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# MODOC County

California Child and Family Services

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## System Improvement Plan

Child Welfare and Juvenile Probation  
Services

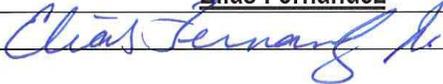
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Child Abuse Prevention, Intervention, and Treatment  
Community Based Child Abuse Prevention Program  
Promoting Safe and Stable Families

Annual SIP Update  
2010

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SIP Cover Sheet

<b><u>California's Child and Family Services Review System Improvement Plan</u></b>	
<b><u>County:</u></b>	<b><u>Modoc County</u></b>
<b><u>Responsible County Child Welfare Agency:</u></b>	<u>Modoc County Department of Social Services</u>
<b><u>Period of Plan:</u></b>	<b><u>2010 Annual Update for Three Year Plan 2009 through 2012</u></b>
<b><u>Period of Outcomes Data:</u></b>	<b><u>Quarter ending 10/5/10 Data Extract Q2-2009 through Q1 2010</u></b>
<b><u>Date Submitted:</u></b>	<b><u>November 15, 2010</u></b>
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<b><u>Submitted by each agency for the children under its care</u></b>	
<b><u>Submitted by:</u></b>	<b><u>County Child Welfare Agency Director (Lead Agency)</u></b>
<b><u>Name:</u></b>	<b><u>Pauline Cravens</u></b>
<b><u>Signature:</u></b>	
<b><u>Submitted by:</u></b>	<b><u>County Chief Probation Officer</u></b>
<b><u>Name:</u></b>	<b><u>Elias Fernandez</u></b>
<b><u>Signature:</u></b>	

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## **I. CWS/Probation Narrative**

During the 2009-2012 PQCR, the focus area of family engagement and participatory case planning was chosen for both child welfare and Probation. A literature review completed by UC Davis in both areas was used to develop questions for the case reviews and interviews that focused on principals of practice in engaging families and participatory case planning. Neither Modoc CWS nor Probation are currently using formal models of participatory case planning, i.e. Family to Family, Family Group Decision Making, or Team Decision Making. However, MCDSS and MCPD are aware of the principles of family engagement and participation by family members and wish to incorporate those principles into everyday practice with their clients.

### **A. Probation**

Over the past nine months the Probation Department has been working on improving the transition from out-of-home care to independence for older youth. The juvenile officers now complete a 90 Day Transitional Plan (Plan) for each youth transitioning out of care. This plan includes issues such as education, employment, housing, support services, permanent connections and health insurance. The officers work with the youth to plan for the future and help them think about some of the very real issues they have ahead of them in their adult life.

For the Plan, the officer meets with a youth ninety days prior to the minor exiting placement. The officer works with the youth who decides what the Plan will be with the officer assisting with ideas and practical establishment of those ideas. The officer then contacts the support people listed by the youth to ensure that each person can indeed support the youth's needs, attesting to this with a signature on the Plan. The officer then distributes the Plan to all involved so they can review what they have agreed to.

The ILP Coordinator assists with education by helping the youth fill out college applications and taking them to visit colleges. They also assist with employment by helping them complete a resume, fill out a job application and take them for job interviews. The youth's parents, or other relative, may provide a place for the youth to live. Support services are usually provided by the alcohol and drug counselor and the mental health counselor. Our youth generally consider their families to be their permanent connection, though some of them also have mentors in the community. Health insurance is either provided by Medi-Cal or the youth's parents. The Probation Officer works with the youth if they need to fill out paperwork for Medi-Cal

Probation has excellent collaboration with the Independent Living Skills coordinator, local schools, legal counsel, mental health and alcohol and drug counselors and social workers. With the 90 Day Transitional Plan, coupled with agency collaboration, this Department has been providing the youth in placement with better transitional care.

The two juvenile officers in the Probation Department have attended trainings in the areas of Concurrent Planning, Team Decision Making, Family Engagement and the Indian Child Welfare Act. These trainings have improved the officer's knowledge of the rules and regulations for youth entering placement, or at risk of placement.

The ICWA training took place in Redding on June 3, 2009. The officer learned the mandatory JV forms and the timeframes in which the forms must be completed.

## **B. Child Welfare**

During the 2009-2012 PQCR, the focus area of family engagement and participatory case planning was chosen for both child welfare and probation. A literature review completed by UC Davis in both areas was used to develop questions for the case reviews and interviews that focused on principals of practice in engaging families and participatory case planning. Neither Modoc CWS nor Probation are currently using formal models of participatory case planning, i.e. Family to Family, Family Group Decision Making, or Team Decision Making. However, MCDSS and MCPD are aware of the principles of family engagement and participation by family members and wish to incorporate those principles into everyday practice with their clients.

Child Welfare Data Compliance: MCDSS will continue to focus on decreasing the recurrence of maltreatment among children and families referred for abuse and neglect (Safety 1.1) and on preventing re-entry into out-of-home care after reunification (Reunification C 1.4). Over the last nine months since the completion of the 2009-2012 SIP the CWS Outcomes System Summary Reports, Q2 2009 through Q1 2010 has shown there were no recurrences of maltreatment and for the year from April 09 to March 10, there were no re-entries into out-of-home care for Modoc County.

Additionally, placement stability was at 100% throughout this period and timely 10 day response was at 100% throughout this period. The reasons for Modoc's positive performance are:

- Weekly individual SW case review meetings with SW supervisor
- Weekly group SW meeting with supervisor regarding policy, program issues etc.

- Implementation of SafeMeasures, SW pre-detention prevention activity and voluntary services
- Social worker supervisor tracking of case progress through SafeMeasures, identifying case problems, identifying improvement in cases, correction of weak SW practices, immediate use of data and interactive reports.

Timely 24 hour immediate response compliance fell to 89.5% during this period because of two emergency responses that were not timely. These two immediate (24 hour) contacts were seen at five days and two days respectively. Additionally, SafeMeasures identified a 10-day response that was seen on the 11th-day. This is being addressed in the weekly and individual supervision of the social workers by the social worker manager.

The balance of the quarterly data reports were either at or above state and federal standards. One hundred percent of the social worker visits were on time and the vast majority of placements to the least restrictive environments. While placement stability fell to 86% for the 8 day to 12 month category it was only three cases and that can be considered an outlier as the shift of one placement would have made placement stability compliant.

Dependency Drug Treatment Court: Over the last nine months MCDSS continues to rely on the Dependency Drug Treatment Court (DDTC) as a major strategy. This collaborative justice program, funded by State ADS with PSSF funds from DSS, was implemented in March of 2004 and has served 19 families (29 parents and 40 children). In 2010 one new family (1 parent and 1 child) has been served. Sixteen parents have successfully graduated and reunified with their children.

Historically, two families moved out of county before completing and one family was terminated with the children remaining in the home. Two families were terminated with the children going into a permanent plan of adoption. In only one family have the children re-entered foster care, and that parent repeated the program and has reunified with the children. To be eligible for DDTC, at least one caregiver must have a substance abuse diagnosis and the children must be dependents of the court.

Over the last nine months DDTC, families, treatment providers and the judge meet together every two weeks to review the progress of the service plan and family participation and compliance. Team members include CWS SWs and Supervisor, CASA Director, Chief Probation Officer, Parent Educator, Alcohol and Drug Counselor, Public Health Nurse, Attorney for MCDSS, Community Health Advocate from Strong Family Health Center (IHS clinic), Family Service Worker, Drug Court Coordinator, and the Judge. One of the positive outcomes of this biweekly meeting has been the development of a close-knit multidisciplinary group of people who share the goals of recovery and increased

parental capacity, as well as child safety and permanency. Information is shared easily and team members have an excellent grasp of the job requirements of each team member.

MCDSS was looking to the creation of a family wellness court to address the issue of recurrence of maltreatment; however, that grant was not received. This grant application will be re-submitted in 2011. The plan to create a multidisciplinary treatment team to provide a range of services identified as needed by the family and team, will be facilitated through the MDT training and a facilitator (UC Davis) in the development of policy and procedures and MOU's between participating MDT Team members (see matrix 1.1.1 and 2.1.1).

The treatment team members will participate in training provided by UC Davis in a new program called "Signs of Safety" (SoS). MCDSS will participate in a Northern California Learning Community that is looking at integrating the solution-focused approach of SoS with Structured Decision Making as a way to ensure that they have a thorough understanding of the principles and application of Family Engagement as well as Child Safety.

The DDTC continues their core service in substance abuse treatment, with case management and ancillary services provided to all family members. CWS SWs also continue to participate on the treatment team for the Healthy Beginnings Program. Other team members represent Public Health, Mental Health, Alcohol and Drug Services, and Early Head Start. This program, funded by First Five and Mental Health Services Act, is available to families with children under 5 years of age. Funding from First Five will end with this fiscal year and conversations are already underway about future funding and coordination with the Family Wellness Court.

Team Decision Making: Both Improvement Goals 1.0 and 2.0 dealt with TDM strategies; development of TDM policy and procedures and implementation of TDM meetings to reduce the recurrence of maltreatment and re-entry into out-of-home care. The TDM training was completed on 6/3/10 with all the identified partners (matrix 5.1.5). However, after the completion of that training it was realized local staff did not have the expertise to write the TDM policy and procedures or create the meeting structure and organization.

Therefore, additional Strategies and Milestones were added to the beginning of Improvement Goals 1.0 and 2.0 to make possible the writing of the TDM policy and procedures and implementation of TDM meetings. The trainings will be conducted through UC Davis, and they will be paid for using CWSOIP money for both probation and CWS staff. It should also be noted that with the additional Milestones for Improvement Goals 1.0 and 2.0 the timeframes for both these Milestones were condensed, which will require additional scrutiny by CWS and Probation to meet Milestone goals.

ICWA/CWS/Probation: Improvement Goal and strategy 4.1 for ICWA was to get tribal members and an ICWA representative involved in CWS pre-detention and case activities throughout the life of an ICWA case. This was to be accomplished by involvement of ICWA, CWS and Probation in the joint development of policy and procedures, ICWA representatives being invited and attending CWS/Probation trainings, ICWA representatives being invited and attending CWS/Probation CWS and Probation policy and case meetings, and enhanced communication /collaboration through regular contact.

After nine months of inviting ICWA representatives to CWS/Probation trainings and meetings and getting no response from the tribes it was realized strategies 4.1 and 4.2 needed to be reversed so that CWS/Probation could acquire new techniques through ICWA training to attract tribal members to CWS/Probation meetings and trainings. CWSOIP money will be used for both the CWS and Probation ICWA training.

Accordingly, ICWA trainings Strategy 4.2, and ICWA, CWS, Probation meeting Strategy 4.1 were reversed for this update. All the various Modoc tribes were invited to meetings and trainings to meet the 2009/2012 three year plan; however, there was no response to these invitations for engagement. Additionally, there is no current ICWA representative in Modoc County and the nearest ICWA representative is in Burney 1 ½ hours from Alturas who has been difficult to engage. It is therefore believed it was necessary to obtain ICWA, CWS, Probation trainings to try and overcome these obstacles so that the communication and collaboration milestones can be achieved.

Concurrent Planning: Concurrent Planning training was completed six months later than scheduled, however all identified partners were able to participate in the training. Most importantly as a result of the training was establishing the workflow characteristics of Concurrent Planning from the beginning of the case through its termination. Especially helpful was the re-establishment of state adoptions in the Concurrent Planning process from the initial onset of the case, through participatory case planning and the termination of the case:

- The on-going partnership with California State Adoptions has been re-established on a routine quarterly basis. Because of budget restraints these case meetings are being held via conference call.
- The social worker supervisor is working weekly (group and individually) with the SW's to include compressive concurrent planning in each case.
- SW's are beginning to incorporate concurrent planning with immediate family, relatives and friends in the development of participatory case planning for each case.

Concurrent Planning trainings are funded through Modoc County CWSOIP allocation.

## C. CWS/PROBATION SIP MATRIX

See SIP Matrix Attachments A-1 through A-13

## D. CWSOIP NARRATIVE

The previous goals of CWSOIP remain the same with the addition of TDM and ICWA training for both Probation and CWS staff. These training components were added to this update to enable the completion of the Improvement Goals, Strategies and Milestones developed in the 2009-2012 SIP Three Year Plan. The CWS and Probation managers will work together with UC Davis to bring these trainings to Modoc County ASAP to accelerate the completion of the Modoc County 2009-2012 SIP Three Year Plan.

### 1. Probation

Because MCPD will be focusing on the permanency and wellbeing outcome of increasing the probability of a successful transition to adulthood, the CWSOIP funds will be used to implement Improvement Targets from the 2009-2012 PQCR, which reads as follows:

- a) Develop policies and procedures to guide SWS and Probation Officers in ensuring youth in care receive everything they need to succeed in the transition into adulthood, including Family Finding.
- b) Develop a community interagency collaborative approach to ensuring that youth in care receive all the services necessary for maximum success in transitioning from foster care. Develop contracts and MOUs for CWS and Probation with FFAs to provide transitional housing services. Work with ILP, Alliance for Workforce Development, and schools, including community colleges

MCPD is planning to train probation officers in the principles and techniques of Family Engagement, Participatory Case Planning, and Family Finding. They also plan to work with area FFAs to develop transitional housing programs for youth aging out of foster care.

### 2. Child Welfare Services

Prior to the 2009/2010 PQCR/SIP processes, CAPIT/CBCAP/PSSF allocations were sent from the auditor to Public Health who then directed the full allocation to a local nonprofit for program implementation with no local oversight. The only oversight to these programs had was OCAP, while both Public Health and Children's Services

participated at the Child Abuse Prevention Council where there was little administrative participation from CWS and Probation in the co-facilitation of common program goals and objectives.

Fiscal policy has now changed and funding for the subcontract for CAPIT/CBCAP/PSSF is now being coordinated with CWS allocations and supervised by CWS. With the inclusion of the OCAP programs in the SIP processes the CWS outcomes of the SIP and CAPIT/CBCAP/PSSF are seen as closely linked by the Child Abuse Prevention Council (CAPC), CWS and Probation. In the writing of the 2009/2010 Modoc SIP we have seen participation of Native Americans, Parenting Coalition, T.E.A.C.H., Inc., CWS social workers, Mental Health, Public Health, Alcohol and Drug Services, CAPC and the Drug Court Steering Committee.

In this process described above, a consensus has been reached among the collaborative partners in the child welfare system to focus on Parenting Education. With the Parenting Coalition and the MHSA Prevention and Early Intervention Council, the partners have begun planning for a continuum of parenting education services to be available throughout the community. Part of this continuum includes the Family Wellness Court, an intervention that will serve families with signs of abuse and/or neglect who are willing to participate in a voluntary plan.

MCDSS plans to use some of the CWSOIP funds to contract with T.E.A.C.H., Inc. to increase the current .5 FTE parent specialist to at least a full-time position to increase the number of classes and one-on-one services.

The importance of fiscal strategies to facilitate, collaborate, and communicate in the achievement of program goals and objectives for Modoc County should not be understated. The new fiscal policies are a proactive prevention policy with the primary goal of preventing child abuse through a cost-effective collaboration, referral and multi-agency partnership with families and children.

More importantly, the Drug Court Steering Committee that will have administrative approval over both the SIP and CAPIT/CBCAP/PSSF plans before they are sent to the Modoc County Board of Supervisors for approval will have input how to best spend the allocations for maximum benefit to Modoc County. The Drug Court Steering Committee includes Public Health, Mental Health, Probation CWS, Superior Court Judges, Native Americans, and community members. What we are now seeing in the planning process is program coordination and collaboration not only to avoid duplication, but most importantly making sure funding is being directed to achieve the best desired outcomes within the collaboration of programs.

## **II. CAPIT/CBCAP/PSSF Update**

The Modoc Child Abuse Prevention Council has been working in close collaboration with the Modoc County Department of Social Services during the past year. We continue to have representation and valuable input from DSS at the Child Abuse Prevention meetings and events. The council holds an annual Child Abuse Prevention Walk and Dinner every April for Child Abuse Prevention Month. At this dinner the Social Workers are honored for their dedication to our local children and the community.

The Child Abuse Prevention Council Coordinator and the Parenting Specialist are members of the Family Wellness Court team and communicate regularly with the Department of Social Services and the Modoc County Probation Department. The council continues to work with DSS and other local partners to expand the current Family Wellness Court to serve voluntary families and increase parent participation.

SIP Component Template

<b>Outcome/Systemic Factor:</b> USE OF POLICIES, PROCEDURES, AND TRAININGS RE FAMILY ENGAGEMENT TO REDUCE RECURRENCE OF MALTREATMENT AND RE-ENTRY INTO FOSTER CARE					
<b>County's Current Performance:</b> Between April 2006 and September 2008: 20% recurrence of maltreatment, April 2005 to September 2008 20% e-entered care, during this same period 8% re-entered in twelve-month period. Between April 2009 and September 2009: 0% recurrence of maltreatment, April 2009 to March 2010, 0% reentered care.					
<b>Improvement Goal 1.0</b> Develop policies and procedures and find trainings to guide social workers and probation officers in their interviews and engagement activities with family members, youth, tribe, extended family, and friends to encourage the active participation of all interested parties in the development of a Strengths and Needs Assessment/Social Study and Case Plan					
<b>Strategy 1. 1</b> TDM Training, train CWS and Probation staff to TDM best practices to reduce recurrence of maltreatment and re-entry into foster care.		<input type="checkbox"/> <b>CAPIT</b>	<b>Strategy Rationale</b> Train CWS and Probation staff to Share awareness of services available to families in the community and to offer/engage services for families so these families feel encouraged to participate in the system throughout the family's involvement in the CWS/Probation system.		
		<input type="checkbox"/> <b>CBCAP</b>			
		<input type="checkbox"/> <b>PSSF</b>			
		<input type="checkbox"/> <b>N/A</b>			
<b>Milestone</b>	<b>1.1.1</b> TDM Training.	<b>Timeframe</b>	June 1, 2010		<b>Assigned to</b>
	<b>1.1.2</b> Assess county needs for TDM implementation.		November 1, 2010		
	<b>1.1.3</b> Acquire facilitator for TDM Policy and Procedure Training.		December 1, 2010		
<b>Strategy 1. 2</b> Write TDM Policy and Procedures Train staff and partners to TDM policy and procedures		<input type="checkbox"/> <b>CAPIT</b>	<b>Strategy Rationale</b> Build support and understanding among staff and partners that TDM model will reduce maltreatment and re-entry into foster care.		
		<input type="checkbox"/> <b>CBCAP</b>			
		<input type="checkbox"/> <b>PSSF</b>			
		<input type="checkbox"/> <b>N/A</b>			
<b>Milestone</b>	<b>1.2.1</b> TDM Policy and Procedure Training.	<b>Timeframe</b>	January 1, 2011		<b>Assigned to</b>
	<b>1.2.2</b> Write TDM Policy and Procedures.		March 1, 2011		
	<b>1.2.3</b> Review Policy and Procedures with Social Workers and Partners.		May 1, 2011		

<b>Strategy 1. 3</b> Facilitate collaborative relationship engagement activities between SW's and Probation Officer, and families, extended families, and identified friends.		<input type="checkbox"/> CAPIT	<b>Strategy Rationale</b> Encouraging active participation of all interested parties in the development of a case plan.		
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		<input type="checkbox"/> N/A			
<b>Milestone</b>	<b>1.3.1</b> Establish timeline protocols for family meetings	<b>Timeframe</b>	July 1, 2011	<b>Assigned to</b>	Social Worker Supervisor Probation Officer Supervisor
	<b>1.3.2</b> Agency to establish engagement policy		October 1, 2011		Social Worker Supervisor Probation Officer Supervisor
	<b>1.3.3</b> SW's and Probation officers engage affected families for joint family assessment of the case and development of a case plan.		December 1, 2011		Social Services Director Probation Officer Supervisor
<b>Strategy 1. 4</b> Agency partners to develop case follow-up plan and transitional aftercare.		<input type="checkbox"/> CAPIT	<b>Strategy Rationale</b> Currently no aftercare or transitional care is available in Modoc County.		
		<input type="checkbox"/> CBCAP			
		<input type="checkbox"/> PSSF			
		<input type="checkbox"/> N/A			
<b>Milestone</b>	<b>1.4.1</b> SW's and Probation officers to develop agency follow-up plan	<b>Timeframe</b>	January 1, 2012	<b>Assigned to</b>	Social Worker Supervisor Probation Officer Supervisor
	<b>1.4.2</b> Review follow-up plan and case records to determine effectiveness of follow-up plan		April 1, 2012		Social Worker Supervisor Probation Officer Supervisor
	<b>1.4.3</b> Statistical and program review to determine effectiveness in reducing maltreatment and re-entry into foster care.		July 1, 2012		Social Services Director Chief of Probation
<b>2010 SIP Matrix Update Narrative</b>					
<ul style="list-style-type: none"> <li>When compared to the national standard performance standard between 4/1/09 and 9/30/09 for the recurrence of maltreatment Modoc County's performance is at 105.7%; the national standard is 94.%. When compared to the national standard performance standard between 4/1/09 and 03/31/10 for no maltreatment in Foster Care, Modoc County's performance is at 100.3%; the national standard is 99.68%.</li> <li>When the National and Modoc's performance is compared to the state of California performance during the same period California</li> </ul>					

has the lowest overall performance for the recurrence of maltreatment at 93% and no maltreatment in Foster Care at 99.57%.

- The reasons for Modoc's positive performance are:
  - Weekly individual SW case review meetings with SW supervisor
  - Weekly group SW meeting with supervisor regarding policy, program issues etc.
  - Implementation of SafeMeasures, SW pre-detention prevention activity and voluntary services
  - Social worker supervisor tracking of case progress through SafeMeasures, identifying case problems, identifying improvement in cases, correction of weak SW practices, immediate use data and interactive reports.
- TDM training milestones 1.1.1, 1.1.2, & 1.1.3 added to acquire TDM facilitator for TDM Policy and Procedure Training.

<b>Improvement Goal 2.0 USE OF TEAM DECISION MAKING MEETINGS TO REDUCE RECURRENCE OF MALTREATMENT AND RE-ENTRY INTO OUT-OF-HOME CARE</b>						
<b>Strategy 2. 1</b> TDM Training, train CWS and Probation staff to the use of TDM to reduce recurrence of maltreatment and re-entry into out-of-home care.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Decrease the rate of recurrence of maltreatment by increasing the families' knowledge of and access to available community services before, during, and after dependency to provide prevention, maintenance, and aftercare support.		
		<input type="checkbox"/>	<b>CBCAP</b>			
		<input type="checkbox"/>	<b>PSSF</b>			
		<input type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>2.1.1</b> TDM Training.	<b>Timeframe</b>	June 1, 2010		<b>Assigned to</b> Social Worker Supervisor Probation Officer Supervisor and partners	
	<b>2.1.2</b> Assess county needs for TDM implementation.		November 1, 2010			Social Worker Supervisor Probation Officer Supervisor and partners
	<b>2.1.3</b> Acquire facilitator for TDM Policy and Procedure Training.		December 1, 2010			Social Services Director Chief of Probation
<b>Strategy 2. 2</b> Conduct collaborative Team Decision Making (TDM) meetings to establish guidelines for implementing family TDM interventions that more effectively deliver services from child welfare services, to better achieve more favorable outcomes for children and families.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Establish an interagency collaboration as already seen in Dependency Drug Court, Healthy Beginnings, and the parenting Coalition.		
		<input type="checkbox"/>	<b>CBCAP</b>			
		<input type="checkbox"/>	<b>PSSF</b>			
		<input type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>2.2.1</b> Organizational assessment of CWS, Probation and collaborative partners.	<b>Timeframe</b>	January 1, 2011		<b>Assigned to</b> Social Worker Supervisor Probation Officer Supervisor and partners	
	<b>2.2.2 TDM intervention guidelines</b>		March 1, 2011			Social Worker Supervisor Probation Officer Supervisor and partners

	<b>2.2.3 Identify and/or find funding as necessary to implement program</b>		May 1, 2011		Social Worker Supervisor Probation Officer Supervisor and partners
<b>Strategy 2.3</b> Establish guidelines for implementing family TDM interventions that more effectively deliver services from child welfare services			<input type="checkbox"/> <b>CAPIT</b>	<b>Strategy Rationale</b> To better achieve more favorable outcomes for children and families, which will reduce maltreatment and re-entry into foster care.	
			<input type="checkbox"/> <b>CBCAP</b>		
			<input type="checkbox"/> <b>PSSF</b>		
			<input type="checkbox"/> <b>N/A</b>		
<b>Milestone</b>	<b>2.3.1</b> Collaboration on reunification plans	<b>Timeframe</b>	July 1, 2011	<b>Assigned to</b>	Social Worker Supervisor Probation Officer Supervisor and partners
	<b>2.3.2</b> Families develop ownership of plans		October 1, 2011		Social Worker Supervisor Probation Officer Supervisor and partners
	<b>2.3.3 Families and child's support team are involved in ongoing community support systems, such as parenting classes, drug and alcohol recovery etc.</b>		December 1, 2011		Social Worker Supervisor Probation Officer Supervisor and partners
<b>Strategy 2.4</b> Aftercare plans and interventions developed			<input type="checkbox"/> <b>CAPIT</b>	<b>Strategy Rationale</b> Ongoing service support from service providers will reduce maltreatment and re-entry into foster care.	
			<input type="checkbox"/> <b>CBCAP</b>		
			<input type="checkbox"/> <b>PSSF</b>		
			<input type="checkbox"/> <b>N/A</b>		
<b>Milestone</b>	<b>2.4.1</b> Plans for follow-up care developed	<b>Timeframe</b>	January 1, 2012	<b>Assigned to</b>	Social Worker Supervisor Probation Officer Supervisor and partners
	<b>2.4.2</b> TDM aftercare interventions		April 1, 2012		Social Worker Supervisor Probation Officer Supervisor and partners
	<b>2.4.3</b> Fewer children re-enter foster care (C1.4). Fewer children experience incidents of maltreatment (S1.1) as in prior years. Fewer children emancipated from system (C3.3)		July 1, 2012		Social Worker Supervisor Probation Officer Supervisor and partners

<b>2010 SIP Matrix Update Narrative</b>				
<ul style="list-style-type: none"> <li>TDM training milestones 2.1.1, 2.1.2, &amp; 2.1.3 added to acquire TDM facilitator for TDM Policy and Procedure Training.</li> <li>TDM Training 2.1 goal added to train CWS and Probation staff to the use of TDM to reduce recurrence of maltreatment and re-entry into out-of-home care.</li> </ul>				
<b>Improvement Goal 3.0 USE OF FAMILY WELL-BEING COURT TO REDUCE RECURRENCE OF MALTREATMENT AND RE-ENTRY INTO FOSTER CARE</b>				
<b>County's Current Performance:</b> Between April 2006 and September 2008: 20% recurrence of maltreatment, April 2005 to September 2008 20% e-entered care, during this same period 8% re-entered in twelve-month period. Between April 2009 and September 2009: 0% recurrence of maltreatment, April 2009 to March 2010, 0% reentered care.				
<b>Strategy 3. 1</b> Continue the process for multi-agency collaborative differential response service delivery.			<b>Strategy Rational</b> Drug Dependency Court oversight of organizational assessment and case plan activities will facilitate program development through the various agencies that will reduce maltreatment and re-entry into foster care.	
<b>Milestone</b>	<b>3.1.1</b> Identify service partners such as TEACH, Health Services, SFHC, CalWORKs and create Treatment Team.		<b>Timeframe</b>	<b>Assigned to</b>
			April 1, 2010 This milestone has been met by using the current DDTC treatment team.	Social Worker Supervisor Probation Officer Supervisor and partners
	<b>3.1.2</b> Identify appropriate trainings in SoS, Solution-focused approaches, and other Family Engagement approaches and train Family Well-Being Court Treatment Team members.		May 1, 2011 This milestone is being put forward by one year to include more intensive and comprehensive training for all team members.	Social Worker Supervisor Probation Officer Supervisor and partners
	<b>3.1.3</b> Engage families and agencies on a "dual" tract that allows CWS and treatment team to respond differently.		May 1, 2011 This milestone is being adjusted to coincide with the end of team training.	Social Worker Supervisor Probation Officer Supervisor and partners Drug Dependency Court Oversight
<b>Strategy 3. 2</b> Family Well-Being Court to start oversight implementation of multi-agency collaborative differential response service delivery.			<b>Strategy Rationale</b> Family Well-Being Court to review effectiveness of the collaboration and effectiveness of reducing maltreatment and re-entry into foster care.	

<b>Milestone</b>	3.2.1 Family Well-Being Court to start oversight of multi-agency collaborative differential response service delivery.	<b>Timeframe</b>	July 1, 2011	<b>Assigned to</b>	S W Supervisor Probation Officer Supervisor and partners Family Well-Being Court Oversight
	3.2.2 Review effectiveness of the collaboration in reducing maltreatment and re-entry into foster care by reviewing data from Safe Measures and UC Berkeley website.		July 1, 2011		S W Supervisor Probation Officer Supervisor and partners Family Well-Being Court Oversight
	3.2.3 Administrative oversight and corrections by Family Well-Being Court to enhance outcomes of the collaboration.		December 1, 2011		Family Well-Being Court

**Describe any additional systemic factors needing to be addressed that support the improvement plan goals.**

- Ongoing training to TDM Model and family engagement activities and policies.
- Memorandums of Understanding created between participating agencies and partners.
- Stable and adequate funding needed to meet improvement goals.
- Will need state and UC Davis help in finding TDM facilitator for the development of policy and procedures and TDM meeting models.

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

- Ongoing training material and actual training from UC Davis and State of California.
- Community partners and staff will need additional training regarding differential response to increase their knowledge base and effective use of these services.

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

- Participating in ongoing TDM meetings to facilitate case plans and family engagement.
- Willingness of partners to actively provide after-care once youth have left the system.
- Parenting with parent mentors in TDM meetings when appropriate.

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

- None at this time.

**2010 SIP Matrix Update Narrative**

- Modoc County had applied for a Federal Drug Court Enhancement Grant to ensure the level of treatment resources that experience has shown is needed for the targeted families. The application was denied but MCDSS intends to continue the development of Family Wellness Court as an alternative response for at-risk families where the abuse/neglect does not rise to that level.

SIP Component Template

<b>Outcome/Systemic Factor:</b> PROVIDE FOR THE SAFETY AND WELL BEING OF NATIVE AMERICAN CHILDREN THROUGH THE DEVELOPMENT OF COLLABORATIVE RELATIONSHIPS WITH LOCAL TRIBES AND NATIVE AMERICAN SERVICE PROVIDERS					
<b>County's Current Performance</b> According to UC Berkeley CWS/CMS Dynamic Report for year ending 12/31/08, Native American children were 9% of those with allegations, 4% of substantiations, and 7% of entries into care. Business Objects report for year ending 10/31/09 indicates that Native American children were 10% of the referrals received. Currently 6 Native American children (3 families) have open cases, 5 in FM and 1 in PP, for 37% of the current caseload. Native American children are between 2 and 4% of the total child population.					
<b>Improvement Goal 1.</b> Involvement of ICWA person from pre-detention throughout the life of the case					
<b>Strategy 4. 1</b> Joint training of tribal members with Social Workers and Probation Officers on ICWA law and procedure as well as cultural competency.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Joint training will bridge cultural fears, mistrust and organizational barriers.	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>4.1.1</b> ICWA, CWS, Probation Trainings.	<b>Timeframe</b>	January 1, 2011		<b>Assigned to</b>
	<b>4.1.2</b> SW/Probation meet with Tribal leaders to establish pre-detention policy.		April 1, 2011		
	<b>4.1.3</b> ICWA, CWS, Probation establish scheduled collaborative meetings to resolve ongoing issues.		July 1, 2011		
<b>Strategy 4. 2</b> CWS, Probation engage tribes in meetings and policy development.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Build organizational framework for CPS, Probation and tribe that enhances communication between the agencies and the family to resolve pre-detention issues and tribal/family participation.	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>4.1.1.</b> ICWA, CWS representatives engaged in meetings to enhance communication and collaboration.	<b>Timeframe</b>	January 1, 2011		<b>Assigned to</b>
	<b>4.1.2</b> . ICWA, CWS, Probation representatives write policy and procedures.		April 1, 2011		

<p><b>4.1.3.</b> ICWA, CWS, Probation representatives have an annual Powwow goodwill breakfast to promote goodwill.</p>	<p>July 1, 2011</p>	<p>Social Services Director Chief of Probation Tribal Leadership</p>
<p><b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b></p> <ul style="list-style-type: none"> <li>• Ongoing trainings and continued meetings with tribes to establish trust</li> <li>• Meeting with tribal leadership for SW understanding tribal policy</li> <li>• Ongoing cultural competency training and awareness</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>• Tribal and State of California ICWA training and literature</li> </ul>		
<p><b>Identify roles of the other partners in achieving the improvement goals.</b></p> <ul style="list-style-type: none"> <li>• Participation in Tribal, CWS, Probation meetings and provision of services as indicated by the Tribe, CWS and Probation.</li> </ul>		
<p><b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</b></p> <ul style="list-style-type: none"> <li>• None at this time.</li> </ul>		
<p><b>2010 SIP Matrix Update Narrative</b></p> <ul style="list-style-type: none"> <li>• The ICWA trainings Strategy 4.2, and ICWA, CWS, Probation meeting Strategy 4.1 were reversed for this update. All the various Modoc tribes were invited to meetings and trainings to meet the 2009/2012 three year plan, however, there was no response to these invitations for engagement. Additionally, there is no current ICWA representative in Modoc County and the nearest ICWA representative is in Burney 1 ½ hours from Alturas who has been difficult to engage. It is therefore believed it was necessary to obtain ICWA, CWS, Probation trainings to try and overcome these obstacles so that the communication and collaboration milestones can be achieved.</li> </ul>		

SIP Component Template

<b>Outcome/Systemic Factor:</b> IMPLEMENT POLICIES, PROCEDURES, AND TRAINING SO SOCIAL WORKERS UNDERSTAND AND UTILIZE THE FULL SCOPE OF THE CONCURRENT PLANNING PROCESS TO ENSURE TIMELY ADOPTIONS					
<b>County's Current Performance:</b> Although the timeframes for the 2 adoptions that have occurred in the last 3 years have been well within the federal guidelines, the case review of the PQCR indicated that SWs were not documenting the development of concurrent plans in the majority of the cases reviewed.					
<b>Improvement Goal 1.0</b> Contract with UC Davis to provide a minimum of 6 hours of local training on concurrent planning to include all SWs, probation officers, adoptions workers, CASA volunteers, foster parents and agencies, attorneys, and judges. Write policies and procedures for implementation of concurrent planning throughout the life of the case.					
<b>Strategy 5. 1</b> Concurrent planning training will bring the resources and awareness to the SW's and Probation Officers on a consistent basis, which will facilitate permanency outcomes.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Establish Permanency in case development and closure is one of the goals in concurrent planning for every case as soon as possible for the child.	
		<input type="checkbox"/>	<b>CBCAP</b>		
		<input type="checkbox"/>	<b>PSSF</b>		
		<input type="checkbox"/>	<b>N/A</b>		
<b>Milestone</b>	<b>5.1.1</b> Gather available literature on concurrent planning and make available to CWS staff.	<b>Timeframe</b>	January 1, 2010 Completed 6/2/10		<b>Assigned to</b>
	<b>5.1.2</b> Identify any funding issues with regard to bringing University of California, Davis to Modoc County for concurrent training.		February 1, 2010 Completed and training held 6/2/10 OIP funding		
	<b>5.1.3</b> Identify partners besides Probation and CWS who will benefit from concurrent planning training.		March 1, 2010 Completed- SWs, probation officers, adoptions workers, CASA volunteers, foster parents and agencies, attorneys, and judges.		
<b>Milestone</b>	<b>5.1.4</b> Re-establish on-going relationship with state adoptions and usage of their staff and resources in the development of concurrent case plans.	<b>Timeframe</b>	January 1, 2010 Completed 6/2/10 Quarterly meetings now being held on a regular basis, with input being incorporated into the case plans.		<b>Assigned to</b>
	<b>5.1.5</b> UC Davis to provide a minimum of 6 hours of local Modoc County training on Concurrent Planning, which is to include all SWs, probation officers, adoptions workers, CASA volunteers, foster parents , public health,		May 1,2010  Training completed 6/2/10 by UC Davis all of the partners scheduled to participate attended the training.		

	<p>mental health, alcohol and drug, office of education and strong family health center, attorneys and judges.</p>				
	<p><b>5.1.6</b> Ongoing training by supervisors to staff on concurrent planning</p>		<p>June 1, 2010 Ongoing training to the social workers is being provided by the SW/Probation managers in the scheduled weekly case review and staff supervision processes.</p>		<p>Social Worker Supervisor Probation Officer Supervisor</p>
<p><b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b></p> <ul style="list-style-type: none"> <li>• None at this time.</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>• Ongoing training material and actual training from UC Davis and State of California</li> </ul>					
<p><b>Identify roles of the other partners in achieving the improvement goals.</b></p> <ul style="list-style-type: none"> <li>• Their agreement to participate in Concurrent Planning training, adoptions workers, CASA volunteers, foster parents and agencies, attorneys, and judges etc.</li> </ul>					
<p><b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</b></p> <ul style="list-style-type: none"> <li>• None at this time.</li> </ul>					
<p><b>2010 SIP Matrix Update Narrative</b></p> <ul style="list-style-type: none"> <li>• Concurrent Planning training was completed six months later than scheduled, however all identified partners were able to participate in the training.</li> <li>• The on-going partnership with the state's probation unit has been re-established on a routine quarterly basis. Because of budget</li> </ul>					

restraints these case meetings are being held via conference call.

- The social worker supervisor is working weekly (group and individually) with the SW's to include compressive concurrent planning in each case.
- SW's are beginning to incorporate concurrent planning with immediate family, relatives and friends in the development of participatory case planning for each case.

SIP Component Template

**Outcome/Systemic Factor:** INSURE YOUTH LEAVING FOSTER CARE AFTER AGE 18 HAVE FAMILIAL AND SOCIAL CONNECTIONS, EDUCATIONAL OPPORTUNITIES, HOUSING, MEDICAL CARE, AND EMPLOYMENT OPPORTUNITIES

**County's Current Performance:** Between April 2006 and March 2009, 17 youth left out-of-home care after age 18

**Improvement Goal 1.0** All foster and ward children exiting the system offered transitional services

**Strategy 6. 1**

Develop policies and procedures to guide SWS and Probation Officers in ensuring youth in care receive everything, including Family Finding, they need to succeed in the transition to adulthood

- |                          |              |
|--------------------------|--------------|
| <input type="checkbox"/> | <b>CAPIT</b> |
| <input type="checkbox"/> | <b>CBCAP</b> |
| <input type="checkbox"/> | <b>PSSF</b>  |
| <input type="checkbox"/> | <b>N/A</b>   |

**Strategy Rationale**

Establishing guidelines and protocols to help guide SWS and Probation Officers to ensure youth are receiving care after they leave out-of-home care after the age 18.

Milestone	Timeframe	Assigned to
6.1.1 Develop policy and procedures for youth leaving foster care transitional care.	January 1, 2010  Probation has completed their Policy & Procedure, however further coordination/coordination policy between CWS, ILP and Probation needs to be put into place. Expected completion date March 1, 2011.	Social Worker Supervisor Probation Officer Supervisor
6.1.2 Identify funding resources	July 1, 2010  OIP and Probation money has and will be used for the further development of transitional services. That will include further TDM, Concurrent Planning, Native American trainings, etc.	Social Worker Supervisor Probation Officer Supervisor
6.1.3 Build key support from partners, ILP program, schools, housing, and job referral	January 1, 2011 Probation officers are now successfully working with youth at	Social Services Director Chief of Probation Social Worker Supervisor

	network, medical and legal. Establish collaborations, MOU's with key systems providers (courts, CWS, Probation, ILP, Mental Health, Public Health, Housing etc).		the schools, Collaboration and MOU's still need development with ILP at T.E.A.C.H. Inc. and CWS to ensure delivery.		Probation Officer Supervisor and partners	
<b>Strategy 6. 2</b> Create multi-agency collaborations to give trainings and assist youth after they leave out-of-home care after the age 18.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Partnerships from service providers, such as ILP program, schools, housing, job referral network, medical and legal are essential to the success of this program.		
		<input type="checkbox"/>	<b>CBCAP</b>			
		<input type="checkbox"/>	<b>PSSF</b>			
		<input type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>6.2.1</b> Provide social worker, probation officer, and collaborative partner training for program implementation, including Family Finding.	<b>Timeframe</b>	January 1, 2011		<b>Assigned to</b>	Social Worker Supervisor Probation Officer Supervisor
	<b>6.2.2</b> Multi-agency plan developed to provide identified services and follow-up support.		April 1, 2011			Social Worker Supervisor Probation Officer Supervisor and partners
	<b>6.2.3</b> Multi-team meeting conducted to refine process and objectives/goals. Youth assisted to develop permanent connections with caring adults.		July 1, 2011			Social Services Director Chief of Probation Social Worker Supervisor Probation Officer Supervisor and partners
<b>Strategy 6. 3</b> Maximize potential of program and conduct program review.		<input type="checkbox"/>	<b>CAPIT</b>	<b>Strategy Rationale</b> Ensuring program sustainability and collaborative partnerships to enhance and continue this transitional program; thus lessening the chances to reenter the system.		
		<input type="checkbox"/>	<b>CBCAP</b>			
		<input type="checkbox"/>	<b>PSSF</b>			
		<input type="checkbox"/>	<b>N/A</b>			
<b>Milestone</b>	<b>6.3.1</b> All foster and ward children exiting in the system offered transitional services	<b>Timeframe</b>	January 1, 2012		<b>Assigned to</b>	Social Worker Supervisor Probation Officer Supervisor and partners
	<b>6.3.2</b> Program review/evaluation to make systemic changes as necessary so services are continued.		April 1, 2012			Social Worker Supervisor Probation Officer Supervisor and partners

<b>6.3.3</b>	Fewer youth reenter the legal/court system because transitional services were not offered.	July 1, 2012	Social Services Director Chief of Probation
<b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b>			
<ul style="list-style-type: none"> <li>All new program. Policy and Procedures, MOU's, Funding, Partner relationships and their funding, Transportation, Ongoing program evaluation.</li> </ul>			
<b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b>			
<ul style="list-style-type: none"> <li>Ongoing training material and actual training, State of California, ILP Program, Department of Education, Public Health, Housing etc.</li> </ul>			
<b>Identify roles of the other partners in achieving the improvement goals.</b>			
<ul style="list-style-type: none"> <li>ILP Program, Department of Education, Public Health, Housing (various), Mental Health, etc.</li> </ul>			
<b>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</b>			
<ul style="list-style-type: none"> <li>None at this time.</li> </ul>			
<b>2010 SIP Matrix Update Narrative</b>			
<ul style="list-style-type: none"> <li>Probation has made good success in starting their program delivering services to all youth existing foster care.</li> <li>OIP monies have been designated for both CWS and Probation to obtain additional training to facilitate the program, policy development and MOU's between service partners.</li> <li>CWS and probation still need to develop policy and procedures to address partnerships, common goals and mutual outcomes.</li> <li>Slight adjustments to milestone completion dates have been made to 6.1.1 and 6.1.3 to accommodate further program and policy development.</li> <li>Case objectives/goals/plans need to be addressed between CWS, probation and ILP after TDM a training facilitators has been hired and meetings begin to be held on a regular basis.</li> </ul>			