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Modoc County Department of Social Services

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MEMORANDUM

TO: Bureau Chief Outcomes and Accountability Bureau
Children and Family Services Division

FROM: Nadine Della Bitta, Interim Director *Nadine Della Bitta*

DATE: November 30, 2011

RE: Department of Social Services Modoc County - System Improvement Plan (SIP)

I have enclosed a copy of the Modoc County California Child and Family Services System Improvement Plan for your records. This is our Annual SIP Update for 2011.

MODOC County

California Child and Family Services

System Improvement Plan

Child Welfare and Juvenile Probation
Services

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

Annual SIP Update
2011

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Appendix B: Part I—CWS/Probation Cover Sheet

California's Child and Family Services Review System Improvement Plan	
County:	Modoc County
Responsible County Child Welfare Agency:	Modoc County Department of Social Services
Period of Plan:	2011 Annual Plan Update for 2009 through 2012 Three Year Plan
Period of Outcomes Data:	Quarter ending: Safe Measures 10/1/2010-9/30/2011
Date Submitted:	November 15, 2011
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Submitted by each agency for the children under its care	
Submitted by:	County Child Welfare Agency Director (Lead Agency)
Name:	Nadine Della Bitta
Signature:	<i>Nadine Della Bitta</i>
Submitted by:	County Chief Probation Officer
Name:	Elias Fernandez
Signature:	<i>Elias Fernandez</i>
Board of Supervisors (BOS) Approval	
BOS Approval Date:	
Name:	
Signature:	

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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 (MCDSS) and Probation (MCPD). 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 Solution Focused Family Engagement). However, MCDSS and MCPD are aware of the principles of Solution Focused family engagement and participation by family members and wish to incorporate those principles into everyday practice with their clients.

A. Probation

Over the past year the Probation Department has been working on improving the transition from out-of-home care to independence for older youth. The juvenile officer continues to complete the 90-day Transitional Plan for each youth transitioning out of care. This plan addresses issues such as education, employment, housing, support services, permanent connections and health insurance. The juvenile officer works with the youth to plan for the future and help them think about some of the very real issues they may encounter as they enter adulthood. The juvenile officer also encourages the youth to have a concurrent plan, in case things head in a different direction than expected.

The juvenile officer begins working with the youth on their future options, such as college, transitional housing, and independent living, just after their placement begins. This allows the youth to have in mind their options and to begin working towards a goal as they work through their placement program. There has been a large interest amongst the placement youth in the transitional housing programs.

Ninety days prior to the youth exiting placement, the juvenile officer and the youth formalize the 90-day Transition Plan. The juvenile 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 juvenile officer then distributes the Plan to all involved so they can review to what they have agreed.

With regard to the 90-day transitional plan and the youth moving forward after placement, the juvenile officer reinforces the plan each site visit and continues to encourage the minor in their future plans. However, Modoc County is a small rural community and the majority of youth the Probation Department deal with, live in Alturas, California and have lived there all, or most, of their lives. Many of the youth have close family in Alturas, as well as extended family. Most of the youth do not have the coping skills to work through their fear of the unknown and revert back to what is safe and comfortable; the home and family from which they were removed. Due to these factors, many of the youth complete their placement program and decide not to move forward with their 90-day plan. The idea of leaving what is

comfortable to them, their family, and a group of people that accepts them, becomes a harsh reality for the youth. This Department has been successful in completing the steps of the 90-day plan goal, but the final step rests on the youth, and there is no forcing them to make that step. In the end, this Department has found the youth are not willing to make that final step, whether it be due to fear or sudden lack of interest. The Department continues to work with each youth in hopes their mind-set will change.

Youth who are dependents are also referred to the ILP Coordinator for evaluation and services when they are sixteen years of age. Social workers work with the youth and the ILP Coordinator to develop the TILP which is incorporated into the case plan. Updates to the plan are made at least every six months.

The ILP Coordinator assists with education by helping the youth fill out college applications and taking them to visit college campuses. They also assist with employment by helping the youth complete a resume, fill out a job application and provide transportation to 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 juvenile officer works with the youth if they need to fill out Medi-Cal paperwork.

Probation has excellent collaboration with the Independent Living Skills coordinator, working closely to formulate and execute the 90-day Transitional Plan. In addition, Probation also works closely with local schools, legal counsel, mental health, and alcohol and drug counselors. With the 90 Day Transitional Plan, coupled with agency collaboration, this Department has been providing the youth in placement with better transitional services.

The juvenile officer in the Probation Department has attended trainings in the areas of Concurrent Planning, Family Engagement, Youth in Transition, and the Indian Child Welfare Act (ICWA). These trainings have improved the juvenile officer's knowledge of the rules and regulations for youth entering placement, or at risk of placement, as well as strengthened knowledge regarding resources for transition age youth and how to encourage and develop a plan with the youth.

The ICWA training took place in Redding on June 3, 2009. The juvenile officer learned the mandatory court JV forms and the timeframes in which the forms must be completed and submitted. The juvenile officer continues to implement these practices in every warranted case.

B. Child Welfare

During the 2009 process, both Child Welfare Services (CWS) and the Probation Department chose Family Engagement and Participatory Case Planning as the focus area for the SIP. 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. At the time, neither MCDSS nor Probation was using formal models of participatory case planning, i.e. Family to Family, Family Group Decision Making, or Team Decision Making. However, DSS and MCPD have been aware of the principles of family engagement and participation by family members and wish to incorporate those principles into everyday practice with their clients.

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, the TDM model requires a specially trained facilitator and we were unable to find a trained facilitator within the county. We are seeking to engage families as soon as possible so it didn't make sense to put off working with them because we did not have a facilitator in the county. It was shortly after that we learned about Signs of Safety from the Northern Training Academy and we have chosen that as an engagement tool that better fits our very small county. It is an approach that incorporates family engagement and participation into a child safety focus that can be used by the social workers at any stage of their involvement and in any environment.

Team Decision Making Training was not attended by Probation as it was found the model did not fit our small county coupled with the unavailability of a facilitator.

Signs of Safety: September, 2010, CWS participated in a three-day training sponsored by the Northern California Training Academy at UC Davis Extension on Signs of Safety (SoS), a Solution-Focused Family Engagement Model developed in Australia by Andrew Turnell and Steve Edwards. Supported by Casey Family Programs and working with trainers from Massachusetts, a state that has implemented SoS, and Raelene Freitag, the director of the Children's Research Center, the Training Academy envisioned the development of a "Community of Practice" helping counties with the implementation of SoS and with the integration of SoS and Structured Decision Making (SDM), the actuarial-based risk and needs assessment used in California. The Training Academy is also part of a National Learning Collaborative.

MCDSS decided to join the Learning Community that was being created by the Training Academy for northern counties. The intent of this "Communities of

Practice” is implementation support which includes an Advanced Signs of Safety/Structured Decision Making Institute, Signs of Safety orientations, ongoing skill training for staff, supervisors, and coaches, support from practice leaders, monthly webinar case conferences to enhance practice, evaluation support that will be part of a national evaluation model and forum for learning and exchanging information between counties, and other jurisdictions. Each county is part of a cluster of three and each cluster has a training coach and practice leaders. The counties met in webinars and conference calls at least once a month for a year and the practice leaders visited each county at least once a month and continue to do so. CWS staff also attended trainings on SoS and SDM at UC Davis in the Spring and Fall of 2011.

SoS is a “solution-focused” approach designed to provide skills, techniques and an overarching practice methodology for child welfare social workers. It offers strategies for creating constructive working partnerships, while focusing on child safety, between child welfare practitioners, the families with whom they work, and community resources. It also provides a common language and format for enhanced critical thinking and judgment on the part of all involved with a family. Components of SoS are now used in multiple states and in more than 15 countries around the world.

The four objectives of SoS are:

(1) *Engagement* of the family members and creation of a shared focus to guide the work with all the stakeholders (child, family, worker, supervisor, etc.) Strategies include a non-threatening, affirmative inquiry approach, use of family and child friendly language, and the consistent use of such tools as Safety Mapping, Danger Statements, and Three Houses interviewing tool for children;

(2) *Critical Thinking* to help all the stakeholders consider complicated and ambiguous case information and sort it into meaningful categories. The primary tool is Safety Mapping which is a process of organizing known information. It is a process that can be done with a family and it provides simple, easy to use, utilitarian definitions, thereby increasing clarity about the purpose of any particular CWS intervention;

(3) *Enhancing Safety* to provide a path for workers and families to engage in “rigorous, sustainable, on-the-ground child safety” efforts. The tools used again include Safety Mapping, the development of a “detailed but short, behaviorally based” Danger Statement that provides a clear rationale for the involvement of CWS and from which clear goals for the work with families can be developed, well-formed goals agreed upon by all parties, and the building of Safety Networks so parents can enlist the help of their families and the community in keeping their children safe; and

(4) *Training Facilitator* to provide in county instruction to teach SoS solution focused interview techniques to social workers, probation and other family service partners providing services to families.

The adoption of the Signs of Safety approach fits well with the State of California CFSR PIP Strategy 1: *to expand use of participatory case planning strategies*. It will

also contribute to Strategy 4: *expanding options and creating flexible services and supports to meet the needs of children and families*, as well as Strategy 5: *sustaining and expanding staff/supervisor training*, and Strategy 6: *strengthening the implementation of the statewide safety assessment system*.

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 twelve months since the completion of the 2010 SIP update the Safe Measures Data Extract Report for CFSR S1.1 shows there were no recurrences of maltreatment from January 2010 to March 2011. We believe that this is partly due to our small size and caseloads which makes it possible for social workers to spend more time on engaging families to address the issues that brought the family to the department's attention.

The Safe Measures Data Extract Report for CFSR C1.4 indicates there have been no re-entries into out-of-home care for Modoc County since October 2008. We believe this is a result of our use of the Family Wellness Court to insure that families receive all the services available in the county to support reunification and family preservation.

At the end of July 2010, one of the two social workers left to take another job. A replacement, with no prior experience, was hired at the beginning of October 2010. Despite this, MCDSS was able to ensure that all referrals deemed to be *immediate* were responded to timely, 100% of the time.

However, MCDSS missed contacting a referral deemed to be a *ten-day* within ten days, five times in the fourth quarter of 2010. This happened again in the first quarter of 2011. While this is unacceptable, the department feels it is understandable when there is only one trained social worker available to respond. This is supported by the data from Safe Measures that indicates that by the second quarter of 2011, the number of contacts not made within ten days went down to three and by the third quarter of 2011, only one contact was not made within ten days. The new social worker has now been working for a year and it is anticipated that the number of missed ten-day referrals will be zero from now on.

Additionally, placement stability was at 100% throughout this period. The reasons for this positive performance are:

- Weekly individual SW case review meetings with SW supervisor
- Weekly group SW meeting with supervisor regarding policy, program issues etc.
- Full use of SDM, SW pre-detention prevention activity and voluntary services

- Social worker supervisor tracking of case progress through Safe Measures, identifying case problems, identifying improvement in cases, correction of weak SW practices, immediate use of data and interactive reports.

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.

Family Wellness Court: (Formerly Dependency Drug Treatment Court) MCDSS continues to rely on the Family Wellness Court (FWC) as a major strategy for the reduction in recurrence of maltreatment and in re-entry into foster care. This collaborative justice program, funded by State ADS with PSSF funds from DSS, was implemented in March of 2004 and has served 21 families (33 parents and 44 children). In 2011 we graduated two families and accepted another family who are still in the program. Eighteen parents have successfully graduated and reunified with their children.

In FWC, 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. Many of the treatment team members have also been participating in the training provided by UC Davis for Signs of Safety.

California CFSR PIP Strategy 1 will be enhanced by MCDSS involvement with the FWC. It also fits well with Strategy 2: *sustaining and enhancing permanency efforts across the life of the case*, as the intensive, multi-agency services provide support for both recovery and child safety. FWC also contributes to Strategy 4 in that it insures a coordinated evaluation of need and delivery of services.

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.

Due to the passage of AB 109 funding is available to the Probation Department who will be implementing an evidenced based assessment tool so that juvenile officers

will be better equipped to glean from the youth and their family what issues need to be addressed. Therefore, a better match to services can be achieved.

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 eighteen 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. All will continue as follows:

- Continue to practice and improve best practices methods for ICWA family engagement.
- Ongoing cultural competency training and awareness.
- Tribal and State of California ICWA training and literature.
- Participation in Tribal, CWS, Probation meetings and provision of services as indicated by the Tribe, CWS and Probation.
- In 2002 60% of CWS referrals were native over the next nine years CWS/Probation have been able to successfully engage individual native families to the point that in 2011 there was only one ICWA CWS placement. As stated in the program narrative both CWS and Probation have made repeated attempts to contact tribal leadership for the purposes of program and policy development; however because of the very small and disjointed tribal leadership structure there has been no response to our outreach.
- This is why CWS and Probation have made efforts to reach individual families, which has been successful.
- Family members and family units have been able to get together to help in the decision making process for place of children with other family members and to refer them to other services that best meets the family's needs.

The Probation Department has continued to comply with the ICWA regulations and updates as necessary. The Probation Department continues to work with tribal ICWA representatives; not only complying with ICWA notifications and mailings, but also following up with personal notification (i.e. telephone calls) to the tribes and their ICWA representatives. To help facilitate native family and tribal relations Probation will develop a personal (customized to each case) introduction letter introducing the Probation Department and asking the family: what needs and services they would suggest to help the situation; if there are any family issues that

need to be discussed; and if there is any other information to discuss with regards not only to the case but within the community needs to be discussed.

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.

The Probation Department has historically implemented concurrent planning to the case plans of those youth in placement involving the youth, their immediate family, relatives, friends and persons the youth is connected to in the development of participatory case planning. The juvenile officer routinely updates the case plans to ensure the objectives and goals are being met. The juvenile officer has attended some training in this area and will continue to do so.

Welfare and Institutions (W&I) Code 241.1 CWS/Probation Joint Assessment Cases: A New SIP Outcome/Systemic Factor to facilitate interagency collaboration between CWS and Probation for W&I Code 241.1 Joint Assessment Cases has been added to the 2011/2012 update. While not directly identified in the 2009-2012 PQCR and SIP Three Year Plan, new milestones and outcome factors will be helpful in updating the CWS Probation MOU for W&I Code 241.1 shared cases and developing better collaboration and mutual understanding between the agencies.

Since there are no provisions in the law for the children to be dependents of the court and wards of the court at the same time, one of the two departments shall have primary responsibility for supervision of the children. Thus, the purpose of this assessment is to determine and recommend to the juvenile court which department shall best serve the interests of these children and the community.

C. CWSOIP NARRATIVE

The previous goals of CWSOIP remain the same for the 2011 SIP Update with the addition of additional ICWA trainings for both Probation and CWS staff as applicable. CWS will work together with UC Davis to bring all applicable trainings to Modoc County ASAP to accelerate the completion of the Modoc County 2009-2012 SIP Three Year Plan. Due to County funding and staff limitations it is necessary for both Modoc County CWS and Probation to find trainings as close to Modoc County as possible.

Both CWS and Probation are maximizing their staff training and education opportunities so that the safety and well being of the children are maximized to the greatest extent. It is also important that all training opportunities received by either CWS or Probation be transmitted to each other so that collaborative opportunities for the children are maximized.

The Probation Department receives email notifications from UC Davis – Resource Center for Family-Focused Practice regarding upcoming trainings. Unfortunately, most are not offered in the north state with Sacramento being the nearest. More often than not, trainings south of Sacramento go unattended due to funding, distance and unavailability of the juvenile officer. Probation Department continues to seek out and attend trainings related to Family Engagement, Concurrent Planning, Participatory Case Planning, and placement/transition age youth.

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 juvenile officers in ensuring youth in care receive everything they need to succeed in the transition into adulthood, including Family Finding which at this time probation has no on-line tool. The Probation Department is looking into an on line tool that is currently being used by another northern California probation department. It is hoped OIP funding would be able to allow probation to purchase yearly access. If applicable, it is hoped the on-line tool would be implemented by the end of 2011.

(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.

For 2011/2012 MCPD has trained and will continue to seek updated trainings for juvenile probation officers in the principles and techniques of Family Engagement, Participatory Case Planning, and Family Finding. The juvenile officer works with area FFAs to use what existing transitional housing programs that are currently available for youth aging out of foster care.

In 2011, MCPD initiated the communication with FFA Environmental Alternatives (EA) regarding a contract for youth to transition from the Transitional Housing Program (THP) to the Transitional Housing Plus Program (THP+). MCPD worked with MCDSS to develop a contract with Environmental Alternatives to utilize their Transitional Housing Plus Programs (THP+). The MCPD has had one youth qualify for the THP+, after obtaining the age of majority while in THP. The youth has not utilized this program at the date of this writing, but has the opportunity to return until the age of 24.

The MCPD has used and will continue to use the CWSOIP funds to provide transition youth with necessities for adulthood such as clothing, bicycles for transportation needs to and from jobs, appointments, college/school, etc. to basic living essentials of pots and pans and furniture. The funds have also been used to send the probation officer to trainings related to transition age youth. The MCPD hopes to use the CWSOIP funds in the future for continued training needs, as well as transportation, college materials (laptops, clothing, dorm needs, etc), and apartment/transitional housing needs such as furniture, deposits, and other related expenses.

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 been 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.

D. CWS/PROBATION SIP MATRIX

See SIP Matrix Attachments 15 through 27

SIP Component Template

SIP Component Template	
Outcome/Systemic Factor: USE OF POLICIES, PROCEDURES, AND TRAININGS RE FAMILY ENGAGEMENT TO REDUCE RECURRENCE OF MALTREATMENT AND RE-ENTRY INTO FOSTER CARE	
County's Current Performance: 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. Over the last twelve months since the completion of the 2010 SIP update the Safe Measures Data Extract Report for CFSR S1.1 shows there were no recurrences of maltreatment or re-entry into foster care January 2010 to March 2011.	
Improvement Goal 1.0 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	
Strategy 1.1 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"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A
	<p>Strategy Rationale 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.</p>
	<p>Assigned to</p> <p>Social Worker Supervisor Probation Officer Supervisor Social Worker Supervisor Probation Officer Supervisor Social Services Director Probation Officer Supervisor</p>
	<p>June 1, 2010 November 1, 2010 December 1, 2010</p>
Milestone	Timeframe
1.1.1 TDM Training.	
1.1.2 Assess county needs for TDM implementation.	
1.1.3 Acquire facilitator for TDM Policy and Procedure Training.	
Strategy 1.2 Write Family Engagement Policy and Procedures Train staff and partners to policy and procedures	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A
Strategy Rationale Build support and understanding among staff and partners that Family Engagement will reduce maltreatment and re-entry into foster care.	
Milestone	Timeframe
1.2.1 TDM Policy and Procedure Training.	January 1, 2011
1.2.2 Write TDM Policy and Procedures.	March 1, 2011
1.2.3 Review Policy and Procedures with Social Workers and Partners.	May 1, 2011
Assigned to	
Social Worker Supervisor Completed 6/3/10	
Social Worker Supervisor One P & P written	
Social Services Director Still to be accomplished	

Strategy 1.3

Develop a "solution-focused" approach designed to provide skills, techniques and an overarching practice methodology for child welfare social workers.

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

Strategy Rationale

Creating constructive working partnerships, while focusing on child safety, between child welfare practitioners, the families with whom they work, and community resources.

Milestone	Timeframe	Assigned to
1.3.1 Develop Signs of Safety Facilitation skills among social workers and probation officers.	January 1, 2012	Social Worker Supervisor
1.3.2 Signs of Safety training for Social Workers	March 1, 2012	Social Services Supervisor
1.3.3 Webinars/conference calls to access progress of objectives.	May 1, 2012	Social Services Director

2011 SIP Matrix Update Narrative

- Over the last twelve months since the completion of the 2010 SIP the Safe Measures Data Extract Report for CFSR S1.1 shows there were no recurrences of maltreatment from January 2010 to March 2011.
- The reasons for Modoc's positive performance are:
 - We believe that this is partly due to our small size and caseloads which makes it possible for social workers to spend more time on engaging families to address the issues that brought the family to the department's attention.
 - 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.
- Over the last several Quarters Safe Measures Data Extract Report indicates the Social workers have been late in their home visits; five, three, and one late visits respectively.
 - The action step to resolve the late visits by the social workers has been intense time management training by the Social Worker Supervisor, with reviews that are reviewed weekly by the Social Worker Supervisor.

Improvement Goal 2.0 USE OF SIGNS OF SAFETY/FAMILY ENGAGEMENT TO REDUCE RECURRENCE OF MALTREATMENT AND RE-ENTRY INTO OUT-OF-HOME CARE				
Strategy 2.1		CAPIT		Strategy Rationale
Engagement of the family members and creation of a shared focus to guide the work with all the stakeholders (child, family, worker, supervisor, etc.) use of family and child friendly language, and the interviewing tool for children.		CBCAP	PSSF	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.
Timeframe		N/A		Assigned to
2.1.1	Development of a non-threatening, affirmative inquiry approach.	March 1, 2012		Social Worker Supervisor
	Development of family and child friendly language tool.	March 1, 2012		Social Worker Supervisor
Strategy 2.2		CAPIT		Strategy Rationale
Critical Thinking to help all the stakeholders consider complicated and ambiguous case information and sort it into meaningful categories. The primary tool is Safety Mapping which is a process of organizing known information.		CBCAP	PSSF	A process that can be done with a family and it provides simple, easy to use, utilitarian definitions, thereby increasing clarity about the purpose of any particular CWS intervention;
Timeframe		N/A		Assigned to
2.2.1	Develop a Safety Mapping Tool	January 1, 2012		Social Worker Supervisor
	Develop an approach for error recognition to traditional CWS approaches.	May 1, 2012		Social Worker Supervisor
	Scheduled reviews to reinterpret any new case information.	June 1, 2012		Social Services Director
Strategy 2.3		CAPIT		Strategy Rationale
Enhancing Safety to provide a path for workers and families to engage in "rigorous, sustainable, on-the-ground child safety" efforts. and the		CBCAP	PSSF	To better achieve more favorable outcomes for children and families, which will reduce maltreatment and re-entry into foster care.
Timeframe		N/A		Assigned to
2.3.1	Safety Mapping practice developed by Social Workers.	February 1, 2012		Social Worker Supervisor Social Worker
	Development of a "detailed but short, behaviorally based" Danger Statement that provides a clear rationale for the involvement of CWS	March 1, 2012		

	<p>2.3.3 Guidelines developed from which well-formed goals agreed upon by all parties.</p> <p>2.3.4 Building of Safety Networks so parents can enlist the help of their families and the community in keeping their children safe.</p>	<p>March 1, 2012</p> <p>December 1, 2012</p>	<p>Social Worker Supervisor Social Worker</p> <p>Social Worker Supervisor Social Worker</p>
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2011 SIP Matrix Update Narrative

The adoption of the Signs of Safety approach fits well with the State of California CFSR PIP Strategies to:

- Expand use of participatory case planning strategies.
- expanding options and creating flexible services and supports to meet the needs of children and families,
- sustaining and expanding staff/supervisor training, and
- Strengthening the implementation of the statewide safety assessment system.

<p>Improvement Goal 3.0 USE OF FAMILY WELLNESS COURT TO REDUCE RECURRENCE OF MALTREATMENT AND RE-ENTRY INTO FOSTER CARE</p>			
<p>County's Current Performance: 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. Over the last twelve months since the completion of the 2010 SIP update the Safe Measures Data Extract Report for CFSR S1.1 shows there were no recurrences of maltreatment or re-entry into foster care January 2010 to March 2011.</p>			
<p>Strategy 3.1 Continue the process for multi-agency collaborative service delivery.</p>	<p>Strategy Rational 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.</p>	<p>Assigned to</p>	<p>Social Worker Supervisor Chief of Probation</p> <p>Social Worker Supervisor Chief of Probation</p>
<p>Milestone</p>	<p>3.1.1 Identify service partners such as TEACH, Health Services, SFHC, CalWORKs and create Treatment Team.</p> <p>3.1.2 Identify appropriate trainings in SoS, Solution-focused approaches, and other Family Engagement approaches and train Family Well-Being Court Treatment Team members.</p>	<p>Timeframe</p> <p>April 1, 2010 This milestone has been met by using the current DDTC treatment team.</p> <p>May 1, 2011 This milestone is being put forward by one year to include more intensive and comprehensive training for all team members.</p>	<p>Social Worker Supervisor Chief of Probation</p> <p>Social Worker Supervisor Chief of Probation</p>

	<p>3.1.3 Engage families and agencies on a "dual" tract that allows CWS and treatment team to respond differently.</p>	<p>May 1, 2011 This milestone is being adjusted to coincide with the end of team training.</p>	<p>Social Worker Supervisor Chief of Probation Family Well-Being Court Oversight</p>
<p>Strategy 3.2 Family Well-Being Court to start oversight implementation of multi-agency collaborative differential response service delivery.</p>	<p>Strategy Rationale Family Well-Being Court to review effectiveness of the collaboration and effectiveness of reducing maltreatment and re-entry into foster care.</p>		
<p>Milestone</p>	<p>3.2.1 Family Well-Being Court to start oversight of multi-agency collaborative service delivery.</p> <p>3.2.2 Review effectiveness of the collaboration in reducing maltreatment and re-entry into foster care by reviewing data from Safe Measures.</p> <p>3.2.3 Administrative oversight and corrections by Family Well-Being Court to enhance outcomes of the collaboration.</p>	<p>July 1, 2011</p> <p>July 1, 2011</p> <p>December 1, 2011</p>	<p>S W Supervisor Chief of Probation Family Well-Being Court Oversight</p> <p>S W Supervisor Chief of Probation Family Well-Being Court Oversight</p> <p>Family Well-Being Court</p>

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

- Ongoing training to SoS family engagement activities and policies.
- Memorandums of Understanding created between participating agencies and partners.
- Stable and adequate funding needed to meet improvement goals.

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 SoS and Solution Focused Approach 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 SoS family meetings to facilitate case plans and family engagement.
- Willingness of partners to actively provide after-care once youth have left the system.
- Partnering with parent mentors in family meetings when appropriate.

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

- None at this time.

2011 SIP Matrix Update Narrative

- In 2009, Modoc County had applied for a Federal Drug Court Enhancement Grant to expand services beyond the current targeted families in which it is required that a child be a dependent of the Court. The application was denied but MCDSS has continued to seek ways to develop the Family Wellness Court as an alternative response for at-risk families where the abuse/neglect does not rise to the level of needing court intervention. It is possible that changes in funding and requirements brought about by Public Safety Realignment of 2011 will allow us to use the funds for those families.

SIP Component Template

Outcome/Systemic Factor: PROVIDE FOR THE SAFETY AND WELL BEING OF NATIVE AMERICAN CHILDREN THROUGH THE DEVELOPMENT OF COLLABORATIVE RELATIONSHIPS WITH LOCAL NATIVE FAMILIES, TRIBES AND NATIVE AMERICAN SERVICE PROVIDERS

County's Current Performance For the period of 10/1/10 through 9/31/11 there has only been one ICWA placement.

Improvement Goal 1. Involvement of ICWA person from pre-detention throughout the life of the case

Strategy 4. 1

Joint training of tribal members with Social Workers and Probation Officers on ICWA law and procedure as well as cultural competency.

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

Strategy Rationale

Joint training will bridge cultural fears, mistrust and organizational barriers.

Milestone	Timeframe	Assigned to				
		CAPIT	CBCAP	PSSF	N/A	
4.1.1 ICWA, CWS, Probation Trainings.	June 1, 2012					Social Worker Supervisor ICWA Person(s) Chief of Probation
	July 1, 2012					Social Worker Supervisor ICWA Person(s) Chief of Probation
	July 1, 2012					Social Worker Supervisor ICWA Person(s) Chief of Probation
Strategy 4. 2		Strategy Rationale				
CWS, Probation engage tribes in meetings and policy development.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	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.
4.2.1. ICWA, CWS & Probation representatives engaged in meetings to enhance communication and collaboration.	Timeframe	May 1, 2012				Social Worker Supervisor ICWA Person(s) Probation Supervisor
		Assigned to				

	<p>4.2.2 ICWA, CWS, Probation representatives write introduction letter.</p>	<p>July 1, 2012</p>	<p>Social Worker Supervisor ICWA Person(s) Probation Supervisor</p>
	<p>4.2.3. ICWA, CWS, Probation representatives have an annual goodwill breakfast to promote goodwill.</p>	<p>August 1, 2012</p>	<p>Social Services Director Chief of Probation Tribal Leadership</p>

<p>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</p> <ul style="list-style-type: none"> • Continue to practice and improve best practices methods for ICWA family engagement. • Ongoing cultural competency training and awareness.
<p>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</p> <ul style="list-style-type: none"> • Tribal and State of California ICWA training and literature.
<p>Identify roles of the other partners in achieving the improvement goals.</p> <ul style="list-style-type: none"> • Participation in Tribal, CWS, Probation meetings and provision of services as indicated by the Tribe, CWS and Probation.
<p>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</p> <ul style="list-style-type: none"> • None at this time.
<p>2011 SIP Matrix Update Narrative</p> <ul style="list-style-type: none"> • In 2002, 60% of CWS referrals were native. Over the next nine years CWS/Probation have been able to successfully engage individual native families to the point that in 2011 there was only one ICWA CWS placement and six probation placements. As stated in the program narrative both CWS and Probation have made repeated attempts to contact tribal leadership for the purposes of program and policy development; however because of the very small and disjointed tribal leadership structure there has been no response to our outreach. • This is why CWS and Probation have made efforts to reach individual families, which has been successful. • Family members and family units have been able to get together to help in the decision making process for place of children with other family members and to refer them to other services that best meets the family's needs. • Probation will develop a personal notification letter (customized to each case) introducing the Probation Department to try and engage the family and asking the family: what needs and services they would suggest to help the situation; if there are any family issues that need to be discussed; and if there is any other information to discuss with regards not only to the case but within the community needs to be discussed.

SIP Component Template

SIP Component Template		Outcome/Systemic Factor: IMPLEMENT POLICIES, PROCEDURES, AND TRAINING SO SOCIAL WORKERS UNDERSTAND AND UTILIZE THE FULL SCOPE OF THE CONCURRENT PLANNING PROCESS TO ENSURE TIMELY ADOPTIONS		County's Current Performance: For the last twelve months Modoc County's Concurrent Planning is 100% where children have been detained and where custody of the child has not been given to a parent. For the same last twelve month period Modoc County has had 0 adoptions.		Improvement Goal 1.0 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.	
Milestone	Strategy 5.1 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.	CAPIT		Strategy Rationale		Assigned to	Social Worker Supervisor Probation Officer Supervisor
		CBCAP	PSSF	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.			
Milestone	5.1.1 Gather available literature on concurrent planning and make available to CWS staff.	January 1, 2010 Completed 6/2/10		Assigned to	Social Worker Supervisor Probation Officer Supervisor		
	5.1.2 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		Assigned to	Social Services Director Chief of Probation		
	5.1.3 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.		Assigned to	Social Worker Supervisor Probation Officer Supervisor		
Milestone	5.1.4 Re-establish on-going relationship with state adoptions and usage of their staff and resources in the development of concurrent case plans.	January 1, 2010 Completed 6/2/2010 Quarterly meetings now being held on a regular basis, with input being incorporated into the case plans.		Assigned to	Social Worker Supervisor Probation Officer Supervisor		
	5.1.5 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, mental health, alcohol and drug, office of education and strong family health center, attorneys and judges.	May 1, 2010 Training completed 6/2/10 by UC Davis all of the partners scheduled to participate attended the training.		Assigned to	Social Services Director Chief of Probation		
Milestone	5.1.6 Ongoing training by supervisors to staff on concurrent planning	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.		Assigned to	Social Worker Supervisor Probation Officer Supervisor		

<p>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</p> <ul style="list-style-type: none"> • None at this time.
<p>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</p> <ul style="list-style-type: none"> • Ongoing training material and actual training from UC Davis and State of California.
<p>Identify roles of the other partners in achieving the improvement goals.</p> <ul style="list-style-type: none"> • Their agreement to participate in Concurrent Planning training, adoptions workers, CASA volunteers, foster parents and agencies, attorneys, and judges etc.
<p>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</p> <ul style="list-style-type: none"> • None at this time.
<p>2011 SIP Matrix Update Narrative</p> <ul style="list-style-type: none"> • The on-going partnership with the state's probation unit continues a routine quarterly basis or sooner if necessary. Because of budget restraints these case meetings are being held via conference call. • The social worker supervisor is working individually with each SW's to include compressive concurrent planning in each case, and to review the concurrent plans with the social workers on an ongoing basis. • SW's have incorporated concurrent planning with immediate family, relatives and friends in the development of family engagement participatory case plan, which includes a safety plan for every child..

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, in 2011 15 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"/> CAPIT	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.	
	<input type="checkbox"/> CBCAP	<input type="checkbox"/> PSSF	<input type="checkbox"/> N/A
Milestone	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.	Assigned to 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 including clothing and incidentals for youth. That will include further Family Engagement, 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 network, medical and legal. Establish collaborations, MOU's with key systems providers (courts, CWS, Probation, ILP, Mental Health, Public Health, Housing etc).	January 1, 2011 Probation officers are now successfully working with youth at the schools, Collaboration and MOU's still need development with ILP at T.E.A.C.H. Inc. and CWS to ensure delivery.	Social Services Director Chief of Probation Social Worker Supervisor Probation Officer Supervisor and partners
Strategy 6.2 Create multi-agency collaborations to give trainings and assist youth after they leave out-of-home care after the age 18.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	Strategy Rationale Partnerships from service providers, such as ILP program, schools, housing, job referral network, medical and legal are essential to the success of this program.	

Milestone	6.2.1 Provide social worker, probation officer, and collaborative partner training for program implementation, including Family Finding.	Timeframe	January 1, 2011 Completed	Assigned to	Social Worker Supervisor Probation Officer Supervisor
	6.2.2 Multi-agency plan developed to provide identified services and follow-up support.		April 1, 2011		Social Worker Supervisor Probation Officer Supervisor and partners
	6.2.3 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
Strategy 6.3 Maximize potential of program and conduct program review.			<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	Strategy Rationale Ensuring program sustainability and collaborative partnerships to enhance and continue this transitional program; thus lessening the chances to reenter the system.	
Milestone	6.3.1 All foster and ward children exiting in the system offered transitional services	Timeframe	January 1, 2012	Assigned to	Social Worker Supervisor Probation Officer Supervisor and partners
	6.3.2 Program review/evaluation to make systemic changes as necessary so services are continued.		April 1, 2012		Social Worker Supervisor Probation Officer Supervisor and partners
	6.3.3 Fewer youth reenter the legal/court system because transitional services were offered.		July 1, 2012		Social Services Director Chief of Probation

Describe any additional systemic factors needing to be addressed that support the improvement plan goals.	<ul style="list-style-type: none"> All new program. Policy and Procedures, MOU's, Funding, Partner relationships and their funding, Transportation, Ongoing program evaluation.
Describe educational/training needs (including technical assistance) to achieve the improvement goals.	<ul style="list-style-type: none"> Ongoing training material and actual training, State of California, ILP Program, Department of Education, Public Health, Housing etc.

<p>Identify roles of the other partners in achieving the improvement goals.</p> <ul style="list-style-type: none"> ILP Program, Department of Education, Public Health, Housing (various), Mental Health, etc.
<p>Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.</p> <ul style="list-style-type: none"> None at this time.
<p>2011 SIP Matrix Update Narrative</p> <ul style="list-style-type: none"> Probation has made good success in starting their program delivering services to all youth existing foster care. The collaborative partnership has worked very well with ILP and the territorial range that transitional services are now offered extends far beyond the local Susanville/Redding communities that had been offered in previous years to Sacramento.. OIP monies are being used by Probation to obtain additional training to facilitate the transitional use program, policy development and MOU's between service partners still needs to be completed.. CWS and probation still need to develop policy and procedures to address partnerships, common goals and mutual outcomes. This outcome should be achieved through the new Matrix Strategy 7.1 (see below). Milestones 6.2.2 and 6.2.3 for multi-agency meetings to indentify, refine and evaluate goals/objectives will also be addressed in strategy 7.1 (see below). The Probation Department continues to seek out and attend trainings related to Family Engagement, Concurrent Planning, Participatory Case Planning, and placement/transition age youth. Collaborate and Implement AB 12.

<p>Outcome/Systemic Factor: A NEW 2012 SIP OUTCOME/SYSTEMIC FACTOR TO FACILITATE INTERAGENCY COLLABORATION BETWEEN CWS AND PROBATION FOR W&I CODE 241.1 JOINT ASSESSMENT CASES.</p>											
<p>County's Current Performance: N/A see narrative below.</p>											
<p>Improvement Goal 1.0 Establish a regularly scheduled meeting between CWS, Probation, Judges, Drug Court Coordinator, District Attorney, CWS Attorney and other affected agencies to establish a guiding principle of communication and cooperation between CWS and Probation over the issue of joint assessment of cases and jurisdictional issues over any particular case where there may be a question of who has jurisdiction over any particular case.</p>											
<p>Strategy 7.1 Create quarterly meeting between CWS, Probation, Judges, Drug Court Coordinator, attorney and other agencies for the purpose of discussing and resolving jurisdictional issues over CWS/Probation 241.1 Joint Assessment Cases and/or any other cases where</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>CAPIT</td> <td>Strategy Rationale</td> </tr> <tr> <td><input type="checkbox"/></td> <td>CBCAP</td> <td rowspan="3"> <ul style="list-style-type: none"> Resolve quickly any issues over any particular case where there may be a question of who has jurisdiction over that case so as to foster the safety and wellbeing of Modoc County youth. </td> </tr> <tr> <td><input type="checkbox"/></td> <td>PSSF</td> </tr> <tr> <td><input type="checkbox"/></td> <td>N/A</td> </tr> </table>	<input type="checkbox"/>	CAPIT	Strategy Rationale	<input type="checkbox"/>	CBCAP	<ul style="list-style-type: none"> Resolve quickly any issues over any particular case where there may be a question of who has jurisdiction over that case so as to foster the safety and wellbeing of Modoc County youth. 	<input type="checkbox"/>	PSSF	<input type="checkbox"/>	N/A
<input type="checkbox"/>	CAPIT	Strategy Rationale									
<input type="checkbox"/>	CBCAP	<ul style="list-style-type: none"> Resolve quickly any issues over any particular case where there may be a question of who has jurisdiction over that case so as to foster the safety and wellbeing of Modoc County youth. 									
<input type="checkbox"/>	PSSF										
<input type="checkbox"/>	N/A										

there may be a jurisdictional problem.				
Milestone	7.1.1 Identify participants and location for this meeting.	Timeframe	Assigned to	Social Worker Supervisor Probation Officer Supervisor
	7.1.2 Hold first meeting with an agenda addressing the jurisdictional and other issues to be addressed.		January 1, 2012	Social Services Supervisor Probation Officer Supervisor
	7.1.3 Update MOU between CWS and Probation, to include AB12.		April 1, 2012	Social Services Supervisor Probation Officer Supervisor
			June 1, 2012	Social Services Supervisor Probation Officer Supervisor
Describe any additional systemic factors needing to be addressed that support the improvement plan goals.				
<ul style="list-style-type: none"> • None at this time 				
Describe educational/training needs (including technical assistance) to achieve the improvement goals.				
<ul style="list-style-type: none"> • Ongoing training material and review of any legislative changes to 421.1, AB 12 or any new legislation affecting CWS/Probation Joint Assessment of Cases. 				
Identify roles of the other partners in achieving the improvement goals.				
<ul style="list-style-type: none"> • Willingness of judges, District Attorney, CWS Attorney, Drug Court Coordinator, CWS and Probation to meet routinely to develop an interagency MOU between CWS and Probation, create an understanding of mutual understanding between agencies to solve jurisdiction issues between agencies and discuss ongoing issues as they may arise to foster the safety and wellbeing of affected Modoc County youth. 				
Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.				
<ul style="list-style-type: none"> • AB 12 Beginning January 1, 2012, 1 in 5 youth who "age out" nationally will receive the support of the foster care system to age 21. AB 12 would ensure that California opts into these essential federal funding opportunities. AB 12 would: 1) re-enact our existing Kin-GAP program to align it with new federal requirements and 2) provide transitional support to qualifying foster youth until age 21. 				
2011 SIP Matrix Update Narrative				
<ul style="list-style-type: none"> • In the past there has been circumstances where communication between CWS and Probation has been missing over which one of the two departments shall have primary responsibility for supervision of the children. This lack of communication has possibly adversely affected the children under the supervision of CWS or Probation. It is the goal of this strategy to establish ongoing regular meetings between all affected agencies, judges, courts etc. to resolve this issue by establishing MOU's between the agencies, fostering an atmosphere of communication and cooperation between agencies, and reviewing and incorporating new legislation, such as, AB 12 into the collaborative relationship between CWS and Probation. 				

II. CAPIT/CBCAP/PSSF 2011 Update

Annual Report Narrative Template **Reporting Period of: July 1, 2010 through June 30, 2011**

A Microsoft word document containing the template with instructions for the narrative report can be downloaded from the California Department of Social Services (CDSS) County Extranet:
<http://www.cdsscounties.ca.gov/>

The narrative report required by the Office of Child Abuse Prevention (OCAP) is used to satisfy state and federal requirements by the U.S. Department of Health and Human Services, Administration on Children, Youth and Families.

The narrative template has the following sections:

- Section I: OCAP (Prevention and Early Intervention) Plan
- Section II: Child Abuse Prevention Council (CAPC)
- Section III: Quality Assurance
- Section IV: Community-Based Child Abuse Prevention (CBCAP)

Complete the template portions of this report.

- *Yellow highlighted areas indicate that a selection is required per the instructions.*
- *Grey highlighted areas indicate where a narrative response is required. (Unless otherwise noted, the maximum allowed in a text box is 250 characters.)*

Type the county name in the space provided:

Modoc

SECTION I: THE OCAP (PREVENTION AND EARLY INTERVENTION) PLAN

1. *Since the last reporting period have there been any changes to the OCAP Plan? (Changes include a different: service provider, service activity, prevention/early intervention network development activity, or public awareness activity.)*

Yes: If, "Yes," proceed to number 2.

No: If, "No," proceed to Section II.

2. *Has the OCAP Plan been integrated into the County Self Assessment (CSA) and System Improvement Plan (SIP)? (If the county is currently in the process of developing their SIP indicate "No" below.)*

Yes: If, "Yes," proceed with the instructions below.

Submit a revised and "complete" Child Abuse Prevention Intervention and Treatment (CAPIT)/ CBCAP/ Promoting Safe and Stable Families (PSSF) Services and Expenditure Summary workbook and a ½ page program description of all the current services (program/practice) on a separate word document. Include in the program description: (1) the reason for the change in the type of service/activity or service provider (contract/ vendor) and (2) a description of how the change strengthens existing services to support children and families. Each document will be used to replace the previous documents submitted.

Email both to OCAP-PND@dss.ca.gov Proceed to section II.

3. If the OCAP Plan **has not been** integrated into the CSA and SIP, and there was a change to the OCAP Plan, complete questions 1-8 below for each type of **new service activity, prevention/early intervention network development activity, public awareness/outreach activity or new service provider (contract/vendor)**. If more space is needed, cut and paste the "Change to OCAP Plan" questions 1 thru 8 below and add it to a separate word document, titled with your county name. Submit the word document with this narrative.

Change to OCAP Plan

1. Reason for the change in the type of activity or service provider (contract/vendor):

Input Text Here

2. Name of the service provider (contract/vendor):

Input Text Here

3. How does the change in the type of activity or service provider (contract/vendor) strengthen existing services to support children and families: (500 characters max.)

Input Text Here

4. Is the service provider (contract/vendor) a new or current provider:

Current Service Provider

New Service Provider

5. Description of the new service, prevention/early intervention network development activity, or public awareness/outreach activity offered by the new or current service provider (contract/vendor): (500 characters max.)

Input Text Here

6. Type of client to be served:

Input Text Here

7. What funding source(s) will be used: CAPIT, CBCAP, and/or PSSF:

Input Text Here

8. What other funding sources will be used:

Input Text Here

Change to OCAP Plan

1. Reason for the change in the type of activity or service provider (contract/vendor):

Input Text Here

2. Name of the service provider (contract/vendor):

Input Text Here

3. How does the change in the type of activity or service provider (contract/vendor) strengthen existing services to support children and families: (500 characters max.)

Input Text Here

4. Is the service provider (contract/vendor) a new or current provider:

Current Service Provider

New Service Provider

5. Description of the new service, prevention/early intervention network development activity, or public awareness/outreach activity offered by the new or current service provider (contract/vendor): (500 characters max.)

Input Text Here

6. Type of client to be served:

Input Text Here

7. What funding source(s) will be used: CAPIT, CBCAP, and/or PSSF:

Input Text Here

8. What other funding sources will be used:

Input Text Here

SECTION II: CHILD ABUSE PREVENTION COUNCIL (CAPC)

1. Type of Organization

Select the type of organization that best describes the CAPC (Welfare and Institutions Code (W&IC) Section 18983.5) during the reporting period.

- Incorporated non-profit corporation
- Independent organization within county government
- Comparably independent organization as determined by the OCAP

2. CAPC Membership

Below, select the agencies and individuals that represented the Board of Supervisors (BOS) designated CAPC during the reporting period. If other is selected, identify the agency represented.

- | | |
|-------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Adult former victims of child abuse & neglect | <input type="checkbox"/> Head Start |
| <input checked="" type="checkbox"/> Alcohol and Drug | <input checked="" type="checkbox"/> Law Enforcement |
| <input type="checkbox"/> Attorney (Private/Public) | <input type="checkbox"/> Licensing Agency |
| <input type="checkbox"/> Board of Supervisors (BOS) Member | <input type="checkbox"/> Medical Health |
| <input checked="" type="checkbox"/> Court Appointed Special Advocate (CASA)/
Advocates | <input checked="" type="checkbox"/> Mental Health |
| <input checked="" type="checkbox"/> Child Care Agencies/Organizations | <input checked="" type="checkbox"/> Organizations for the Disabled (Private/Public) |
| <input checked="" type="checkbox"/> Child Welfare Services (CWS) | <input type="checkbox"/> Parents/Consumer (Foster Family Agency (FFA), Foster,
Guardian, Adoptive Parent) |
| <input type="checkbox"/> Civic Organization | <input type="checkbox"/> School (Private/Public; Kinder-College) |
| <input checked="" type="checkbox"/> Community-Based Agencies | <input type="checkbox"/> Probation |
| <input checked="" type="checkbox"/> Community Volunteers | <input type="checkbox"/> Private Non-Profit Service Provider |
| <input type="checkbox"/> Coroner | <input type="checkbox"/> Public for Profit Sector (Business, Media) |
| <input type="checkbox"/> Court | <input checked="" type="checkbox"/> Public Health |
| <input type="checkbox"/> District Attorney | <input type="checkbox"/> Religious Community |
| <input checked="" type="checkbox"/> Domestic violence | <input type="checkbox"/> Tribe/Indian Child Welfare Act (ICWA) |
| <input checked="" type="checkbox"/> Early Childhood Council, Collaborative | <input type="checkbox"/> Youth |
| <input type="checkbox"/> Family Advocate | |
| <input type="checkbox"/> First 5 | |
| <input type="checkbox"/> Other: Public Agency: <u>Input Text Here</u> | |
| <input type="checkbox"/> Other: <u>Input Text Here</u> | |

3. CAPC Activities

Below, select each area where the CAPC was an active participant in the county's child abuse and neglect prevention and early intervention efforts during the reporting period. Use "other" only in the event the activity does not fit within a listed category. (Note: an asterisk (*) denotes there is more information below.)

Primary Prevention Activities

Secondary, Tertiary and Other Prevention

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> Provision of public awareness | <input checked="" type="checkbox"/> Provided mandated reporter training |
| <input checked="" type="checkbox"/> Provided information & referral to the general population or families at risk of entering CWS | <input checked="" type="checkbox"/> Provided information & referral to families receiving CWS |
| <input checked="" type="checkbox"/> Provided outreach activities | <input type="checkbox"/> Direct service provider for family preservation*** |
| <input checked="" type="checkbox"/> Provided direct services* to at risk clients for prevention of child abuse and neglect | <input type="checkbox"/> Direct service provider for family reunification*** |
| <input checked="" type="checkbox"/> Provided Child Abuse Prevention Month Activities | <input type="checkbox"/> Direct service provider for pre- or post adoption |
| <input type="checkbox"/> Differential Response – path I | <input type="checkbox"/> Differential Response – path II |
| <input type="checkbox"/> CAPC is a Family Resource Center (FRC) | <input type="checkbox"/> Differential Response – path III |
| <input type="checkbox"/> Developed & supported provider networks including FRCs | <input type="checkbox"/> Provided parent leadership training |
| <input type="checkbox"/> Provided education, training & development** to service providers (professionals) including FRCs | <input type="checkbox"/> Contract management and oversight activities of contracted providers |
| <input checked="" type="checkbox"/> Provided child safety training | <input checked="" type="checkbox"/> Death Review Team |
| <input type="checkbox"/> Planning and advisory activities for service improvement | <input type="checkbox"/> Multi-Disciplinary Interview Center (MDIC) |
| <input checked="" type="checkbox"/> Parent engagement and leadership | |
| <input type="checkbox"/> County needs assessment | |
| <input type="checkbox"/> CBCAP peer review activities | |
| <input checked="" type="checkbox"/> CAPC development (Regional Meetings) | |
| <input type="checkbox"/> Interagency Coordination Forum | |
| <input type="checkbox"/> Other: <input type="text" value="Input Text Here"/> | |
| <input type="checkbox"/> Other: <input type="text" value="Input Text Here"/> | |
| <input type="checkbox"/> Other: <input type="text" value="Input Text Here"/> | |

*Direct services include the provision of: skills development, mentoring, child care, respite, parent education/support, therapy, counseling, crisis line, application assistance, etc. to clients.

**Education, training & development of service providers includes: presentations, workshops, classes, etc. for the development or provision of technical assistance.

***Family Preservation and Family Reunification are components of child welfare services.

4. CAPC Financial Support

Below, select each of the funding sources used to support the local CAPC during the reporting period.

- | | |
|--------------------------------------------------------------|------------------------------------------------------------------------------|
| <input type="checkbox"/> CBCAP | <input type="checkbox"/> Kids Plate |
| <input checked="" type="checkbox"/> CAPIT | <input type="checkbox"/> Other: <input type="text" value="Input Text Here"/> |
| <input type="checkbox"/> PSSF Family Support Funding | <input type="checkbox"/> Other: <input type="text" value="Input Text Here"/> |
| <input type="checkbox"/> County Children's Trust Fund (CCTF) | <input type="checkbox"/> Other: <input type="text" value="Input Text Here"/> |

SECTION III: QUALITY ASSURANCE

As the BOS designated lead agency, the county is responsible for the administration of funds and program oversight, including quality assurance of prevention/early intervention programs funded through CAPIT/CBCAP/PSSF programs. For purposes of this report, quality assurance refers to a set of activities for the systematic monitoring and evaluation of the various aspects of a project, service, or facility to ensure that standards of quality are being met.

Research and evaluation are critical components in the quality assurance of the child and family service provision. California counties engage in a variety of research and evaluation activities on programs that span the continuum of child welfare services. Please attach any executive summaries or abstracts of research evaluations of CAPIT/CBCAP/PSSF supported programs completed during the reporting period, if applicable.

1. Quality Assurance of Service Delivery

Report one service/program for each funding source received. If the county combines CBCAP and CAPIT funds for one service/program do not report duplicate information. Check the box above Table 1 and complete Table 1, question 1-8, then proceed to Table 3. If there are multiple service providers for the same program, report on only one service provider.

Select this box if the county utilizes both CBCAP and CAPIT to fund one program/practice.

TABLE 1 – CBCAP FUNDS

1. Name of Service Provider:

Welcome Baby

2. What type of service does this provider deliver: (500 characters max.)

Welcome Baby is a home visitation program performed by a licensed LVN who provides education, support, and referral services to families with children 0-5, including children with disabilities. The program consists of two parts: a well baby education component and an at-risk infant program.

3. List other funding source(s) that support this program:

The program is also supported with in-kind funds from Early Head Start.

4. Describe the unmet need as determined/identified in the county's current OCAP Plan or CSA that support the funding of this service/program: (550 characters max.)

Due to the large rural area in Modoc County families are often time isolated from friends, family and services. Many families are not aware of the resources available in the community and they lack transportation to the available services.

5. How did the county evaluate the service provider's service delivery system:

Evaluation of the program is on-going. The program staff provides a monthly report to the CAPC.

6. How did the county measure the service/program's effectiveness: (1000 characters max.)

The increase or change in knowledge of parents education on infant care, and increase in knowledge of available resources, decrease in isolation.

7. Discuss the progress achieved by this service/program toward meeting the unmet need identified above during the reporting period: (500 characters max.)

The Welcome Baby program provides family centered support, and assists families with young children. In addition to the home visiting and referral component the program offered child birth classes, play groups, infant massage classes and transportation to services.

8. How does the county ensure that client satisfaction is being measured: (500 characters max.)

Families participating in services are asked to participate in an evaluation while services are being provided. Participants are also asked to take part in a pre and post assesment of the education services they are receiving. Staff evaluates the assesments and shares the findings with the CAPC.

9. If any concerns were discovered that required correction, what steps did the county take to ensure the concerns were addressed:

N/A

10. Would the county recommend this service provider to another county interested in this service:

Yes.

Complete the following questions regarding quality assurance for one service/program funded with only **CAPIT FUNDS** during the reporting period.

TABLE 2 – CAPIT FUNDS

1. Name of Service Provider:

Families Matter Parenting Program

2. What type of service does this provider deliver: (500 characters max.)

Facilitate age appropriate parenting education to voluntary and mandated families in Modoc County including co-parenting, parent advocacy, self sufficiency and life management skills.

3. List other funding source(s) that support this program:

4. Describe the unmet need as determined/identified in the county's current OCAP Plan or CSA that support the funding of this service/program: (550 characters max.)

Lack in parenting education, support, and resources.

5. How did the county evaluate the service provider's service delivery system:

Evaluation of the program in on-going. The program staff provides a monthly report to the CAPC. Changes in curriculum and program length are adjusted based on the need of clients.

6. How did the county measure the service/program's effectiveness: (1000 characters max.)

Successful number of parents participating in parenting classes, increase in knowledge of parenting skills among parents, successful number of parents applying skills, successful number of parents with high participation satisfaction.

7. Discuss the progress achieved by this service/program toward meeting the unmet need identified above during the reporting period: (500 characters max.)

Families Matter provided one on one and group based parenting classes and well as co-parenting classes for mandated and non-mandated families in Modoc County.

8. How does the county ensure that client satisfaction is being measured: (500 characters max.)

Families participating in services are asked to participate in an evaluation while services are being provided. Families are also asked to take part in a pre and post assesment of the education services they are receiving. Staff evaluate the assesments and shares the findings with the CAPC.

9. If any concerns were discovered that required correction, what steps did the county take to ensure the concerns were addressed:

N/A

10. Would the county recommend this service provider to another county interested in this service:

Yes.

*If the county combines all PSSF funds to implement one service/program do not report duplicate information under each of the PSSF components. Check the box above Table 3 and complete Table 3, question 1-8 then proceed to Section IV. However, if the county funds various services/programs under each of the PSSF components, report **one** service/program for each PSSF component by completing Table 3-6, question 1-8. If there are multiple service providers for the same program, report on only one service provider.*

Select this box if the county utilizes ALL PSSF FUNDS to fund only one program/practice.

TABLE 3 – PSSF FAMILY PRESERVATION FUNDS

1. Name of Service Provider:

Family Service Worker/ Family Preservation Liaison/ Dependency Court Coordinator

2. What type of service does this provider deliver: (500 characters max.)

Support CPS social workers and families with case management activities for both voluntary and mandated clients, supervise parent/child visits and give appropriate feedback, assist with drug testing, transporation of clients, deliver in-home parenting and home management training, interface with other service agenciesand clients on service plan.

3. List other funding source(s) that support this program:

CWS and funding from Modoc County Drug and Alcohol.

4. Describe the unmet need as determined/identified in the county's current OCAP Plan or CSA that support the funding of this service/program: (550 characters max.)

Insure children are protected from abuse and neglect, children are safely maintained in their own homes whenever possible, children have permanency and stability in their living situations, the continuity of family relationships and connection is preserved for children, families have enhanced capacity to provide for their children's needs, children receive appropriate services to meet their eduactional, physical and mental health needs.

5. How did the county evaluate the service provider's service delivery system:

Evaluation of the program in on-going. The program staff provides a monthly report to the CAPC and PSSF liaison.

6. How did the county measure the service/program's effectiveness: (1000 characters max.)

Successful number of parents receiving prevention services, successful number of appropriate agencies working collaboratively to help families.

7. Discuss the progress achieved by this service/program toward meeting the unmet need identified above during the reporting period: (500 characters max.)

The PSSF staff person worked closely with CPS and the courts to provide services the voluntary and mandated families with the goal of keeping families together and keeping children protected from abuse and neglect. The staff person also worked to assure that children have a safe permanent living situation.

8. How does the county ensure that client satisfaction is being measured: (500 characters max.)

There is no formal process for ensuring client satisfaction. The PSSF staff person works closely with other collaborating agencies in the county. The collaborating agencies meet on a regular basis to dicuss what is working well and what needs to be changed if anything.

9. If any concerns were discovered that required correction, what steps did the county take to ensure the concerns were addressed:

N/A

10. Would the county recommend this service provider to another county interested in this service:

Yes.

*Complete the following questions regarding quality assurance for a service/program funded with **PSSF FAMILY SUPPORT FUNDS** during the reporting period.*

TABLE 4 -- PSSF FAMILY SUPPORT FUNDS

1. Name of Service Provider:

[REDACTED]

2. What type of service does this provider deliver: (500 characters max.)

[REDACTED]

3. List other funding source(s) that support this program:

[REDACTED]

4. Describe the unmet need as determined/identified in the county's current OCAP Plan or CSA that supports the funding of this service/program: (550 characters max.)

[REDACTED]

5. How did the county evaluate the service provider's service delivery system:

[REDACTED]

6. How did the county measure the service/program's effectiveness: (1000 characters max.)

[REDACTED]

7. Discuss the progress achieved by this service/program toward meeting the unmet need identified above during the reporting period: (500 characters max.)

██████████

8. How does the county ensure that client satisfaction is being measured: (500 characters max.)

██████████

9. If any concerns were discovered that required correction, what steps did the county take to ensure the concerns were addressed:

██████████

10. Would the county recommend this service provider to another county interested in this service:

██████████

*Complete the following questions regarding quality assurance for a service/program funded with **PSSF TIME - LIMITED FAMILY REUNIFICATION FUNDS** during the reporting period.*

TABLE 5 – PSSF TIME - LIMITED FAMILY REUNIFICATION FUNDS

1. Name of Service Provider:

██████████

2. What type of service does this provider deliver: (500 characters max.)

██████████

3. List other funding source(s) that support this program:

██████████

4. Describe the unmet need as determined/identified in the county's current OCAP Plan or CSA that supports the funding of this service/program: (550 characters max.)

██████████

5. How did the county evaluate the service provider's service delivery system:
6. How did the county measure the service/program's effectiveness: (1000 characters max.)
7. Discuss the progress achieved by this service/program toward meeting the unmet need identified above during the reporting period: (500 characters max.)
8. How does the county ensure that client satisfaction is being measured: (500 characters max.)
9. If any concerns were discovered that required correction, what steps did the county take to ensure the concerns were addressed:
10. Would the county recommend this service provider to another county interested in this service:

*Complete the following questions regarding quality assurance for a service/program funded with **PSSF ADOPTION PROMOTION AND SUPPORT FUNDS** during the reporting period.*

TABLE 6 – PSSF ADOPTION PROMOTION AND SUPPORT FUNDS

1. Name of Service Provider:
2. What type of service does this provider deliver: (500 characters max.)
3. List other funding source(s) that support this program:
4. Describe the unmet need as determined/identified in the county's current OCAP Plan or CSA that supports the funding of this service/program: (550 characters max.)
5. How did the county evaluate the service provider's service delivery system:
6. How did the county measure the service/program's effectiveness: (1000 characters max.)
7. Discuss the progress achieved by this service/program toward meeting the unmet need identified above during the reporting period: (500 characters max.)
8. How does the county ensure that client satisfaction is being measured: (500 characters max.)
9. If any concerns were discovered that required correction, what steps did the county take to ensure the concerns were addressed:
10. Would the county recommend this service provider to another county interested in this service:

SECTION IV: COMMUNITY-BASED CHILD ABUSE PREVENTION (CBCAP)

1. ACTIVITIES

Describe the extent of collaborations with other county, public, and private entities to maximize the use of CBCAP funds with various federal, state, local, and private funds to enhance child abuse prevention programs/activities. Identify and describe at least one CBCAP outcome measured during the reporting period for each of the activities.

For two activities funded with CBCAP funds, complete the following tables.

ACTIVITY 1

Select the activity to be reported:

- Service/Program Activity Public Awareness Activity Prevention Network Activity

Name of the program/activity:

Infant Massage Classes

Name of the service provider:

Welcome Baby

Description of the program/activity (Include the specific services provided): (1075 characters max.)

The Welcome Baby staff provided infant massage classes in various locations in the county. Parents who spoke spanish were able to participate with the services of a translator. Various agencies collaborated to provide a facility, transportation of families, and child care.

List the agencies that collaborated to develop/support this program/activity:

Early Head Start, Families Matter Parenting Program, Modoc County Public Health Department.

List the funding sources that were used to leverage CBCAP funds to make this program/activity possible:

In kind funds from Early Head Start, Public Health, and Families Matter Parenting Program.

What were the outcomes that were measured, check all that apply:

- Engagement Short-term Intermediate
- Long-term

Describe how the outcome was measured and the results. (500 characters max.)

Parents were asked to complete a pre and post test as well as a evaluation of the service and service provider. We found that parents gained valuable skills including how to nurture their child, knowledge of infant development, and decreased isolation for parents living in our rural communities.

ACTIVITY 2

Select the activity to be reported:

- Service/Program Activity Public Awareness Activity Prevention Network Activity

Name of the program/activity:

Input Text Here

Name of the service provider:

Welcome Baby

Description of the program/activity (Include the specific services provided): (1075 characters max.)

Input Text Here

List the agencies that collaborated to develop/support this program/activity:

Input Text Here

List the funding sources that were used to leverage CBCAP funds to make this program/activity possible:

Input Text Here

What were the outcomes that were measured, check all that apply:

- Engagement Short-term Intermediate
- Long-term

Describe how the outcome was measured and the results. (500 characters max.)

Input Text Here

2. Client Satisfaction

- a. Below, provide a case specific example of a parent/consumer who benefited from CBCAP services during the reporting period. Include the services the parent/consumer received and the change in the parent/consumer's behavior that demonstrated how the parent/consumer benefited from the service. Include the name of the CBCAP program.

Description of case, service received, and change in parent/consumer's beliefs, attitude, and/or behavior: (500 characters max.)

New parent, Welcome Baby home visiting program. " The Welcome Baby Program was so good. They came to my home after I had my son to make sure that I was doing okay. She offered me services and told me about the playgroups and other things. I was really impressed that our little county had such a great program. I learned a lot and I am sure I will continue to as I am still in the program."

Provide the name of the CBCAP funded program:

Welcome Baby!

b. Select the tool used to assess the parent/consumer's satisfaction in the services received from the program identified in 2a, above.

Telephone Survey

In person pre and post test

In-person Interview

Focus Group

On-line Survey

Other, Explain:

c. Below, describe changes, if any, that the service provider will implement as a result of the feedback received from parent/consumers of the CBCAP program indicated in section 2a.

The service provider will offer

3. CBCAP Peer Review

Peer Review is a form of quality assurance that uses a process of self-assessment and external review by two or more similar CBCAP programs. The CBCAP Peer Review process is in addition to the Peer Quality Case Review (PQCR) used in the California Children and Families Services Review. The PQCR cannot supplant the CBCAP Peer Review process as they are two separate requirements. For more information regarding the CBCAP Peer Review visit: <http://www.friendsnrc.org/peer-review>

Select one of the following two options (Option A or B) to report on peer review activities:

If option "a" is selected, enter an "x" to indicate all CBCAP Peer Review activities that were conducted during this reporting period. Provide a brief description of one of the activities selected.

Option A: Local CBCAP peer review activities

CBCAP peer review training

On-site visit by peers that included observation and discussion

Case review by peers for the purpose of self assessment and improvement of practice

Facilitated focus group with peers for the purpose of self assessment and improvement

Other: Describe:

Provide a description of one of the activities selected above. Include the name of the CBCAP program selected for peer review, at least one finding, and strategies discussed for program/practice improvement: (500 characters max.)

If option "b" is selected, include a description of the challenges that prevented the implementation of the CBCAP peer review process.

Option B: No CBCAP peer review activities occurred during the reporting period.

Describe the challenges that prevented the implementation of a peer review process: (500 characters max.)

The number of similar programs near our county is limited. Due to the financial restrictions of the program and the distance for other counties to travel we are unable to complete the peer review process. The CAPC Coordinator does participate in the Regional CAPC meetings and has gained valuable information from other counties on the CBCAP programs in the Northern California area.

4. PARENTS/CONSUMERS – PARENT LEADERSHIP AND FAMILY INVOLVEMENT

The OCAP maintains a commitment to (1) involving parents in the planning and implementation of programs receiving CBCAP funds, including involvement of parents of children with disabilities, parents who are individuals with disabilities, racial and ethnic minorities, adult former victims of child abuse and neglect, and members of other underrepresented or underserved groups and (2) strengthening parent leadership and parent involvement throughout the State. Meaningful parent involvement can occur when parents are viewed as

effective leaders in shaping the direction of their families, programs, and communities. Parent leaders assist counties with their efforts to improve service delivery and outcomes.

a. Select which activities were provided **to enhance parent participation and leadership** in the prevention of child abuse and neglect: (See section 4d. for activities where the parent was an **active participant**.) Do not record those activities in this section.

- | | |
|-------------------------------------------------------------------------------|---------------------------------------------------------------------------------|
| <input type="checkbox"/> Skill Development Training | <input type="checkbox"/> Invitation to staff meeting |
| <input type="checkbox"/> Agency Orientation | <input type="checkbox"/> Stipend |
| <input type="checkbox"/> Conference (sponsored attendance) | <input checked="" type="checkbox"/> Child Care |
| <input checked="" type="checkbox"/> Convenient time and location for meetings | <input checked="" type="checkbox"/> Transportation |
| <input checked="" type="checkbox"/> Awards, Recognition or Scholarship | <input type="checkbox"/> Provision of office space and supplies |
| <input type="checkbox"/> Provision of ongoing training | <input checked="" type="checkbox"/> Invitation or direct request made to parent |
| <input type="checkbox"/> Peer Support | |

b. Select if no activities were provided to enhance parent participation and leadership in the prevention of child abuse and neglect during this reporting period.

c. Choose one of the activities that was selected in question 4a. Provide details on the efforts to enhance parent participation and leadership.

Activity Selected

Invitations made to parents

Description of the efforts to enhance parent participation and leadership: (500 characters max.)

Invitations were provided to parents to participate in various activities ranging from CAPC meetings to community awareness activities. Parents were also offered incentives to participate.

d. Select the activities where parents were **active participants**. If a parent attended a meeting, determine the type of meeting, i.e. advisory, grant making, state or local board or council, etc., and mark the appropriate area.

- | | |
|-----------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Grant making board or committee
outreach activities | <input checked="" type="checkbox"/> Participated in public awareness or |
| <input type="checkbox"/> Agency advisory board, council, or coalition | <input type="checkbox"/> Served as a mentor for other families |
| <input type="checkbox"/> State or local board, council, or coalition | <input checked="" type="checkbox"/> Recruitment of volunteers |
| <input checked="" type="checkbox"/> CAPC meetings (includes regional CAPC) | <input type="checkbox"/> Participated in the hiring process |
| <input type="checkbox"/> County Children's Trust Fund (CCTF) | <input type="checkbox"/> Developed educational material |
| <input type="checkbox"/> Development of the County Self Assessment | <input type="checkbox"/> Participated in fund raising activities |
| <input type="checkbox"/> Development of the County System
Improvement Plan
implementing activities) | <input checked="" type="checkbox"/> Child Abuse Prevention Month (planning, development
or |
| <input type="checkbox"/> Program monitoring, oversight, or evaluation
(includes CBCAP Peer Review) | <input type="checkbox"/> Participated in public speaking engagements |
| <input type="checkbox"/> Review and selection of grant proposals | <input type="checkbox"/> Participated in a parent leadership role |
| <input type="checkbox"/> Training staff and/or volunteers | <input checked="" type="checkbox"/> Served as a volunteer in the area of child abuse
prevention. |

- e. From the above in 4d, provide details of one of the activities where the parent was an active participant in the planning, implementation, and evaluation of child abuse prevention programs. Include strengths and challenges.

Activity selected:

CAPC meetings local and regional

Description of the project, role and activities the parent performed as an active participant: (500 characters max.)

Several Parents were invited to participate in local and regional CAPC meetings. The participation from parents was limited at the regional level due to the distance to travel for the meetings. The CAPC offered transportation to regional and local meetings. One parent was committed to attending the regional parent leadership conference and her children were sick so she was unable to attend. Parents participated in local activities including, CAPC meetings, family swim nights and family sledding.

- f. Select if parents were not active participants in the planning, implementing and evaluating of child abuse prevention programs during this reporting period

- g. Record the unduplicated number of parents who participated in activities during the reporting period listed in 4d.

- h. Describe the challenges or technical assistance needs regarding the recruitment and retention of parent leaders: (500 characters max.)

- i. Select the funding source that supported the activities indicated above, 4a and 4d:

CBCAP CAPIT PSSF

Other:

[Print](#)

[Submit Survey to OCAP](#)