

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

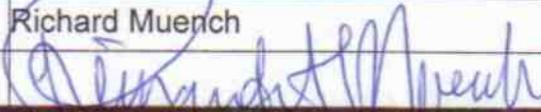
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### Board of Supervisors (BOS) Approval

BOS Approval Date:	Not Applicable for SIP Updates
Name:	
Signature:	

# Tehama County Child Welfare

## System Improvement Plan (SIP) 2009-2012



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## SIP Narrative

### 1. Process for Conducting SIP

#### a. Team Membership

The SIP development team included the CWS Program Manager, CWS Supervisors, the Department's Staff Services Analyst assigned to CWS (who also functions as the CAPIT/CBCAP/PSSF Liaison), and the Juvenile Probation Division Director. The team was also informed by feedback from CWS Social Workers, and information gleaned through surveying the following stakeholders:

#### Required Core Representatives

- CAPC
  - Linda Kenyon Rose, President
- County Children's Trust Fund Commission (CCTF)
  - Tehama County's CAPCC acts as the CCTF Commission. See above.
- County BOS designated agency to administer CAPIT/CBCAP/PSSF Programs
  - Charlene Reid, Director, Tehama County Department of Social Services
- County Health Department
  - Sydnei Wilby, PHN, Director, Tehama County Health Services Agency, Public Health Division
- County Mental Health Department
  - Ann Houghtby, MFH, Director, Tehama County Health Services Agency, Mental Health Division
- CWS administrators, managers, and social workers (includes CAPIT/CBCAP/PSSF Liaisons)
  - See above
- Foster Youth
- Juvenile Court Bench Officer
  - Judge Edward King
- Native American Tribes served within the community
  - Paskenta Band of Nomlaki Indians
- Parents/Consumers
  - Ronda Dougherty, CWS Parent Partner/Former Consumer
- Probation administrators, supervisors, and officers
  - Renny Noll, Interim Chief Probation Officer
  - Greg Ulloa, Juvenile Division Director
- PSSF Collaborative
  - Tehama County's CAPCC acts as the PSSF Collaborative. See above.
- Resource families and other caregivers

## Recommended Stakeholders

- County Alcohol and Drug Department
  - Susan McVean, Director, Tehama County Health Services Agency, Drug and Alcohol Division
- County Children and Families Commission (Prop. 10 Commission)
  - Denise Snider, Director, First 5 Tehama
- Department of Developmental Services (DDS) Regional Center
  - Far Northern Regional Center
- Domestic Violence Prevention Provider
  - Clara Osborne, Executive Director, Alternatives to Violence
- Education
  - Tehama County Department of Education
- Law enforcement
  - Danny Rabalais, Tehama County Sheriff's Office
- Public Housing Authority
- Regional Training Academy
  - Susan Brooks, Program Director, Northern California Training Academy, UC Davis Extension, University of California
- Representatives from Businesses
- Service Providers
- Workforce Investment Board
  - Kathy Schmitz, Job Training Center, WIA Member
- County Counsel
  - Sylvia Duran, Deputy County Counsel assigned to CWS
- Various Community-Based Organizations and Other Service Providers
  - Triad Family Services
  - DayStar Ranch
  - Other anonymous respondents in these categories

### b. Data Sources

Data for the CSA and SIP were gathered from SafeMeasures, CWS Outcomes System Summary Reports and other data compiled and published by UC Berkeley Center for Social Services Research, as well as from other custom reports developed in the county utilizing data from CWS/CMS in Business Objects reports and data from the Efforts to Outcomes (ETO) Team Decision making (TDM) database.

### c. Decision Making

The CWS Program Manager and CWS Social Worker Supervisors made decisions with the assistance of the Staff Services Analyst and feedback from the CWS Social Workers, using information from the data sources listed above, feedback from stakeholders, the CSA, and results of the PQCR. Decisions were made via a process of the Program Manager developing a draft of the SIP after discussion with supervisors and the Staff Services Analyst about SIP priorities, using feedback from the above-named sources, and then receiving feedback on the draft, and making

requested revisions. Since the Program Manager was in the process of retiring, the Tehama County DSS Deputy Director has been closely involved with this process.

## 2. Outcomes Identified for Improvement

### a. Themes Identified in the CSA and PQCR

The following themes were identified in the CSA:

- *Youth in Care more than 24 months without a Permanent Plan:* Factors which likely influence the length of time a child/youth will be in care longer than 24 months without a permanent plan include a longer median time to reunification and/or an increased rate of failed reunification (re-entry following reunification); delays in implementing concurrent planning, and delays with finalization of adoption. Tehama County rate of exits to permanency for youth in care 24 months or longer has been declining. Court delays, delays in finalizing adoptions, and lack of early concurrent planning likely all contribute to this factor.
- *Placement Stability:* Tehama County has been improving in the area of placement stability, except in the area of children and youth in care for more than 24 months. In this area, performance has been declining. Research shows that the longer a child/youth has been in care without a permanent plan, the more likely this child/youth will suffer multiple placement changes. As Tehama County makes better use of risk of removal and emergency placement TDM's, and places more focus on initial placement with relatives and NREFM's, placement stability should improve.
- *Timely Response:* Tehama County has made good improvements with timely response, which was a goal in the county's last two SIPs. However in the past six months the figures have shown a dramatic downward shift in performance. Some factors which were discussed in the CSA were a change in unit structure, which resulted in a learning curve for three of four supervisors, in the area of monitoring emergency response. As could be reasonably expected after the first few months of learning and adjustment to this change an improvement in timely response was shown. However there has since been a sharp dip in performance over a recent two or three month period. Some factors which may have some bearing on this decreased performance are the assignment of a specific supervisor to oversee the intake screeners and this person needing to get comfortable in this new role; social worker noncompliance regarding recording contacts; and a large hit on the unit outstationed in Corning (south county) when a local task force made a sizeable methamphetamine sweep/bust in May of 2009. Corrective actions are already being put into place to resolve social worker compliance with data entry and the workload issues in the Corning unit.

- *Timely Social Worker Contacts:* Tehama County has demonstrated a decline recently in timeliness of recorded social worker contacts. This could be due to one or more of the following factors: contacts are not recorded in a timely fashion; contact waivers in case plans are not current; social workers are meeting with clients monthly, but not within 30 days of the previous contact; social workers in the Corning outstationed unit are carrying vertical caseloads, and are not able to make mandated monthly contacts due to the timeline pressures of immediate and 10-day responses required for referrals and detention/jurisdictional and dispositional reports. For a period of time, an extra-help social worker was monitoring the non-dependent legal guardian cases, and was not instructed to update case plans, thus contact waivers for those cases were not current. Measures are to correct these issues are already being initiated. They are:
  - a. Supervisors are using Safe Measures more and checking more.
  - b. Many contact were not in compliance due to an oversight on many non-dependent legal guardianship cases not having updated case plans, so the every six-month contact changed to monthly, and we were out of compliance on those.

Tehama County chose Placement Stability as the focus for its PQCR in September 2008. Findings from the PQCR included:

- Barriers to parent/youth engagement with their case plans included parents who were incarcerated, resistance on the part of parents/youth, and a lack of effective strategies being used by social workers.
- Common barriers to timely reunification included high caseloads and multiple case transfers.
- A noted barrier to effective concurrent planning was not having a concurrent plan in place at the beginning/onset of the case.
- An issue identified as contributing to lessened placement stability was that the decisions for placement were made on availability of a bed, rather than appropriateness of fit.
- Another issue identified as related to placement stability was foster parent retention, affected in part by placing children with behavioral challenges with caregivers with little to no experience.

### 3. Improvement Targets or Goals

**a. Outcome Target Goal Selection Process**

Tehama County did not use the composite planner for identifying improvement goals, as it was not found to be terribly useful in this size county with a small data set and because training on the planner was not able to be scheduled in time for application of such to the CA-CFSR CSA and SIP processes. Tehama County did use the PQCR findings and other data as mentioned above, as well as feedback from social workers and stakeholders for identifying improvement goals. As a small county, Tehama CWS is able to closely observe practice, and to relate those observations to current research, for example the research on placement stability and participatory case planning reviewed in preparation for the PQCR.

Tehama's improvement goals are centered around the county's data related to the Long Term Care and Placement Stability Composites. Tehama will be focusing on improved rates of reunification and lowered rates of re-entry, based on the belief that optimal permanency plan for children and youth is to return home and to remain home. Correct use of the Structured Decision-making (SDM) tool, including the Family Strengths and Needs Assessment (FSNA), enhances the participatory case planning process, which research shows leads to better reunification outcomes. Expertise with and use of motivational interviewing helps to remove the barrier of resistance for clients, thus both speeding up the reunification process, and helping to solidify the gains made, which reduces recidivism. Another factor in reducing recidivism is connecting the family to a supportive community to help them to remain drug and alcohol free and to be able to maintain their stability as a family.

Improved use of the TDM process can help in several areas. Improved use of the risk of removal and emergency placement TDMs provide an opportunity to coordinate support around a family unit so the child(ren) can remain home, or if placement is necessary TDM provides a forum for engaging the family in the identification of a placement with a person who is familiar to the child(ren) and ideally in their own neighborhood and school district, such as a relative or non-related extended family member, which research shows can better support reunification, placement stability, and permanency for the child/youth should reunification fail.

Appropriate implementation of concurrent planning early on in a case can both support reunification efforts and support placement stability and permanence for children/youth should reunification fail.

The outcome/goal selection process revolved around Tehama's concerns regarding the numbers of children/youth in care 24 months or longer without a permanent plan. With the premise that the best permanent plan for a child/youth is to remain or return home safely, and that the next best permanent plan is permanency with a relative or other person close to the child, ideally in his or her own neighborhood, and school district, and with siblings, the improvement goals selected focus on

placement at home and/or reunification without re-entry and placement with relatives or NREFMs who can support reunification while still offering permanency. All of this is better accomplished through improved client engagement, participatory case planning, concurrent planning, and the TDM process.

#### 4. Summary of Current Research Available

UC Davis prepared two research papers which relate to Tehama County's chosen improvement goals.

**A Literature Review of Placement Stability in Child Welfare Services: Issues, Concerns, Outcomes, and Future Directions** was prepared by the Northern California Training Academy, University of California, Davis, Extension, the Center for Human Services, in August of 2008. The basic findings of this research paper are:

- It is important to minimize the number of changes children experience.
- Some key components for improving practices for increasing the probability for placement stability include:
  - Strong tracking and case planning to ensure that "foster drift" is avoided to achieve permanence
  - Early intervention
  - Increasing the availability and use of placement choice
    - It is essential that children are moved because of their identified needs, not because of unavailability of placements
  - Increasing multi-agency support
    - There is strong and conclusive evidence that providing support to foster parents (and kin) reduces the likelihood that a placement disruption will occur.

**Participatory Planning in Child Welfare Services Literature Review: Selected Models, Components and Research Findings**, was prepared by The University of California, Davis, Extension, the Center for Human Services, in July of 2008.

This paper concludes that while there is not conclusive evidence that participatory models such as Family Group Conferencing and Wraparound services are effective in improving outcomes for children and families in the long term, there is encouraging and positive evidence. "The research generated thus far illustrates the effectiveness of the participatory planning model, mainly involving families in the decision making process for contributing to some positive outcomes for families and children." Findings are that families "...exhibit greater commitment to receiving services and feel more empowered when they are involved in contributing to decisions that affect them and their families."

TDM is one of the four core strategies of the Family-to-Family initiative, which is an evidence-based model, which has demonstrated success in the areas of out-of-home

placement prevention, better identification of needs and placement matching when out-of-home care is necessary, enhancing placement stability and permanence, and improved reunification and/or exits from care outcomes.

## **5. Summary of Current Activities in Place or Partially Implemented**

The restructure of the units, which took place in late 2008, has positively affected the flow of cases through the units. Each unit is now a vertical unit, and all members of each unit are aware of and gain knowledge of the case as it enters the unit, so that the case transition is smooth. The ongoing social worker is informed of her/his assignment to a case at the time it is assigned to the court social worker. This way the ongoing social worker can also be involved in the development of the case plan with the client. The members of each unit team with one another on the cases, and can provide coverage for one another.

All of the social workers and all of the supervisors have been trained in motivational interviewing, which evidence shows has a positive influence in early engagement of and motivation of clients. The three court social workers in the Red Bluff office and two of the social workers in the Corning office have been assigned motivational interviewing coaches to enhance their learning of and performance in this model.

The Northern California Training Academy has assigned two trained facilitators to do case readings regarding the effective use of SDM and to then plan and conduct trainings in SDM in Tehama County. They began with the use of the FSNA tool, which is directly related to improved participatory case planning.

The CWS supervisors and program manager and California State Adoptions – Chico District Office supervisors provided a joint training to CWS and State Adoptions social workers on concurrent planning. A concurrent planning policy and procedure is being updated, and additional training on more effective use of concurrent planning is being planned.

Tehama County is one of four northern counties, along with Lake, Butte, and Trinity, who were successfully funded for the PSSF Regional Partnership Grant on methamphetamine prevention. Through this grant Tehama County CWS has had the benefit of having an on-site alcohol and other drug (AOD) counselor, who is able to provide early engagement, assessment and case management for clients with drug and alcohol issues. In addition, Tehama CWS has benefited from enhanced training from the Northern Regional Training Academy on topics such as with motivational interviewing and SDM.

Tehama County has had an active Dependency Drug Court (DDC) since 2007 and has found that our clients with Dependency Drug Court involvement have had a high rate of success with continued sobriety and successful reunification.

Tehama County CWS has had a mental health counselor from the Tehama County Health Services Agency, Mental Health Division (TCHSA – Mental Health) co-located two

afternoons each week at Child Welfare for about a year. This counselor provides assessments of foster children, which has included assessment for Medi-Cal eligibility for mental health services. Co-location has fostered increased and enhanced communication between TCHSA - Mental Health and CWS social workers, with the result of better assessments and timelier services to children.

Tehama County CWS has worked hard to ensure consistent use of TDMs, especially for risk of removal and emergency placements, in order to enhance the children's chances of either remaining safely at home or being placed in a familiar environment.

## **6. New Activities**

Increased use of motivational interviewing and participatory case planning activities will enhance the chances of early engagement for the clients, and of better outcomes for reunification. This will help diminish the barriers which were noted in our PQCR of client resistance, and it will also likely increase the likelihood of positive expectations of the clients on the part of the social workers.

Improved use of the SDM process, such as appropriate use of the FSNA tool in relation to participatory case planning, will enable the social workers to work with the clients towards the development of more meaningful case plans, better tailored to the client, and developed to build on a client's strengths to work with their issues.

Case plan development in a team setting will enable all parties who work with the client to be in clear communication with the client and with each other as to expectations, progress or lack thereof, and continuing issues which need to be addressed.

Being able to refer clients to an established aftercare program, developed especially for child welfare families leaving the system, will allow for increased support for the families, and some continuing accountability after they leave the child welfare system, thus decreasing the chances for recidivism and re-entry.

Tehama CWS's parent partner program has been successful in terms of providing support for and a reality check to the clients, however it has not moved beyond these activities. Involving past and current clients, including parents and youth, in an advisory, training and orientation capacity will both enhance the awareness of the social workers in meeting the needs of the clients, and will change the image the community has of the CWS system as a threatening, unforgiving system, to one comprised of people who are willing to learn from the clients, and are willing to work with and be a support to the clients.

## **7. Link between Activities and Outcome Improvement**

Tehama's goals and strategies are geared towards better understanding and engagement of clients which in turn will translate into better outcomes for children and families. Activities

directed at teaming with clients to understand their strengths and needs, valuing their participation in decision-making, and working with them to develop personalized case plans that will address their specific needs will in turn result in faster reunification while still providing adequate support to stabilize the family and prevent re-entry to the CWS system.

Being open to learning from clients and using these lessons to improve service provision and casework will improve practice in all areas of Child Welfare. Additionally, efforts to engage family members and non-related extended family members in placement of the children if out-of-home care is necessary provides for greater stability and increased well-being of the children. Similarly, support to foster care providers, whether they be foster homes, relatives, or NREFMs and effective concurrent planning are important pieces of ensuring positive outcomes for the children in the care of Child Welfare.

#### **8. Integration between CSA, PQCR, and CWS/Probation Planning Process and CAPIT/CBCAP/PSSF Plan**

Information gathered in the CSA, PQCR and CWS/Probation planning process have all indicated needs in terms of better case planning with clients, more comprehensive and better integrated services, which meet the clients' needs and extend beyond the time of case management by CWS/Probation. Funding from the CAPIT, CBCAP, and PSSF funding streams to community-based organizations support these goals in the following ways:

Through CAPIT Tehama County has chosen to fund home-based services for CWS clients to be provided through the local Family Resource Centers, run by Northern Valley Catholic Social Services (NVCSS runs two of the three FRCs in the county's FRC network, the third is not equipped to provide these types of services). The home visitors provide support and training services for families who need to improve their functioning in order to safely parent their children. This supports the belief that the best permanent plan and placement stability for the child is to safely remain with, or return to, their family.

Through CBCAP Tehama County has chosen to fund home-based services for families at risk of child welfare involvement, also to be provided through the local Family Resource Centers, run by Northern Valley Catholic Social Services (again, NVCSS runs two of the three FRCs in the county's FRC network, the third is not equipped to provide these types of services). The intent of these services is to decrease the numbers of children who need to come into care, and increase the numbers of healthy families who can safely parent their children without CWS intervention.

Through PSSF funding, Tehama County supports the only local domestic violence agency, Alternatives to Violence, which provides a customized program for CWS clients and also participates in Differential Response as appropriate. Further, the PSSF funds will support an Adoption Support Program to be run for the first time in many years by CWS itself, and an aftercare program at the Red Bluff Family Resource Center. There is a similar aftercare

program in the Corning Family Resource Center, which is funded through the Cowell Foundation, which is also geared to working with former CWS families.

All of these programs chosen to be funded with the CBCAP, CAPIT and PSSF funds support families remaining together if possible, which is the ultimate permanent plan for children. With these services, the hope is that there will be reduced incidences of entry into the CWS system, with resultant lessened need for placement, and/ or reduced re-entry. When a child must move to an alternate permanent plan, the added support for adoptive and kinship families helps to ensure that the placement remains stable and secure.

**Attachments:**

- CSA Executive Summary
- PQCR Executive Summary

***Attachment 1: CSA Executive Summary***

The County Self-Assessment (CSA) provided an opportunity for Tehama County to evaluate its performance on the CA-CFSR outcomes for children and families in context of data related to overall demographic and community-level information available for the county. While interesting to review there were few surprises in either the CA-CFSR or the community-level data.

Nevertheless, after reviewing the outcome measures and related data CWS tentatively decided to focus on children in long-term foster care in the upcoming SIP, since this population has the most disturbing data related to permanency, in terms of adoption, exits to permanency and placement stability. This would include a focus on the following measures:

- Adoption within 12 months (17 Months in Care) - Children in foster care for 17 continuous months who were then adopted within 12 months. (Measure C2.3)
- Exits to Permanency (24 Months in Care) - Children discharged to a permanent home (reunification with parents or primary caretakers, discharge to guardianship, or discharge to adoption) prior to turning 18, who had been in foster care for 24 continuous months or longer. (Measure C3.1)
- In Care 3 Years or Longer (Emancipated/Age 18) - Children in foster care for 3 years or longer who were then either discharged to emancipation or turned 18 (aka "aged-out") while still in foster care. (Measure C3.3)
- Placement Stability (At Least 24 Months in Care) - Children with two or fewer placements who have been in foster care for 24 months or more. (Measure C4.3)
- Youth Transitioning to Self-Sufficient Adulthood – Children aging-out of foster care with one or more of the following - a high school diploma; enrollment in College/Higher Education;

received Independent Living Skills Program (ILP) Services; completed vocational training; employed or have other means of support. (Measure 8A)

In addition, during a recent consultation with CDSS Tehama CWS was informed that the CDSS would likely be encouraging the county to continue to look at re-entry following reunification on the 2009-2012 SIP. If this is the case it would then be important for CWS to also look at measure C1.2 Median Time to Reunification as it may be supposed that faster reunification may mean that the family was not able to adequately make the appropriate changes in the time frame of the case and may then be more likely to become re-involved with CWS. While it is important for child well-being to reunify as quickly as possible, it is equally important that the issues which brought them into care be properly addressed so that future involvement (i.e. re-entry) be prevented.

The intent will be to put into place simple, straightforward, doable practice changes and strategies that would simultaneously make an impact on multiple focus outcomes. Tehama found that it's last SIP was too varied and lofty and thus difficult to accomplish. This method of choosing to use strategies that would affect complimentary outcomes will be a more reasonable and appropriate way to accomplish the SIP goals.

#### ***Attachment 2: PQCR Executive Summary***

The Peer Quality Case Review (PQCR) was an occasion for Tehama County CWS and Juvenile Probation to evaluate its practice strengths and weaknesses in qualitative format, the results of which can then be considered in compliment to the CA-CFSR outcome data. The PQCR took place between September 22-25, 2008.

The PQCR revealed that Child Welfare had strengths in making efforts to maintain educational permanency and continuity as well as general permanency planning, including such participatory case planning practices as Team Decision-making (TDM). However, it was also found that Child Welfare faces challenges in the area of placing infants in relative and/or NREFM homes rather than pre-adoptive homes that then may struggle to support reunification efforts with biologically related caregivers. On a systemic level it was noted that Child Welfare needs to better ensure that when cases are transferred that the existing social worker introduces the incoming social worker to the child/youth, foster family, education personnel, etc, as relevant to the case.

Child Welfare also faces resource issues, including transportation for children/youth and mental and behavioral health services. It was also found that while many foster children/youth receive medications there are few opportunities for caregivers to attend training on how to effectively work with these children/youth in a relationship-based way. Additionally, it was noted that addressing the characteristics of the foster home and effectively implementing "goodness of fit" practices in placement is an area for improvement.

Throughout the PQCR training needs were identified including how to use TDM and SDM appropriately and effectively; relative placement and relative location/identification including such practices as Family Finding; concurrent planning; Ways to effectively involve parents: provide training that provide more of a “hands-on” approach allowing social workers to help parents overcome resistance and noncompliance with case plan activities; making effective case transfers between social workers and other important service providers so that case management activities are not delayed; and information and training on evidence based substance abuse treatment models. Tehama CWS would likely benefit from technical assistance in several of these areas as well as in the area of the Education Passport in CWS/CMS.

Other general recommendations received and/or identified for Child Welfare during the PQCR process included the social worker visiting the youth more often to assist in developing adequate relationships, however avoid visits at the child’s school because visits at this type of location can be embarrassing for youth; when cases are transferred, having the social worker and/or probation worker meet the family with previous worker so that families do not feel that they are being passed around and to enhance more information sharing between workers; smoothing transitions for children placed in the receiving home by utilizing icebreakers and possibly having the foster family come meet the child and engage in an enjoyable activity; assisting parents/family with transportation to visit youth in juvenile hall or group homes; offer conflict mediation services to foster parents and the youth in their care to improve placement stability; clarify the purpose and procedures of the Team Decision-making process with all child welfare partners, including both the primary goals of the process and strategies for follow-through on identified activities and revisit the participants who are included in the Team Decision-making process, including those who receive information regarding TDM goals and/or outcomes; and utilize a standardized assessment protocol and tool(s) for all children/youth who enter the foster care system.

For Juvenile Probation the PQCR highlighted good support and communication as a practice strength. Probation officers were mentioned as being supportive of the youth in their case plans and for maintaining open communication. This consistent and open communication was viewed as contributing to better support for youth.

Juvenile Probation, however, does face difficulty in involving families in case planning. Both the parent who had a youth involved in probation and the probation officer mentioned that the parent and/or youth was not involved in the case planning. It appears that more support and assistance is needed for involving parents and youth in the case planning process in order to contribute to placement stability. Specifically, it was identified that Juvenile Probation would benefit from training on placement engagement and support for adolescent girls with the goal of reducing AWOLs (absent without leave or permission/run a-ways).

Additionally, Juvenile Probation faces resource challenges, namely lack of transportation. Consistent and reliable transportation is needed to better support biological caregivers in visiting youth, especially youth placed far away in group homes, which was mentioned commonly.

Through the PQCR general recommendations for improvements were made including having youth who return home receive “post-reunification” family services/more resources and support are needed for youth and families transitioning home; improving permanency and long-term placements for youth who age-out of the Juvenile Probation system, including identifying resources to assist Juvenile Probation in this effort.

## **Part I. CWS/Probation**

### **a. CWS/Probation Narrative**

- *Basis for decisions made regarding outcomes selected for SIP specific to CWS/Probation*

Each of the selected themes relate to outcomes in need of improvement for Tehama County. The Program Manager and CWS supervisors made the decision to focus on improvement in the area of youth in care more than 24 months without a permanent plan, for the following reasons. The first is this is an important outcome which is declining in performance in Tehama County. It is also in line with the intended outcomes of the State PIP, which focuses to a large degree on permanence for CWS children and youth. In addition, many of the chosen strategies to achieve permanence for children are also related to improved performance in placement stability, timely response, and timely social worker contacts.

For example, Strategies 1.1 (Motivational Interviewing); 1.2 (Correct and consistent use of the Family Strengths and Needs Assessment (FSNA) SDM tool, in correlation with the development of the client’s case plan); and 1.3 (Use a Teaming Model in Participatory Case Planning), all relate to timely social worker visits, as they are all related to the development of the client’s case plan, which must be completed within a specific time frame, and to the monitoring of the case plan progress, which also has time regulations. To frame the goals in this way adds depth and quality to the social worker visit with the client, rather than just focusing on the contact being timely. Tehama County is committed to improving performance on Outcome Measure 2C Timely Social Worker Contacts, but will focus on this without making it a separate SIP goal.

Similarly, the above-mentioned strategies, which enhance the client’s ability to reunify, also foster the youth’s placement stability, as the most permanent and most stable placement for the child is successful reunification with their family. In addition, placement stability is enhanced by the appropriate and timely use of the Team Decision Making (TDM) process, as described in Strategy 3.1; and Concurrent Planning, Strategy 3.2. Enhanced placement stability also leads to more timely permanence for children, and is linked to enhanced performance with timely social worker contacts. Working hand in hand with the TDM process is the goal of early identification of relatives (Strategy 3.1), which research shows fosters placement stability, as well as reunification efforts, and enhanced permanence for children should reunification fail.

Also directly related to the goal of permanency for children is a desired decrease in re-entry. Improved access to supportive aftercare case management and services (Strategy 2.1) will help

families to remain stable after leaving the supportive and directive CWS system, which helps many families stay on track. This also relates to the State PIP goals of early intervention and prevention.

Regarding Outcome Measure 2B Timely Response, Tehama County has made the decision to more closely monitor this measure without adding it as a SIP goal. Having had Timely Response as a SIP goal for the last two rounds of the SIP, Tehama County has learned what is necessary to improve on this goal. Indeed, there has been marked improvement in the past on this goal, and only a very recent decline, which is in part due to some unusual circumstances, which are currently being addressed. One goal of Tehama County is to step up activities towards improved monitoring of compliance, which includes timely recording of contacts in CWS/CMS which will be addressed with all performance outcomes.

- ***Discussion of findings from the PQCR and CSA highlighting the connection to the SIP***

Outcomes selected for the Tehama County 2009-2012 SIP were related to the themes identified in the CSA and PQCR. These included the following:

- Youth in Care more than 24 months without a Permanent Plan
  - Placement Stability
  - Timely Response
  - Timely Social Worker Contacts
- ***Description of the connection between the SIP and the PIP***

On August 15, 2008, the CWDA adopted the following PIP priorities. Listed after each PIP priority is the Tehama County SIP strategy which addresses that priority.

#### Participatory Case Planning

Strategies 1.1 (Motivational Interviewing), 1.2 (Correct and consistent use of the Family Strengths and Needs Assessment (FSNA) SDM tool), 1.3 (Use a Teaming Model in Participatory Case Planning) and 1.4 (Document effective use of team approach to case planning in CWS/CMS contacts and in the court report) all support this PIP priority.

#### Foster Parent Recruitment, Retention and Support; Kinship Support

This was not directly addressed in Tehama County's 2009-2012 SIP, however Strategy 3.1 does address placement with relatives and the use of the TDM process. In the TDM process, strengths and challenges of the children/youth are addressed, and a plan is put into place to address the challenges through the enhancement of the strengths. This process does afford better support of the resource family, who is ideally a relative or NREFM of the child/youth. Strategy 3.2 (Concurrent Planning) addresses resource family support in 3.2.4 (Develop a plan to provide ongoing support and training for all Concurrent Planning Resource Families).

### Education and Mental Health Services

This was not directly addressed in Tehama County's 2009-2012 SIP; however at this time Tehama County has a good plan in place to address mental health needs of children. Through participation in the PSSF Regional Partnership Grant on Meth Prevention all social workers will be trained in conducting a developmental assessment on all children entering care, via use of the Ages and Stages Questionnaire. Also through participation in this grant, CWS has been able to have a full-time Alcohol and Other Drugs (AOD) counselor on-site. Thus far, this counselor has been working with the adults involved in CWS cases with alcohol and/or drug dependency issues, but this coming year there will be more emphasis on meeting the mental health and other needs of the children as well. In addition, for about 18 months, CWS has been fortunate to have a co-located Mental Health counselor, who conducts initial mental health assessments on Tehama County CWS children and youth, qualifies the child or youth for Medi-Cal eligibility for Mental Health services, and facilitates referrals to services. Thus, Tehama County did not find it necessary to add this into the SIP goals.

### Prevention and Early Intervention

Tehama County implemented Differential Response in 2005. At this time, it is an established practice for Tehama County CWS. Tehama County has a well-established protocol and procedure for Path I responses, and an established relationship with our Family Resource Centers, which provide a comprehensive and effective home visiting program, as well as other FRC services for families. It would be beneficial for Tehama County to look more closely at how the use of the Path II response, to the enhancement of prevention and early intervention. However, because the Differential Response program is well-established, it was not chosen as a goal for the 2009-2012 SIP.

- ***Process used to develop outcome goals, strategies, rationales, and milestones***

This was discussed in the SIP Narrative.

- ***Address/discuss all outcomes identified as an area needing improvement in the CSA***

This was discussed in the SIP Narrative.

- ***Address/discuss outcomes which are performing below statewide standards, primarily outcomes for which quarterly data reports reflect a negative data trend***

This was discussed in the SIP Narrative, and is outlined in the SIP Matrix, under the heading Outcome/Systemic Factor and County's Current Performance.

## SIP Update 2010

*\*\* All 2010 Update text is in blue.*

### **Child Welfare Services:**

Tehama County Department of Social Services, Child Welfare Division continues to strive to achieve the goals and outcomes as outlined in the September 2009 SIP. Tehama has implemented many aspects of the SIP and has made demonstrated progress in several areas of practice change. However, the County has experienced challenges to meeting the identified outcomes in all areas. As with other Counties, the economic situation in the State has caused continuous re-evaluation of resources and emphasis on how to effectively meet the needs of its most vulnerable populations. Family stress and instability has led to more interventions due to abuse or neglect which has impacted the CWS program. Higher worker caseloads have continued to affect timely referral response, as well as face to face child and parent contact. Since the implementation of the SIP, the County was greatly impacted by the loss of our Differential Response (PATH 1) program which was a contractual arrangement with a community based organization. This was an established program in our County, and was working well. Unfortunately with the economic downturn and loss of resources it has been necessary to focus more on core services of child safety. However, although some of the timeframes for goal achievement have shifted, Tehama remains committed to practice change in the identified areas.

### *Time to Reunification:*

According to the July 2010 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2009) prepared by the UC Berkeley Center for Social Services Research<sup>1</sup> Tehama County's Median Time to Reunification (Exit Cohort) in the calendar year 2009 was 2.3 months. A marked decrease from calendar year 2008 in which it was 6.4 months. According to SafeMeasures<sup>2</sup> Tehama's Median Time to Reunification (Exit Cohort) in the 12-month period ending June 2010 was 2.7 months for children reunified within 12 months (84.3% or 86 children) and 15.5 for children not reunified within 12 months (15.7% or 16 children) with an overall total Median Time to Reunification for the total 102 children reunified between 7/1/09-6/30/10 of 3.8 months. SafeMeasures data indicates that Tehama has had a median time to reunification of 4.4 months or less since the 12-month period ending June 2009, with the

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<sup>1</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2010). Child Welfare Services Outcomes System Summary Report published July 2010.

<sup>2</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measures C1.1. and C1.2: Reunification within 12 Months (Exit Cohort). Retrieved 9/20/10 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.

lowest median time to reunification being noted as 2.3 months for calendar year 2009, which corresponds to the data prepared by UC Berkeley discussed above.

The strategies to improve time to reunification include Motivational Interviewing (MI), improved consistency with the SDM model, and participatory case planning. Motivational Interviewing has been expanded in the last year to all investigative/court staff and to the entire Corning field office. The data for Tehama County has steadily improved in this area, which demonstrates that the efforts of the organization are working. Management has actively engaged staff to focus on the safety assessment and to make efforts based on that assessment to provide services in the home whenever possible. Staff has embraced this effort and have been much more diligent in returning children to their home or origin with appropriate safety planned and monitoring.

Motivational Interviewing has proved to be very effective for the staff who has actively engaged in the training and coaching opportunities and the training process began in early 2009 with a small number of identified staff. The process of engaging parents in a positive dialogue and gathering information has enhanced the skills of the IR and Court workers. The expectation is that this process of interviewing will be expanded to all Tehama County CWS staff in the coming year. The coaching piece has been on hold for a few months, but recent discussions with UC Davis have clarified how to effectively move forward to receive the coaching so the model can be expanded and enhanced.

The Family Strengths and Needs Assessment (FSNA) is still an area of growth for the staff in Tehama. The tool is not used consistently or accurately at this time. Tehama will work with our consultants at UC Davis in December 2010 and will implement strategies for compliance and fidelity to the model. Participatory case planning has improved in Tehama County but is still a work in progress. Social workers are still not actively engaging the client in development of their case plan, and this will be addressed in the coming year with new SIP timeframes. The engagement of the client in case planning has multiple factors including workload and failure to use the FSNA assessment appropriately to develop a caseplan that is consistent with the needs of the client and some systemic issues with regard to work flow within the organization. In September 2010, the agency restructured the teams within the organization, which resulted in a reduction in cases for the ongoing staff and an expectation that they will have more opportunity to engage with the client in the development of the case plan. The FSNA tool and participatory case planning will be in tandem with one another for the maximum benefit to the client.

*Rate of Re-Entry Following Reunification:*

According to the July 2010 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2009) prepared by the UC Berkeley Center for Social Services Research<sup>3</sup> Tehama County's rate of Reentry Following Reunification (Exit Cohort) hit a five year low at 8.2% in calendar year 2008. Tehama's rate plummeted from a four-year high of 22.6% in calendar year 2007. According to SafeMeasures<sup>4</sup> Tehama's rate of Reentry Following Reunification in the 12-month period ending June 2009 was 19%. SafeMeasures data indicates that this outcome measure trended back up in the 12-month periods ending 03/09 and 06/09 as compared to the trend down that began in the 12-month period ending 03/08 and the low measurements that approached the national goal that were reported between the 12-month period ending 06/08 and 12/08.

Aftercare services are contracted through one of Tehama's Community-Based Organizations which provides case management and referral to resources once a CWS case is closed. There is not currently a consistent process for ensuring that clients are referred, and in light of the current fiscal climate\* it is also uncertain how many clients can be handled at a given time. Efforts are currently underway to create a consistent referral and follow up system with our provider.

*\*While the aftercare program is funded with PSSF dollars that were not subject to the State budget reductions the cuts to the Child Welfare budget at the State and local levels have resulted in subsequent reductions in and eliminations of contracts with the FRCs. The revenue from the reduced or eliminated contracts was used by the FRCs to support their overall operations and the funds were blended and braided to offer full-scale programs, such as the aftercare program, whose contracts came with small amounts of funding that in and of themselves may not be enough to offer a complete range of services and/or to serve very many clients.*

Another goal of the SIP was to create an advisory group of individuals with prior CWS involvement for system improvement. This goal has been partially implemented, with the inclusion of former clients into the trainings for foster parents and as a panel of "experts" for new clients entering the Parent Engagement Group for the Nurturing Parenting curriculum. Additional efforts will be made in the coming year to identify opportunities for former clients to serve in an advisory capacity to enhance practice and service delivery.

As previously mentioned, the consistency of TDM participation among staff was a concern in 2009 but has greatly improved. Staff still struggle with the Exit TDM process, but have been trained and are receiving supervisory guidance to ensure the TDM occurs before a child exits

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<sup>3</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2010). Child Welfare Services Outcomes System Summary Report published July 2010.

<sup>4</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measure C1.4: Reentry Following Reunification (Exit Cohort). Retrieved 9/20/10 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.

the system. Data is being collected about completion rates and any additional staff training needs will be identified.

#### *Placement Stability:*

According to the July 2010 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2009) prepared by the UC Berkeley Center for Social Services Research<sup>5</sup> Tehama County's rate of Placement Stability (At Least 24 Months in Care) was 38.5% in calendar year 2009. This measure has been trending up towards the national standard/goal of 41.8% since 2007 but Tehama has not yet achieved such. According to SafeMeasures<sup>6</sup> Tehama's rate for the 12-month period ending June 2010 of children/youth in care for over 24 months experiencing no more than two placement settings was 41.7% and 58.3% for those experiencing three or more placement settings. SafeMeasures data indicates Tehama continues to improve on this measure, in fact performing better on this measure between June 2009 and June 2010 than in the prior two years.

The strategies to increase placement stability include increased relative placement, consistent use of emergency placement TDM's, Icebreakers, and concurrent planning. In the past year, our CWS Division created the Placement Support Team (PST) with a significant focus on increasing relative placement, especially at the time of detention. In the past, the culture of the agency was to initially place children in foster care no matter what the situation, and then took several weeks to evaluate relatives which lengthened the time children remained without extended family support and also created an additional placement episode which was usually unnecessary. At this time, the PST is ready to evaluate relatives who come forward immediately, and to work with parents to identify those relatives who can provide a safe and nurturing environment.

Emergency Placement TDM's are now occurring on a more consistent basis and within an appropriate timeframe. Workers were given some additional training with regard to the expectations of compliance with TDM and supervisors were also given clear direction about holding workers accountable to ensuring that they occur. The PST is tracking TDM's with placement episodes, and the rate of compliance has increased dramatically.

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<sup>5</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2010). Child Welfare Services Outcomes System Summary Report published July 2010.

<sup>6</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measure C4.3: Placement Stability (Over 24 Months in Care). Retrieved 9/20/10 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.

Icebreakers have not been initiated within the last year as planned due to other organizational changes and prioritization of activities. Staff did participate in a visitation training that emphasized the benefits of icebreakers, and this has created a renewed enthusiasm for the process. Workers are being encouraged to bring parents and caregivers together in the first stages of a case, and the process will be formalized in the next several months. Tehama is committed to ensuring that parents are comfortable with where their children are placed while they mitigate safety issues in their own home, and to giving parents the opportunity to share critical information that can assist children in being more adjusted.

Concurrent planning is actively being discussed at the supervisory level and Tehama has continued the practice of staffing cases with State Adoptions on a monthly basis. Additional training opportunities will need to be explored to establish concurrent planning as being part of a seamless process within the framework of CWS practice. Additionally, it must be noted that Tehama County's ability to effectively carry out concurrent planning is affected by the capacity issues that are being experienced at the Chico District Office of State Adoptions. Over the past year to two years State Adoptions has also faced budget cuts, and this has affected the Chico District Office by way of staffing furloughs, impacted caseloads, and slower timelines. In fact, at one point the Chico District Office was so overwhelmed they instructed Tehama County CWS to prioritize concurrent planning on only poor prognosis cases as they were unable to address all referrals, at least for the time being. Despite these challenges Tehama County CWS and State Adoptions Chico District Office continue to work together diligently on concurrently planning.

## **Probation**

Traditionally Tehama County probation youth that have been placed in foster care at any given point in the year averages between 15-20 juveniles. The new philosophy of probation which is assessment driven and encompasses evidence based treatment through services such as, parenting classes, will ultimately improve family engagement and needs based services. This will result in better family dynamics and fewer out of home placements.

The Tehama County Probation Department has joined the Northern California Probation Consortium (NCPC) and is comprised of sixteen counties. Collectively these counties purchased the Positive Achievement Change Tool (PACT) assessment tool and Tehama County is in the process of operationalizing the assessment process. The PACT will aid in identifying levels of risk, identifying target populations and by creating caseloads for minimal service to low risk offenders, treatment opportunities to moderate and some high risk offenders, and provide intensive/intrusive supervision to the highest risk offenders. Additionally, probation officers have been trained in Motivational Interviewing (MI) to enhance their ability to successfully interview and develop a rapport with each juvenile offender and family member to achieve maximum results.

### *PROGRAM OBJECTIVES:*

- Assess all existing and incoming probationers.
- Bank low risk offenders (minimal service probationers).



- Provide assessment driven case plan supervision, direct counseling, and referrals to community services.
- Probationers with an assessment score of low risk will receive no service and will be tracked on one electronic caseload (banked caseload), or will be subject to minimal reporting requirements, and will report via kiosks.
- Probationers whose assessment scores of moderate to high risk that indicate they could benefit from specific services will be the focus of the limited number of probation supervision staff.
- Probationers whose assessment scores are high risk, i.e. Gang members and sex offenders will be placed on an intensive/intrusive supervision caseload.
- These juvenile probationers will be required to report in person to the probation officer at least once a month for urinalysis testing and will also be subjects of home visits by teams that will include Probation Officers, Sheriff's Deputies and City Police.

The PACT will support family engagement by giving officers information through the assessment itself. It will generate a case plan via the needs of the minor and family. It will identify the strengths of the minor and family and the minors risk to re-offend. By having this information we can be more effective in engaging the family. We have been able to support family engagement by utilizing the OIP monies to pay for bus tickets, motels, hotels, luggage, gas cards, and food for families of youth in placement. It has been very beneficial for our placement families to visit the minor's while in placement. Typically, probation parents are without resources to travel and visit their children making family reunification and engagement difficult, but with the available OIP monies it made all the difference with some of our placement youth and their respective families.

Additionally, those juvenile probationers whose scores indicate they would be receptive to and benefit from cognitive behavioral restructuring group will be enrolled in one or more of the following programs: drug and alcohol services, mental health services, job training center, alternatives to violence programs, children's counseling, and parenting classes as needed. Currently, we are less than a year in of implementation of this new approach to case management of our juvenile and adult probationers. This has been a monumental task in and of itself with limited staff, but we have continued to press forward and we are hopeful after collecting data over the next eighteen to twenty four months we will improve our system delivery, and provide improved services for our youth and families.

Looking to the future, probation officers and correctional staff from the juvenile detention facility will receive training to facilitate parenting classes in the not so distant future. These classes will serve two very important purposes; the first is humanizing the probation officers and correctional staff, by exposing probation youth and family to a completely different setting. From one of disciplinarian and punitive official to a partner involved and interested in seeing family success. The second is staff will be exposed to the family structure with depth and

understanding as to their dysfunction. It is not that Tehama County has not been effective in family engagement, but always striving to improve upon existing procedures and services to better effect our minor's and families in the criminal justice system.

**b. CWS/Probation Matrix**

Please see matrices below.

**Outcome/Systemic Factor: C1.2 Median Time to Reunification (Exit Cohort)**

**County's Current Performance:** According to the July 2009 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2008) prepared by the UC Berkeley Center for Social Services Research<sup>7</sup> Tehama County's Median Time to Reunification (Exit Cohort) in the calendar year 2008 was 6.4 months. Data graphs included in this UC Berkeley report indicate that Tehama's Median Time to Reunification has been rising since the 12-month reporting period ending 12/31/2004. According to the July 2010 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2009) prepared by the UC Berkeley Center for Social Services Research<sup>8</sup> Tehama County's Median Time to Reunification (Exit Cohort) in the calendar year 2009 was 2.3 months. A marked decrease from calendar year 2008.

According to SafeMeasures<sup>9</sup> Tehama's Median Time to Reunification (Exit Cohort) in the 12-month period ending June 2009 was 2.2 months for children reunified within 12 months (80.3% or 53 children) and 15.5 for children not reunified within 12 months (19.7% or 13 children) with an overall total Median Time to Reunification for the total 66 children reunified between 7/1/08-6/30/09 of 4.4 months. SafeMeasures data indicates that this most recent measurement of 4.4 months is the lowest that Tehama has managed during any reporting period shown on SafeMeasures at the time accessed (8/24/09), the earliest of which is 7/1/05-6/30/06. According to SafeMeasures<sup>10</sup> Tehama's Median Time to Reunification (Exit Cohort) in the 12-month period ending June 2010 was 2.7 months for children reunified within 12 months (84.3% or 86 children) and 15.5 for children not reunified within 12 months (15.7% or 16 children) with an overall total Median Time to Reunification for the total 102 children reunified between 7/1/09-6/30/10 of 3.8 months. SafeMeasures data indicates that Tehama has had a median time to reunification of 4.4 months or less since the 12-month period ending June 2009, with the lowest median time to reunification being noted as 2.3 months for calendar year 2009, which corresponds to the data prepared by UC Berkeley discussed above.

**Improvement Goal 1.0** Decrease the Median Time to Reunification to meet the National Standard/Goal of 5.4 months.

**Strategy 1.1**  
Motivational Interviewing (MI)

**Strategy Rationale**  
CWS Social Workers use of Motivational Interviewing will enhance the client's ability and willingness to engage with the social worker and decrease the time to engaging in services.

Milestone	Timeframe	Assigned to
<p><b>1.1.1</b> Train all Social Workers and Supervisors on Motivational Interviewing. Social Workers and supervisors have been trained on the Motivational Interviewing model.</p>	<p>By October 2009 <b>COMPLETED</b></p>	<p>CWS Social Workers, CWS Supervisors</p>
<p><b>1.1.2</b></p>	<p>Begin in August 2009; continuous</p>	

<sup>7</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2009). Child Welfare Services Outcomes System Summary Report published July 2009.  
<sup>8</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2010). Child Welfare Services Outcomes System Summary Report published July 2010.  
<sup>9</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measures C1.1. and C1.2: Reunification within 12 Months (Exit Cohort). Retrieved 8/24/09 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.  
<sup>10</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measures C1.1. and C1.2: Reunification within 12 Months (Exit Cohort). Retrieved 9/20/10 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.

<p>Social Workers to receive Motivational Interviewing coaching, beginning with the court Social Workers. The Court workers have received MI coaching which has been very successful. The coaching was expanded to CWS supervisors, the entire Corning office staff and to investigative workers in 2010.</p>	<p>through July 2010 <b>COMPLETED</b></p>	<p>CWS Social Workers, MI Coaches through Northern Regional Training Academy, and Supervisors to monitor</p>
<p><b>1.1.3</b> Court Social Workers and all Supervisors consistently use motivational Interviewing as a tool. Court workers are consistently using MI as a tool. Supervisors have not been as consistent, but are learning to approach families and staff using the MI techniques.</p>	<p>By October 2009 <b>COMPLETED</b></p>	<p>CWS Social Workers; CWS Supervisors to monitor and model</p>
<p><b>1.1.4</b> All Social Workers and all Supervisors consistently use Motivational Interviewing as a tool. Although all staff has been trained, not all of the Social Workers are using MI consistently. The coaching piece has been a significant benefit to staff who it has been offered to and has engrained practice changes. It is anticipated that all staff will be consistent in the use of the MI tool by the new target date.</p>	<p>By August 2010 REVISE: March 2011</p>	<p>CWS Social Workers; Program Manager, CWS Supervisors to monitor and model</p>
<p><b>Strategy 1.2</b> Correct and consistent use of the Family Strengths and Needs Assessment (FSNA) SDM tool, in correlation with the development of the client's case plan.</p>	<p><b>Strategy Rationale</b> Through correct and consistent use of the FSNA, in collaboration with the client, the social worker will be able to successfully tailor the client's case plan to that client's needs, and the strengths for the client to get the needs met, which will assist the client in successful reunification with their child(ren).</p>	
<p><b>Milestone</b></p> <p><b>1.2.1</b> Assessment of CWS Social Workers use of the FSNA tool.</p> <p><b>1.2.2</b> Develop a corrective plan of action in relation to the use of the FSNA tool. Although an assessment of the FSNA tool was completed, the corrective plan of action was not</p>	<p><b>Timeframe</b></p> <p>By September 2009 <b>COMPLETED</b></p> <p>By October 2009 REVISE: December 2010</p>	<p><b>Assigned to</b></p> <p>Brad Seiser and Tom Taylor of the Northern Regional Training Academy, all CWS Supervisors, Program Manager</p> <p>Brad Seiser and Tom Taylor of the Northern Regional Training Academy, all CWS Supervisors, Program Manager</p>

placement moves each month and compares to the list of TDM's held. Program Manager sends out to all CWS supervisors for explanation if a TDM did not occur. This process has greatly improved the incidence of holding exit/reunification TDM's.

**Notes:**

PSSF funds are being used to support the development and provision of an aftercare program through the Red Bluff FRC.

**Describe systemic changes needed to further support the improvement goal.**

- **Strategy 1.1:** This strategy will not require a significant systemic change, except for the Social Workers to embrace referring the clients to aftercare services. This remains unchanged, except that CWS will need to meet with the FRC to discuss prioritization of referrals given their economic situation and reduction of funding.
- **Strategy 1.2:** This strategy will require a shift in system culture and practice to include and value clients for their knowledge, expertise and to find appropriate ways to learn from their strengths and unique perspectives. The creation of the Placement Support Team (PST) will allow for an expertise in this area to develop advisory opportunities for past CWS clients to participate in.
- **Strategy 1.3:** It is likely that full implementation of exit/reunification TDMs will preclude the need for case staffing which are currently held to assist the Social Worker in making the decision whether to reunify the family. If so, it will require a culture shift for the Social Workers to move to a facilitated team meeting in which the decision to reunify will be made. Social workers have received updated training and expectations on the use of exit/reunification TDM's. The use of these type of meetings has increased and continues to become part of the system culture and practice.

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

- **Strategy 1.1:** The Social Workers will need to be trained regarding the aftercare services which are made available through the Family Resource Centers in Corning and Red Bluff, and will need to be trained in the policy and procedure for referring the clients to aftercare. CWS will meet with the FRC to determine a protocol for referrals and will train staff about the available resources from the FRC.
- **Strategy 1.2:** Research into, training on, and subsequently possible implementation of the Building Better Futures program offered through the Family-to-Family initiative is likely to be a part of the accomplishment of this strategy. The Placement Support Team will continue to offer opportunities to past clients to participate in PRIDE, Nurturing Parenting – Parent Engagement Group and other trainings to facilitate discussions on how to improve the CWS system.
- **Strategy 1.3:** Social Workers and Supervisors will need training on exit/reunification TDMs. New Social Workers and any new Supervisors who have not been trained on exit/reunification TDMs will need an initial training. Social Workers and Supervisors who have been trained, but have not been using exit/reunification TDMs per the model, will need a refresher training that includes any updates to the exit/reunification TDM process that were instituted since they were originally trained. Staff has been trained with regard to exit/reunification TDM's. CWS Supervisors are more diligent in ensuring these are scheduled and held and Program Manager/FZF Coordinator are tracking compliance.

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

- **Strategy 1.1:** In order to have success it will be necessary that the provider operating the aftercare program work in collaboration with Child Welfare to develop and implement a program that meets the needs of former CWS clients effectively. This remains unchanged.
- **Strategy 1.2:** Meaningful and appropriate participation of Child Welfare parents and youth, both current and past, in advisory, orientation, and training capacities is critical to the success of this strategy. The Placement Support Team (PST) will also be critical in ensuring that these opportunities are fully realized.
- **Strategy 1.3:** Meaningful and appropriate participation of service providers and others involved with the family will make the exit/reunification

TDMs more successful, which ultimately will contribute to making the family more successful at maintaining stability. This remains unchanged.  
**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**  
Not applicable.

**Outcome/Systemic Factor: C4.3 Placement Stability (At least 24 months in Care)**

**County's Current Performance:** According to the July 2009 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2008) prepared by the UC Berkeley Center for Social Services Research<sup>15</sup> Tehama County's rate of Placement Stability (At Least 24 Months in Care) in the calendar year 2008 was 31.1%. Data graphs included in this UC Berkeley report indicate that Tehama's rate of Placement Stability (At Least 24 Months in Care) has been rising since the 12-month reporting period ending 12/31/04. According to the July 2010CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2009) prepared by the UC Berkeley Center for Social Services Research<sup>16</sup> Tehama County's rate of Placement Stability (At Least 24 Months in Care) was 38.5% in calendar year 2009. This measure has been trending up towards the national standard/goal of 41.8% since 2007 but Tehama has not yet achieved such.

According to SafeMeasures<sup>17</sup> Tehama's rate for the 12-month period ending June 2009 of children/youth in care for over 24 months experiencing no more than two placement settings was 33.7% and 66.3% for those experiencing three or more placement settings. SafeMeasures data indicates that this most recent period of measurement is the best reported for Tehama since the reporting period ending June 2006. According to SafeMeasures<sup>18</sup> Tehama's rate for the 12-month period ending June 2010 of children/youth in care for over 24 months experiencing no more than two placement settings was 41.7% and 58.3% for those experiencing three or more placement settings. SafeMeasures data indicates Tehama continues to improve on this measure, in fact performing better on this measure between June 2009 and June 2010 than in the prior two years.

**Improvement Goal 1.0** Improve Placement Stability for youth in care 24 months or more to meet the National Standard/Goal of 41.8%.

<p><b>Strategy 1. 1</b></p> <p>Increased placement with relatives or NREFMs, aided by the consistent use of Emergency Placement TDMs that include relatives/NREFMs who are potential placement resources.</p>	<p><b>Strategy Rationale</b></p> <p>Research shows that children placed with relatives experience more stability in placement. Research of practice shows that use of Emergency Placement TDMs is effective in increasing the #'s of children placed with relatives or NREFM's.</p>
<p><b>Milestone</b></p> <p><b>1.1.1</b></p> <p>Revise policy and procedure regarding Emergency Placement TDMs to include step-by-step procedure for arranging for, attending, and follow-up from TDMs.</p> <p>The updated TDM protocol has been completed and clearly outlines this process.</p>	<p><b>Timeframe</b></p> <p>By September 2009 <b>COMPLETED</b></p> <p><b>Assigned to</b></p> <p>Program Manager, with assistance of CWS Social Worker Supervisors, the Staff Services Analyst/F2E Coordinator, and Placement Support Team (PST).</p>

<sup>15</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Freter, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2009). Child Welfare Services Outcomes System Summary Report published July 2009.

<sup>16</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Freter, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2010). Child Welfare Services Outcomes System Summary Report published July 2010.

<sup>17</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measure C4.3: Placement Stability (Over 24 Months in Care). Retrieved 8/25/09 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.

<sup>18</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measure C4.3: Placement Stability (Over 24 Months in Care). Retrieved 9/20/10 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.

<p><b>1.1.2</b> Train all CWS Social Workers on the Policy and Procedure for arranging for Emergency Placement TDMs. Workers have been trained in the policy and procedure for requesting and arranging an Emergency Placement TDM.</p>	<p>By October 2009 <b>COMPLETED</b></p>	<p>Program Manager, CWS Supervisors, Staff Services Analyst/F2F Coordinator</p>
<p><b>1.1.3</b> In 90% of cases where children are removed, an Emergency Placement TDM will be held within 24 hours (or on the next business day if removal occurs over a weekend) and prior to a detention petition being heard in Court. Due to an increased compliance with TDM participation, the Emergency Placement TDM is being held more consistently for cases. However, with the economic issues, staffing levels for TDM facilitators sometimes does mean that the TDM is not always held within the scheduled timeframe but does occur whereas before it may never have been scheduled. CWS Supervisors have improved in attendance at Emergency Placement TDM's but need more consistency in this area to be supportive to their staff.</p>	<p>By October 2009 and ongoing REVISE: October 2010 and ongoing</p>	<p>CWS Social Workers; Program Manager, Staff Services Analyst/F2F Coordinator and CWS Supervisors. CWS Supervisors to monitor and attend</p>
<p><b>Strategy 1.2</b> Full implementation of Icebreakers.</p>		
<p><b>Milestone</b> <b>1.2.1</b> Review existing policy and procedure and put into standard TCSSS format. Existing policy and procedure has been reviewed and the Policy and Procedure workgroup will review and finalize by new deadline.</p>	<p><b>Timeframe</b> By February 2009 REVISE: By December 2010</p>	<p><b>Assigned to</b> Program Manager, CWS Supervisors, Staff Services Analyst/F2F Coordinator and Policy/Procedure Workgroup</p>
<p><b>Strategy Rationale</b></p>		

<p><b>1.2.2</b> Training/refresher training for all Social Workers and Supervisors. All CWS Social Workers participated in a session with a nationally recognized trainer on visitation, engagement with parents and how to bridge the gap between the placement resource and the biological family. The concept of icebreakers was discussed and suggestions reviewed.</p>		<p>By April 2009 REVISE: Visitation Training Completed June 2010 ; refresher training specifically regarding icebreakers and new policy by January 2011</p>	<p>Program Manager, CWS Supervisors, Staff Services Analyst/F2F Coordinator, and CWS Social Workers.</p>
<p><b>1.2.3</b> Training/refresher training for all foster care providers (foster and FFA) and FFA staff. *Relatives/NREFEMs will be oriented to this process when they are preparing to accept placement of a child. There were several foster and FFA participants in the above-mentioned training. The use of icebreakers is discussed in the PRIDE foster parent training courses. Kinship classes are beginning Fall 2010 and this will be covered as well. The PST will develop ongoing training opportunities and improved information sharing between parents and caregivers. The FRC network has implemented policies with regard to icebreakers between parents and caregivers before and after visitation opportunities which have been very successful.</p>		<p>By June 2009 REVISE: Inclusion into PRIDE completed; foster, FFA and relative caregivers participated in trainings June 2010; ongoing.</p>	<p>Program Manager, CWS Supervisors, Staff Services Analyst/F2F Coordinator and Placement Support Team (PST).</p>
<p><b>Strategy 1.3</b> Concurrent Planning</p>		<p><b>Strategy Rationale</b> The best permanent placement for a child, when it can be safely arranged, is to return home. When a child cannot be safely returned home, the best permanent plan is to remain in the same resource family with whom s/he is initially placed.</p>	
<p><b>Milestone</b> <b>1.3.1</b> Develop policy and procedure regarding concurrent Planning. The Policy and Procedure workgroup will review and finalize P&amp;P regarding concurrent planning. Program Manager, CWS Supervisors and State Adoptions</p>	<p><b>Timeframe</b></p>	<p>By September 2009 REVISE: By December 2010</p>	<p><b>Assigned to</b> Program Manager and Policy and Procedure workgroup in collaboration with California State Adoptions, Chico office.</p>

<p>office have had recent discussions regarding concurrent planning and to ensure that trafficking held monthly discuss concurrent planning.</p>			
<p><b>1.3.2</b> Schedule regular monthly concurrent planning case reviews with State Adoptions. Discuss permanency options, including implementation of a Family for Life (FLL) team and plan for each youth. Workers and supervisors are fully engaged in concurrent case planning discussions with State Adoptions on a monthly basis. Permanency options are discussed at length and recommendations are made at the meetings. Family for Life implementation has been slower to implement; the Placement Support Team (PST) will continue to develop this model for implementation.</p>		<p>By August 2009 REVISE: COMPLETED except for Families for Life Implementation; by June 2011.</p>	<p>CWS Supervisor assigned to Concurrent Planning in collaboration with California State Adoptions, Chico office. Families for Life – Placement Support Team (PST).</p>
<p><b>1.3.3</b> Train all CWS Social Workers and CWS Supervisors on concurrent planning. Workers staff concurrent planning with their supervisor and make appropriate referral to State Adoptions agency whenever deemed appropriate.</p>		<p>By January 2010 COMPLETED</p>	<p>Program Manager to arrange for training, in conjunction with State Adoptions</p>
<p><b>1.3.4</b> Train all new resource families on concurrent planning, and provide refresher training for all existing foster care providers. Concurrent planning is discussed in the PRIDE classes and information is included in the Relative Placement packet developed in May 2010.</p>		<p>Within the next PRIDE training, to commence January 2010 COMPLETED</p>	<p>Foster Parent PRIDE trainers, Placement Support Team (PST).</p>
<p><b>1.3.5</b> A special set training, to include all new and established foster parents, CWS Social Workers, and Supervisors using AB2129 funds.</p>		<p>March 2010 REVISE: March 2011</p>	<p>Placement Support Team (PST); Representative from California State Adoptions</p>
<p><b>1.3.6</b> Develop a plan to provide ongoing support and training for all concurrent planning resource families. The Placement Support Team (PST) is currently developing ongoing support for foster and kinship</p>		<p>By January 2010 REVISE: March 2011</p>	<p>Placement Support Team (PST), State Adoptions Social Worker or Supervisor</p>

caregivers which will include concurrent planning.			
<p><b>1.3.7</b> Implement above plan for ongoing support and training for all concurrent planning resource families.</p>		<p>By March 2010 and ongoing REVISE: By March 2011 and ongoing</p>	<p>Placement Support Team (PST), State Adoptions Social Worker or Supervisor</p>
<p><b>Notes:</b> PSSF funds for adoption support may be used to support parts of Strategy 1.3.</p>			
<p><b>Describe systemic changes needed to further support the improvement goal.</b></p>			
<ul style="list-style-type: none"> <li>▪ <b>Strategy 1.1:</b> Emergency Placement TDMs are currently being utilized, but not with a consistency that is deemed to be good practice. Many are being missed, either due to Social Worker resistance to bringing a parent into a Team Decision Making meeting, or due to lack of understanding of the process, and of the benefits to using the Emergency Placement TDM. Training and Supervisor buy-in and consistent monitoring will help to increase performance on this activity. The system and practice culture have been changed with regard to achievement of this strategy. Program Manager has emphasized the model for TDM and the importance of consistent practice. Program Manager and F2F Coordinator are monitoring compliance and the use of emergency TDM's has significantly increased based on monthly monitoring from the PST Team which is given to the Program Manager. Any staff who changed placement of a child but did not have a TDM are asked to justify their actions, which has increased participation and compliance.</li> <li>▪ <b>Strategy 1.2:</b> A policy and procedure for conducting Icebreakers already exists, however it has not been mandatory up to this point for Social Workers to use this practice. Requiring Social Workers to implement Icebreakers will likely result in some resistance from workers who perceive this as a great strain on their workload. However, with a thorough understanding of the practice and upon experiencing the benefits of taking this approach to placement stabilization Social Worker buy-in will likely improve. Staff has received training with regard to visitation planning and the importance of Icebreakers to ensure placement stability and engagement with families. Staff are not as resistant to Icebreakers and have seen the benefits of the Family Contact Center (contracted visitation service provider) requiring meetings between caregivers and parents to exchange information and build mentoring opportunities.</li> <li>▪ <b>Strategy 1.3:</b> Child Welfare Social Workers and Supervisors will need to develop a better understanding of concurrent planning. Many Social Workers and some Supervisors believe that it is too difficult, if not impossible, for a resource family to make a commitment to permanency for a child while at the same time actively supporting reunification efforts. When the focus is on what is best for the child, the benefits of concurrent planning become obvious. Currently most Social Workers and some Supervisors view concurrent planning as something which happens when the recommendation is to terminate reunification and establish permanency, rather than at the beginning of a case. The shift needs to be to an attitude that it is okay to ask a resource family to concurrently plan for permanency while supporting reunification, because it is in the best interest of the child. Meetings have been held with staff and State Adoptions to discuss concurrent planning practices. The Placement Support Team (PST) and PRIDE facilitators are very committed to educating staff and caregivers on the importance of early concurrent planning. Additional training is to be developed as part of an ongoing effort to adhere to concurrent planning practices. Staff resistance will still need to be addressed.</li> </ul> <p><b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b></p> <ul style="list-style-type: none"> <li>▪ <b>Strategy 1.1:</b> Social Workers and Supervisors need additional training on Emergency Placement TDMs to deepen their understanding of this practice, inform them of successes when used in other counties, help to alleviate their concerns about this practice, and help to eliminate barriers to them fully embracing of the implementation of this practice. Staff has been more actively participation with Emergency TDM's and is clear on the expectation that they occur.</li> <li>▪ <b>Strategy 1.2:</b> Social Workers and Supervisors will participate in training/refresh training on the use of Icebreakers. This process has been started but will need more development and implementation.</li> </ul>			

- **Strategy 1.3:** Social Workers and Supervisors need to be educated in the basic tenets of concurrent planning, and why it can be successful. This education should include success stories when concurrent planning is appropriately implemented. Social Workers and Supervisors need to be trained in how resource families can be encouraged to engage in concurrent planning, and how they can receive appropriate and needed support for this. State Adoptions and CWS Supervisors/Program Manager will need to continue education and training in this area for staff. The Placement Support Team (PST) will need to continue to develop materials and training for resource families to understand the importance of concurrent planning.

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

- **Strategy 1.1:** Meaningful and appropriate participation of relatives and NREFMS, as well as service providers and others involved with the family, will make the Emergency Placement TDMs more successful and complete. This is unchanged.
- **Strategy 1.2:** The support of Tehama CWS's FFA partners will be integral in accomplishing Icebreakers when the placement involves an FFA home. Program Manager and FFA partners have been having discussions about processes including Icebreakers. FFA staff attended the visitation training and is working with CWS to establish protocols that will be effective for their homes to participate in TDM's.
- **Strategy 1.3:** A shared vision and commitment to the goal between CWS and State Adoptions is critical to the success of this strategy. State Adoptions and CWS Supervisors/Program Manager have been building support in this area and developing strategies to work more effectively together.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**  
Not applicable.

**Outcome/Systemic Factor: 2B Timely Response**

**\*\*This measure was added in SIP Update 2010**

**County's Current Performance:** According to the July 2010 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2010) prepared by the UC Berkeley Center for Social Services Research<sup>19</sup> Tehama County's immediate response compliance rate was 87.1%. Data graphs included in this UC Berkeley report indicate that Tehama's immediate response compliance has hovered in the upper 80<sup>th</sup> and low to high 90<sup>th</sup> percentiles since the 12-month reporting period ending 12/31/05.

According to SafeMeasures<sup>20</sup> Tehama's immediate response compliance in the third quarter of 2010 was 95.7%. SafeMeasures data reveals that Tehama's immediate response rate has been consistently above the State goal of 90%, with the exception of one quarter, since the second quarter of 2008.

According to the July 2010 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2010) prepared by the UC Berkeley Center for Social Services Research<sup>21</sup> Tehama County's ten-day compliance rate was 52.9%. Data graphs included in this UC Berkeley report indicate that Tehama's ten-day response compliance has varied widely over the last ten years and has been declining steadily since the 12-month reporting period ending 12/31/07.

According to SafeMeasures<sup>22</sup> Tehama's ten-day response compliance in the third quarter of 2010 was 69.2%. SafeMeasures data reveals that Tehama's ten-day response rate had been falling fairly consistently until reaching its lowest point so far in the first quarter of 2010 with a rate of 48.7% after which time the trend began to improve and the compliance rate increase.

**Improvement Goal 1.0** Increase the rate of compliance on referrals requiring a response within ten-days to the State goal of 90% or better.

<b>Strategy 1. 1</b> Enhanced information gathering at the point of intake		<b>Strategy Rationale</b> The intent of gathering additional information at the intake level is to ensure that the County is responding appropriately to referrals and making more accurate decisions about the priority of the response, and the effective use of the Structured Decision Making Hotline Tool.	
<b>Milestone</b>	Screening protocols will be revised to reflect need for extensive information gathering at the first contact with reporter. This will also include possible contact with other collaterals to gather information to assist in effective decision-making.	<b>Timeframe</b>	COMPLETED- P&P/screening referral completed October 2010.
	<b>1.1.2</b> Screeners and CWS Supervisors will participate in SDM refresher training.		Hotline Tool SDM training refresher to be completed by April 2011
		<b>Assigned to</b>	CWS Supervisors and Screeners will complete refresher training

<sup>19</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2010). Child Welfare Services Outcomes System Summary Report published July 2010.  
<sup>20</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measure 2B: Referrals by Time to Investigation (Immediate). Retrieved 12/20/10 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.  
<sup>21</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2010). Child Welfare Services Outcomes System Summary Report published July 2010.  
<sup>22</sup> Children's Research Center SafeMeasures Data. Tehama County CFSR Measure 2B: Referrals by Time to Investigation (Ten-Days). Retrieved 12/20/10 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.

<p><b>1.1.3</b> Referrals will be evaluated by screening supervisor within 24 hours of contact with reporter.</p>	<p>COMPLETED October 2010</p>	<p>Program Manager will utilize Safe Measures data and conduct regular staffing with CWS screening supervisor to identify gaps</p>
<p><b>Strategy 1. 2</b> Supervisory oversight to ensure timely response.</p> <p><b>Strategy Rationale</b> Supervisors will demonstrate that they are using data and regular staffing opportunities with their social workers to ensure timely response to referrals.</p>		
<p><b>1.2.1</b> IRC Referral Form will be developed which the supervisor will review with social worker when referral is assigned. CWS Supervisor will review history, safety issues, and set due date by which the 10-day referral must be initiated with the assigned social worker.</p>	<p>COMPLETED October 2010</p>	<p>Program Manager, CWS Supervisors, IRC Team</p>
<p><b>1.2.2</b> CWS Supervisors will review all investigations within 1 week of initiation or less to ensure that social workers have initiated the referral and are making appropriate decisions. CWS Supervisor will document timely response or indicate reason it was not achieved.</p>	<p>COMPLETED October 2010</p>	<p>PM will discuss with supervisors at weekly supervision and randomly review cases for completion</p>
<p><b>1.2.3</b> CWS Supervisors and Program Manager will consistently review data with regard to this outcome measure.</p>	<p>COMPLETED October 2010</p>	<p>Program Manager, CWS Supervisors and Staff Services Analyst will review data monthly and discuss systemic factors that may be a barrier to improvement</p>
<p><b>Strategy 1. 3</b> Improved documentation and accuracy in the CWS/CMS system and development of consistent protocols to document families who are "unable to be located".</p> <p><b>Strategy Rationale</b> Social Workers initiate referrals but then do not enter their initial contact with the identified victim until the close of the investigation, which may be a significant time and impacts the data. Social workers also have not been consistent in practice with regard to attempts to initiate contact with referral families and documenting their efforts in an appropriate way.</p>		
<p><b>1.3.1</b> Initial face to face contact with victim will be initiated within timeframe and documented in CWS/CMS 48 hours after contact.</p>	<p>COMPLETED October 2010</p>	<p>Program Manager and CWS Supervisors will review data monthly to ensure that initiations are timely and entered appropriately in database</p>
<p><b>1.3.2</b> CWS Supervisors will consistently discuss referrals and status of initiation with social workers during regularly scheduled supervision.</p>	<p>January 2011</p>	<p>CWS Supervisors</p>

<p><b>1.3.3 Social Workers will notify CWS Supervisors when they are unable to locate a family to initiate a referral. CWS Supervisor will develop a strategy with social worker to ensure all efforts are made to locate the family within the 10-day timeframe.</b></p>		January 2011	CWS Supervisors, IRC Team, Program Manager.
<p><b>1.3.4 Social Workers will receive training on Safe Measures so they can consistently monitor their compliance with this measure.</b></p>		COMPLETED September 2010	CWS Supervisors, CWS Social Workers
<p><b>Notes:</b></p>			
<p><b>Describe systemic changes needed to further support the improvement goal.</b>  CWS Supervisors and social workers have not consistently focused on this outcome measure due to lack of supervisory oversight and documentation issues. The implementation of the IRC Team will create consistency within the social workers who routinely perform the initial investigation, and for supervisors to ensure they are providing appropriate oversight and data analysis.</p>			
<p><b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b>  Training needs were identified for Safe Measures and a refresher on the SDM Hotline Tool.</p>			
<p><b>Identify roles of the other partners in achieving the improvement goals. Not applicable.</b></p>			
<p><b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. Not applicable.</b></p>			

**Outcome/Systemic Factor: 2C Timely Social Worker Visits with Child**

**\*\*This measure was added in SIP Update 2010**

**County's Current Performance:** According to the July 2010 CWS Outcomes System Summary Report for Tehama County (Data Extract Q4 2010) prepared by the UC Berkeley Center for Social Services Research<sup>23</sup> Tehama County's timely social worker visits with children rates for the fourth quarter of 2009 were 82.8% (Oct. 2009), 79.4% (Nov. 2009), and 78.7% (Dec. 2009) respectively. Data graphs included in this UC Berkeley report indicate that Tehama's timely social worker visits with children have been fairly steadily improving over the last several years but saw a decrease between the fourth quarters of 2008 and 2009.

According to SafeMeasures<sup>24</sup> Tehama's timely social worker visits with children rate was measured at 65.8% in November 2010. This rate has been gradually decreasing, with a few small exceptions, since the fourth quarter of 2009.

**Improvement Goal 1.0** Increase the rate of Timely Social Worker Visits with Child to the State goal of 90% or better.

**Strategy 1.1** Increased analysis of the data pertaining to timely social worker visits with child and addressing documentation issues.

**Strategy Rationale** Social workers and supervisors are not routinely ensuring they are in compliance with this outcome measure, and frequently have not entered the data or have entered the data incorrectly to accurately capture the activity.

Milestone	Timeframe	Assigned to
<p><b>1.1.1</b> Caseworker visits with children will be face to face on a monthly basis in the preferred location of placement home. Any deviation from preferred location will be pre-approved by supervisor and only in certain circumstances. Approval and reason will be documented in case file.</p>	<p>Beginning January 2011</p>	<p>PM/supervisors will review Safe Measures data monthly; supervisors will address individually with staff in supervision.</p>
<p><b>1.1.2</b> Workers will record all contacts into the CWS/CMS database in a timely manner. Any worker who is more than 30 days behind on documentation will receive additional supervisory guidance and supervisors will develop performance plans for workers who consistently are unable to meet documentation requirements. Workers will participate in daily protected time to ensure they are entering completed contacts in a timely manner and</p>	<p>Beginning January 2011</p>	<p>PM and supervisors will randomly review cases for CWS/CMS documentation; Supervisors will report to PM regarding staff issues and documentation strategies</p>

<sup>23</sup> Needell, B., Webster, D., Armiijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, & Peng, C. (2010). Child Welfare Services Outcomes System Summary Report published July 2010.  
<sup>24</sup> Children's Research Center SafeMeasures Data, Tehama County CFSR Measure 2B: Referrals by Time to Investigation (Immediate). Retrieved 12/20/10 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>.

<p>accurately to reflect the contact occurred within the established timeframe.</p> <p><b>1.1.3</b> Workers will participate in training related to case worker contacts to ensure accuracy.</p>		<p>March 2011</p>	<p>PM, CWS Supervisors and consultation with the UC Davis Training Academy for technical assistance</p>
<p><b>Strategy 1. 2</b> Approval of case plans so that initial contacts are not required as frequently.</p>		<p><b>Strategy Rationale</b> Until the initial case plan is approved, social workers are required to complete multiple face to face contacts with child in the first 30 days. If the case plan could be developed/approved by the supervisor, it would allow for improved compliance with this measure by the worker being able to switch the frequency to one time per month.</p>	
<p><b>1.2.1</b> County has established the IRC Team, which consists of the initial response (IR) and Court (C) processes. The staff is learning to combine the two job functions but this learning curve has resulted in a lack of timely completion of contacts within the first 30 days. Staff will meet with parents to develop an initial case plan based on the SDM Assessment and request approval within the first two weeks after detention.</p>	<p><b>Milestone</b></p>	<p><b>Timeframe</b></p> <p>January 2011</p>	<p><b>Assigned to</b></p> <p>IRC Team, CWS Supervisors, Program Manager will review data monthly and CWS Supervisors will address in individual supervision with IRC social workers.</p>
<p><b>Strategy 1. 3</b> Development of protocol to ensure compliance with contacts for Non-Dependent legal guardianship (NDLG) cases.</p>		<p><b>Strategy Rationale</b> The NDLG cases are impacting the compliance with this measure due to workload issues and not having the caseload differentiated from other cases.</p>	
<p><b>1.3.1</b> The NDLG cases will be consolidated into one caseload for ease of organization and clean data.</p> <p><b>1.3.2</b> The CWS Supervisors and PM will review data monthly for upcoming contacts that are needed with the NDLG caseload. CWS Supervisors will identify social workers who will be assigned in each given month to complete the necessary contacts and update the case plan.</p> <p><b>1.4.2</b> Staff Services Analyst will research if a job classification of Social Service Aide is able to perform the bi-annual contact with NDLG cases and update the case plan with supervisory oversight.</p>	<p><b>Milestone</b></p>	<p><b>Timeframe</b></p> <p>January 2011</p> <p>January 2011</p> <p>March 2011</p>	<p><b>Assigned to</b></p> <p>CWS System Support, Program Manager, CWS Supervisors</p> <p>CWS Staff Services Analyst, Program Manager, CWS Supervisors</p> <p>CWS Staff Services Analyst, Program Manager</p>

**Notes:**

**Describe systemic changes needed to further support the improvement goal.** The professional development of the supervisors to use data in their everyday practice to influence compliance with this measure is critical to the success of achieving the desired outcome. Supervisors must have the ability to use the data in supervision and to ensure social workers are completing contacts in a timely manner. The creation of the IRC Team will assist in consistent practice with regard to initial contacts.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** The agency has identified that workers are not always accurately entering the contacts they have completed. Training is necessary to ensure workers understand the appropriate mechanisms within the CWS/CMS system to trigger the data for this outcome measure.

**Identify roles of the other partners in achieving the improvement goals.** The identified processes do not require other partners in achieving the improvement goals.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.**  
Not applicable.

c. CWSOIP Narrative

In order to achieve CWS goals of timely referrals and increased response times, the CWSOIP funds were used as follows:

1. Funded contract with Northern Valley Catholic Social Services for the Ameri-Corp program to provide additional support at their Family Resource Center for the Differential Response clients CWS referred there, either through Path 1, Path 2, or Path 3.
2. Funded contract with Northern Valley Catholic Social Services for the Family Resource Center for the Differential Response clients CWS referred there, either through Path 1, Path 2, or Path 3.
3. Salaries for parent partners, who make home visits and assist Social Workers.
4. Enhanced family finding efforts using the internet and special sites developed for locations of persons.
5. Provided trainings to staff to discuss outcome improvement strategies and get feedback of the changes in procedures.

Probation was able to use the CWSOIP funds to provide a probation child a bus ticket in order to make a visit to his parents.

Child Welfare CWSOIP

*Support for Caregivers-*

The creation of the Placement Support Team (PST) was accomplished to assist in the improvement of placement stability and a dedicated workforce for caregiver support. The PST consists of a Social Worker Supervisor, Placement Social Worker, Licensing Social Worker, TDM Facilitator, Social Service Aide, and Office Assistant. This team has finalized a caregiver packet to give to all families seeking placement of children involved in CPS, and includes information related to how the CWS system works, the TDM process, community resources, and a direct contact with the PST for ongoing supportive services. The PST also created a logo and used CWSOIP monies to purchase items that will aide in recruitment and development of new resource families including reusable shopping bags, pens, and notebooks for caregivers to record information about children in their care. The PST has focused efforts on informing caregivers about training opportunities and is working on a caregiver newsletter which will be distributed electronically. Tehama also used CWSOIP monies to mount a large informational board that informs caregivers of upcoming events, trainings, and changes within CWS when they are in the caregiver waiting area.

The PST has formalized a process of screening for relative caregivers which allows for more expedited consideration and enhances placement stability efforts by placing children with extended family members from the beginning of the placement episode. The team has created a relative assessment tool which assesses motivation, ability to support reunification,

permanency if family reunification services are not successful, training needs, and supportive services needed to sustain the placement.

*Family Engagement-*

In the last year, Tehama County has focused many efforts on improving family engagement. Tehama County invested in improving the visitation rooms where children and families have contact. This was accomplished by adding more interactive toys to encourage parents to have active engagement with their children in a supportive environment. An outside visitation area was also created, which allows families to be in a more open environment to have contact with their children. CWS-OIP monies were also used to purchase a genogram program for staff to use to engage parents in discussions about their background and family members, as well as sites that will assist the PST with engaging in more extensive family finding efforts. A camera and printer were charged to CWS-OIP for the purpose of picture taking at family contacts, whereby both the parent and child have a picture of the interaction to take with them. Tehama County is hopeful this will help engage parents in the participation of positive moments with their children and incentive to work on mitigating safety issues so that children have the opportunity to reunify.

*Service Delivery/Training:*

CWS-OIP was also used to update the Tehama County Child Welfare website for the purpose of increased service delivery to clients and the public. The current website has very limited information about the practice model, delivery of services, and data. The goal of the update is to create a site that will be user-friendly and give pertinent information about the CWS program. It is anticipated this website update will be completed in January 2011. One of the greatest challenges identified for Tehama County in the last year has been creating a supervisory team that is built on competency, leadership and positive interpersonal skills/communication. The supervisors had reached a point where they were not communicating, and this was greatly affecting the staff and the CWS program as a whole. The supervisors have actively participated in processes to improve their communication, and to function as a strong leadership team. The supervisors and Program Manager have participated in (3) off-site meetings to discuss issues and have had two of those facilitated by UC Davis staff. Additional meetings are planned to ensure supervisors are engaged in working together effectively for the service to staff and clients.

In an effort to encourage consistent practice, CWS-OIP monies were used to purchase SDM "field guides" which have all pertinent SDM information and guidance in a laminated booklet for staff to have while conducting assessments of families. Staff also received a laminated copy of the California Safety Assessment for use in more reliable decision-making with our evidence-based tools.

Probation CWSOIP

Tehama County Probation used its OIP monies to support family engagement by purchasing bus tickets, motels, hotels, luggage, gas cards, and food for families of youth in placement. It has been very beneficial for our placement families to visit the minor's while in placement. Typically, probation parents are without resources to travel and visit their children making family reunification difficult, but with the available OIP monies it made all the difference with some of our placement youth and their respective families.