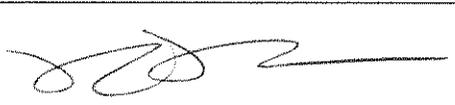


**PLACER COUNTY CHILD WELFARE SERVICES
2008 SYSTEM IMPROVEMENT PLAN UPDATE**

California's Child and Family Services Review System Improvement Plan	
County:	Placer
Responsible County Child Welfare Agency	Placer County Children's System of Care
Period of Plan	3/18/07 – 3/18/08
Period of Outcomes Data	October 2006 – January 2008
Date Submitted	
County Contact Person for County System Improvement Plan	
Name:	Michelle Labrador
Title:	Program Manager
Address:	11716 Enterprise Drive, Auburn, CA 95603
Phone/E-Mail	(530) 889-6703 mlabrado@placer.ca.gov
Submitted by each agency for the children under its care	
Submitted by:	County Child Welfare Agency Director (Lead Agency)
Name:	Richard Knecht
Signature	
Submitted by:	County Chief Probation Officer
Name:	Steve Pecor
Signature	

MAR 10 2008

Placer County 2008 SIP Progress Report

Outcome:

Outcome 1: Children are, first and foremost, protected from abuse and neglect. Indicators 1A and 1B: Recurrence of Maltreatment (Revised indicator S1.1)

Outcome 2: Children are maintained safely in their homes, wherever possible and appropriate. Indicator 2A: Recurrence of maltreatment where children were not removed from their homes.

Outcome 3: Children will have permanency and stability in their living situations without increasing re-entry to foster care. Indicators 3F and 3G: Re-entry to foster care. (Revised indicator C1.4)

County's Performance:

	Baseline Data	Oct 2006 data (start of SIP)	Jan 08 data	California Average	National Std/Goal
S1.1 (1A). No Recurrence of Maltreatment	87.6%	90.4%	89.9%	92.5%	94.6%
C1.4 (3F) Re-entry following reunification	21.7%	8.3%	9.3%	12.0%	9.9%
1B. Recurrence of maltreatment within 12 months (data no longer collected)		13.3%	NA	NA	NA
1B. Recurrence of maltreatment within 12 months after first substantiated allegation (data no longer collected)		14.4	NA	NA	NA
2A. Rate of recurrence abuse/neglect in homes where children were not removed (data no longer collected)		8.3%	NA	NA	NA
3G. Percentage who re-entered within 12 months of reunification (data no longer collected)		16.2%	NA	NA	NA

Improvement Goals

Improvement Goal 1.0: Reduce recurrence of maltreatment (1A and 1B) by a rate of 1.2% to 8.4%/12.1% and maintain reduction.

Status: Rate of no recurrence has not met goal; although it has improved since the baseline, during this SIP, it has decreased by 0.5%.

Placer's rate remains below the California average and national standard.

Improvement Goal 2.0: Reduce recurrence of maltreatment where children were not removed (2A) by a rate of 1.2% to 7.1%, maintain 7.1% rate

Status: Not available, because data no longer collected.

Improvement Goal 3.0: Maintain rate of re-entry to foster care (3F) at 8.3% or below

Status: After significant decrease to 8.3%, rate has risen to 9.3%. It surpasses the state average and national standard.

Improvement Goal 4.0: Reduce rate of foster care entry among those entering foster care for the first time (3G) by 1.2% to 15%.

Status: Not available, because data no longer collected.

Placer County 2008 SIP Progress Report

Strategy 1. 1 Re-implement Structured Decision Making (SDM) and re-train staff to improve consistency and reliability of safety and risk assessments		Strategy Rationale: Placer County's Self assessment showed that social workers differ in their decision making processes and criteria regarding leaving the children in the home or placing them in protective custody. Current compliance with SDM requirements is approximately 27%. A renewed effort to implement SDM will provide structured safety and risk assessments, providing consistency and reliability.			
Milestone	1.1.1 Develop re-implementation plan	Timeframe	05/30/07	Assigned to	SDM Manager And Core Team
	1.1.2 Train all CWS staff in SDM		08/30/07		SDM Manager, Core Team and Regional Training Academy (RTA)
Status:					
<ul style="list-style-type: none"> Re-implementation plan has been completed and implemented, and all CWS staff have been trained. 					
Strategy 1. 2 Monitor use of SDM tools and measure changes in decision-making; ensure staff compliance of 80%.		Strategy Rationale To ensure staff have adopted the philosophy of SDM and are using the tools properly to measure recurrence of maltreatment.			
Milestone	1.2.1 Develop and implement procedures for monitoring staff use of SDM	Timeframe	6/30/07	Assigned to	SDM Manager And Core Team
	1.2.2 Train supervisors to use systems for monitoring staff compliance		8/30/07		SDM Manager, Core Team and CSOC Supervisors
	1.2.3 Supervisors report to Program Managers and SDM Core Team to ensure and maintain 80% compliance		11/30/07 and ongoing.		SDM Manager, Core Team and CSOC Supervisors
Status:					
<ul style="list-style-type: none"> Procedures have been developed and supervisors trained. Refresher training has been scheduled to ensure all supervisors are trained. Procedures to ensure compliance are under development; target for 80% compliance is 11/08. 					

Placer County 2008 SIP Progress Report

Strategy 2.1 Expand, improve and fully implement new Differential Response intake structure		Strategy Rationale: Implementation of Differential Response will permit CSOC and community partners to use engagement strategies that are individualized to families but provide standardized responses. The new system will provide greater opportunities for families to participate in preventive services within their communities and avoid involvement in the CWS system. Full implementation of Differential Response will also increase compliance with 10-day responses.			
Milestone	2.1.1 Revise and simplify confidentiality procedures pertaining to Differential Response Path 1	Timeframe	1/31/07	Assigned to	ACCESS Program Manager and County Counsel
	2.1.2 Develop an MOU to overcome confidentiality barriers between ACCESS and community partners		1/31/07		ACCESS Program Manager, County Counsel and community partners
	2.1.3 Implement Differential Response Path 1 referrals seven days a week		1/31/07		ACCESS leadership team and community partners
Status:					
<ul style="list-style-type: none"> All milestones have been completed. Path 1 referrals have been implemented seven days a week. 					
Strategy 2.2 Review and make needed changes in procedures and staff assignments for Differential Response		Strategy Rationale: Current procedures for Differential Response multi-disciplinary team meetings, assignments and referrals may contribute to compliance issues.			
Milestone	2.2.1 Analyze current procedures for Differential Response meetings and referral assignments. Consider staff suggestions and possibly restructure	Timeframe	6/30/07	Assigned to	ACCESS Leadership team, ACCESS staff and community partners
	2.2.2 Develop job description for Community Engagement Specialist		7/31/07		Community partners and ACCESS leadership
	2.2.3 Contract with Child Abuse Prevention Council to hire a community engagement specialist (AmeriCorps) who will be stationed at ACCESS, participate in daily Path decisions and coordinate Path 2 appointments		9/30/07		Community partners and ACCESS leadership
	2.2.4 Implement Differential Response for all referrals seven days a week countywide		12/31/07		ACCESS Leadership, ACCESS staff and community partners
Status:					
<ul style="list-style-type: none"> Procedures and staffing are currently being analyzed; they are targeted for completion by 6/08. A community engagement specialist has been hired and is stationed at ACCESS. Differential Response has not yet been implemented countywide; target date is 6/08. Issues of partner capacity remain. 					

Placer County 2008 SIP Progress Report

<p>Strategy 3. 1 Implement training and best work practices related to methamphetamine treatment and relapse prevention</p>	<p>Strategy Rationale Methamphetamine use is prevalent in Placer County and the primary reason children are removed from their parents. Placer County currently has no effective relapse prevention system in place to treat individuals (within family systems) with methamphetamine abuse and dependence.</p>
--	--

Milestone	3.1.1 Design Meth Project plan	Timeframe	2/28/07	Assigned to	ASOC and CSOC Directors, managers and identified staff.
	3.1.2 Develop and present plan and procedures for implementing meth project activities to CSOC staff		4/30/07		Meth Project and Wrap-Around Team Managers
	3.1.3 Implement multi-systemic treatment modality plan within CSOC		6/30/07		Meth Project Team: Placer County Board of Sups, Placer County Sheriff, Placer County DHH
	3.1.4 Train all staff in Meth Project activities and protocols		12/31/07		SMART Policy Board, Supervisors, Staff and Training Team
	3.1.5 Enroll and provide services to approximately four parents participating in family reunification services		6/30/08		SMART Policy Board
	3.1.6 Identify and enroll eight to ten additional child welfare clients in the multi-systemic treatment modality related to the Meth Project		6/30/08		SMART Policy Board, Supervisors, Staff and Training Team.
	3.1.7 Ensure that all staff work to create community wide awareness of what we can do in our communities to stop methamphetamine use		6/30/08		SMART Policy Board, Managers, Supervisors, Staff and Training Team.

<p>Status:</p> <ul style="list-style-type: none"> • Plan has been developed and presented to CSOC staff. • Media presentation to build community awareness has been developed. • Multi-systemic treatment modality plan was developed; protocols were partially developed. • Some CSOC staff have been trained. • Four families have been enrolled and are participating in the program. • Although formal Evidence Based Service model has been placed on indefinite hold due to budgetary constraints, Meth addicted parents continue to receive services as required by statute; no additional families will be enrolled in the EBP model during 07-08/08-09 fiscal

Placer County 2008 SIP Progress Report

years.

Placer County 2008 SIP Progress Report

Strategy 3.2 Implement training and best practices related to treatment of child welfare services clients with co-occurring disorders		Strategy Rationale Co-occurring disorders are associated with recurrence of maltreatment. Placer County currently has limited systems in place to treat individuals with co-occurring disorders.			
Milestone	3.2.1 Form MHPA Transformation Group; identify Change Agents	Timeframe	2/28/07	Assigned to	ASOC and CSOC Directors, managers and identified staff.
	3.2.2 Develop co-occurring competence plan and procedures for implementation. Present plan to ASOC and CSOC staff		6/30/07		Transformation Team, Change Agents, SMART Policy Team ASOC and CSOC Directors, managers and identified staff.
	3.2.3 Develop co-occurring disorders program plan and identify transformation team		6/30/07		Transformation Team, Change Agents, SMART Policy Team ASOC and CSOC Directors, managers and identified staff.
	3.2.4 Develop and implement procedures for best practices; present procedures to staff in small group training		6/30/07		Transformation Team, Change Agents, SMART Policy Team ASOC and CSOC Directors, managers and identified staff.
	3.2.5 Train all staff to use best practices in treating co-occurring disorders		12/31/07		Transformation Team, Change Agents, SMART Policy Team ASOC and CSOC Directors, managers and identified staff.
Status:					
<ul style="list-style-type: none"> • A co-occurring plan has been developed. • Appropriate training for CWS staff on working with families with co-occurring disorders will be identified by 3/08. • All staff will be trained in best practices by 12/08. 					

Placer County 2008 SIP Progress Report

Strategy 4.1 Provide increased support for parents participating in family reunification services		Strategy Rationale Some parents participating in reunification services indicate that their services are often delayed due to inconsistent and un-timely social worker contact with their assigned social workers and service providers.			
Milestone	4.1.1 Develop a CSOC Agency policy stating that it is best practice to respond to requests from parents within seven days.	Timeframe	5/30/07	Assigned to	Program Director and team of managers, supervisors and seniors.
	4.1.2 Review and reissue policy guidelines to all staff regarding 24-hour response to phone calls and e-mail. Include best practice for completing requests for services within 7 days		3/30//07		Program Director and team of managers, supervisors and seniors.
	4.1.3 Develop and implement a protocol for exit interviews with parents who successfully reunify with their children, at the close of placement. The interview, conducted with a family advocate, will include a review and rating of CSOC services, support, and responsiveness during the reunification process		8/30/07		Program Director and team of managers, supervisors and seniors, family advocate.
Status:					
<ul style="list-style-type: none"> • Policy on best practices for communication and responses to service requests was completed and implemented 2/08. • Protocol for exit interviews was completed 2/08. Tools will be completed and interviews started by 4/1/08. 					
Discuss changes in identified systemic factors needed to further support the improvement goals.					
<ul style="list-style-type: none"> • Caseload sizes are too large, and will need to be reduced in order to make room for training and maintenance of new practices. 					
Status: Some caseloads for ongoing cases have been slightly reduced.					
Describe educational/training needs (including technical assistance) to achieve the improvement goals.					
<ul style="list-style-type: none"> • Training takes time away from the actual practice of social work, and caseloads are high, making time scarce. • Train ACCESS leadership and staff and community partners on new confidentiality MOU and procedures Status: Training completed. • Educate all ACCESS staff and community partners on role of Community Engagement Specialist. Status: Completed. • Staff will require periodic feedback from exit interviews about what works to promote reunification, and what to avoid. Status: Feedback will be provided to staff as information is gathered from interviews. 					
Identify roles of the other partners in achieving the improvement goals.					
<ul style="list-style-type: none"> • Create AmeriCorps position for Community Engagement Specialist. Status: AmeriCorps position was not created; CSOC is using an MSW intern for the activity. • Community Partners must ensure staffing for Path 1 and Path 2 referrals seven days a week Status: Staffing is under review • Managers and Supervisors must incorporate use of tools and application of new best practices (SDM, DR, meth project, Co-occurring Treatment Practices, etc) into supervision to help ensure compliance. Status: ongoing 					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.					
<ul style="list-style-type: none"> • Resolve confidentiality issues between Placer County and Community partners regarding Path 1 referrals. Status: Completed 					

Placer County 2008 SIP Progress Report

Outcome:

Outcome 1: Children are, first and foremost, protected from abuse and neglect. Indicator 2B: Timely Response to Referrals

County's Performance:

	Baseline Data	Oct 2006 data (start of SIP)	Jan 08 data	California average	National Std/Goal
2B Timely Response to Referrals – immediate response	98.5%	85.8%	94.1%	NA	NA
2B Timely Response to Referrals – 10-day response	87.9%	79.3%	83.5%	NA	NA

Improvement Goal 5.0:

Increase rates for immediate response by 4.2% to 90%, and 10-day response by 10.7% to at least 90%; maintain 90% rate.

Status: Although both rates remain below baseline rates, since the beginning of this SIP.

- Immediate response rates have exceeded goal, increasing by 8.3% to 94.1%
- Ten-day response rates have increased by 4.2% to 83.5%; they do not yet meet the goal.

Strategy 5. 1

Ensure staff compliance to immediate and 10 day response requirements

Strategy Rationale

Immediate and 10 day response compliance are expected performance outcomes, and should be included in employee evaluations

Milestone	Timeframe	Assigned to
5.1.1 Using SafeMeasures data, review compliance with response requirements in each weekly or biweekly supervision session with staff	1/31/07 and ongoing	ACCESS/CSOC supervisors
5.1.2 Ensure compliance by reviewing SafeMeasures report on emergency response monthly with ACCESS supervisors	2/28/07 and ongoing	ACCESS/CSOC Program Manager
5.1.3 Ensure compliance by reviewing SafeMeasures report on 10-day response with ACCESS and CSOC supervisors	2/28/07 and ongoing	ACCESS/CSOC Program Managers

Status:

All milestones have been completed; all compliance reviews have been implemented and are ongoing

Strategy 5. 2

Clarify requirements for compliance when contact is attempted but not completed within 10 days

Strategy Rationale

Contact requirements are unclear

Milestone	Timeframe	Assigned to
5.2.1 Identify ACCESS leadership and MIS/IT team members to research contact requirements to clarify definitions for proper response	3/15/07	ACCESS leadership team member
5.2.2 Conduct research; report to Leadership Team	4/1/07	ACCESS leadership team member/ MIS/IT team
5.2.3 Train staff on contact requirements	5/30/07	MIS/IT Team

Status:

All milestones have been completed. The research has been completed and staff has been trained on contact requirements.

Placer County 2008 SIP Progress Report

Strategy 5.3 Review and (if needed) restructure ACCESS work assignments.		Strategy Rationale Current configuration of CWS and Mental health emergency response assignments may contribute to compliance issues for 10 day assessments			
Milestone	5.3.1 Request ACCESS Staff to review and consider new configurations for ER assignments	Timeframe	3/01/07	Assigned to	All ACCESS staff
	5.3.2 Analyze current assignment configuration and consider staff suggestions and possible restructuring		3/30/07		ACCESS leadership team
	5.3.3 Implement recommendations for changes in assignment configuration as appropriate		4/15/07		ACCESS Program Manager
Status: All milestones have been completed; changes in assignment configuration have been implemented					
Discuss changes in identified systemic factors needed to further support the improvement goals. <ul style="list-style-type: none"> • Reduce social worker caseloads, to facilitate consistent 10-day responses. 					
Status: Caseloads have not been reduced for emergency response social workers due to budget demands.					
Describe educational/training needs (including technical assistance) to achieve the improvement goals. <ul style="list-style-type: none"> • None 					
Identify roles of the other partners in achieving the improvement goals. <ul style="list-style-type: none"> • None 					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. <ul style="list-style-type: none"> • None 					

Placer County 2008 SIP Progress Report

Outcome:

Outcome 2: Children are maintained safely in their homes, wherever possible and appropriate. Indicator 2C: Timely Social Worker Visits with Child

County's Current Performance

	Baseline Data	Oct 2006 data (start of SIP)	Jan 08 data	California average	National Std/Goal
2C: Timely Social Worker Visits with Child – Month 1	83.8%	83.6	90.9%	90.2%	NA
2C: Timely Social Worker Visits with Child – Month 2	84.6%	85.5	91.0%	89.6%	NA
2C: Timely Social Worker Visits with Child – Month 3	84.1%	86.8%	92.0%	88.7%	NA

Improvement Goal 6.0

Improvement Goal 6.0: Increase timely social worker visits by a rate of 3.2% to 90%; maintain 90% rate.

Status: Rates have exceeded goal, increasing by 4.1, 4.2 and 5.2% respectively; they now exceed the state average.

Strategy 6.1

Monitor social worker visits through the use of SafeMeasures

Strategy Rationale

Full use of SafeMeasures will assist workers and supervisors in effectively monitoring social worker visits.

Milestone		Timeframe	Assigned to
6.1.2 Train all CWS staff to use SafeMeasures		4/30/07	Program Manager, MIS/IT staff
6.1.3 Monitor CWS staff use of SafeMeasures during one-on-one supervision		5/31 and ongoing	Supervisors/Managers

Status:

All milestones have been completed. Supervisors, managers and staff have been trained to use SafeMeasures; it is used on an ongoing basis.

Strategy 6.2

Ensure all eligible cases have up to date contact exceptions in CWS/CMS case plans

Strategy Rationale

Ensuring every case plan is reviewed for contact exceptions will assist staff in making appropriate decisions about visitations.

Milestone		Timeframe	Assigned to
6.2.2 If eligible, complete contact exceptions in the CWS/CMS case plan		7/31/07 and ongoing	Staff
6.2.3 Ensure timely update of contact exceptions in the case plan through CWS/CMS and SafeMeasures		12/31/07 and ongoing	Supervisors, Staff and Managers
6.2.4 Develop guidelines for monthly contact, including exception criteria, in accordance with Section 31-320 of Division 31 regulations		8/31/07	Program Manager, MIS/IT Team

Placer County 2008 SIP Progress Report

6.2.5 Develop and issue procedures for updating case plans, including contact exceptions	12/31/07	Program Manager, MIS/IT Team
--	----------	------------------------------

Status:

- All cases have been reviewed and updated.
- Staff training was completed 1/08.
- Final guidelines will be implemented 3/08.

Strategy 6. 3 Provide clerical assistance to input visitation notes in CWS/CMS	Strategy Rationale Clerical assistance will ensure timely data input and will allow CWS workers more time for visits.
--	---

Milestone	6.3.1 Review existing Case Activity Contact /Visit Log and modify if necessary to match CWS/CMS system	Timeframe	6/30/07	Assigned to	Supervisor workgroup
	6.3.2 Review workload of each staff. Staff that need assistance will use Case Activity Contact /Visit Log		12/31/07		Managers/Supervisors/Seniors
	6.3.3 Train clerical staff to input information from Case Activity Contact /Visit Log		12/31/07		MIS/IT and Supervisors

Status:
All milestones have been completed

Discuss changes in identified systemic factors needed to further support the improvement goals.

- Caseload reduction would support more timely visits.

Status: Caseloads for some ongoing caseloads have been slightly reduced.

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

- None identified

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

- None identified

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

- Consider regulation change to allow other qualified staff to conduct monthly contacts. **Status:** Not being pursued.

Placer County 2008 SIP Progress Report

Outcome:

Outcome 3: Children will have permanency and stability in their living situations without increasing re-entry to foster care; Indicators 3B and 3C- Multiple Foster Care Placements, revised indicators – C4.1-.3

County's Performance

	Baseline Data	Oct 2006 data	Jan 08 data	California Average	National Std/Goal
C4.1 Placement Stability (8 days to 12 months in care)	79.8%	NA	81.9%	82.4%	86.0%
C4.2 Placement Stability (12 to 24 months in care)	49.5%	NA	58.9%	60.9%	65.4%
C4.3 Placement Stability (at least 24 months in care)	21.5%	NA	24.4%	34.9%	41.8%

Improvement Goal 7.0

Improvement Goal 7.0: Increase percentage of children with 1-2 placements by a rate of 5.8% to 86.7%. Significant change in measure requires change to Improvement Goal. New goal: Increase percentage of children with stable placements by 2.1% for each of the three indicators. C4.1 will increase to 84%, C4.2 to 61%, and C4.3 to 26.5%:

Status:

- Placement stability for children in care between 8 days and 12 months (C4.1) has improved by 2% since the baseline, but remains 0.5% below the state average and 4.1% below the national standard.
- Placement stability for children in care between 12 and 24 months (C4.2) has improved significantly by 9.4% since the baseline, but remains 2% below the state average and 6.4% below the national standard.
- Placement stability for children in care at least 24 months (C4.3) has improved by 2.9% since the baseline, but remains 10.5% below the state average and 17.4% below the national standard.

Strategy 7.1

Recruit additional concurrent planning families for older children

Strategy Rationale

In Placer County, children over six years old typically experience a greater number of foster placements, with fewer opportunities for permanency, than younger children. In part, this is due to an inadequate number of concurrent planning families interested in adopting older children.

Milestone	Timeframe	Assigned to
7.1.1 Contract with the Child Abuse Prevention Council to hire a foster parent recruiter through AmeriCorps	2/28/07	Recruitment and Outreach Team
7.1.2 Identify geographic areas and age groups (including older children) for targeted recruitment of foster parents	5/31/07	Recruitment and Outreach Team and MIS/IT Team

Placer County 2008 SIP Progress Report

7.1.3 Monitor the number of families willing to foster older youth		8/30/07 and ongoing	Recruitment and Outreach Team and MIS/IT Team
7.1.4 Provide regular training to staff on concurrent planning and permanency planning issues emphasizing the needs of older youth		Twice a year beginning by 6/30/07	Managers, supervisors, seniors and permanency planning workers on each team

Status:

- AmeriCorps employment did not work out; 7.1.1 deleted from plan.
- Geographic areas and age groups for targeted recruitment have been identified; an update is under development.
- Campaign to foster older youth implemented and number of families willing to foster older youth has increased.
- Curriculum has been developed; all staff will be trained by 6/08.

Strategy 7. 2 Provide increased support for Resource Parents	Strategy Rationale Some resource parents report that when they call or e-mail caseworkers about issues with foster children or need for additional support, they do not receive a timely response within the agency's guideline of 24 hours. They also report delays in obtaining needed services. The perceived lack of caseworker responsiveness and support may result in frustration, requests to move children from placements, or even resignation of resource families.
--	--

Milestone	7.2.1 Develop a CSOC agency policy stating that it is best practice to complete requests from resource parents for services within 7 days	Timeframe	4/30/07	Assigned to	Program Director and team of managers, supervisors and seniors.
	7.2.2 Review and reissue policy guidelines to all staff regarding 24hour response to phone and email. Include best practice for completing requests for services within 7 days		3/30/07		Program Director and team of managers, supervisors and seniors
	7.2.3 Consider creating a full time permanent Foster Parent Liaison position to assist case workers in providing resource parents with information and other supports		06/30/08		CSOC mgmt team.
	7.2.5 Develop and implement a protocol for exit interviews with Resource Parents at the close of placements. The interview will review CSOC services, support, and responsiveness during the placement.		09/30/07		Foster Parent Liaison.
	7.2.6 Recruit 5 Resource Families specifically for Respite Care		12/31/07		Recruitment and Outreach team

Placer County 2008 SIP Progress Report

Status:					
<ul style="list-style-type: none"> • Communication and service request policies (7.2.1 and 7.2.2) were combined with strategies 4.1.1 and 4.1.2 and implemented 2/08. • The full time permanent position was not created due to budgetary constraints. • The protocol for exit interviews with Resource Parents has been developed and fully implemented. • Formal recruitment for respite not yet implemented as CSOC has no recruitment budget; members of the foster parent association are working together to provide informal respite care. 					
Strategy 7. 3 Expedite the relative/Non-Related Extended Family Member (NREFM) approval process			Strategy Rationale Delays in the approval of placements with relatives and NREFM may result in unnecessary temporary placements in other foster care.		
Milestone	7.3.1 Develop and implement an agency policy requiring ACCESS investigators to include a list of relatives or NREFM in the detention report or transfer summary to permit ongoing workers to immediately pursue possible placement	Timeframe	6/30//07	Assigned to	ACCESS Program Manager
	7.3. 2 Develop and implement best practice policy of conducting assessments of relatives/NREFM within 10 days of the child's removal		6/30/07		CSOC program managers
	7.3.3 Monitor and assist caseworkers with relative/ NREFM approvals during monthly supervision		6/30/07 and ongoing		Team supervisors/seniors
Status:					
<ul style="list-style-type: none"> • The policy was completed and implemented • The best practice policy was changed to require assessment within 30 days of removal; it was implemented 1/08 • Monitoring of relative/NREFM approvals has been implemented and is ongoing 					
Discuss changes in identified systemic factors needed to further support the improvement goals.					
<ul style="list-style-type: none"> • Staffing systemic factor: 1) Reduce CWS ongoing social worker caseloads from 35 to 20 by hiring new workers. 2) Create Full Time Permanent Position for Resource Parent Liaison. 					
Status: Staffing changes have not been implemented due to budgetary constraints; alternative brainstorming is necessary to identify resources.					
Describe educational/training needs (including technical assistance) to achieve the improvement goals.					
<ul style="list-style-type: none"> • Periodically train ongoing workers; review concurrent planning and permanency goals for children in foster care. 					
Status: Training completed by 6/08					
Identify roles of the other partners in achieving the improvement goals.					
<ul style="list-style-type: none"> • Encourage partner FFA's to actively seek concurrent planning families for older children 					
Status: Ongoing; also implementing Destination Family for older youth.					
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None					

Placer County 2008 SIP Progress Report

Systemic Factor: Management Information System					
County's Current Performance: County has implemented SafeMeasures, case management software that allows an almost real-time reporting of case information and AB636 performance measures. CSOC MIS Team and Evaluator for CSOC produce monthly report on performance measures and productivity.					
Improvement Goals 8.0					
<ul style="list-style-type: none"> • Ensure correct and appropriate entry of data and closure of immediate and 10-day assessments to improve Timely Response to Referrals • Ensure correct and appropriate entry of data and approval of CWS Case Plans to improve Timely Social Worker Contacts • Ensure correct and appropriate association and evaluating out of referrals in CWS/CMS to reduce false reporting of Recurrence of Maltreatment. • Help reduce Re-Entry into Foster Care by completion of an ongoing SIP analysis of reasons for re-entry. • Create an additional analyst position to work with the evaluation team. 					
Status: See below					
Strategy 8. 1 Set standard procedures for entry of contacts and required data on immediate and 10-day assessments			Strategy Rationale Due to the lack of clarity of statewide data entry standards, data may be entered in a format that is not queried by state performance measures. Setting standard procedures will insure that all "fields" required for correct measurement are completed.		
Mile stone	8.1.1 Complete standard procedures for data entry of face-to-face contacts for immediate and 10-day assessments	Time frame	4/30/07	Assig ned	MIS/SIP Committee
Status: Standard procedures have been completed.					
Strategy 8. 2 Train staff on data entry standards and ensure timely and correct supervisor approval of immediate and 10-day assessments			Strategy Rationale Training staff will ensure appropriate entry of investigative contacts with children and families, ensure proper closure of immediate and 10-day assessments, and ensure that supervisors are signing off on immediate and 10-day assessments in a timely and correct manner for closure of the immediate and 10-day assessments.		
Milestone	8.2.1.Train teams on data entry process	Timeframe	5/15/07	Assigned to	MIS SIP Committee
	8.2.2 Train Supervisors on correct process for approval and closures of immediate and 10-day assessments		6/30/07		MIS SIP Committee
Status: Training for staff and supervisors has been completed and is ongoing.					

Placer County 2008 SIP Progress Report

Strategy 8.3 Conduct monthly reviews of immediate and 10-day assessments that do not meet performance standards to determine if data entry contributed to the reporting of non-compliance.		Strategy Rationale Ensures effectiveness of training and helps establish appropriate data entry standards.			
Milestone	8.3.1 Randomly sample 10% of all immediate and 10-day assessments that do not meet established performance standards	Timeframe	June 30, 2007 and Ongoing	Assigned to	MIS SIP Committee
	8.3.2 Complete report on findings as related to data entry standards and distribute to Manager and Supervisors for review		August 30, 2007 and Ongoing		MIS SIP Committee
	8.3.3 Make recommendations for procedural changes or training needs based upon findings of study		September 30, 2007 and Ongoing		MIS SIP Committee
Status: <ul style="list-style-type: none"> The random sample has been drawn. Reports on findings and recommendations targeted for completion 3/08. 					
Strategy 8.4 Set standard procedures for entry of social worker contacts, ensure timely and correct supervisor approval of CWS Case Plans and train staff on standards.		Strategy Rationale Due to the lack of statewide data entry standards, data may be entered in a format that is not queried by state performance measures, setting standard procedures will insure that all "fields" required for measurement are completed and that supervisors are signing off on CWS Case Plans in a timely manner, a procedure that is necessary for measurement of this performance standard.			
Milestone	8.4.1 Complete standards for entry of social worker contacts	Time frame	June 30, 2007	Assigned to	MIS SIP Committee
Status: The standards have been completed					

Placer County 2008 SIP Progress Report

Strategy 8.5 Train staff on data entry process for recording Social Worker contacts, submitting CWS Case Plans to supervisor and how to correctly approve the CWS Case Plans including requests for exceptions for Social Worker contacts		Strategy Rationale Training staff will ensure appropriate data entry of Social Worker contacts in a manner that will be correctly queried by the state performance measures. Since the CWS Case Plan is linked in the query language to successful compliance with this measure, training Supervisors on approval will ensure that the contact requirements for the case "match" the Social Worker contacts.			
Milestone	8.5.1 Conduct training for each service team to ensure compliance with standards	Timeframe	August 30, 2007	Assigned to	MIS SIP Committee
	8.5.2 Conduct training for supervisors on appropriate and timely process for approval of case plan		August 30, 2007		MIS SIP Committee
	8.5.3 Review and consider staff compliance when completing performance appraisals		November 30, 2007		Managers, supervisors, seniors
Status:					
<ul style="list-style-type: none"> • Training will be completed 3/08. • Staff compliance is ongoing. 					
Strategy 8.6 Conduct monthly reviews of Social Worker contacts that do not meet performance standards to determine if data entry contributed to the reporting of non-compliance		Strategy Rationale Ensures effectiveness of training and helps establish appropriate data entry standards.			
Milestone	8.6.1 Randomly sample 10% of all Social Worker contacts that do not meet established performance standards	Timeframe	September 30, 2007 and Ongoing	Assigned to	MIS SIP Committee
	8.6.2 Complete report on findings as related to data entry standards and distribute to Manager and Supervisors for review		October 31, 2007 and Ongoing		MIS SIP Committee
	8.6.3 Make recommendations for procedural changes or training needs based upon findings of study		December 1, 2007 and Ongoing		MIS SIP Committee
Status:					
<ul style="list-style-type: none"> • The sampling and report are underway, targeted for completion 3/08 • Recommendations are also targeted for completion 3/08 					

Placer County 2008 SIP Progress Report

Strategy 8.7 Set Standards for recording referrals of maltreatment or abuse in CWS/CMS that will link related referrals		Strategy Rationale Sample reviews of referrals for recurrence of maltreatment suggest that referrals that are subsequent to and related to a previously substantiated referral are not always being associated with the substantiated referral or being evaluated out. Failure to complete the association or to evaluate out the referral can result in recording the subsequent referral as a recurrence of maltreatment or abuse.		
Milestone	8.7.1 Work with program staff to set standards for determination of relationship of subsequent referrals to previously substantiated referrals	Time frame	January 31, 2008	Assigned to MIS SIP Committee
Status: Standards underway, targeted for completion 3/08.				
Strategy 8.8 Train staff on guidelines for association of referrals or on procedures for evaluating out referrals as appropriate		Strategy Rationale Currently there are a number of referrals that are open on ongoing cases. Many of these referrals are on reports for maltreatment or abuse that is a part of the approved CWS Case Plan for the child or family. Training staff to evaluate these referrals out can result in a more accurate reporting of recurrence of maltreatment or abuse.		
Milestone	8.8.1 Conduct training for intake and ongoing teams to ensure that subsequent referrals are associated with previous substantiated referrals as appropriate or that subsequent referrals on ongoing cases are evaluated out as necessary	Timeframe	March 31, 2008	Assigned to MIS SIP Committee
Status: <ul style="list-style-type: none"> • Training is now targeted for completion 5/08. 				
Strategy 8.9 Conduct quarterly reviews of recurrence of maltreatment or abuse to determine if data entry contributed to an inappropriate report of cases		Strategy Rationale Ensures effectiveness of training and helps establish appropriate data entry standards		
Milestone	8.9.1 Disaggregate recurrence of maltreatment report and sample 10% of cases reported	Timeframe	September 30, 2007 and Ongoing	Assigned to MIS SIP Committee
	8.9.2 Complete report on findings as related to data entry standards and distribute to Manager and Supervisors for review		September 30, 2007 and Ongoing	MIS SIP Committee
	8.9.3 Make recommendations for procedural changes or training needs based upon findings		September 30, 2007 and Ongoing	MIS SIP Committee
Status: <ul style="list-style-type: none"> • All milestones are underway, targeted for completion 4/08. 				

Placer County 2008 SIP Progress Report

Strategy 8.10 Conduct six (6) month reviews of Re-entry into Foster Care to ensure that cases are reported appropriately in CWS/CMS		Strategy Rationale Analysis of reasons for Re-entry into Foster Care can help establish practices that better address the service needs of our children and families.			
Milestone	8.10.1 Disaggregate recurrence of maltreatment report and sample 10% of cases reported	Timeframe	October 30, 2007 and Ongoing	Assigned to	MIS SIP Committee
	8.10.2 Complete report on findings as related to data entry standards and distribute to Manager and Supervisors for review		November 30, 2007 and Ongoing		MIS SIP Committee
	8.10.3 Make recommendations for procedural changes or training needs based upon findings of study		January 31, 2008 and Ongoing		MIS SIP Committee
Status: <ul style="list-style-type: none"> • Reports and recommendations targeted for completion 6/08. 					
Strategy 8.11 Identify resources to either create an additional analyst position for CWS or re-engineer existing functions to create capacity for increased reviews, analysis, and reporting		Strategy Rationale Data analysis and evaluation are integral to improvement of performance measures. Without accurate reporting and assessment of data and ongoing evaluation of results, decisions meant to effect program change may be based solely staff experience and anecdotal evidence. Failure to base decisions on data analysis and evaluation is evident in Placer's 2004 System Improvement Plan strategies to reduce re-entry to foster care. Because Placer was unable to evaluate the cause of the rate of re-entry at the time, 2004 SIP strategies did not address what was later determined to be the primary cause of the re-entry into foster care-- parental relapse of substance abuse. The addition of an analyst position will provide staff time necessary for evaluation of factors contributing to successful completion of performance measures.			
Milestone	8.11.1 Work with CSOC administration and accounting to determine feasibility of creating an additional position for evaluation	Timeframe	September 30, 2007	Assigned to	MIS SIP Committee
	8.11.2 Rewrite job description or re-assign duties		November 30, 2007		CSOC Accounting
Status: The creation of a new position was determined to be infeasible due to budgetary constraints. The strategy has been dropped from plan.					

Placer County 2008 SIP Progress Report

Discuss changes in identified systemic factors needed to further support the improvement goals.

Statewide standards for data entry have not been set, potentially resulting in reporting inaccuracies in state performance standards. As a result, the county is left with the review of formulas for reporting of state performance standards and the drafting of appropriate data entry standards. Completion requires learning the performance standard formulas and then learning how to enter data into CWS/CMS in a manner that will result in data being entered in the appropriate field for the particular performance query.

Status: Statewide process is underway.

Staffing: It is recommended that the County consider creating an additional analyst position to work with the evaluation team. Currently, Placer has the software necessary for disaggregating data required for determination of factors contributing to the success or failure in achievement of our performance outcomes. However, disaggregating only gives us the names of the cases which either met or did not meet the performance criteria. Determination of the factors that contributed to the criteria usually requires a hand review of each of the cases. For example, a review of all cases of children re-entering foster care demonstrated that the primary reason for the re-entry was parental relapse of substance abuse. Absence of that information prevented Placer from implementing a program strategy that actually targeted successful achievement of the goal to reduce re-entry. That level of analysis requires additional staff time that CSOC does not presently have available.

Status: See 8.11

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

Client Services Supervisor/Evaluator needs to be trained on query language for CWS/CMS.

MIS Committee needs technical assistance on deciphering performance standard formulas.

CSOC staff needs training on standards as designed by the MIS Committee to ensure appropriate data entry.

Supervisors require training on correct procedures for approval of immediate and 10-day assessments, approval of CWS Case Plans and review of CWS/CMS cases to ensure staff responsiveness to performance.

Status: All training has been completed and is ongoing.

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

CSOC supervisors of ACCESS and ongoing teams need to help establish criteria for determination of association or evaluating out referrals related to Recurrence of Maltreatment. Managers and Team Supervisors must incorporate reports into supervision to help ensure compliance with record keeping requirements and reporting in CWS/CMS.

Status: In process. Anticipated completion 6/08.

Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None at this time.

Placer County 2008 SIP Progress Report

Systemic Factor CWS Case Management Caseloads					
County's Current Performance: The average caseload for family-centered service teams, providing case management services to children in placement is 35 children for each caseworker. This compares to caseloads for direct services for mental health, wraparound and special education of 18:1S.					
Improvement Goal 9.0 Reduce average caseloads for workers providing CWS case management services to 20 children to meet AB 2030 workload standards.					
Strategy 9. 1 Use supplementary state funding for CWS to hire additional caseworkers			Strategy Rationale <ol style="list-style-type: none"> 1. The Placer CWS Self-Assessment, completed in November, 2006 concluded that high caseloads were a factor in every outcome for which Placer County is not meeting the state/federal standards. 2. The Peer Quality Case Review, completed in March, 2006, indicated that high caseloads were strongly related to high rates of re-entry to foster care. 3. Placer's CWS caseloads are considerably higher than many other counties. 		
Milestone	9.1.1 Apply supplementary state funding to employment of CWS caseworkers	Timeframe	8/1/08	Assigned to	CSOC Management Team
	9.1.2 Hire additional CWS caseworker staff		9/30/08		CSOC Management Team
Status: No supplementary state funding is available or proposed; the strategy has been indefinitely deferred until funding becomes available.					
Strategy 9. 2 Employ bachelor's level staff or para-professionals, where appropriate, to handle some of the duties of social workers, where permitted by law			Strategy Rationale : To a limited extent, bachelor's level staff or para-professionals could take some of the burden off current caseworkers, at a potentially lower cost		
Milestone	9.2.1. Review caseworkers duties to determine which duties could be assigned to other staff; develop job specifications as needed	Timeframe	5/31/08	Assigned to	CSOC Management Team/HHS Human Resources
	9.2.2 Hire and train new CWS caseworkers		9/30/08		CSOC Management Team
Status: Analysis is underway and on track to determine re-allocation of personnel resources					