings starting in October and is also scheduling a workshop specifically with DCFS.
- DCFS and DMH continue to discuss the co-location of adult mental health clinicians at DCFS regional offices to provide multidisciplinary teaming support to social workers (particularly those in emergency response) around the mental health status and needs of parents.

#### 8) Reduce social worker caseloads.

• Since December 2020, the department has hired 301 CSWs and continues its efforts to fill existing vacancies; one of its goals is to reduce attrition while it actively fills vacancies to help decrease and maintain reduced caseloads. In December 2020, average caseloads were 19.7 for the continuing-services section and 7.7 for emergency-response referrals. In September 2021, the average caseloads for continuing services decreased to 17.5, but rose for emergency response to

12.3. The increase of the latter is likely due in part to children returning to schools in the fall for in-person instruction.

• DCFS continues to hold monthly Caseload Accountability Panel meetings with Service Employees International Union (SEIU) Local 721 representatives to jointly track and monitor caseloads. Discussions around reducing CSW caseloads remains a central topic during the standing meetings.

#### Risk Assessment and System Improvement Recommendation Implementation

- Partnering with DCFS to implement the recommendations outlined by the OCP in its report of May 2017
- Evident Change worked with the DCFS policy unit to finalize changes to the Structured Decision Making<sup>®</sup> (SDM) reunification, case-closure, and permanency sections of DCFS policy; updated instruction is beginning to be delivered. DCFS assistant regional administrators and SCSWs have received/will receive day-long leadership trainings on these areas from September through December, followed by the SCSWs returning with their CSWs for two-day in-depth field trainings beginning in October and continuing through 2022. More than 2,000 workers will be trained, some by Evident Change and some by DCFS trainers.

# Use of Public Health Nurses (PHNs) in Child Welfare

 DPH's Child Welfare Public Nursing Program (CWPHN) launched a Coronavirus Warmline in April 2020 to support the needs of DCFS and Probation families, clients, employees, contractors, and facility staff after hours and on weekends and holidays. A total of 1,260 non-duplicated COVID-19–related initial PHN consultations were logged between mid-April 2020 and the end of September 2021.

During the last full quarter of 2021 (July 1 through September 30), a total of 144 consultations were received. Nearly 80% were for children in foster care; 20% were from short-term residential therapeutic programs (STRTPs), and around 1% for children in home-of-parent. Interventions provided by the PHNs included sharing COVID-19 information, education, and resources (92%); 60% of children were referred to their primary provider, and nearly half (47%) of the PHNs consulted with the DPH COVID-19 provider line for additional guidance.

# **Electronic Data-Sharing Efforts**

- <u>Emergency Response Investigative Service (ERIS)</u>—Working with DCFS, the CIO, and County Counsel on a web-based portal to facilitate the electronic sharing of information relevant to investigations of child abuse/neglect across six County departments and DCFS, based on a Memorandum of Understanding (MOU) that the OCP finalized with participating departments, County Counsel, and the CEO
  - ♦ Launched a revised ERIS in December 2020 designed to help streamline DCFS investigations and the placement of children with relatives when a removal is

necessary. The new system—created by the Internal Services Department (ISD), the OCP, DCFS, and the CIO—adds data from other departments and includes changes suggested by users to improve system functioning. The new system has now been implemented in all 20 DCFS regional offices and its command post. The Department of Human Resources (DHR) and ISD were instrumental in ensuring a smooth transition from Learning Net to Learning Link so that offices could access the ERIS mandated training.

- Los Angeles Network for Enhanced Services (LANES)—Working with LANES (a health information exchange system), DPH, County Counsel, DCFS, and the CEO to provide child-welfare teams with health information from LANES to support healthcare coordination and effective treatment for DCFS youth. Using LANES, childwelfare PHNs are able to view, download, and print timely, comprehensive health records for their clients and update children's social workers and caregivers, as appropriate, about client needs.
  - ♦ Access to LANES was extended to all County child-welfare public health nurses, as well as their intermediate typist clerks (ITCs). Since that time, the OCP has:
    - Coordinated efforts to enhance the usability of DHS' electronic record system, ORCHID (Online Real-time Centralized Health Information Database), through improvements to its outside records tab, which links to LANES
    - Worked with Medical Hub providers to identify potential improvements to the presentation of the LANES information within ORCHID to fit more effectively within the Hub clinical workflow
    - Worked with LANES to make improvements that reflect CWPHN feedback; specific changes included, among other improvements, revamping the patient synopsis to improve the presentation of key data, ensuring that data in the patient synopsis mirrors the data in the original summary tab, adding a timeout notice, and including the California Immunization Registry information within the synopsis
    - With DPH, convened CWPHNs for a training on the new LANES features and updated training materials accordingly
    - Worked with DCFS to add Medicaid Client Identification numbers (CIN) to the child-welfare client roster to improve the data-matching process with LANES
- <u>Electronic Education Passport System (EPS)</u>—The Education Coordinating Council (ECC), working with DCFS and LACOE, has made significant progress toward greater access to accurate and consistent education data about foster youth.
  - ♦ Between August 1 and October 1, 2021, LACOE trained 76 staff members at 10 school districts on EPS. During this period, district staff made 3,919 document searches, and 5,733 student searches were conducted in EPS.

- LACOE developed an attendance report for DCFS that allows the user to create ad hoc reports within EPS to view district attendance data in real time. Data can be sorted/filtered by name, local education agency, school, grade, CSW/SCSW, and/or DCFS regional office.
- ♦ The ECC is working with LACOE to ensure that stakeholder input is gathered and included before the development of any new modules.
- LACOE has completed the recruitment process for an EPS change-management consultant to engage in user engagement and improving the functionality of the system. LACOE is currently conducting interviews with candidates and then will select a finalist.

**<u>GOAL 3: PERMANENCY</u>** No child leaves the system without a permanent family or a responsible caring adult in his or her life.

#### Increasing the Use of Relative Placements

- The Upfront Family Finding (UFF) project is now in 11 DCFS offices: Belvedere, West LA, West San Fernando Valley, Santa Fe Springs, Glendora, Vermont Corridor, Santa Clarita, Wateridge, Hawthorne, South County, and Pomona.
  - ♦ From January through September 2021, 3,080 children have been the subject of detention hearings in the 11 offices; 85% of those children have been placed with kin following removal from their homes. Planning is underway to expand UFF to the remaining DCFS offices.
  - Discussions continue as to whether UFF meets the criteria to qualify under 'kinship navigator support' for funding under FFPSA.

# Permanency and Self-Sufficiency Planning for Transition-Age Youth (TAY)

- On September 4, 2019, the OCP submitted a report to the Board of Supervisors, <u>Increasing Stability and Permanency for Transition-Age Youth</u>, which contained recommendations from the OCP Permanency Workgroup on data, family reunifica- tion, DCFS's Youth Permanency Units, and the Dave Thomas Foundation's foster- child adoption project, "Wendy's Wonderful Kids," plus a draft analysis of programs and benefits available to eligible youth.
  - The OCP Permanency Workgroup continues to meet monthly. DCFS provided the following data as of September 30, 2021:
    - 2,372 children have been freed with a plan of adoption and are awaiting adoption finalization
    - 686 have been in adoptive placement for more than six months
    - 877 adoptions were finalized in 2021 through August of this year
    - 678 cases in the dependency court for 90 days or longer have not reached disposition

> Discussions are ongoing with the Rotary Club of Los Angeles and others to fund and develop an interactive electronic version of the TAY benefits chart created by OCP and other stakeholders. The chart can currently be found on the <u>Permanency</u> page of the OCP website, under "Relevant Publications and Reports."

## Transitional Shelter Care Facility (TSCF) Pilot

 Bi-weekly meetings continue with stakeholders—including DCFS, DMH, Probation, the Juvenile Court, the Children's Law Center, Court-Appointed Special Advocates (CASA), County Counsel, and others—to discuss the multidisciplinary teaming pilot led by DCFS' Accelerated Placement Team (APT), along with DMH, to stabilize and find permanency for hard-to-place youth (overstays and chronic repeaters) at 10-day Temporary Shelter Care Facilities (TSCFs). The APT has named the special social workers staffing this effort "the OCP unit."

The success of this pilot, which has been chronicled in previous updates, resulted in the Short Term Residential Therapeutic Program (STRTP) Task Force recommendation that it be significantly expanded so more of these youth can be served by this highly effective teaming project. DCFS is working with the Board on a motion to expand this pilot to the Placement Stabilization Team program. Future updates will report on that expansion.

- ♦ Data from the last quarter shows the number of high-risk program youth returning to a shelter:
  - 1 reentry for OCP clients during the month of July
  - 1 reentry for OCP clients during the month of August
  - 4 reentries for OCP clients during the month of September
  - With a total of 62 youth currently in the program, the return rate was **10%**.
- ♦ For this quarter, out of 62 of the most highly at-risk youth, the OCP unit was able to keep over 90% out of TSCFs. Of the OCP clients that entered the shelter and the preventative placements that the OCP unit was able to establish, 50% of these clients were placed in foster homes, not in congregate care.
- ♦ The OCP team also assisted DCFS regional offices with four youth having significant challenges who were not part of the program, successfully positioning 100% of these youth in stable placements.
- Youth Summary
  - AA—In May 2021, the Children's Law Center reached out about its client AA. The case came in for physical abuse and neglect of AA by her bio-father and stepmother, but there were also possible CSEC concerns. AA was hospitalized in May for suicidal ideations. AA had been living in a foster home on Catalina Island, but upon her hospital discharge her foster parent refused to have her back; it was also difficult getting her access to the services she needed while being placed there. AA had two prior hospitalizations before her case was

> opened. She was receiving WRAP services and was discharged from the hospital with a 30-day supply of her medication.

Hearing the story of this minor's having been ripped away from her bio-mother 12 years before in Texas, plus her downward trajectory with regard to mental health, the OCP unit assigned CSW Vero Milian to AA's case in June 2021. At that time, AA was being exploited by a pair of 30-something brothers living near her placement. She was running away daily, had no healthy connections in her life, and was not in touch with her birth mother or maternal siblings, all living in Texas. OCP CSW Milian began visiting AA daily, sharing meals, occupying AA's time with activities a child should be experiencing. At the same time, CSW Milian struggled between courts and child-protection agencies in two states, finally locating AA's bio-mother—also a veteran of the child-welfare system—in Texas. CSW Milian developed a rapport with the bio-mom and brought her into AA's life after years of no contact and 12 years' of being physically apart.

CSW Milian negotiated a re-evaluation of circumstances around another relative residing with the mother, finally getting agencies in two states to consider returning AA to the home of her biological mother. CSW Milian accomplished this in less than four months, all the while becoming a most trusted confidante to AA. In September, CSW Milian bought new matching travel cases for AA, shared a celebration dinner with her, then helped her pack. At 4:00 a.m. on September 28, she saw 14-year-old AA board a flight to Texas to be reunited with her family. AA was met at the airport by her mother and four siblings; the family brought her home to a wonderful coming-home party with balloons, home cooking, and a celebratory "Welcome Home" cake. CSW Milian still speaks with AA and her mother and they continue feeling elated to be together. The family is now complete, with all mom's children under one roof.

**<u>GOAL 4: WELL-BEING</u>** Ensure that system-involved youth achieve the physical, emotional, and social health needed to be successful.

#### Efforts to Improve School Stability

- Continuing to partner with DCFS, Los Angeles County school districts, and LACOE to implement the foster-youth school-stability provisions included in the federal Every Student Succeeds Act (ESSA)
  - ♦ To date, 42 school districts have signed the long-term ESSA school-stability MOU, with Bonita Unified, East Whittier City, and Little Lake City school districts becoming signatories since the OCP's July update to the Board.
  - The ECC is engaging with other school districts to facilitate additional agreements, including Pomona and Las Virgenes Unified (both currently moving the MOU forward with their school boards). These 'on the verge' districts plus those that have already signed the MOU serve approximately 85% of the County's foster youth.

- The ECC is also working with partners to secure state sustainable funding to cover foster youth school-stability transportation costs for DCFS and school districts.
  - Convened a workgroup of representatives from DCFS, LACOE, the CEO's legislative affairs unit, school districts, the Alliance for Children's Rights, and California Youth Connection to implement a strategic plan to secure sustainable state funding
    - Working with HopSkipDrive (the initiative's contracted ride provider when other options are not available), DCFS, and Pomona Unified to collect the additional data needed to educate state stakeholders on this work
    - Continuing to engage other school districts to collect school-stability costs, staff time, and outcome data
  - OCP secured \$44,000 in philanthropic dollars for the UCLA Center for the Transformation of Schools to develop a report examining Los Angeles County school-stability efforts/outcomes to include quantitative data, human-interest stories, information on the process/model, research on the importance of school-stability transportation and its impact on well-being indicators (attendance, graduation, placement stability, placement changes, etc.), the intersection of school stability with equity, as well as information on potential funding streams. We currently have approximately \$70,000 for this effort and the OCP continues to secure the additional funds needed for this project.

#### School-Based Healing-Informed Arts Education

- Working with the Creative Wellbeing Team—the Los Angeles County Department of Arts and Culture (DAC), DMH, and the Arts for Healing and Justice Network (AHJN) to implement a creative well-being program that integrates healing-informed arts with mental-health—issue prevention models for middle and high schools with high numbers of foster and probation youth, helping youth build protective factors through the arts and developing local networks of mental-health clinicians, artists, teachers, and other stakeholders within schools and their surrounding communities
  - ♦ Between June and October 2021, the Creative Wellbeing Team:
    - Secured \$30,000 from Great Public Schools Now for AHJN to serve 53 young people through nine workshops at four STRTP sites, in partnership with DCFS and DMH.
    - Through a partnership with the Los Angeles Suicide Prevention Network (LASPN), AHJN artists provided five 20-minute 'Moments of Creative Wellbeing' workshops woven through LASPN's 2021 Virtual Summit "Re-Envisioning the Journey Together: The Hero in All of Us" along with a 90minute workshop featuring Creative Wellbeing writing team member Fabian Debora from Homeboy Art Academy. The summit drew over 3,000 attendees

and the creative wellbeing sessions each drew an average of 350 participants. Recordings of the sessions will soon be available on the LASPN <u>website</u>.

- The Creative Wellbeing curriculum workgroup is collaborating with AHJN member artworxLA to create an updated facilitators' guide and curriculum resources centered around four foundational concepts: healing-informed arts approaches, mental health promotion, cultural relevancy, and self-care.
  - The workgroup convened five youth content advisors who provided input on the existing curriculum and worked with mentors to create their own Creative Wellbeing art projects to be folded into the curriculum as resources, examples, and lesson plans.
  - The workgroup is interviewing Creative Wellbeing teaching artists to develop case studies and key insights to support teaching artists to incorporate the four foundational concepts that have emerged from the curriculum 'refresh' into their professional-development trainings and arts residencies for youth.
  - artworxLA, AHJN, and the curriculum workgroup will finalize the guide and resources throughout the fall and collaborate to deliver a trainer-of-trainers workshop in early 2022.
- ♦ For Fiscal Year (FY) 2021–2022, DAC has secured \$425,000 from the Juvenile Justice Crime Prevention Act (JJCPA) to fund school-based healing-informed arts education implementation in four school districts and two STRTPs.
  - Contracting and planning conversations are underway at Antelope Valley Union High School District, Pasadena Unified, Pomona Unified, and Whittier City School District.
  - DAC, DCFS, DMH, and OCP have regular planning conversations regarding Creative Wellbeing implementation at STRTPs and how arts programming already being implemented by each agency can be leveraged and coordinated.

# **Educational Equity**

- Created a workgroup with DCFS and LACOE partners to focus on the issue of equity in education for system-involved youth
  - Developed a workplan, including substance, timeline, and leadership roles, for the upcoming years to facilitate the examination with an equity lens of issues/ solutions pertaining to demographic data collection, chronic absenteeism, and access to resources
  - Continued working with DCFS to examine the race/ethnicity, and sexual orientation/gender identity and expression (SOGIE) data gathered at various touchpoints in the DCFS process

♦ Began working on an assessment of the causes of and positive interventions for chronic absenteeism

#### **Increasing Access to Higher Education**

- Working with John Burton Advocates for Youth (JBAY), LACOE, relevant County departments, and community-based organizations to facilitate enhanced support for post-secondary educational attainment for youth in the child-welfare and juvenilejustice systems, and to implement SB 12 provisions
  - DCFS, Probation, and LACOE participated in 2020–2021's California Foster Youth FAFSA<sup>®</sup> Challenge (Free Application for Federal Student Aid), designed to increase system-involved youths' access to financial aid for college by increasing FAFSA completion rates. LACOE analyzed the 2020–2021 FAFSA Challenge results and found data suggesting that non-public school students, African-American students, and probation-involved youth need additional support in preparing for postsecondary education, as these groups completed FAFSA/CADAA (California DREAM Act Application) submissions at lower rates than their peers.
  - Workgroup partners developed targeted strategies to increase the completion rate for these youth populations and incorporate this work into the coming year's FAFSA Challenge workplan.
- Working with JBAY, DCFS, Probation, LACOE, the Los Angeles Unified School District (LAUSD), and the Department of Workforce Development, Aging and Community Services (WDACS) to develop creative solutions for reaching out to system-involved youth to virtually support their completing the FAFSA
  - ♦ To incentivize completion, JBAY secured \$10,000 from the Hilton Foundation, donating it to LACOE to provide gift cards to the first 200 qualifying youth completing their FAFSAs.

  - LACOE hosted three think-tank meetings with foster-youth program partners from the University of California, California State University, and California community college systems to identify barriers to college attendance as well as strategies to successfully transition youth to college and career.
  - ♦ LACOE and partners from DFCS, Probation, local universities, and community colleges are hosting ongoing financial-aid workshops.
  - ♦ LACOE is developing an enhancement in EPS (page 10) to allow districts and partners from DCFS and Probation to pull FAFSA status reports, thus helping them to support youth in completing the FAFSA.

> ♦ JBAY has updated all its FAFSA materials, including additional resources for those completing the CADAA.

# **Resource Guide to Improve Foster Youth Educational Outcomes**

The ECC partnered with the Alliance for Children's Rights to provide input into its newly published <u>Best Practices Guide</u> that includes step-by-step procedures for creating district-wide systems to consistently implement the education rights of youth in foster care, featuring relevant laws, tools, equity and trauma considerations, and data-collection tips. Topics covered include identifying youth in foster care, school stability, immediate enrollment, partial credits, graduation, and data. This guide was distributed to ECC members and constituents.

#### Workforce Development

- WDACS has begun making enhancements to its Automated Referral System (ARS) based on the August 10 Board motion plus feedback from the Opportunity Youth Collaborative (OYC) and a May 2021 L.A. Compact study, <u>Improving Equitable Employment Outcomes for Transition-Age Foster Youth in L.A. County</u>. Enhancements will allow a faster distribution of referrals to the workforce centers, notification improvements to facilitate follow-up, and updated confirmation e-mails to youth.
- WDACS' Youth@Work Camp to Community Transition program, which served 70
  Probation youth in camps and juvenile halls during program year 2020–2021, received
  a Special Merit Award from the Los Angeles County Quality and Productivity Commission, as well as recognition from the National Association of Counties.
- OYC released a guide entitled <u>Fostering Careers: A Guide for Supportive Adults</u> <u>Helping Youth</u>, designed to help a youth's caregiver or other supportive adult discuss the youth's career interests and set expectations around getting a first job. This was written as a companion piece to OYC's guide for youth, <u>Fostering Careers:</u> <u>A Roadmap to Your First Job</u>.

# Short-Term Residential Therapeutic Program (STRTP) Task Force

- In January 2021, the directors of DCFS and DMH asked the OCP to coordinate the creation of a short-term workgroup composed of health and human services department heads, judicial personnel, law-enforcement leadership, community partners, commissioners, advocates, youth, community members, and providers to develop a comprehensive set of recommendations to the Board of Supervisors regarding needed systemic improvements for short-term residential therapeutic programs (STRTPs) and the continuum of care for children.
- On June 30, 2021, the STRTP task force submitted <u>A Report from the Short-Term</u> <u>Residential Therapeutic Program (STRTP) Task Force</u> to the Board of Supervisors for consideration. The task force's recommendations include several to improve local practice; those lie within the existing authority of the County and can be implemented by its child-serving departments in a relatively short timeframe. Also

included are longer-term solutions, many of which depend on state statutory and budgetary/funding action.

- DCFS, DMH, Probation, and OCP have developed a workplan—included in this progress update as Attachment A—with anticipated implementation timeframes and status updates on each of the STRTP task force recommendation areas.
- The DCFS Executive Team has also developed the Placement Capacity Project, which includes recommendations for 16 issue areas to improve placement capacity for DCFS-involved children. Implementation of the STRTP task force recommendations is one of the areas included in the Placement Capacity Project.

# **County Medical Hubs**

- Working with DHS, DCFS, DMH, and DPH to implement a detailed workplan to improve the overall Hub system, focusing on timely access to forensic exams and initial medical exams (IMEs) in the short term, and potentially broadening Hub services as part of strengthening healthcare coordination for DCFS-involved youth in the longer term (Phase II). Examples of recent improvements include:
  - ♦ Executed an Interagency MOU between DCFS, DHS, DMH, and DPH which outlines the target population, core services, governance structure, funding, and roles and responsibilities for co-located departments at the County Medical Hubs
  - OCP is working with DCFS and DHS to strengthen communication around forensic evaluations, developing a Medical Hubs 'cheat sheet' for DCFS regional administrators and line staff plus updating an escalation decision tree that outlines how DCFS staff can connect with Hub medical providers when they have questions regarding the disposition, timing, or results of a forensic evaluation during and after regular hours. OCP is working with DCFS to gather feedback from regional office leadership and line staff on the documents.
  - ♦ OCP, DCFS, and DHS have developed short- and medium-term action steps to improve the medical-clearance process for high-risk youth from TSCFs. This includes adding on-call security to the LAC+USC Medical Hub at night and on weekends to assure staff, youth, and other patients' safety, as well as DCFS's reviewing its medical clearance policies and TSCF contracts to streamline and clarify, where possible, to reduce unnecessary or repeated medical clearances.
  - OCP, DCFS, DHS, DMH, and DPH's Medical Hub collaboration received a Traditional Plaque Award from the Los Angeles County Quality and Productivity Commission.

#### **Dental Screenings and Exams**

- Working with DCFS, DPH, DHS, and the University of California Los Angeles (UCLA) to increase the number of foster youth receiving dental screenings and exams, when needed, within policy timeframes.
  - DPH's Oral Health Program (DPH–OHP) developed a mobile-friendly resource in <u>English</u> and <u>Spanish</u> that outlines oral-health best practices at each developmental milestone. DCFS posted the document on its LA Kids website so that social workers can refer to it and provide documents to caregivers during their monthly visits.
  - ♦ Working with DPH–OHP and DCFS to develop oral-health trainings for youth, bench officers, and attorneys who work with families and youth in care
    - DPH–OHP and OCP presented at the September 1 California Youth Connection Los Angeles chapter meeting regarding the importance of oral health, gathering feedback to help develop a youth-friendly presentation on the basics of oral health, best practices, and how to use Medi-Cal to access dental services. DPH is currently developing a presentation incorporating that feedback, with another session planned in early 2022.
    - DPH–OHP presented to 30 members of the SPA 8 Prevention & Aftercare lead agency, Strength-Based Community Change (SBCC), on September 29. DPH–OHP, DCFS, and OCP are also helping SBCC develop a survey for its clients to better understand why Denti-Cal data show lower dental-service utilization rates in SPA 8 for foster youth compared to other SPAs.
    - DPH–OHP will present to the November 4 Expecting and Parenting Youth Workgroup meeting (co-led by DCFS and the Children's Law Center) on the importance of oral health, evidence-based practices, and oral-health resources. DPH–OHP will also present to Expecting and Parenting Youth resource specialists on October 14.
    - DPH–OHP, DCFS, and OCP are working with the juvenile court, the Children's Law Center, and Los Angeles Dependency Lawyers to develop oral-health presentations to be scheduled in early 2022.

#### **Mental Health Coordination**

- Working with DCFS and DMH to implement an independent evaluation of the Multidisciplinary Assessment Team (MAT) and the overall front-end assessment process to help inform how mental health services can be streamlined for DCFS-involved youth. DCFS and DMH are jointly funding the evaluation and the OCP is managing the independent contractor implementing it, the California Institute for Behavioral Health Solutions (CIBHS).
  - ♦ CIBHS has completed the evaluation report and will be reaching out to stakeholders to provide the report findings and recommendations.

## Addressing Psychotropic Medication Use in Child Welfare

- Monthly meetings of the Psychotropic Medication Workgroup continue, overseeing the implementation of all protocols related to the use of psychotropic medications for youth in out-of-home care in both the child-welfare and juvenile-justice systems.
  - Quarterly updates of psychotropic medication data were recently received from DCFS and Probation.
    - DCFS data as of October 6, 2021, indicate that:
      - 1,553 children are being administered psychotropic medications, which is 8.6% of Los Angeles County foster children
      - 309 children are being administered anti-psychotic medications, which is 19.9% of foster children on medications
      - 761 children are being administered two or more medications, which is 49% of foster children on medications
    - Probation data as of September 30, 2021, indicate that:
      - 45 youth who are suitably placed are being administered psychotropic medications, which is 15% of those in suitable placement
      - 4 youth in suitable placement are being administered anti-psychotic medications, which is less than 1% of that population
      - 20 youth in suitable placement are being administered more than one medication, which is 7% of that population
      - 39 youth placed at Dorothy Kirby Center are being administered psychotropic medications, which is 73.6% of that population; 20 of those youth were on more than one medication
      - 103 youth in juvenile halls are being administered psychotropic medications, which is 39.9% of that population; 42 of those youth were on more than one medication
      - 43 youth in probation camps are being administered psychotropic medications, which is 53.8% of that population; 15 of those youth are on more than one medication
  - The Psychotropic Medication Youth Engagement Worksheet (YEW) is being administered in both systems. Probation continues to file 25 to 30 each month, while PHNs from DPH's Child Welfare Public Health Nurse unit have initiated 1,687 YEWs with 1,040 completions from program launch through September 2021.

# California Opioid and Stimulant Learning Collaborative

- With support from DCFS, Probation, DMH, DPH, the juvenile court, the Children's Law Center, Los Angeles Dependency Lawyers, and others, the OCP, as lead, applied in December 2020 to participate in a new statewide effort managed by the California Department of Health Care Services, California Health Policy Strategies, LLC, and Health Management Associates to establish regional learning collaboratives— "Effective Child Welfare and Justice Systems for Families Impacted by Opioid and Stimulant Use." Los Angeles was selected as one of the 13 participating counties for this project; meetings began in February and will last through August 2022.
- Most recently, the team has participated in learning webinars on Plans of Safe Care and 'reasonable efforts' and is currently working on the Plan of Safe Care protocol required by federal and state law for newborns prenatally exposed to substances including alcohol; meetings are being scheduled with jurisdictions such as Orange County, Santa Barbara County, Riverside County, and the City and County of San Francisco that have recently developed Plan of Safe Care protocols.
- Current and future work includes training for system stakeholders on the neuroscience of addiction and the use of medication-assisted treatment.

#### Strengthening Detection and Services for Fetal Alcohol Spectrum Disorders

- On September 15, 2021, the Board of Supervisors passed a motion, "Serving Children with Fetal Alcohol Spectrum Disorders," calling for cross-departmental collaboration to strengthen detection efforts and services for children with fetal alcohol and other inutero substance exposure; provide training to medical, social work, and mental health staff to improve understanding and awareness of the impacts of fetal alcohol and other in-utero substance exposure; and assess the County's current fetal alcohol/ substance exposure assessment, practices, and treatment activities.
- In early October, the OCP convened a workgroup consisting of DMH, DHS, DCFS, and DPH–SAPC to work on a joint response to the Board motion. To date, the workgroup has met with representatives from the Harbor-UCLA Medical Hub and LAC+USC's FASD Clinic to learn about their assessment process and best practices for detecting FASD and providing services for children with those disorders.

<u>GOAL 5: CROSS-CUTTING STRATEGIES</u> Rethink structures, programs, and processes, on an ongoing basis, that impact multiple entities, to take advantage of new thinking and learning that meaningfully improves our child protection system.

#### **Dual-Status Youth Motion**

 Pursuant to the Board motion of March 20, 2018, the OCP, in collaboration with multiple County stakeholders and others, continues activity through its Dual-Status Youth Workgroup's two subcommittees—Delinquency Prevention and WIC 241.1 Multidisciplinary Team (MDT).

- The Delinquency Prevention Subcommittee, led by Professor Denise Herz of California State University Los Angeles, filed its final report, <u>Delinquency</u> <u>Prevention Recommendations for the County of Los Angeles</u>, on April 30, 2021.
- The WIC 241.1 MDT Subcommittee submitted a complete redraft of the WIC 241.1 protocol to the juvenile court in February 2020. On September 21, 2021, the juvenile court shared its own draft protocol, which has been sent to subcommittee members for their review and comments (due shortly). Once comments are received, the group will provide feedback to the juvenile court that should ultimately lead to the adoption of, training for, and implementation of this protocol to the benefit of youth involved in both the child-welfare and juvenile-justice systems.

# **Commercial Sexual Exploitation of Children and Youth**

 In the 2018 evaluation <u>Commercially Sexually Exploited Girls and Young Women</u> <u>Involved in Child Welfare and Juvenile Justice in Los Angeles County: An</u> <u>Exploration and Evaluation of Placement Experiences and Services Received</u>, two recommendations out of a total of eight were identified as short-term fixes that would help improve CSEC placement stability.

The first was to ensure that all service providers are properly trained on issues facing CSEC, such as non-judgmental communication skills, trauma and mental health, and recognizing signs of AWOL (absence without leave). The second supports a youth preference for placements in the most homelike environment possible, given the finding that CSEC placed in foster-family agency homes stayed significantly longer in those placements when specialized services were also provided to them.

Additional discussion was requested on the revised CSEC housing statement of work that consolidates Foster Family Agency (FFA) and Intensive Services Foster Care (ISFC) requirements. The procurement package—which includes the statement of work—and sample contract is expected to be sent to County Counsel for review before the end of this month. The anticipated timeframe for the procurement release is November 2021 with contracts in place by July 2022.

# **Additional OCP Activities**

# **Ongoing Collaborative Efforts**

- Participate in the CEO's Anti-Racism, Diversity, and Inclusion (ARDI) Initiative's Planning and Data workgroup to help develop the Countywide ARDI strategic plan
- Participate in DCFS's and DMH's workgroup to implement the County's Family Urgent Response System (FURS)
- Participate in the UCLA Pritzker Center's collaborative on Racial Equity Child Welfare Efforts in Los Angeles County
- Participate on the Domestic Violence Child Welfare Policy subcommittee

- Participate on DCFS' and LACOE's Partnership Workgroup to ensure child safety during the COVID-19 pandemic
- Participate on DCFS' Eliminating Racial Disproportionality and Disparity (ERDD) workgroup
- Participate on the Project ABC Governance Board on serving young children and their families
- Participate in the Youth Justice Reimagined Advisory Group and the Department of Youth Development Structure and Oversight workgroup
- Participate on DPH's Office of Violence Prevention leadership committee
- Participate on the CIO's Business Management Committee and on its Information Management Committee for Countywide data-sharing
- Participate in the LA County Digital Divide Action Team
- Participate in DCFS's Administrative Review Round Tables (AART) and Child Fatality Roundtables

In summary, the OCP is working hard to accomplish its goals, as are the relevant County departments and a host of key community partners. We look forward to reporting further progress in our next quarterly update.

If you have any questions or need additional information, please contact me via e-mail at <u>mnash@ocp.lacounty.gov</u>, or your staff may contact Minsun Meeker at <u>mmeeker@ocp.lacounty.gov</u>.

#### MN:eih

c: Chief Executive Office Executive Office, Board of Supervisors Alternate Public Defender Child Support Services Chief Information Office Children and Family Services County Counsel District Attorney Fire Health Services Mental Health Parks and Recreation Probation Public Defender

> Public Health Public Library Public Social Services Sheriff Workforce Development, Aging and Community Services

#### Attachment A STRTP Task Force Recommendations Implementation Plan and Timeframe

#### Updated 10/25/2021

| 1. Expand the Continuum of Care   | Anticipated<br>Implementation<br>Timeframe | Status  |
|---|--|---|
| DCFS, Probation Child Welfare (PCW), and DMH should conduct a data<br>analysis of youth currently in or at risk of placement in STRTPs to<br>identify their strengths and needs and the behaviors they exhibit.   | March 2022                                 | DCFS initiated an analysis of youth placed at STRTPs in August<br>2021, which was presented to the Children and Families Cluster<br>on 9/22/21. At that time, 433 youth were placed. The analysis<br>included a review of the needs of the youth, the frequency of<br>Child and Family Team (CFT) meetings, and transition planning<br>efforts. All youth placed in STRTPs will continue to be reviewed<br>biweekly. DCFS continues to review the strengths and needs of<br>youth awaiting placement at our Temporary Shelter Care Facili-<br>ties (TSCFs) daily, information that assists in the development of<br>placement resources.<br>Probation Child Welfare (PCW) continues to analyze and assess<br>the current 172 PCW youth in STRTPs for step-downs or<br>increased services such as 1:1 behavioral support, wraparound,<br>Functional Family Therapy (FFT), Functional Family Probation<br>(FFP), Intensive Services Foster Care (ISFC), etc. The CFT is<br>utilized to accelerate all activities. |
| <ul> <li>DCFS, PCW, and DMH should use this 'youth needs' data to develop a plan to expand the continuum of care, including:</li> <li>Expanding options for older youth stepping down from STRTPs</li> <li>Increasing the recruitment of families that can provide intensive services to higher-need youth</li> <li>Reviewing and enhancing the STRTP model to better meet youth needs</li> <li>Prioritizing the implementation of missing levels of care that are necessary for meeting youth needs</li> </ul> | June 2022                                  | In collaboration with DMH, PCW, and various subject-matter<br>experts, DCFS developed concept papers for Foster Family<br>Agency (FFA), STRTP, and Resource Family Emergency Shelter<br>Care (ESC) specialized placement populations: CSEC, LBGTQIA+,<br>Regional Center, Substance Use Disorder, High Risk Youth,<br>Specialized Health Care Needs, and younger children (ages 6–9).<br>Virtual stakeholder conferences were held on July 28 and July 29<br>to garner input and feedback to finalize the program concepts.<br>On 8/9/21, the Request for Statement of Qualifications (RFSQ)<br>Solicitation was posted on the Internal Services Department and<br>DCFS Contracts public websites. The Prospective Contractors'<br>Conference was held on 9/9/21. The RFSQ Submission Period<br>opened on 9/14/2021 and closed on 10/12/2021. Two FFAs and  |

| 1. Expand the Continuum of Care | Anticipated<br>Implementation<br>Timeframe | Status  |
|---------------------------------|--|---|
|                                 |  | one STRTP submitted Statements of Qualifications (SOQs). If all qualifications are met, notice of tentative selections should occur by 11/29/21, with an anticipated contract start date of 1/1/2022.   |
|                                 |  | On October 1, 2021, the California Department of Social Services<br>(CDSS) released All County Letter (ACL) No. 21-119—Complex<br>Care Funding Opportunity, Requirements and Guidelines. This<br>ACL provides counties with "guidance on the funding opportuni-<br>ties under Assembly Bill 153 to support or expand new pro-<br>grams, services, practices and training to build system capacity<br>and ensure the provision of a high quality continuum of care<br>that is designed to support foster children in the least restrictive<br>setting, consistent with a child's permanency plan." |
|                                 |  | <ul> <li>Three types of funding allocations will be made available:</li> <li>(1) Child-specific funding available through individual request</li> <li>(2) Funds to support county capacity building</li> <li>(3) Funds to support the Children's Crisis Continuum Pilot</li> </ul>  |
|                                 |  | At this point, guidance has been provided to access the first allo-<br>cation type only. Additional guidance is still pending on access-<br>ing the second and third allocations.   |
|                                 |  | Additional discussion was requested on the revised CSEC hous-<br>ing statement of work that consolidates FFA and ISFC require-<br>ments. The procurement package (including the statement of<br>work) and sample contract is expected to be sent to County<br>Counsel for its review before the end of October. The antici-<br>pated timeframe for the procurement release is November 2021<br>with contracts in place by July 2022.  |
|                                 |  | As part of its Executive Team's Placement Stabilization Project,<br>DCFS will be developing a plan to establish a public ISFC<br>program.   |

| 1. Expand the Continuum of Care | Anticipated<br>Implementation<br>Timeframe | Status   |
|---------------------------------|--|--|
|                                 |  | From July through October 2021, DCFS, DMH, and PCW held<br>individual meetings with all contracted STRTP providers to<br>discuss their readiness and any preparations required to meet<br>the FFPSA Qualified Residential Treatment Program (QRTP)<br>requirements. DCFS/DMH/PCW also supported STRTP providers<br>and attended meetings with the California Department of Health<br>Care Services (DHCS) when requested to discuss their proposals<br>to address the Institutions for Mental Disease (IMD) exclusion<br>issue. DCFS continues to provide ongoing technical assistance to<br>all STRTP providers regarding FFPSA requirements and<br>implementation. |
|                                 |  | In preparation for FFPSA Part IV implementation, Casey Family<br>Programs facilitated a "Peer Learning Session" for DCFS/DMH/<br>PCW, state partners, and provider advocates with Colorado in<br>August 2021. In debriefing, a commitment was made to<br>schedule a meeting with CDSS, the County Welfare Directors<br>Association, and the California Alliance of Children and Family<br>Services to continue discussions around building a placement<br>continuum in Los Angeles County. The meeting was originally<br>planned for October but is being rescheduled to ensure that our<br>state partners are available.  |
|                                 |  | Los Angeles County applied and was accepted for Casey Family<br>Program's Youth First Demonstration Project, which assists<br>counties and providers in designing and implementing individu-<br>alized programs ("Enhanced Care Programs") for youth. The pro-<br>ject kickoff meeting is scheduled for 11/9/2021, and the STRTP<br>Task Force Report was shared with the project team.  |
|                                 |  | Lastly, as PCW and DCFS—in collaboration with DMH and the<br>County Systems of Care (SOC) team—develop the next five-year<br>System Improvement Plan (SIP), we will work to incorporate all<br>STRTP Task Force recommendations (specifically expansion of   |

| 1. Expand the Continuum of Care | Anticipated<br>Implementation<br>Timeframe | Status   |
|---------------------------------|--|--|
|                                 |  | the Continuum of Care across all departments) so that all county<br>plans will be in alignment. The Peer Review, which involved 15<br>peers from eight outside counties interviewing 28 county<br>workers (18 Children's Social Workers [CSWs] and 10 Deputy<br>Probation Officers [DPOs]), and is only done every five years,<br>was completed on October 8, 2021. Currently, six focus groups<br>are being conducted (current foster youth, bio-parents,<br>Resource Families, County Workers [DMH, DPOs, CSWs], bench<br>officers, and attorneys/court advocates, with three additional<br>groups—Non-Minor Dependents, Permanency Partners, and<br>providers—to be conducted by mid-November 2021. The<br>feedback from all groups will be incorporated into the Peer<br>Review Report and the County Self-Assessment, which will form<br>the SIP for the next five years. |

| 2. Improve Multidisciplinary Teaming and Interagency<br>Collaboration for High-Need Youth  | Anticipated<br>Timeframe   | Status   |
|--|----------------------------|--|
| DCFS, DMH, and PCW should develop a plan to expand the multi-<br>disciplinary teaming pilot led by DCFS' Accelerated Placement Team<br>(APT), along with DMH, to stabilize and find permanency for up to<br>100 more high-need youth who are at risk of STRTP placement<br>and/or have struggled in STRTP placements.  | January 2022               | DCFS is working with the Board on a motion to expand the APT pilot to<br>the Placement Stabilization Team, per this recommendation.<br>In addition, teaming among DMH, PCW, and DCFS has increased for high-<br>risk youth to prevent crossover whenever possible. The DCFS APT or any<br>team looking for placement resources typically reaches out across<br>departments to call for a meeting, and all parties discuss the youth,<br>strengths, challenges, history, etc., and then all parties brainstorm place-<br>ment options and shared resources. A recent media campaign brought in<br>several families interested in DCFS and PCW teens, whose contact<br>information has been shared as additional placement options.  |
| <ul> <li>Improve interdepartmental communication and collaboration when serving survivors of the commercial sexual exploitation of children (CSEC) who are in STRTPs or at risk of placement there:</li> <li>DCFS, PCW, and DMH should clarify their Commercial Sexual Exploitation of Children (CSEC) units' roles, responsibilities, and strategies for effectively collaborating to meet the needs of these youth.</li> <li>DCFS, PCW, and DMH should provide enhanced trainings to Children's Social Workers (CSW), Deputy Probation Officers (DPOs), and DMH staff on how to engage with CSEC youth, develop more defined treatment goals, implement targeted CFT meetings, and work with both female and male CSEC survivors.</li> <li>DCFS, PCW, and DMH should establish best-practice strategies on interventions and supports for providers and families working with these youth, including harm-reduction approaches.</li> </ul> | February 2022<br>June 2022 | DCFS will be identifying a lead to work with PCW and DMH by<br>November 2021 with implementation steps to be completed by<br>February 2022.<br>The departments will also leverage the System of Care workgroup to<br>create a workgroup comprised of the CSEC units from DCFS, PCW, and<br>DMH to clarify roles between the departments and develop guidelines<br>for best practice.<br>Currently, there are several collaborations in place around this<br>population that include PCW, DCFS, and DMH, such as weekly Multi-<br>Disciplinary Team (MDT) meetings and monthly PCW, DCFS, and DMH<br>strategy meetings. The county also developed a CSEC MOU with clear<br>policies and practices spelled out related to MDTs, CFTs, etc. Enhanced<br>training for CSWs, DPOs and DMH staff are offered and conducted on a<br>routine basis, with specialized trainings such as Social Media: Parenting<br>in a Digital World, LGBTQI+ and CSEC, Trauma-Informed Training, and<br>the 16-hour CSEC 102 provided by West Coast Children's Clinic.<br>Additionally, the CDSS Harm Reduction Guide for Caregivers has been<br>disseminated countywide. |
| DCFS and PCW should consider co-locating liaisons from their departments' out-of-home care divisions at STRTP sites to improve communication and collaboration between the County and STRTPs.  | February 2022              | This recommendation will require conversations with STRTP providers<br>and will need to begin in early 2022 to allow providers the time to<br>continue focusing on FFPSA implementation.   |

| 2. Improve Multidisciplinary Teaming and Interagency<br>Collaboration for High-Need Youth   | Anticipated<br>Timeframe  | Status   |
|---|---------------------------|--|
| DCFS, PCW, and DMH should develop an accountability mechanism<br>for ensuring County departments' fidelity to the CFT process,<br>building on existing quality improvement and assurance efforts, and<br>possibly implementing a CFT fidelity tool. | June 2022<br>October 2022 | <ul> <li>On August 13, 2021, a DCFS workgroup completed a review of CFT meeting (CFTM) protocols to determine what actions might be necessary to increase the engagement, planning, and assessment of youth with complex needs to preserve existing placements and identify future placements. The review identified the following:</li> <li>1) CFTM policy should be updated to include Placement Preservation CFTMs.</li> <li>2) Explore the use of coach developers to facilitate CFTMs for youth with complex needs.</li> <li>3) Explore collaborating on how to best utilize Family Urgent Response System (FURS) to help stabilize placements.</li> <li>4) To ensure accountability and consistency, develop a tracking system of Permanent Placement (PP) CFTMs.</li> <li>5) Create a "cheat sheet" that describes programs available for youth with complex needs.</li> <li>6) Form partnerships with faith-based organizations and community-based organizations (CBOs) to support resource parents with youth with complex needs. Include in PP CFTMs.</li> <li>7) Encourage children's social workers (CSWs) to speak with resource parents about the placement during each home visit and work with Resource Family Approval (RFA) support workers in CFTMs.</li> <li>8) Develop a team to solely focus on PP CFTMs to find the right people to be a part of the team.</li> <li>DCFS will use this workgroup, which is led by a Deputy Director, to implement CFTM Task Force recommendations.</li> <li>The implementation of FFPSA, specifically around the role of the Qualified Individual (QI), provides an opportunity for the three departments to hone their CFTM process, including the utilization of a CFT fidelity tool that has been developed and disseminated by CDSS. Currently the DMH CCR Performance Oversight teams are providing technical assistance to the STRTP providers to strengthen the CFT process.</li> </ul> |

| 2. Improve Multidisciplinary Teaming and Interagency<br>Collaboration for High-Need Youth | Anticipated<br>Timeframe | Status  |
|---|--------------------------|---|
|   |                          | Additionally, PCW and DCFS utilize the Child and Family Services<br>Review (CFSR) Federal Case Review process as part of the county's<br>Continuous Quality Improvement (CQI) and accountability process to<br>ensure the quality and fidelity of the CFT model across the continuum. |

Appendix A

| 3. Elevate Youth Voices and Ensure Their Incorporation<br>Throughout Case-Planning Processes  | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
| DCFS, PCW, and DMH should ensure that youth have an active voice<br>that is respected in the CFT process and throughout all placement-<br>decision and case-planning processes.   |                          |  |
| <ul> <li>Properly notify youth of all CFTMs and include youth on communi-<br/>cations about placement changes.</li> </ul>   |                          | DCCC has identified a load Donuty Director to work with DCCC   |
| <ul> <li>Implement a training for County staff led by youth on how to incor-<br/>porate youth voices into the CFT process.</li> </ul>   | June 2022                | DCFS has identified a lead Deputy Director to work with DCFS,<br>PCW, and STRTP providers to develop a plan to implement this<br>recommendation.   |
| <ul> <li>Consider implementing CFTMs led either by neutral parties or by<br/>youth when they prefer leading their own. The County could con-<br/>sider providing coaches of the youth's choice to support youth who<br/>want to lead their own meetings, and/or bringing back former<br/>foster/probation youth as neutral parties to lead these meetings.</li> </ul> |                          |  |
|   | June 2022                | DCFS has identified a lead Deputy Director to work with DMH,<br>PCW and STRTP providers to develop a plan to implement this<br>recommendation.   |
| DCFS, PCW, and DMH should ensure that CFTMs are held to conduct early planning for placement changes and other transitions for youth.   | October 2022             | The implementation of FFPSA, specifically around the role of the QI, provides an opportunity for the QI to engage youth in conversations about the strengths and needs of the youth and family, and the services, supports, and placement the youth wants/needs. When the QI process is fully implemented, the QI will join placement-preservation CFTMs to discuss services and supports for placement preservation and engage the QI in the CFT before the placement is disrupted. |
| DCFS, PCW, and DMH should improve youth engagement in the STRTP placement-decision and -matching process.   |                          |  |
| <ul> <li>Arrange pre-placement visits of prospective STRTPs for youth, virtually and in-person—including overnight when desired by the youth—before placement decisions are made.</li> </ul>  | June 2022                | DCFS will identify a lead in November 2021 to work with DMH, PCW, and STRTP providers to develop a plan to implement this recommendation.  |
| <ul> <li>Improve the interview process for youth and STRTPs so that youth<br/>have a voice in placement service decisions.</li> </ul>   |                          |  |

| 3. Elevate Youth Voices and Ensure Their Incorporation<br>Throughout Case-Planning Processes  | Anticipated<br>Timeframe | Status  |
|---|--------------------------|---|
| Ensure that CFTMs incorporate healing-centered engagement<br>practices through trainings and technical assistance to county staff<br>and providers, if needed. The STRTP Task Force Report has more<br>details on implementing healing-centered engagement practices. | June 2022                | <ul> <li>DCFS, PCW, DMH, and OCP will leverage and build on the work of the Creative Wellbeing Team (Los Angeles County Department of Arts and Culture, DMH, and the Arts for Healing and Justice Network), which integrates healing-informed arts with mental health prevention models, to implement more healing-centered engagement practices for youth.</li> <li>The departments will coordinate with the Creative Wellbeing Team by January 2022 and develop a plan to implement this recommendation.</li> </ul> |

| 4. Expand Peer-to-Peer Supports and Mentoring  | Anticipated<br>Timeframe | Status   |
|--|--------------------------|--|
| DCFS, PCW, and DMH should build on existing models that encourage youth leadership through pairing them with a supportive adult who can provide guidance and support.                              | June 2022                | The departments will review existing models by January 2022<br>and develop a plan to implement this recommendation.  |
| DMH should establish peer-support specialists as Medi-Cal providers<br>so young people with lived experience can provide Medi-Cal–<br>claimable, culturally competent services to youth in STRTPs. | October 2022             | DHCS has awarded the California Mental Health Services Author-<br>ity (CalMHSA) the contract for the initial launch of the peer<br>support specialist certification program. CalMHSA will be sub-<br>mitting an implementation plan to DHCS by 11/19/21, and in a<br>recent listening session with counties, shared that it will likely<br>not be until July 2022 that California will obtain the necessary<br>federal approvals for Peer Support Services reimbursement via<br>Medi-Cal claiming. |

| 5. Expand Substance-Use Disorder (SUD) Supports and<br>Services   | Anticipated<br>Timeframe | Status  |
|---|--------------------------|---|
| DPH's SAPC unit should:<br>1) Connect SAPC contractors that provide field-based services for<br>youth to STRTP providers<br>2) Develop a training around substance use/abuse issues to be used at<br>STRTP sites.   | June 2022                | <ul> <li>DPH–SAPC has cross-walked its list of contractors with STRTP providers by service areas, and is continuing to work with DCFS, DMH, and PCW to expand field-based SUD treatment services at STRTPs.</li> <li>DPH–SAPC is supporting dedicated SUD counselors through the Client Engagement and Navigation Services (CENS) program for youth by using funding from the Coronavirus Response and Relief Supplemental Appropriations Act, 2021. SAPC is awaiting final program approval from the state; the plan is for these counselors to be accessible to the clients of DCFS, DMH, PCW, and STRTP staff.</li> <li>On 8/10/21, DPH–SAPC hosted a training for almost 300 STRTP staff on SUD issues, including recognizing signs and symptoms of SUD, how to talk to youth about substance-use issues, and accessing treatment services through SAPC Youth Services.</li> <li>DPH–SAPC is working with DMH and DCFS to build out an 'SUD 101' training to include more detailed information on interventions and on overdose prevention. This training is tentatively planned for the third quarter of FY 2021–22.</li> <li>STRTP providers may also access a series of online trainings on youth substance use issues and treatment.</li> </ul> |
| DCFS, PCW, DMH, and DPH–SAPC should develop a plan to expand<br>placement options and intervention services for youth with serious<br>SUD needs. This could include:  | June 2022                | Placement options for youth with serious SUD needs will be<br>addressed in the continuum-of-care expansion discussions<br>described under Recommendation 1.   |
| <ul> <li>Contracting or licensing STRTPs to provide their own SUD services</li> <li>Developing SUD detox and/or treatment centers for adolescents<br/>(in highly supervised/structured settings different than an STRTP)</li> <li>Training STRTP staff to use opioid-overdose medication</li> <li>Developing a continuum of care for children/youth with co-<br/>occurring mental health and substance-use disorders</li> </ul> | January 2022             | In September 2021, PHN Supervisor Cynthia Calagui connected<br>with two agencies that were willing to conduct in-service train-<br>ings with STRTP staff related to the use of Narcan and conduct<br>health education to the youth related to opioids/fentanyl. These<br>agencies are:  |

| 5. Expand Substance-Use Disorder (SUD) Supports and<br>Services   | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
|   |                          | <ol> <li>Tarzana Treatment Center</li> <li>Los Angeles County DPH Community &amp; Field Services<br/>Division Service Planning Area 4—Metropolitan Los Angeles</li> </ol>  |
|   |                          | Both agencies contract or work closely with SAPC. On 9/5/21, this information was sent out to all providers, and providers are now reaching out to facilitate these trainings on-site with youth and staff.  |
|   |                          | The Community Care Licensing Division (CCLD) has expanded<br>collaboration with providers as a results of the increased use of<br>substances laced with fentanyl. One effort that continues to be<br>discussed is expanding Pro-Act restraint efforts to include the<br>refusal to cease using substances when observed by staff or<br>others.   |
|   |                          | Another effort was the presentation and dissemination by CCLD<br>of PIN 21-12-CRP—Administration of Naloxone (Narcan) in<br>Children's Residential Homes & Facilities. CCLD presented at<br>several provider forums and shared the template for the waiver<br>needed for agencies to utilize Narcan. Many agencies have sub-<br>mitted this waiver, complied with all requirements for Narcan<br>use, and been given approval by CCLD.   |
|   |                          | A final effort that has been implemented by several STRTPs is an<br>Enhanced Search policy, which must be developed by each<br>agency and submitted to DCFS for approval. The policy applies<br>to youth returning from off-ground activities with a reasonable<br>suspicion of carrying substances—their outer clothing and shoes<br>are removed and thoroughly searched while they are in private<br>wearing a medical gown. A few STRTPs have recently submitted<br>their policy to CCLD and are awaiting approval. |
| DCFS, PCW, DMH, and DPH–SAPC should gather stakeholder input to discuss 'lessons learned' from providers that have tried to provide SUD residential services in the past. | February 2022            | This recommendation will require conversations with providers<br>and will need to begin in early 2022 to allow providers time to<br>continue focusing on FFPSA implementation.   |

| 6. Strengthen Clinical Supports   | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
| DCFS, PCW, and DMH should identify and amend STRTP contract<br>requirements under local control to address STRTP workforce issues<br>related to recruitment, retention, pay, administrative requirements, etc.  | June 2022                | This recommendation will require conversations with providers<br>and will need to begin in early 2022 to allow providers to con-<br>tinue focusing on FFPSA implementation.  |
| DCFS, PCW, and DMH should ensure that STRTPs provide non-<br>traditional mental health treatments, maintain a treatment culture<br>that sees youth as a whole person, and use a healing-centered<br>engagement model by 1) providing additional trainings and technical<br>assistance to STRTP providers; and 2) amending and monitoring STRTP<br>contracts to ensure compliance. | June 2022                | DCFS, PCW, DMH, and OCP will leverage and build on the work<br>of the Creative Wellbeing Team (Los Angeles County<br>Department of Arts and Culture, DMH, and the Arts for Healing<br>and Justice Network), which integrates healing-informed arts<br>with mental health prevention models, to implement more<br>healing-centered engagement practices for youth.<br>The departments will coordinate with the Creative Wellbeing |
|   |                          | Team by January 2022 and develop a plan to implement this recommendation.<br>DMH is preparing its cohort of STRTP staff to be trained on neurofeedback.  |
| DMH should explore funding to train STRTP clinicians in more<br>evidence-based practices (EBP) designed to treat the clinical and<br>behavioral needs of youth placed in STRTPs.  | March 2022               | DMH is finalizing training estimates and how training will be rolled<br>out to STRTP providers. Given the implementation of FFPSA,<br>which launched 10/1/21, STRTPs are working with DMH to ensure<br>compliance with the new STRTP requirements. Therefore, DMH is<br>preparing to launch EBP trainings in early 2022.   |
| DCFS, PCW, and DMH should review policies and practices around psychotropic medications for youth placed in STRTPs and consider developing recommendations to further improve oversight.  | June 2022                | DCFS will identify a lead in November 2021. This recommenda-<br>tion will require conversations with providers beginning in early<br>2022 to allow providers time to continue focusing on FFPSA<br>implementation.   |
| DCFS, PCW, and DMH should work with Regional Centers to improve<br>access to Applied Behavior Analysis (ABA) services at STRTP sites to<br>address the needs of intellectual/developmentally challenged youth<br>placed in STRTPs for whom talk therapy and/or Cognitive Behavioral<br>Therapy is not effective.  | June 2022                | DCFS will identify a lead in November 2021. This recommenda-<br>tion will require conversations with providers beginning in early<br>2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.<br>DCFS, DMH, and PCW can also add this recommendation to the<br>monthly agendas of the System of Care workgroup, in which<br>Regional Center leadership participates.            |

| 7. Expand Culturally Relevant and Affirming Supports  | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
| DCFS, PCW, and DMH should ensure that STRTPs provide more<br>engaging activities for youth by 1) providing additional trainings and<br>technical assistance to STRTP providers on consulting youth about<br>what activities/interests they want to be involved in and delivering<br>these services in healing-centered ways and 2) amending and monitor-<br>ing STRTP contracts to ensure compliance. | June 2022                | DCFS, PCW, and DMH will identify leads in November 2021. This<br>recommendation will require conversations with providers<br>beginning in early 2022 to allow providers time to continue<br>focusing on FFPSA implementation and DHCS IMD<br>determinations. |

| 8. Improve Aftercare Services   | Anticipated<br>Timeframe | Status  |
|---|--------------------------|---|
|   | November 2021            | CDSS and DHCS released the ACL on FFPSA Part IV Aftercare requirements on 9/30/21. DMH is convening the second meet-<br>ing with DCFS and PCW to continue working on the Family-<br>Centered Aftercare Services (F-CAS) plan that must be submitted to CDSS and DHCS by 11/15/21.   |
| <ul> <li>DCFS, PCW, and DMH should amend STRTP contract requirements to:</li> <li>Increase flexibility in the provision of aftercare services so that the provider that best fits the youth's needs, particularly geographically, can deliver those services</li> <li>Allow for a 30- to 60-day overlap, in either direction, between the STRTP and the receiving treatment team to maintain continuity of services</li> <li>Ensure that STRTPs identify community supports for families during the youth's transition home and with aftercare efforts, to improve reunification success</li> </ul> | October 2022             | The plan will include the timely development of policies and pro-<br>cedures around F-CAS, as well as revisions to contract language.<br>The departments will create a timeline for ensuring that provid-<br>ers are ready to implement F-CAS per state guidelines by<br>10/1/22. During the year leading up to the full implementation<br>of F-CAS, departments will be working with providers to ensure<br>appropriate transition planning and service provision when<br>youth step down from an STRTP.<br>For PCW, more attention is being given to the transition to the<br>aftercare process within the transition CFT. For cases when<br>placement is with a resource family, PCW assigns a Permanency<br>Officer to work alongside the DPO to ensure that aftercare<br>needs and services are fully discussed with the family prior to<br>placement, and then follows the youth into the home to ensure<br>that aftercare services are in place. A few times, providers have<br>maintained the same therapist for aftercare to ensure continuity<br>of care. The DPO and STRTP are also including aftercare supports<br>and services in case plans/needs and services plans. |
| County departments' and CEO legislative teams should work with and<br>advocate to the state for flexibility in aftercare services under FFPSA<br>to ensure the availability of both Medi-Cal–claimable and non–Medi-<br>Cal-claimable services.   | November 2021            | CDSS and DHCS released the ACL on FFPSA Part IV Aftercare<br>requirements on 9/30/21. DCFS, PCW, and DMH will partner to<br>submit the County's Aftercare Services plan by 11/15/21.<br>Funding has been identified in the Governor's budget for both<br>Medi-Cal and non–Medi-Cal services. We await additional guid-<br>ance from the state.  |

| 8. Improve Aftercare Services   | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
| DCFS, PCW, and DMH should develop a plan to expand respite care<br>overall by streamlining the process for approving respite-care<br>providers. This may involve amending STRTP and Intensive Service<br>Foster Care Provider (ISFC) contract requirements around recruiting<br>and approving respite-care providers. | June 2022                | DCFS, PCW, and DMH will identify leads in November 2021. This<br>recommendation will require conversations with providers<br>beginning in early 2022 to allow providers time to continue<br>focusing on FFPSA implementation and DHCS IMD<br>determinations. |

| 9. Improve Family-Finding and Family-Engagement Supports  | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
| DCFS and PCW should develop a plan to ensure that its Permanency<br>Partners Program, CFTs, and other family-finding best practices are<br>used to support permanency for STRTP youth.  | June 2022                | <ul> <li>DCFS has expanded the Upfront Family Finding Project to 11 offices, with the goal of expanding to the remaining 8 offices as additional funding is identified. DCFS continues to work with the CEO to identify county funds for the expansion.</li> <li>In addition, DCFS is working with Chapin Hall and OCP to determine the ability to identify Upfront Family Finding as a Kinship Navigator program to be eligible for FFPSA funding as a long-term strategy.</li> <li>In August 2020, PCW onboarded a new team under Placement Permanency &amp; Quality Assurance, Upfront Family Connections (UFC), to work closely with all PCW foster youth who have no family or suitable family to return to and ensure no youth leaves the system without at least one lifelong connection. The Forever Friend program is overseen by the UFC Team and has been implemented in most STRTPs and is currently working with DCFS to expand this program into Resource Family homes and to NMDs.</li> </ul> |
| DCFS and PCW should increase the use of parent partners to engage family and non-family supports for youth in STRTPs, and offer transportation resources to families to help increase their participation in visits with youth and STRTP family activities. | June 2022                | This recommendation will require conversations with providers beginning in early 2022 to allow providers time to continue focus-<br>ing on FFPSA implementation and DHCS IMD determinations.   |
| DCFS and PCW should provide support to relative caregivers to address barriers to Resource Family Approval (RFA).   | June 2022                | DCFS has identified a lead Deputy Director to work with Proba-<br>tion to develop a plan to implement this recommendation.   |

#### Recommendation 10

| 10. Improve Court Oversight Over STRTP Placements  | Anticipated<br>Timeframe | Status  |
|--|--------------------------|---|
| DCFS, PCW, DMH, and the Juvenile Court should revisit the Juvenile<br>Court's prior group-home reporting protocol to apply to STRTP<br>placements. This involves working with stakeholders to ensure<br>alignment with existing STRTP placement-related processes and new<br>FFPSA requirements. After review/discussion, the departments should<br>develop a plan, if agreed upon, to implement the protocol. | October 2021             | The Judicial Council approved the FFPSA proposed rules and<br>forms effective 10/1/21. The forms are posted on the courts<br>website and the rules were posted on Monday, 10/4/21. In<br>collaboration with County Counsel, DCFS is developing a webi-<br>nar on the new FFPSA Court Oversight process scheduled to be<br>held on 11/4/21. All STRTP providers were advised of the new<br>process during the STRTP Forum held on 10/1/21. |

| 11. Improve STRTP Placement Decisions   | Anticipated<br>Timeframe      | Status   |
|---|-------------------------------|--|
| DCFS, PCW, and DMH should develop a plan to ensure that placement<br>in an STRTP is discussed and decided on in CFTMs before involving the<br>Interagency Placement Committee (IPC) and that all stakeholders,<br>including youth and minors' attorneys, are part of these discussions.             | October 2021<br>October 2022  | <ul> <li>On 9/30/21, FYI 21-17 New Procedures for Placement in a Short-<br/>Term Residential Therapeutic Program was posted on the LAKids<br/>intranet site and shared with all DCFS staff via an email blast. The<br/>FYI was developed to inform staff of the implementation of the<br/>new state-mandated STRTP placement and replacement require-<br/>ments as of 10/1/21, including information on the new QI and<br/>court process. The FYI noted that a CFTM is required prior to the<br/>referral to the QI and IPC for an STRTP placement. CFTMs should<br/>include all members of the child's team (caregivers, attorneys, etc.).</li> <li>The implementation of FFPSA, specifically around the role of the<br/>QI, provides an opportunity for the QI to engage youth in con-<br/>versations about the strengths and needs of the youth and<br/>family, and the services, supports, and placement the youth<br/>wants/needs. When the QI process is fully implemented, the QI<br/>will join placement-preservation CFTMs and be engaged before<br/>the placement is disrupted.</li> </ul> |
| DCFS, PCW, and DMH should work with STRTP providers to make<br>County placing agencies' internal decision-making processes for refer-<br>ring youth to STRTPs more transparent to STRTP providers.  | February 2022                 | This recommendation will require conversations with providers<br>that will need to begin in early 2022 to allow providers time to<br>continue focusing on FFPSA implementation and DHCS IMD<br>determinations.   |
| DCFS, PCW, and DMH should develop a plan to improve the IPC<br>process so that County placing agencies and STRTP providers have<br>more information for placement discussions and decisions, including<br>the appropriate length of stay in STRTPs based on the youth needs<br>and treatment goals. | February 2022<br>October 2022 | This recommendation will require conversations with providers<br>that will need to begin in early 2022 to allow providers time to<br>continue focusing on FFPSA implementation and DHCS IMD<br>determinations.<br>The implementation of FFPSA, specifically around the role of the<br>QI, provides an opportunity for the QI to engage youth in conver-<br>sations about the strengths and needs of the youth and family,<br>and the services, supports, and placement the youth wants/<br>needs. When the QI process is fully implemented, QI will join<br>placement-preservation CFTMs and be engaged before the place-<br>ment is disrupted. The QI process redefines the IPC process.  |

| 11. Improve STRTP Placement Decisions   | Anticipated<br>Timeframe | Status  |
|---|--------------------------|---|
| DCFS, PCW, and DMH should ensure that the qualified individual who<br>assesses the appropriateness of placements in QRTPs under FFPSA<br>connects with the appropriate stakeholders, including minors' attor-<br>neys and other CFT members, as part of the assessment process. | October 2021             | On 9/30/21, ACL 21-113, Assessments By A Qualified Individual<br>(QI) For Placements In Short-Term Residential Therapeutic Pro-<br>grams (STRTPs) Under The Requirements Of The Family First<br>Prevention Services Act (FFPSA) And Assembly Bill (AB) 153<br>(CHAPTER 86, STATUTES OF 2021), was released. On 9/30/21,<br>2021, DCFS released FYI 21-17 New Procedures for Placement in<br>a Short-Term Residential Therapeutic Program. The FYI was<br>posted on the LAKids intranet site and shared with all staff via an<br>email blast. The FYI was developed to inform staff of the imple-<br>mentation of the new state-mandated STRTP placement and re-<br>placement requirements as of 10/1/21, including information on<br>the new QI and court process.<br>The implementation of FFPSA, specifically around the role of the<br>QI, provides an opportunity for the QI to engage youth in con-<br>versations about the strengths and needs of the youth and<br>family, and the services, supports, and placement the youth<br>wants/needs. DMH, DCFS, and Probation have been working<br>very closely to review state requirements and ensure that the QI<br>recommends STRTP placement only when placement in a com-<br>munity family-home setting is not a viable option. |

Appendix A

| 12. Improve Education Supports and Services  | Anticipated<br>Timeframe | Status   |
|--|--------------------------|--|
| LACOE should connect its regionally based Foster Youth Services Coor-<br>dinating Program (FYSCP) counselors in the field with their local<br>STRTPs to provide additional support to resident youth and make sure<br>they are engaged in school. FYSCP counselors should collaborate with<br>youth, schools, social workers, and STRTPs to increase special-<br>education assessments and credit-recovery practices for STRTP youth.  | May 2021                 | On 5/11/21, LACOE provided DCFS and PCW with a Foster Youth<br>Services flyer for STRTPs that included information on how staff<br>and youth in care can receive additional educational supports. In<br>addition, each STRTP has been assigned a FYSCP Counselor. This<br>information was provided to all STRTPs in May 2021 and will be<br>sent on a regular basis as updates/changes are made. |
| DCFS, PCW, and LACOE should ensure that school-district Foster Youth<br>Liaisons include STRTP staff in best-interest determinations for school-<br>of-origin decisions, and request special-education assessments when<br>needed.   | April 2022               | DCFS and PCW will identify leads in November 2021. This<br>recommendation will require conversations with providers<br>beginning in early 2022 to allow providers time to continue<br>focusing on FFPSA implementation and DHCS IMD<br>determinations.   |
| DCFS, PCW, and DMH should work with STRTPs to expand rela-<br>tionships with and knowledge of charter schools, schools-within-a-<br>school, magnet programs, and other alternative settings, as not every<br>youth will thrive in a traditional school setting.  | April 2022               | DCFS, PCW, and DMH will identify leads in November 2021. This<br>recommendation will require conversations with providers<br>beginning in early 2022 to allow providers time to continue<br>focusing on FFPSA implementation and DHCS IMD<br>determinations.   |
| DCFS and PCW should explore and develop a plan, if needed, to use<br>one-on-one behavioral aides for youth with special-education needs.<br>This involves working with stakeholders including DMH, LACOE, school<br>districts, STRTPs, and minors' attorneys.  | April 2022               | DCFS and PCW will identify leads in November 2021. This<br>recommendation will require conversations with providers<br>beginning in early 2022 to allow providers time to continue<br>focusing on FFPSA implementation and DHCS IMD<br>determinations.   |
| <ul> <li>County departments' and CEO legislative teams should work with and advocate to the state to modify the STRTP funding model to address the educational needs of youth in STRTPs, including:</li> <li>Consider increasing funding for the "care and supervision" of the STRTP rate for staff caring for youth who are suspended from school or resistant to attending school during school hours.</li> <li>Consider increasing funding to STRTPs that are expected to provide transportation for youth to their schools or origin.</li> </ul> | June 2022                | DCFS will consider forming a workgroup to develop further recommendations and proposals to CDSS.   |

| 13. Create a Safe Environment at and Near STRTP Sites   | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
| DCFS, PCW, and DMH should ensure that STRTPs are implementing<br>and reinforcing a healing-centered model, as well as anti-bullying<br>practices and programming, at their sites by 1) providing additional<br>trainings and technical assistance to STRTP providers and 2) amending<br>and monitoring STRTP contracts to ensure compliance.  | June 2022                | DCFS, PCW, DMH, and OCP will leverage and build on the work<br>of the Creative Wellbeing Team (Los Angeles County<br>Department of Arts and Culture, DMH, and the Arts for Healing<br>and Justice Network), which integrates healing-informed arts<br>with mental health prevention models, to implement more<br>healing-centered engagement practices for youth.<br>The departments will coordinate with the Creative Wellbeing<br>Team by January 2022 and develop a plan to implement this<br>recommendation. |
| <ul> <li>DCFS, PCW, and DMH should work with STRTP providers to explore ways to ensure that STRTPs have an appropriate number of staff on site at all times, including:</li> <li>Rethinking staffing ratios, adding the flexibility to increase as needed; this will involve amending STRTP contract requirements and rates</li> <li>Developing standards for obtaining 1:1 and 2:1 behavioral supports by reviewing and refining the process for expedited approval when providers are accepting and/or stabilizing highrisk youth; developing a procedure for appealing denials for behavioral aides; and training stakeholders on the process for requesting behavioral aides</li> </ul> | June 2022                | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.   |
| DCFS, PCW, and DMH should work with stakeholders, including STRTP providers, advocates, and community members, to explore options to support the use of security guards (whose roles are clearly defined) on STRTP sites.   | June 2022                | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.   |
| <ul> <li>DCFS, PCW, and DMH should work with stakeholders, including youth, the state's CCLD, STRTP providers, advocates, and others, to explore ways and then develop a plan for STRTPs to create consistency, boundaries, routines, and structure at their sites, while also respecting and promoting youth voice and independence. This includes:</li> <li>Consider adopting the Association for Community Human Service Agencies' STRTP Community Independence Guidelines, which outline the process to support community independence through the CFT process and treatment team</li> </ul>  | June 2022                | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.<br>Also see PCW's update on initial conversations with CCLD under<br>Recommendation 5.  |

Appendix A

| 13. Create a Safe Environment at and Near STRTP Sites   | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
| <ul> <li>Review STRTP-placed youth cell-phone policies and other licens-<br/>ing requirements, and what STRTPs can do with regard to the<br/><u>Reasonable and Prudent Parent Standard</u> to keep youth safe</li> </ul>  |                          |  |
| <ul> <li>Review current STRTP requirements and practices related to the<br/>provision of life-skills classes, work/volunteer opportunities, and<br/>opportunities for youth to be independent and leave campus<br/>appropriately</li> </ul>   |                          |  |
| DCFS, PCW, DMH, and STRTP providers should consider and develop a<br>plan, if agreed upon, to incorporate delayed egress at STRTP sites,<br>which may assist youth with runaway behaviors triggered by SUD,<br>CSEC involvement, and other unmet needs who are challenging to<br>engage in treatment when insufficient means exist to keep them<br>physically present at STRTP sites. | June 2022                | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations. |

| 14. Reduce Unnecessary Law-Enforcement Agency (LEA)<br>Engagement with STRTPs   | Anticipated<br>Timeframe | Status   |
|---|--------------------------|--|
| DCFS, PCW, and DMH should develop a protocol for STRTPs on when<br>and whom to call when they need assistance with youth, including<br>resources like the Family Urgent Response System (FURS), Psychiatric<br>Mobile Response Team (PMRT), and other departmental resources<br>and contacts, so that contacting LEAs is a last resort and considered<br>only when the law has been broken. | May 2022                 | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.                       |
| DCFS, PCW, and DMH should work with stakeholders, including minors' attorneys and STRTP providers, to clarify the "runaway" criteria and consider adopting the electronic reporting of low-risk runaways (STRTPs must currently contact LEAs whenever there is a runaway).  | May 2022                 | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.                       |
| DCFS and PCW should develop and provide guidance to STRTPs on developing partnerships and collaborations with their local LEAs and clarifying each other's roles.   | May 2022                 | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.                       |
| DCFS, PCW, and DMH should consider partnering with the<br>Department of Health Services' (DHS) Office of Diversion and Re-<br>Entry's (ODR) Youth Diversion and Development's (YDD) division to<br>provide trainings for LEAs on how to appropriately engage with<br>STRTPs and youth.  | May 2022                 | Departments will identify leads in November 2021 and then<br>connect with YDD about potential next steps and opportunities<br>to leverage YDD's existing training provider.  |
| DCFS, PCW, DMH, and YDD should collaborate to develop a plan to<br>expand partnerships between STRTPs and youth diversion programs.<br>This includes:   | June 2022                | Departments will identify leads in November 2021 and then con-<br>nect with YDD about potential next steps and opportunities to<br>leverage efforts under 'Youth Justice Reimagined' to access<br>more diversion programs and build referral pathways from<br>DCFS/STRTPs. |
| • Exploring how to build a pathway for STRTPs to make direct referrals to diversion programs, and eventually considering a pathway for CSWs to make referrals   |                          |  |
| <ul> <li>Expanding the County's capacity for diversion programs—like<br/>restorative/transformative justice programs and youth develop-<br/>ment programs—to serve more youth</li> </ul>  |                          |  |
| <ul> <li>Providing trainings to STRTP providers on YDD and diversion<br/>programs/services, so they can better collaborate moving<br/>forward</li> </ul>  |                          |  |

| 15. Streamline and Improve STRTP Training Requirements   | Anticipated<br>Timeframe | Status   |
|--|--------------------------|--|
| DCFS, PCW, and DMH should review and streamline their training<br>requirements for STRTPs, as well as review and enhance, as necessary,<br>the trainings outlined in the report under this recommendation. This<br>may involve amending STRTP contracts to ensure that STRTPs imple-<br>ment and access these trainings. | May 2022                 | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations. |
| DCFS, PCW, and DMH should identify how locally required and state-<br>required trainings through CDSS and DHCS can be aligned to avoid<br>duplication.   | May 2022                 | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations. |

| Appendix A |
|------------|
|            |

| 16. Streamline and Improve STRTP Administrative<br>Requirements   | Anticipated<br>Timeframe | Status  |
|---|--------------------------|---|
| DMH should convene a short-term workgroup with STRTPs to solicit<br>feedback on how to make the Mental Health Program Approval<br>(MHPA) policies and procedures more flexible. Streamlining the MHPA<br>process may remove burdensome and/or duplicative administrative<br>and documentation requirements that can prevent STRTP staff from<br>engaging with and serving more youth.   | June 2022                | DMH will identify a lead by January 2022 and develop imple-<br>mentations steps for this recommendation. This recommenda-<br>tion will require conversations with providers beginning in early<br>2022 to allow providers time to continue focusing on FFPSA imple-<br>mentation and DHCS IMD determinations. |
| County departments' and CEO legislative teams should work with and<br>advocate to the state, based on recommendations from DMH, to<br>change the MHPA annual requirement to every three years, similar to<br>Medi-Cal certification and accreditation, and to make the daily<br>progress-note requirement less frequent.  | June 2022                | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.  |
| DCFS, PCW, and DMH should review and consider recommendations<br>from the California Alliance of Child and Family Services' February<br>2021 report <u>STRTP Policy and Practice Recommendations</u> and identify<br>specific STRTP model changes, including funding structure, staffing<br>requirements, administrative/documentation requirements, and<br>data/outcomes training requirements, to advocate for at the state<br>level. | June 2022                | Departments will identify leads in November 2021. This recom-<br>mendation will require conversations with providers beginning in<br>early 2022 to allow providers time to continue focusing on FFPSA<br>implementation and DHCS IMD determinations.  |



# County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020 (213) 351-5602

BOBBY D. CAGLE Director

GINGER PRYOR Chief Deputy Director

January 4, 2022

Board of Supervisors HILDAL. SOLIS First District HOLLYJ. MITCHELL Second District SHEILAKUEHL Third District JANICE HAHN Fourth District KATHR YN BAR GER Fifth District

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

Dear Supervisors:

# REQUEST TO APPROVE AN EXTENSION TO THE CURRENT SOLE SOURCE CONTRACT FOR THE PRE-EMPLOYMENT CLINICAL PSYCHOLOGICAL EVALUATION SERVICES (ALL SUPERVISORIAL DISTRICTS) (3-VOTES)

# SUBJECT

The Department of Children and Family Services (DCFS) requests your Board's approval to extend the existing Pre-Employment Clinical Evaluation Services contract effective February 8, 2022 through June 30, 2023, in order to allow DCFS time to evaluate the new version of the psychological assessment tools and to align the term of the contracts with the County fiscal year.

# IT IS RECOMMENDED THAT THE BOARD:

 Delegate authority to the Director of DCFS, or designee, to execute an amendment substantially similar to Attachment A to Contract No. 19-4-029 with Susan Saxe-Clifford, PH.D., Contract No. 19-4-030 with Jay Michael Nagdimon PH.D., and Contract No. 19-4-031 with Psychological Consulting Associates, Inc. for the Pre-Employment Clinical Psychological Evaluation Services for the Children's Social Worker (CSW) and Human Services Aide (HSA) classifications. The term of these contracts will be effective February 8, 2022 through June 30, 2023, with an optional six-month period at the County's sole discretion to complete the upcoming solicitation. The Maximum Contract Budget for this term is \$697,917 financed by 22.5 percent federal funds and 77.5 percent local funds.

# PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

DCFS considers CSWs and HSAs to be "High-Risk Positions" as they provide services to at-risk children and families in Los Angeles County. Thus, DCFS has determined that it is

The Honorable Board of Supervisors January 4, 2022 Page 2

appropriate that each applicant be required to complete a Pre-Employment Clinical Psychological Evaluation. These evaluations will assist DCFS in the screening and selection of CSW and HSA applicants to protect the children and families it serves. CSW and HSA applicants who have the appropriate psychological adjustment, judgment and reliability necessary to ensure that children at-risk are not re-abused, exploited or neglected, shall be eligible for a conditional employment offer.

DCFS hires an average of 80 CSW and HSA applicants per month to meet staffing requirements and operational needs. The evaluation services are needed to avoid disruption in services and to continue to provide support and quality child welfare services for children. The absence of these services would create a backlog of cases thus negatively impacting the lives of the children of Los Angeles County.

This extension will allow DCFS time to review updates to the assessment tools, and will align the new contract terms with the State and County fiscal year. The following assessment tools have been updated and will be evaluated for use and inclusion in the Request For Statement of Qualifications, the Minnesota Multiphasic Personality Inventory, third Edition; the Detailed Assessment of Posttraumatic Symptom; and the Hardiness Resilience Gauge. In addition, the Americans with Disabilities Act and the California Fair Employment and Housing Act updates will be reviewed.

#### IMPLEMENTATION OF STRATEGIC PLAN GOALS

The recommended services support the County's Strategic Plan Goal III, Realize Tomorrow's Government Today; Strategy III.1, Continually Pursue Development of Our Workforce; Objective III.1.1, Develop Staff through High Quality Multi-Disciplinary Approached to Training: Implement training models that envision learning and professional growth occurring over time that includes relevant department, academia, labor, and other stakeholders.

#### FISCAL IMPACT/FINANCING

The total Maximum Contract Budget for the term February 8, 2022 through June 30, 2023, will be \$697,917 and financed as follows: Fiscal Year (FY) 2021-2022 will be \$197,917 financed by 22.5 percent federal funds (\$44,531.33), and 77.5 percent local funds (\$153,385.67); and FY 2022-2023 will be \$500,000 financed by 22.5 percent federal funds (\$112,500) and 77.5 percent local funds (\$387,500).

#### FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The CSW and HSA classifications are considered high-risk positions. The clinical psychological evaluation services are used as a condition to employment and are justified under the Americans with Disabilities Act to ensure that individuals with certain kinds of mental illness in high-risk positions do not endanger the health and safety of others. High-risk positions are those that involve: 1) the management of potentially

The Honorable Board of Supervisors January 4, 2022 Page 3

life-threatening situations; 2) the requirement to manage immense stress; 3) the requirement to make quick and responsible decisions; and 4) the employee's actions have implications for public welfare.

These services have allowed DCFS to achieve the following:

- 1. Ensured applicants with serious mental disorder, were not placed in a "High Risk Position" that could pose a threat to the health and safety of others.
- 2. Reduced the likelihood that at-risk children are abused, exploited, or neglected.
- 3. Increased employee permanency and retention.
- 4. Assured that continuous high-quality services are provided to children and families.

County Counsel and the Chief Executive Officer (CEO) have reviewed the Board Letter. County Counsel has approved the Amendment (Attachment A), as to form. CEO has approved the Sole Source Checklist (Attachment B).

#### CONTRACTING PROCESS

On May 12, 2021, DCFS received approval from the California Department of Social Services (CDSS), (Attachment C), to extend the existing Sole Source contract for the term effective February 8, 2022 through June 30, 2023, per CDSS Manual of Policies and Procedures (MMP) Section 23.650.1.18.

On August 4, 2021, DCFS sent a Notice of Intent to renegotiate the contract extension. The extension will help DCFS finalize and administer the solicitation. These services are professional and are needed on a part-time or intermittent basis; therefore, the provisions of County Code Chapter 2.121 do not apply to this contract.

#### **IMPACT ON CURRENT SERVICES (OR PROJECTS)**

Approval of the current recommendations will allow the Department to continue to receive uninterrupted Pre-Employment Clinical Psychological Evaluation Services, and to provide support and qualified child welfare services to the children of Los Angeles County without creating a delay to attend to the casework. The Honorable Board of Supervisors January 4, 2022 Page 4

#### **CONCLUSION**

Upon approval of this request, it is requested that the Executive Officer/Clerk of the Board send an adopted stamped copy of this Board Letter to:

Department of Children and Family Services Contracts Administration Division Attention: Leticia Torres-Ibarra, Division Manager 425 Shatto Place, Room 400 Los Angeles, CA 90020

Respectfully submitted,

BOBBY D. CAGLE Director

BDC:GP:CMM KDR:LTI:CP

Attachments (3)

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



County of Los Angeles Child Support Services Department



TERRIE HARDY Director

DEAN DE GRUCCIO Chief Deputy Director

January 4, 2022

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

Dear Supervisors:

# **REQUEST FOR AUTHORIZATION TO TERMINATE THE SERVICE OF PROCESS CONTRACT WITH SUE YA, INC.**

# **SUBJECT**

The County of Los Angeles Child Support Services Department (CSSD) requests your Board's authorization to terminate the Service of Process contract with Sue Ya, Inc., for convenience.

# IT IS RECOMMENDED THAT YOUR BOARD:

Delegate authority to the Director of the Child Support Services Department, or her designee, to terminate the Service of Process contract with Sue Ya, Inc., for convenience.

# PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

Service of process is essential to CSSD's ability to establish and enforce child support orders for children in Los Angeles County. CSSD currently has contracts with three service of process vendors. Sue Ya, Inc. is one of those vendors. The contracts were procured through the Request for Proposals process and have a termination date of August 31, 2024.

During contract negotiations, Sue Ya, Inc. indicated that they could complete the volume of work provided by CSSD with the number of staff they had in place. CSSD accepted their proposal as submitted. However, as a result of the contract monitoring process, it was discovered that Sue Ya, Inc. was not in compliance with the County's Living Wage

#### CONTRACTS AND PROCUREMENT MANAGEMENT DIVISION

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Honorable Board of Supervisors 1/04/22 Page 2

requirements pursuant to Section 9.1, Paragraph 9.1.3 of the contract. Repeated attempts to bring Sue Ya, Inc. into compliance failed. Finally, in an email dated November 9, 2021, Sue Ya, Inc. admitted that they do not have sufficient staff to continue providing services for CSSD.

# FISCAL IMPACT/FINANCING

Approval to terminate the contract with Sue Ya, Inc. will have no financial impact on CSSD. The remaining two contractors will be able to meet CSSD's service needs without exceeding the budgeted amount.

# **IMPACT ON CURRENT SERVICES (OR PROJECTS)**

The termination of the current contract with Sue Ya, Inc. will have no impact on CSSD's ability to provide services to the public. The remaining two contractors will be able to meet CSSD's service needs.

# CONCLUSION:

Upon approval by the Board of Supervisors, we request that the Executive Officer-Clerk of the Board send an adopted, stamped copy of the Board letter and attachments to:

Child Support Services Department Attention: Andrea Barnes 5770 South Eastern Avenue, 4<sup>th</sup> Floor Commerce, California 90040

Respectfully submitted,

TERRIE HARDY Director

TH:AB:MC:mc

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