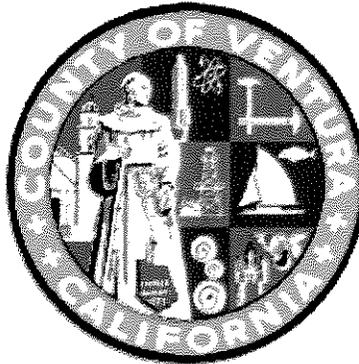


# **California Outcomes and Accountability System**

## **County of Ventura System Improvement Plan UPDATE**

**2010 – 2013**



**Prepared by the**

**Ventura County Human Services Agency  
Department of Children and Family Services**

**and**

**Ventura County Probation Agency  
Juvenile Commitment Services Division**

Submitted to the California Department of Human Services

Children and Family Services Division

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TABLE OF CONTENTS

	<b>Page</b>
<b>A. Child Welfare System/ Probation Cover Sheet</b>	<b>1</b>
<b>B. Child Welfare System/ Probation Narrative</b>	<b>3</b>
<b>C. Child Welfare System/ Probation System Improvement Plan Matrix</b>	<b>26</b>
<b>D. CWSOIP Narrative</b>	<b>55</b>
<b>E. CAPIT/ CBCAP/ PSSF Annual Report</b>	<b>57</b>

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

<b>County:</b>	Ventura County
<b>Responsible County Child Welfare Agency:</b>	Human Services Agency Children & Family Services
<b>Period of Plan:</b>	January 29, 2010 – January 28, 2013
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## Introduction

Assembly Bill 636 (Chapter 678, The Child Welfare System Improvement and Accountability Act of 2001) established the Child Welfare Outcomes and Accountability System to improve child welfare outcomes for children and their families in California. The process for achieving this goal is the California Child and Family Services Review (C-CFSR). The review occurs in 3-year cycles during which the performance of each of the state's 58 counties is monitored regularly in five outcome domains: (a) protection of children from abuse and neglect; (b) safety of children not removed from their home; (c) permanence and stability for children in foster care; (d) maintenance of a child's family relationships and connections; and (e) preparation of youth for transition to adulthood.

Outcomes identified as needing improvement have been prioritized for improvement based on recent performance. As a result, plan components to address the following outcome measures and improvement goals will be implemented across the three years of the System Improvement Plan (SIP). This summary report includes progress toward achieving the four outcome measures selected by Child Welfare and Probation in the SIP.

Outcomes measures targeted for the 2010-2013 SIP are as follows:

### Child Welfare

#### **A. Increase the percent of children who do not experience substantiated abuse/neglect during the six-month period following an initial substantiated abuse/neglect referral (Child Welfare Only).**

##### Improvement Goals:

1. Standardize response and intervention models for referrals that do not result in an open case.
2. Standardize current intervention models for substantiated referrals that result in Family Maintenance (FM) cases.

#### **B. Decrease the percent of children who re-enter care during the 12 months following reunification (Child Welfare Only).**

##### Improvement Goals:

1. Standardized use of SDM reunification assessment and risk reassessment tools.
2. Standardized case dismissal process and procedures.

#### **C. Decrease the percent of children who emancipate or turn age 18 during a 12-month period who had been in care 3 years or more at emancipation or reaching age of majority (Child Welfare Only).**

Improvement Goals:

1. Increase the percentage of children/youth who exit to adoption or guardianship.
2. Provide services to address barriers to permanency.

**Probation**

**Increase the percent of children who are reunified with their parent(s) or primary caregiver(s) within 12 months of entering care (Probation Only).**

Improvement Goals:

1. Improve assessments and case plans.
2. Enhance family engagement.
3. Enhance service delivery.

**Updated Results for SIP Targets**

The primary data reported in this Update are from the Center for Social Services Research (CSSR), University of California, Berkeley and are based on records contained in the California Child Welfare Services/ Case Management System (CWS/ CMS) through October 2010 (2010 Quarter 1 Extract). The Update also includes additional data through September 2010 that are provided in SafeMeasures reports by the National Council on Crime and Delinquency Children's Research Center. When available, SafeMeasures data is depicted by red-filled circles within the data series. Results are reported for successive, rolling 12-month periods or for designated points-in-time. Finally, analysis focuses on results since September 2008 (2008 Quarter 3 Extract) the last CSSR update reported in Ventura County's Self Assessment.

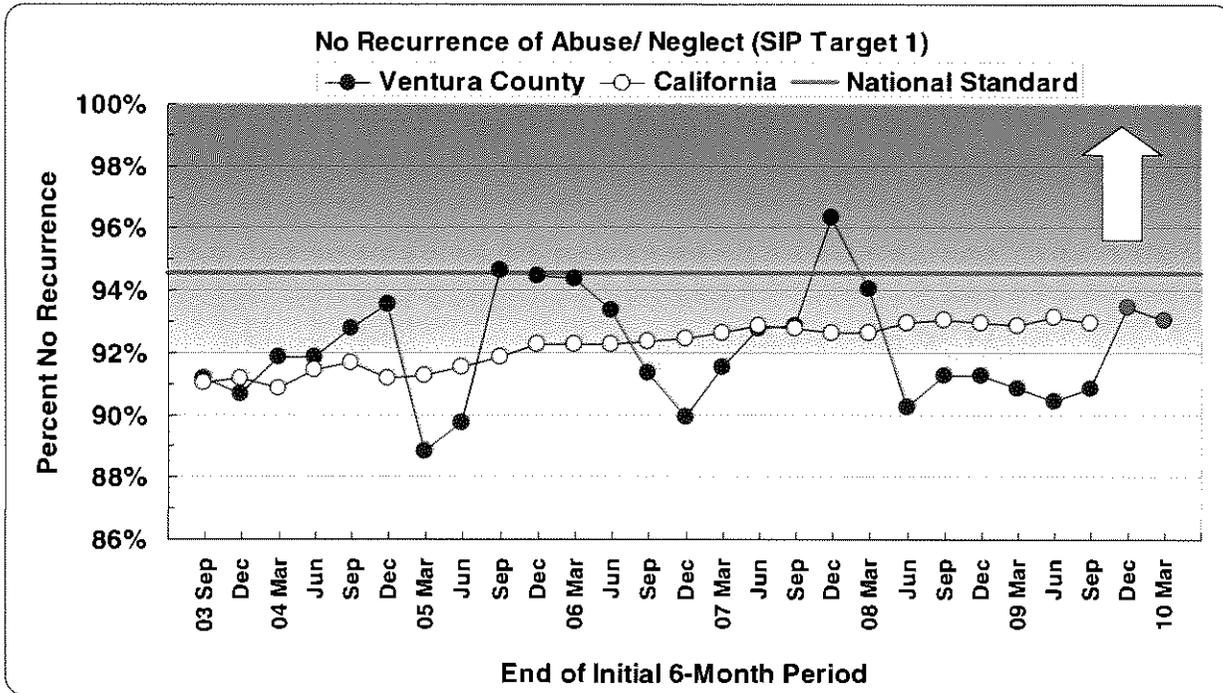
**Child Welfare Results**

**A. Target 1 – No Recurrence of Maltreatment (Measure S1.1) - Child Welfare Only**

The SIP target for **Measure S1.1** is to increase the percent of children who do not have another substantiated maltreatment allegation within six months following the initial substantiated maltreatment allegation. The "base" for this percent is the number of children with an initial substantiated allegation during the 6 month report period. (Note: Measure S1.1 tracks individual children in abuse/ neglect referrals, whether or not a child dependency case is opened following the initial emergency response contact.)

Recent Performance. Performance levels for **Measure S1.1** have decreased over the six report periods since March 31, 2008. However, recent results reported in SafeMeasures show that 93.1% of children did not experience a substantiated allegation during the six-month period between October 1, 2009 and March 31, 2010. Ventura County's current

performance falls below the National Standard for this measure (94.6%), but exceeded recent statewide performance (93.0%).

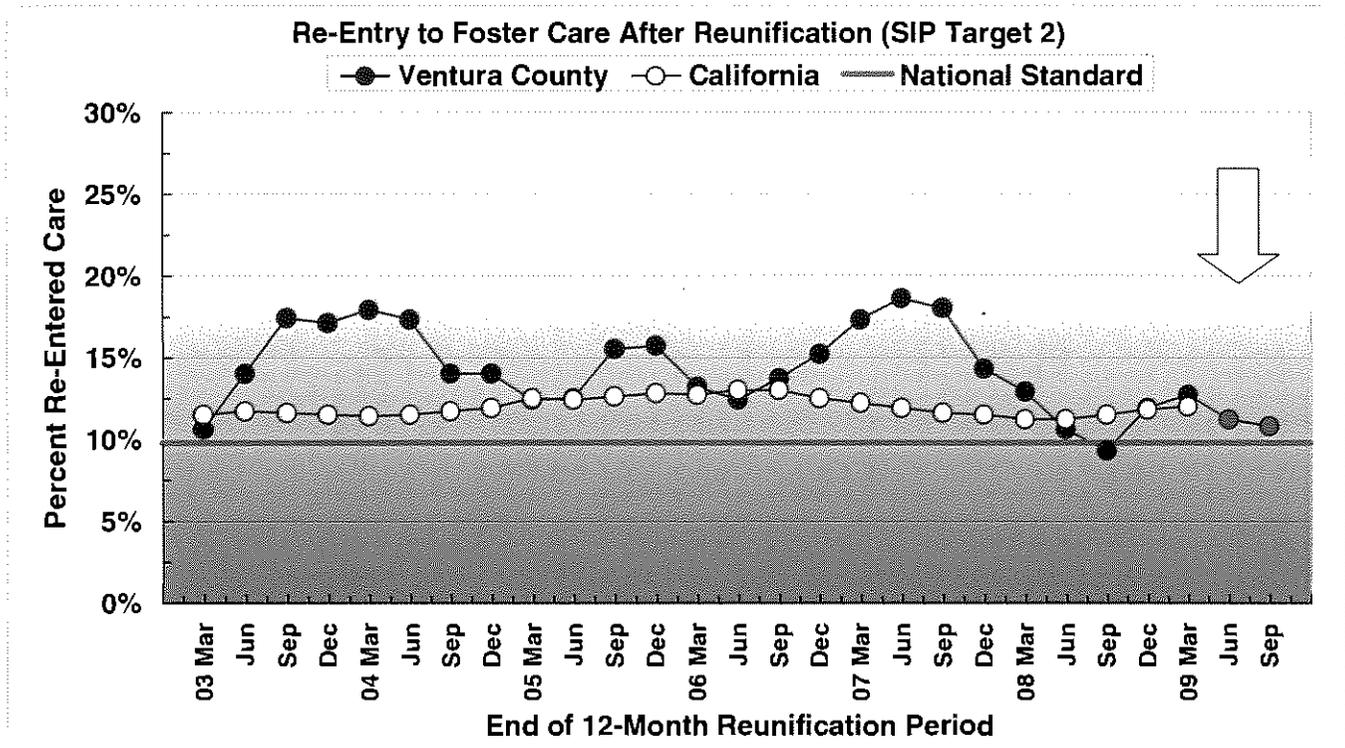


Target Performance. The County of Ventura will improve performance on this measure from 91.1% to 95.0%, increasing the percentage of children who do not experience substantiated abuse/neglect during the six-month period following an initial substantiated abuse/neglect referral.

**B. Target 2 – Re-Entry to Foster Care Following Reunification (Measure C1.4) - Child Welfare Only**

**Measure C1.4** contributes to the first permanency composite and assesses the permanency of reunification. The SIP target for **Measure C1.4** is to decrease the percent of children who exit foster care to reunification in a 12 month period who then re-enter care within 12-months following their reunification. The cohort for this measure includes all children who enter care, regardless of how long they remain before exiting (i.e., includes children in care 7 days or less and 8 days or more).

Recent Performance. The four data points following the Sept 07 report period marked a decreasing trend resulting in performance that exceeded the National Standard for this measure (9.9%) for the first time since Dec 02. Five out of six data points were above the National Standard ranging from 0.8% to 4.5%. Recent results reported in SafeMeasures during the 12-month period between October 1, 2008 and September 30, 2009 show that 10.9% of children reentered foster care. Ventura County’s recent performance did not meet the National Standard for this measure (9.9%), but did exceed recent statewide performance (12.1%).

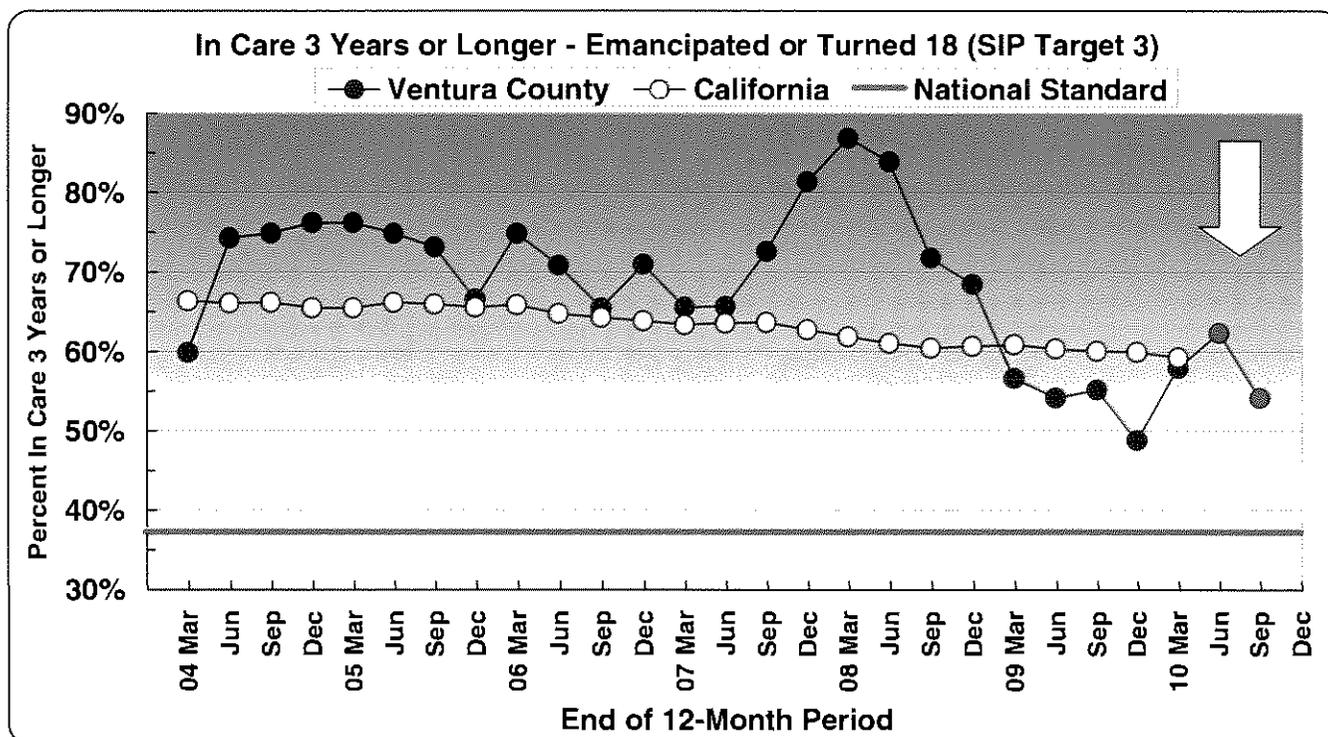


**Target Performance.** The County of Ventura will maintain performance to exceed the National Standard resulting in fewer children who re-enter care during the 12 months following reunification. Strategies selected to improve this measure will positively impact other measures such as placement stability.

**C. Target 3 – In Care Three Years or Longer (Measure C3.3) - Child Welfare Only**

**Measure C3.3** contributes to the third permanency composite and assesses permanency for children in long-term foster care. The SIP target for **Measure C3.3** is to decrease the percent of children in foster care who have been in care three years or longer who were then either discharged to emancipation or turned 18 while still in foster care.

**Recent Performance.** The trendline for emancipated/aged-out youth was decreasing when the System Improvement Plan was completed. Following an increase across two report periods, the SafeMeasures estimate for the period ending September 2010 was 54.3%. While significant improvement has been achieved, performance remains above the National Standard for this measure (37.5%). Reflecting recent improvement, Ventura County's performance for six out of the most recent seven periods exceeded statewide levels.

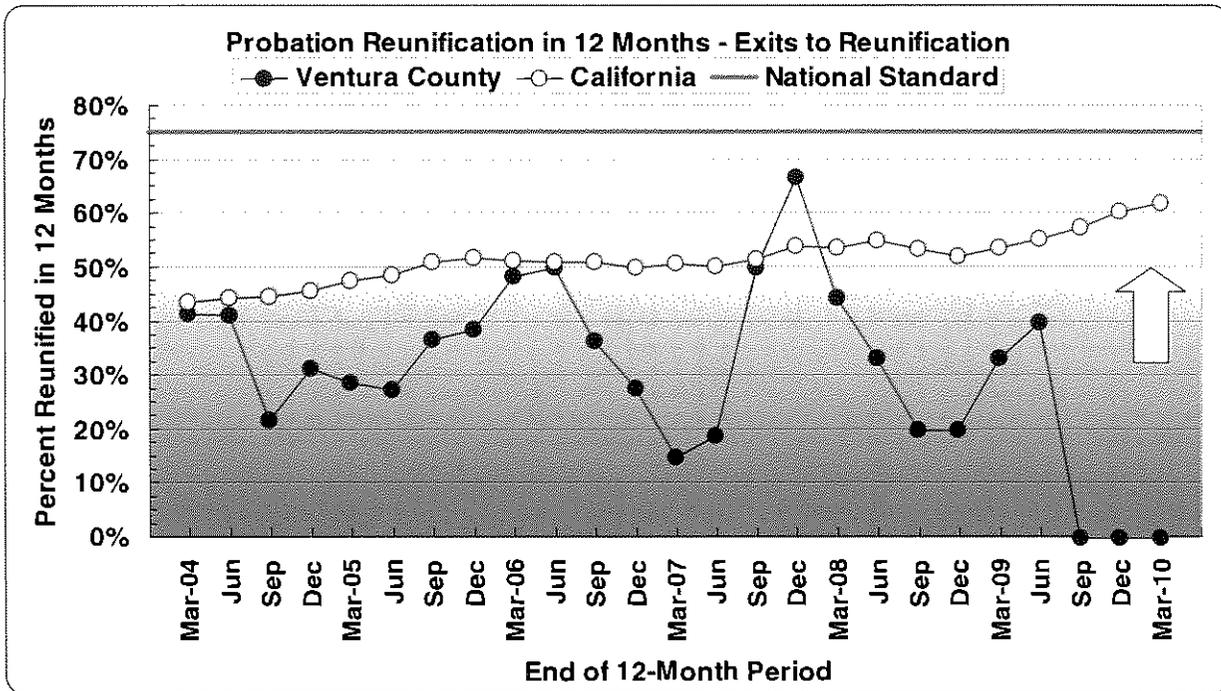


Target Performance: The County of Ventura will improve performance on this measure to meet or exceed the National Standard, resulting in fewer children who emancipate or turn age 18 during a 12-month period who had been in care 3 years or more at emancipation or reaching age of majority.

### Juvenile Probation Results

#### Target 4 – Reunification in 12 Months (Measure C1.1) - Probation Only

The SIP target for **Measure C1.1** is to increase in a 12-month cohort of children who exit foster care to reunification, the percent of children who exit within 12 months of entering care. Exit cohorts for this measure include only those children who remain in care 8 days or more following entry.



**Recent Performance:** Data from the Center For Social Services (CSSR) website (CWS/CMS 2010 Quarter 1 Extract) indicated that during the last of these periods (Apr 09-Mar 10), only 1 child exited to reunification. As the above data reflects, the County's recent results fall well below the National Standard for this measure (75.2%) and the statewide performance levels for probation-supervised youth. Between January 2008 and March 2010, statewide levels ranged from 52.0% (Jan-Dec 08) to 62.0% (Apr 09-Mar 10). An explanation for the recent results will be elaborated on later in this report.

**Target Performance:** The Ventura County Probation Agency (VCPA) will improve performance on this measure by increasing the percentage of children who are reunified with their parent(s) or primary caregiver(s) within 12 months of entering care.

**Updated Results for Outcomes Needing Improvement**

Recent performance levels for the following outcomes fall below statewide standards:

**Child Welfare**

- a. Child welfare months to reunification (C1.2). Performance for this outcome has remained an average of one month higher than the National Standard (5.4 months) since the Apr 08-Mar 09 period. Recent SafeMeasures data estimates for the periods ending Jun 10 and Sep 10 were medians of 6.4 months and 6.4 months respectively. Although the four most recent report periods indicate a negative trend, performance for Mar 09 is the first period to fall below the National Standard subsequent to Mar 05.

- b. Child welfare reunification in 12 months (C1.3). Levels have varied widely across report periods, with performance for Dec 07 exceeding both the statewide average and the National Standard (48.4%). Recent SafeMeasures data estimates for the periods ending Jun 09 and Sep 09 were 49.2% and 45.8%, in alignment with an upward trend.
- c. Child welfare legally freed in 6 months (in care 17 months or longer) (C2.4). Performance levels have remained below the statewide average and the National Standard (10.9%) for this measure. SafeMeasures estimates were 2.2% (end Dec 09), 6.1% (end Mar 10), 10.6% (end Jun 10), and 6.0% (end Sep 10). The trend for this measure continues to be cyclical, with the most recent estimates marking an upward trend.
- d. Child welfare exit to permanency before age 18 (free at exit) (C3.2). Performance levels exceeded statewide performance for 3 out of the six report periods subsequent to Sep 08. The report period ending Mar 10 reversed the downward trend that began with report period ending Jun 09. Supporting the positive trend, SafeMeasures estimates were 96.0% and 97.0% for the periods ending Jun 10 and Sep 10.
- e. Child welfare two placements or less (in care 12 to 24 months) (C4.2). Following a downward trend, levels for children in care between 12 and 24 months increased from 58.0% (Sep 09) to 60.7% (Mar 10). In alignment with the positive trend, subsequent SafeMeasures estimates were 63.0% and 59.7% for the periods ending Jun 10 and Sep 10 respectively.
- f. Child welfare two placement or less (in care 24 months or longer) (C4.3). Performance levels have remained at about the level of the statewide average for this measure through the period ending Sep 09 but have fallen below that level since then. SafeMeasure estimates were 29.6% and 28.1% for the periods ending Jun 10 and Sep 10.

## Probation

- a. Reunification within 12 months for exit cohorts (C1.1). Following the submission of the 2010-13 SIP, performance levels for Probation-supervised youth decreased from 40.0% (Jul 08-Jun 09) to 0% (Jul 09-Jun 10). The decreasing trend is attributed to a narrower focus on the types of clients being suitably placed.
- b. Probation exit to permanency before 18 (in care 2 years or longer) (C3.1). Performance levels have decreased since the Jul 09-Jun 10 report period. The decreasing trend is due to the decreasing numbers of youths in the report period cohort.
- c. Probation two placements or less (in care 12 to 24 months) (C4.2). Levels have decreased since Jul 07-Jun 08. In Jul 07-Jun 08, the level was at 61.1%; in Jul 08-Jun 09, the level was at 52.6%; and in Jul 09-Jun 10, the level was at 43.8%. None of the points since Jul 07-Jun 08 met or exceeded the National Standard for this measure.
- d. Probation two placements or less (in care 24 months or longer) (C4.3). Performance levels have increased and decreased in alternating cycles since the Jul 07-Jun 08 period.

Performance has remained below the National Standard for this measure for all periods since the Jul 07-Jun 08 period.

### **Updated CWS/ Probation SIP Plan Components**

This section includes updates on the status of improvement goals, strategies, milestones, and timeframes for the four SIP targets. Milestones that have been completed, milestones that are currently in progress and subsequent next steps are included for each SIP target.

#### **TARGET 1: Increase the percent of children who have no recurrence of abuse/neglect in six months following a substantiated referral (Measure S1.1). Child Welfare Only**

##### **Milestones Achieved:**

1.1.1 The Data Management Team will review and monitor CWS/CMS and SDM data to identify and separate data entry errors from actual instances of recurrence. Data review completed Quarter 3 of Year 1.

1.4.1 Establish a workgroup to review MDT policy and procedures. MDT workgroup established Quarter 3 of Year 1.

1.4.2 Assess and monitor the current MDT process through observation and discussion at MDTs meetings through Quarter 4 of Year 1.

1.4.6 Implement MDT model throughout Ventura County.

1.5.1 Research and identify an evidence based program that addresses the needs of the targeted children and their families. SafeCare was identified to provide in-home prevention/early intervention services.

1.5.2 Establish a workgroup (SafeCare) to assess needs and resources.

1.5.3 Assess needs and resources to develop policy and procedure to begin program implementation. Policies and procedures were developed and SafeCare was implemented during February 2010.

1.5.4 Develop and conduct targeted training to implement a pilot program. SafeCare service providers received training on the SafeCare model. Children & Family Services staff have been trained and continue to be trained on SafeCare services and the MDT process. SafeCare and PATH providers will be trained on Triple P Parenting.

2.1.1 The data management team will review and monitor CWS/CMS and SDM data to identify FM cases that experience a recurrence of abuse and/or neglect in order to gain an understanding of the reasons for recurrence.

2.2.1 Through the use of workgroups assess current policies and procedures to identify consistency of information included in a face-to-face contact. Implementation of CHILDD for face-to-face contacts.

### **Milestones In Progress:**

**Improvement Goal 1.0: Standardize response and intervention models for referrals that do not result in an open case.**

**Strategy 1.1 - Gain an understanding of the reasons for recurrence in families involved in referrals that are substantiated but do not result in open cases.**

Recurrence data for the first 3 quarters of 2009 (Jan 09-Sep 09) was extracted from CWS/CMS to identify and separate data entry errors from actual instances of recurrence. A thorough review of the recurrence data revealed accurate data entry in accordance with current policy and procedure regarding referral documentation. As a result, the original milestone dedicated to conducting targeted staff data entry training has been revised to establish a workgroup to review the current referral association policy and make recommendations for potential changes to policy. The workgroup will utilize the selected recurrence data to identify opportunities to improve the accuracy of actual instances of recurrence and revise policy and procedure.

In order to analyze and categorize common factors in recurrence, Case Research Consultant, Dr. Erika Felix and her assistant collaborated with the Data Team to develop an in-depth case review of identified instances of recurrence. Dr. Felix and the data management team designed a comprehensive case review form that served as a tool to document key pieces of data for the selected recurrence sample of cases. The case review process was conducted utilizing CWS/ CMS and SafeMeasures to compile the necessary data elements. Children with referrals related to allegations of abuse/ neglect between January 2009 and December 2009 were identified for the detailed case review. In addition, a control group matched on age, sex, ethnicity, home language, and primary allegation was created for comparison purposes.

A brief summary of the recurrence study findings show: (a) families who had recurrence of maltreatment had more children on average (2.76) than families who did not (2.22); (b) in families that did not recur, 68% had a father/paternal caregiver, whereas it was 52% for the families that did recur; (c) there was no difference between groups on having a mom/maternal caregiver; (d) there was no difference between groups on the child having a special need; (e) parents in the recurrence sample were more likely to have a criminal history (46%) as indicated on an Emergency Response (ER) document, compared to parents who did not (24%); (f) parents in the non-recurrence group were more likely to have a history of domestic violence (22%) as indicated on the ER document, compared to parents that did not (9%).

At present, Dr. Felix has completed the case review process and has provided a final report to the Data Team. The Data Team has reviewed all study results and has provided additional input and recommendations related to report findings and conclusions. The final report,

along with the Data Team's input will be shared with Children & Family Services management and staff. Study findings will direct the modification of existing response and intervention models.

**Strategy 1.2 - Standardize the completion of the Structured Decision-Making (SDM) Risk Assessment.**

Protocols for Structured Decision Making (SDM) Safety, Risk and Family Strengths and Needs Assessments were implemented in March 2005 to improve decision-making regarding the need (a) to remove a child following an investigation when a case is opened, (b) to open a case following an ER face-to-face contact, and (c) to plan services for children and families in conjunction with opening a case.

Data extracted from the SafeMeasures database show that completion of SDM Risk Assessments have decreased slightly over the past year. Risk Assessments completion percents were 7.7% and 7.3% for the periods Oct 09 and Oct 10 respectively. During the same time period, the percent of required Risk Assessments increased from 10.6% (Oct 09) to 16.7% (Oct 10).

The Structured Decision-Making workgroup completed a post-SDM Training review of feedback from workgroup members and attendee evaluations. In addition, workgroup activities have focused on (a) business process clarification related to SDM Risk assessment, (b) the identification of SDM training needs, and (c) the development of example SDM language for court reports to assist Line Staff and Supervisors. To further analyze the completion of SDM Risk Assessment data, the original time frame has been extended an additional quarter (Year 2, Quarter 1) to accommodate the review of individual and system-wide performance. Additionally, a milestone has been added to conduct an SDM-related continuous process improvement event to streamline SDM tool completion. The new milestone will begin during Quarter 4 of Year 1 and extend through Quarter 2 of Year 2.

**Strategy 1.3 - Standardize the use of risk Team Decision Making (TDM).**

Team Decision Making (TDM) is one of the four core strategies of the Family to Family (F2F) initiative. TDMs are based on the belief that children need the support of strong, nurturing communities, and child welfare agencies can best help families by partnering with their communities. Imminent Risk TDM meetings focus on referred children who have not yet been removed and who meeting participants may decide can remain safely in their homes with appropriate supports. Since January 2010, an average of 7 IR TDM meetings have been held each month through December 31, 2010. The majority (84.8%) of the resulting IR TDM decisions were not to remove the focus child from his/her home.

The TDM Strategy Group has been established to review existing risk TDM process and related policies and procedures to identify opportunities for engagement of family and linkage to services and make recommendations for policy changes. The TDM Strategy Group will focus on recommendations for policy change in the following areas (a) criteria and circumstances for which a Risk TDM is conducted (b) standardization of the Safety Plan, and (c) comprehensive review of the current SDM policy. In addition, data from

SafeMeasures will be used to identify instances where a TDM was not held for conditionally unsafe and unsafe Emergency Response referrals.

**Strategy 1.4 - Standardize the use and process of the Multi-Disciplinary Team (MDT) - Differential Response model.**

The Pathways Workgroup was established to address prevention and early intervention of child abuse through the use of standardized response models for referrals that do not result in an open case. The MDT model has been implemented throughout Ventura County and the MDT workgroup will standardize the use and process of the MDT Differential Response model and identify gaps in services, procedures and/or resources. The Pathways Coordinator and regional MDT Supervisors monitor the MDT process through discussions with MDT members and Community Partner Supervisors. Information is shared on a regular basis at the MDT Supervisor meetings which are regularly attended by the Pathways Coordinator.

The original milestone which contained the assessment of the MDT process and the identification of gaps in service through the administration of consumer surveys, has been divided into two distinct milestones. Currently, the Pathways MDT Workgroup is finalizing the consumer surveys and will begin survey distribution beginning in December 2009. Survey data will be collected and the identification of barriers or gaps in service will continue through Year 2 Quarter 3.

**Strategy 1.5 – Initiate an evidence based prevention program for child abuse referrals.**

SafeCare was identified as the program that will provide in-home prevention and early intervention services to targeted children and their families. SafeCare is an evidence-based program for parents who are at-risk or have been reported for child maltreatment. SafeCare staff reduce recurrence of child maltreatment by working with at-risk families in their home environment to improve skills related to health and safety issues, home safety, how to plan and implement activities with their children, and responding appropriately to child behaviors.

The SafeCare workgroup was established to assess needs and resources and to develop related policy and procedure. The workgroup created policy and procedure to support SafeCare implementation and organized targeted training for service providers and staff. SafeCare in-home service providers received intensive week-long training on the SafeCare model. Children & Family Service staff have been trained on SafeCare services and the MDT process for assigning a SafeCare service provider. SafeCare and Path in-home service providers will also be trained on the Positive Parenting Program (Triple P). The Triple P is an evidence-based program focusing on parenting interventions to support the prevention of child maltreatment and the strengthening of parenting and parental self confidence. Ventura County implemented the SafeCare program during February 2010.

**Improvement Goal 2.0: Standardize current intervention models for substantiated referrals that result in Family Maintenance (FM) cases.**

**Strategy 2.1 - Gain an understanding of the reasons for recurrence in families involved in referrals that are substantiated and result in FM cases.**

Recurrence data for the first 3 quarters of 2009 (Jan 09-Sep 09) was extracted from CWS/CMS to identify and separate data entry errors from actual instances of re-entry. In order to gain an understanding of the reasons for recurrence in families involved in referral that are substantiated and result in FM cases, Case Research Consultant, Dr. Erika Felix and her assistant collaborated with the data management team to develop an in-depth case review of identified instances of recurrence. Dr. Felix and the data team designed a comprehensive case review form that served as a tool to document key pieces of data for the selected recurrence sample of cases. The case review process was conducted utilizing CWS/ CMS and SafeMeasures to compile the necessary data elements. Dr. Felix has completed the case review process and will provide a preliminary report to the data management team by December 2009. The final report will be shared with Children & Family Services management and staff.

**Strategy 2.2 - Standardize face-to-face contacts to ensure that the parent has the support needed to maintain custody of child(ren).**

Supporting the strategy to standardize face-to-face contacts to ensure that the parent has the support needed to maintain custody of their child(ren), the CHILDD guidelines were developed and implemented during January 2010. The CHILDD acronym represents the key steps in documenting out-of-home and in-home contacts in CWS/CMS: Case Plan, Home, Issues, Logistics, Developmental/ Behavioral Needs, and Documents. Each key step includes further detail specific to each target area for documentation. Although all fields may not be relevant to each contact, the CHILDD guideline provides a standardized approach to contact documentation for child welfare staff. CHILDD guideline application and consistency of usage will be monitored by CWS/ CMS reports customized to identify potential areas for improvement and/or targeted training.

In addition to CHILDD, the LASER system for documenting ER investigation contacts in CWS/CMS was implemented during October 2008. The LASER guidelines are followed by all ER staff completing an investigation and entering contact/ investigation information into CWS/CMS. The LASER acronym represents the key steps in documenting ER contact information in CWS/CMS: Logistics, Allegation, Supporting Facts, Evidence and Rule of Three. The LASER guidelines support consistency of information for face-to-face contacts.

**TARGET 2: Decrease the percent of children who re-enter care during the 12 months following reunification (Measure C1.4). Child Welfare Only**

**Milestones Achieved:**

2.1.1 The data management team will review and monitor CWS/CMS and SDM data to identify and separate data entry errors from actual instances of re-entry.

### **Milestones In Progress:**

**Improvement Goal 1.0: Standardize use of SDM Reunification Assessment and Risk Reassessment tools.**

**Strategy 1.1 - Standardize completion of Structured Decision-Making (SDM) Reunification Assessment**

**Strategy 1.2 – Standardize completion of Structured Decision Making Risk Reassessment.**

Structured Decision-Making tools improve decision-making regarding the need to identify safety factors, level of risk, family strengths, needs and priorities. Re-entry to care is in part a function of the likelihood of future abuse/neglect at the time the child exits care or when the case is closed. The SDM Reunification Assessment tool guides the decision whether to return the child to the removal home, maintained in foster care placement, and/or if reunification services should be terminated and a permanent plan implemented. Subsequently, the SDM Risk Reassessment tool assesses risk of future child maltreatment and to guide the decision whether to return the child home or maintain out-of-home placement. Reassessment at established intervals ensures that changes in the family's risk level are considered in the decision process. Data extracted from the SafeMeasures database 1/20/11 show that an average of 70.4% ongoing FM and FR cases with a current case plan each month had a Risk Reassessment or Reunification Assessment completed timely. [Note: This calculation excludes cases that (a) were open less than 6 months (average = 194 per month), (b) had a pending ongoing case plan (average = 23 per month) or (c) were missing a current case plan (average = 32 per month). Timely completion means the reassessment was completed within 65 days of the effective date of the case plan for court cases and 30 days for voluntary cases. This calculation excludes initial case plans and initial risk assessments.]

The Structured Decision Making workgroup administered a post-SDM training evaluation that consisted of a thorough review of class notes from workgroup members and a written training evaluation from all training attendees. The Risk Reassessment-related questions were identified and correct business practice was discussed and clarified. In addition, the workgroup developed a staff tool/ handout that included examples of SDM language for court reports to assist Line Staff and Supervisors. The staff tool/handout was provided to child welfare staff as a reference outlining specific examples to assist in Court Report documentation.

Next steps include establishing a county-level minimum compliance goal to be monitored via quality assurance methods and the utilization of the Children's Research Center case reading model to assist social workers in addressing barriers to assessment compliance.

**Improvement Goal 2.0: Standardize case dismissal process and procedures.**

### **Strategy 2.1 – Gain an understanding of reasons for re-entry.**

Re-entry is the recurrence of child maltreatment that follows an earlier episode of out-of-home placement that resulted in reunification. Research in this area includes comprehensive literature review and studies that identify risk and protective factors for reentry into foster care. The current strategy was selected to identify additional preventive strategies to reduce the incidence of re-entry. In preparation for an in-depth case review, the data management team conducted a preliminary review of CWS/CMS and SDM data to identify and separate data entry errors from actual instance of re-entry. At the conclusion of the initial review no immediate data entry issues were identified. Targeted staff training is scheduled to follow the completion of the in-depth case review of identified instances of re-entry to evaluate and categorize common factors in re-entry.

### **Strategy 2.2 – Aftercare Services will be provided by matching services to client's needs.**

Aftercare services that are focused on providing continuing services to families after children are reunified will reduce the risk of re-entry. Aftercare services support and assist families with the challenges they may face throughout the reunification process. Aftercare services that are specifically matched to client's needs will prove more successful to reduce re-entry into foster care. To identify possible service needs, the data management team will review cases resulting in re-entry to identify and evaluate common factors.

In order to analyze and categorize common factors in re-entry, Case Research Consultant, Dr. Erika Felix and her assistant will collaborate with the Data Team to develop an in-depth case review of re-entry cases that are not attributed to Dependency Drug Court. Dr. Felix and the data management team will design a specific case review plan that will utilize CWS/ CMS and SafeMeasures to compile the necessary data elements.

**TARGET 3: Decrease the percent of children who emancipate or turn age 18 during a 12-month period who had been in care 3 years or more at emancipation or reaching age of majority (Measure C3.3). Child Welfare Only**

#### **Milestones Achieved:**

2.1.1 Explore the viability of implementing Multidisciplinary Treatment Foster Care (MTFC) program. MTFC implementation began on September 1, 2010, expanded to all youth in ongoing as of October 13, 2010. Meeting scheduled to improve utilization.

2.3.2 Evaluate current contracted family reunification services for gaps and accessibility.

#### **Milestones In Progress:**

**Improvement Goal 1.0: Increase the percentage of children/youth who exit to adoption or guardianship.**

**Strategy 1.1 – Engage child/ youth and caregivers in the concurrent planning process.**

Identification of a committed family by engaging youth and caregivers in the concurrent planning process will have a positive impact on permanency. The data management team will review Peer Quality Case Review (PQCR) focus group data and CWS/CMS data to identify themes for reasons for non-permanency. The PQCR data scheduled for review will be analyzed with Family Reunification (FR) and Permanency Planning (PP) data. Additional research will be included in the FR/PP case listing to include the time in FR services and Case Plan Goal at time of service change.

Significant work to identify needs for youth has been completed via various avenues including Interagency Placement Expansion and Review Committee. Findings from the focus group held in April 2010 include: (a) hardship for providers in paying for activities for youth; (b) providers could benefit from time to share with each other program components or new community resources; (c) obtaining employment for youth utilizing Workforce Investment Act (WIA) programs is difficult; (d) gaps between Group Home providers and respective placement staff regarding individual Group Home's points and level/behavioral system; (e) difficulty for some Group Home providers in obtaining mental health services for Medi-Cal eligible youth; (f) criteria to "step down" a youth from a Group Home is not known or agreed upon.

Currently a charter is in development for the Business, Provider and Placement (PAC) components to structure meetings, provide tools to conduct business, and track decisions and progress. Next steps include the finalization of the IPERC charter and continued identification of gaps in resources and possible solutions.

**Strategy 1.2 – Initiate the adoptive home study process earlier.**

A workgroup has been established to review current licensing and adoption processes to develop a Unified Home Study project plan and a Unified Home Study process which can be used for both adoption and licensing purposes. Members of the workgroup are scheduled to participate in a continuous process improvement event that will standardize and streamline the Unified Home Study process. The timeframe for this milestone has been extended through Year 2 to ensure adequate research and implementation time.

In preparation for the Unified Home Study process, the Foster Care information packet will be redesigned to include information on Adoption. The revised packets will include information such as Frequently Asked Questions, Adoption Assistance Program and other materials designed to assist with providing more information to interested Foster Care and Adoption. In addition, a new video specific to Ventura County will include adoption information. The content for the new materials will be developed by December 1, 2010 and the new materials could be distributed as early as the beginning of January 2011.

**Improvement Goal 2.0: Provide services to address barriers to permanency.**

**Strategy 2.1 – Develop resources and strategies to match unmet needs of youth exiting to permanency.**

To develop resources and strategies to match unmet needs of youth exiting to permanency, the Multidisciplinary Treatment Foster Care (MTFC) was implemented on September 1, 2010. The initial target population was Youth Services Division youth, however, due to low enrollment the target population was expanded to all youth in ongoing programs as of October 13, 2010.

The focus group held in April 2010 provided essential feedback regarding unmet needs of youth. Identified barriers and gaps in services are listed above in Strategy 1.1. Foster Kinship Care Education (FKCE) has committed to providing training for caregivers who care for the tween/teen youth population. Training will be conducted according to the Independent Living Program class schedule for the convenience of caregivers.

**Strategy 2.3 – Reassess and provide services to biological parents to support reunification post Permanency Planning.**

Reassessment of biological parents in Permanency Planning (PP) cases occurs throughout the life of a case. At the annual PP staffing, permanent options are considered including reunification with parents. Case plans developed and reviewed by social workers include visitation with parents if appropriate. Additional options include quarterly case reviews, case management practices, family finding and the Coordinated Assessment Review Team (CART).

Services offered for PP cases include: Coalition to End Family Violence, Interface Children and Family Services, and educational advocacy. Wraparound, Therapeutic Behavior Services (TBS), and family counseling offered through the group home are available to assist with preserving and/or reuniting the family. However, other contracted services currently offered to assist reunification such as AspiraNet in-home parent aide program and therapy services does not extend to support biological parents with reunification post PP.

**TARGET 4: Increase the percent of children who are reunified with their parent(s) or primary caregiver(s) within 12 months of entering care (Measure C1.1). Probation Only**

Milestones In Progress:

**Improvement Goal 1.0: Improve assessments and case plans.**

**Strategy 1.1 – Improve assessments and case plans to increase reunification outcomes.**

1.1.1 Attend specialized training for placement Probation Officers working with foster youth including, but not limited to Probation Placement Officer Core, case planning, and family engagement. Attend training offered by UC Davis Extension and in-house training provided by the Probation Agency and Children Family Services (Y1/Q4). Status: Satisfactory and ongoing. Placement staff have or will be attending majority of training offered by U.C. Davis,

such as placement officer CORE, Secrets of Case Planning, Skills and Practice for Permanency Training, and CWS/CMS Data Entry Training. Monitored and evaluated by DM & SDPO.

1.1.2 Revise current intake process that occurs while the youth is in custody and before he/she is placed or returned to an out-of-home placement. Engage youth, birth parents, probation staff, counselors, therapist, coaches, relatives and/or group home providers in the case planning process by scheduling on-going appointments, and contacting them via telephone and mail (Y1/Q4). Status: Revision of intake process complete, engagement of assigned POs on-going. Monitored and evaluated by SDPO & SrDPO.

1.1.3 Identify community resources that assist foster youth with challenges that impede reunification efforts (substance abuse counseling, anger management, mental health therapy, parenting classes, domestic violence, etc). A resource list will then be created immediately for Probation Officers, including but not limited to community organizations and websites. The tool will be used as needed for each individual case (Y1/Q4). Status: Completed. Community resources identified and resource list established. Monitored and evaluated by SDPO & SrDPO.

**Strategy 1.2 – Develop an intake questionnaire tool designed to assist youth, families, and assigned Probation Officers to develop realistic case plans.**

1.2.1 Develop questions that assist Probation Officers to obtain participation from youth and families to create a case plan with realistic goals and timeframes (Y1/Q4). Status: Completed. Probation Officers currently use Compas, a risk assessment and case plan generating tool that was designed and validated for the Probation Agency's use. This tool is comprised of 176 questions and is first utilized at the time the probationer and his/her family first enters the juvenile justice system. Thereafter, the case plan and risk assessment status is updated by the assigned probation officer at least every six months. Additional questions are asked for probationers placed under a suitable placement order, as the tool is in compliance with all Title IVE and Division 31 mandates. Monitored and evaluated by DM & SDPO.

1.2.2 Develop questions that facilitate early concurrent planning. Identify immediate family members (parents, grandparents, aunts/uncles, great aunts/great uncles, siblings, non-relatives) and educate parents/caregivers about the foster care process (Y1/Q4). Status: Completed. As noted in the previous section, the Compas has a specific section that addresses probationers in suitable placement, including concurrent planning and identification of immediate family. Monitored and evaluated by SDPO, SrDPO and DPOs.

**Strategy 1.3 – Improve communication with Juvenile Facilities (JF) Commitment Staff to ensure services are delivered as identified in the youth's case plan and release plans are developed in a timely manner.**

1.3.1 Schedule meetings to educate JF Commitment Staff about placement youth risk factors and needs. This may occur during staff meetings. Other training may involve Supervising Deputy Probation Officers and Senior Deputy Probation Officers who will then forward the

information to Juvenile Hall staff (Y1/Q3). Status: Completed and on-going. Field/Institution staff meetings (e.g. JPOC, JF critical reviews) are currently being utilized to educate institution staff regarding placement youth on a monthly basis. Monitored and evaluated by SDPO & SrDPO.

1.3.2 Assigned Probation Officer and JF Commitment Staff to begin meeting on a bi-monthly basis to review youth's progress while in custody, case plan objectives, child/family's needs, and release plans. The process should also include parents. They are to be invited to a minimum of one meeting per month (Y1/Q3). Status: Completed and on-going. Placement unit officers meet regularly with JF staff to discuss youth's progress in custody and involve parents when possible. Monitored and evaluated by SrDPO.

## **Improvement Goal 2.0: Enhance family engagement**

### **Strategy 2.1 – Involve birth families in the planning and decision-making process.**

2.1.1 Develop and implement family team meetings during the intake process to review reunification needs and goals. The assigned Probation Officer will facilitate the meeting. Team meetings should include parents, relatives, group home providers, JF Detention Staff and the assigned Probation Officer (Y2/Q3). Status: Pending. SrDPO and assigned POs to develop and implement family team meetings. To be monitored and evaluated by SrDPO.

2.1.2 Identify relatives and/or individuals that will offer support to birth parents/guardian during the reunification process and after the youth is reunified with his/her family (Y1/Q2). Status: Completed and on-going. Assigned POs are expending more effort in identifying and engaging birth parents/guardian support during reunification process. Monitored and evaluated by SrDPO.

2.1.3 Increase the frequency of visits to exceed the current mandate leading up to reunification to help facilitate the reunification transition (Y1/Q3). Status: Completed and on-going. Due to small caseloads, assigned POs are able to increase frequency of visits, particularly to facilitate reunification. Monitored and evaluated by SrDPO.

### **Strategy 2.2 – Improve communication between the assigned Probation Officer and the birth parent. The Court and Probation's expectation should be discussed with families from the beginning.**

2.2.1 Engage group home providers, Probation Officers, parents, and/or relatives within 60 days of placement to discuss expectations and goals in efforts to achieve successful reunification. Revisions can then be made for those case plans that were initiated prior to the 60 days (Y2/Q1). Status: Completed and on-going. Assigned POs are engaging group home providers, and parents/relatives when possible, within 60 days of placement to discuss expectations and goals. Monitored and evaluated by SrDPO.

2.2.2 Probation Officers will be available evening hours during the week to increase meetings with youth and families that cannot meet during regular business hours (8 a.m.-5 p.m.). Weekend hours may be scheduled on an as-needed basis (Y1/Q3). Status: Completed.

Placement probation officers maintain flexibility in their work schedules, particularly to meet with families when the need arises. Monitored and evaluated by SrDPO.

2.2.3 Seek resources and funding for families in need of services; transportation, housing, parenting classes (Y2/Q1). Status: Completed and on-going. Assigned POs are aware of resources and funding for families in need of assistance of listed services. Monitored and evaluated by SrDPO.

**Strategy 2.3 – Identify support groups that support family engagement and reunification.**

2.3.1 Meet with Community Partners and group home providers to identify supportive services available to biological families (Y2/Q1). Status: Completed and on-going. All placement staff, including the Division Manager, attends meetings with community partners and group home providers on a monthly basis to discuss placement issues, including supportive services available to families. Some of these meetings involve the Children's Services Oversight Committee (CSOC), the Interagency Placement Expansion and Review Committee (IPERC), Wraparound Review Committee (WRC), and the Placement Agencies Collaborative (PAC) just to name a few. Monitored by DM and SDPO.

2.3.2 Seek input from Children's Services System Oversight Committee (CSOC) to identify services that promote timely reunification, best practices, gaps in services that support reunification and to evaluate the roles and expectations of group home providers that promote family participation. This process will be captured via survey. The information will be included in a resource guide to be utilized by Probation Officers (Y2/Q2). Status: Pending. CSOC attended by division manager and survey to identify above services to be developed. To be monitored and evaluated by DM and SDPO.

2.3.3 Seek assistance from the Probation Advisory Committee to identify successful reunification services and best practices from other probation departments. The information will be provided to the Probation Officers (Y2/Q2). Status: Completed and on-going. Probation Advisory Committee meetings are attended when they are held every six weeks in Sacramento by a placement unit staff person. This committee is an excellent networking opportunity that discusses various federal, state and local foster care issues. Monitored and evaluated by SDPO and SrDPO.

**Improvement Goal 3.0: Enhance service delivery**

**Strategy 3.1 – Refer families to community resources that offer support and contribute to positive reunification outcomes including: in-home services, mental health or counseling services, substance abuse services, parenting support, child care, housing, financial assistance and transportation.**

3.1.1 Obtain resource guides utilized by Community Partners that include services for foster youth. Identify effective community-based interventions and programs that emphasize family interactions. The information is to be provided to youth and families in the form of a resource guide (Y3/Q1). Status: On-going and pending. Placement officers obtain resource guides

utilized by community partners on an on-going basis to identify effective community-based interventions and programs. Resource guide for youth and their families to be developed. To be monitored and evaluated by SrDPO.

3.1.2 Refer families to in-home and community services. Identify and maintain contact with service providers to monitor assistance to families (Y1/Q4). Status: Completed and on-going. Probation placement staff follow-up and monitor all referrals of families to in-home and community services to ensure quality assistance is provided, such as when Wraparound services are provided to a family in the home. These services are typically provided to a family to avoid having a child removed from the home and being suitably placed, or after a child is reunified with his/her family and are in need of aftercare services. Monitored and evaluated by SrDPO.

**Strategy 3.2 – Implement a resource guide for linkages and referral to services to include housing, employment, health care, transportation, education, support groups and counseling.**

3.2.1 The Probation Officer is to provide a resource guide to families that reunify and to youth with plans to emancipate (Y3/Q1). Status: pending. Development of resource guide is pending, however, Probation placement staff works extensively with reunified families to ensure they are receiving the services they need. Additionally, placement staff works collaboratively with their partner, the Human Services Agency, in providing Independent Living skills to age-appropriate youth who do not reunify with their families. Monitored and evaluated by SrDPO and assigned POs.

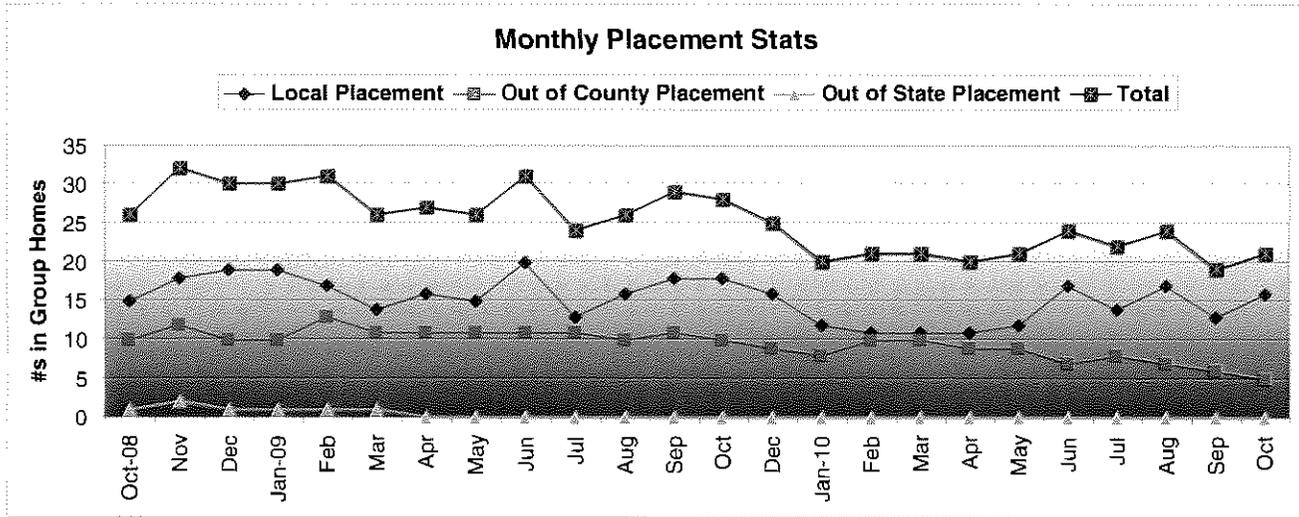
3.2.2 Educate parents and youth to utilize resource guide(s) and seek services independently as needed (Y3/Q2). Status: On-going. As noted above, development of resource guide is pending. Placement staff does prepare youth and their families to seek services independently as needed. Monitored and evaluated by SrDPO and assigned POs.

**Probation Narrative/Summary**

As noted in the previous “Recent Performance” section, data from the Center For Social Services (CSSR) website (CWS/CMS 2010 Quarter 1 Extract) indicated that during the last of these periods (Apr 09-Mar 10), only 1 child exited to reunification. Consequently, the County’s recent results fall well below the National Standard for this measure (75.2%) and the statewide performance levels for probation-supervised youth. Between January 2008 and March 2010, statewide levels ranged from 52.0% (Jan-Dec 08) to 62.0% (Apr 09-Mar 10). This negative trend appears to be the result of the following:

- For the past year, Probation’s placement unit has worked diligently to reduce the number of probationers who are Court-ordered into suitable placement, specifically group homes. Historically, probationers’ placement in group homes was used as an alternative sanction when other community and institutional programs failed to adjust delinquent behavior. As a result, the numbers of probationers in group homes in-county, out-of-county and out-of-state increased, particularly with those who did not

belong in group homes due to their conduct-disorder driven “acting out” behaviors. VCPA decided to decrease these numbers by narrowing their focus towards probationers who were solely abused, abandoned, or neglected. As the chart reflects below, VCPA began to see the fruits of their labor in January 2010, when the total number in group homes



reached an all-time low of 20 probationers. In addition to decreasing the numbers, probationers were no longer being placed out-of-state, and more were being placed in Ventura County instead of out-of-county. Although this benefited the placement unit due to budget and workforce reductions in placement staff, the change in focus adversely affected the trend in the outcome data. In June 2009, outcome data for Ventura County showed probationers being reunified with their families within the first 12 months of placement at 40%. Three months later in September 2009, no probationers were being reunified with their families within the first 12 months and this negative trend has stayed the same since. The reason – less probationers in group homes because placement is no longer used as an alternative sanction. Additionally, there has been an increase in use of alternative detention, community-based programs such as Wraparound and juvenile specialty court programs that have been successful in keeping probationers from being removed from their homes.

Those probationers who are placed because they have been abused, abandoned and/or neglected are typically clients, in most cases, that either do not have a home to return to or the home is inappropriate for their return, particularly within the first 12 months of their placement. It is anticipated that this negative trend will be maintained as long as VCPA’s current philosophy regarding the placement of probationers is continued. Although efforts will continue in reunifying more clients with their families within the first year of their placement, it is not realistically expected that the numbers will reach the level of the National Standard or the state’s performance levels. It is significant to note, however, that despite the negative trend, VCPA has successfully achieved many of its strategies and milestones to date and is on track to complete those still pending.

**Child Welfare Additional Policy/ Activity/ System Enhancements**

In addition to the activities outlined in the SIP matrix, the County of Ventura is implementing additional system enhancements and modifications that will enhance the responsiveness and effectiveness of the current system and support the current scope of work identified in the SIP matrix. The policy changes listed have been implemented effective November 2010. The activities and system enhancements listed will be implemented over the next 12 months.

## **Policy Changes**

Interviewing policy changes. In physical and sexual abuse cases involving children, warrants will be sought to independently interview children in an appropriate environment away from the influence of the alleged perpetrator. Also, in addition to the hotline referral report, the new policy will require interviews of all reporting parties by the assigned field social worker as part of the investigative process.

Guardianship policy changes. The new policy regarding probate guardianship will require that all referrals associated with the case shall remain open until the initiation of the guardianship has been completed. Probate guardianships are commonly used to establish a safe environment for the child, usually with a relative, and with the least disruption to the child. This legal action is critical to assure that the caretakers of the child will seriously fulfill their role and obligation to nurture and protect the child. As such the referral will not be closed until assurance had been made that this action has occurred.

## **Activities and System Enhancements**

- Development and implementation of the necessary protocols and practices for Children & Family Services to access medical or mental health records in order to obtain information that may be used to evaluate the stability and risks associated with families that may have mental illness or other medical conditions that may impact the safety of a child.
- Development and provision of additional training to Children & Family Services social workers regarding intervention techniques, evaluation strategies, and case planning with families and individuals with mental illness.
- Inclusion of an enhanced segment for interviewing skills and techniques as part of the annual training plan. All staff will be required to participate in the training over the next 12 months.
- Formation of an independent functional unit dedicated to the monitoring and assessment of staff performance and compliance to established policies and professional practices.
- Peer case reviews by a third-party are an important aspect of professional oversight. Bringing in outside experts to identify strengths and challenges promotes learning through detailed examination of county practice. Inter-county agreements to perform peer case review were established and will occur on December 17, 2010. An inter-county relationship will allow for detailed case reviews that are kept within the bounds of confidentiality and will yield an objective review that can be used for the betterment of the work performed by staff. In addition, a case review tool will be created in collaboration

with the California Social Work Education Center (CalSWEC). The new case review tool will adhere to the evidence-based practice model and will advance quality assurance methodologies.

- Secure the services of an independent third party entity to perform a professional standards review of the Children & Family Services system. Objectivity is paramount in order to fully assess the strengths or weaknesses of a system. Therefore, the Children & Family Services Department will establish and participate in a third-party review assessing the standards and policies of the Children & Family Services system.
- Perform a legislative review to assess the legal options regarding the ability to intervene and/or remain legally connected to a known dependency case beyond the period currently allowed by law. This review will have particular focus on cases that may have mental health risks, substance abuse or other risk factors that may require continual oversight. Future State or Federal legislative requests may be developed as appropriate to allow for the involvement of Children & Family Services with dependent cases where mental health risk factors are associated with child's safety.

**Target 1: Increase the percent of children who do not experience substantiated abuse/neglect during the six-month period following an initial substantiated abuse/neglect referral (Child Welfare Only - Measure S1.1).**

**Current Performance:**

Results reported in SafeMeasures show that 91.1% of children did not experience a substantiated allegation during the six-month period between October 1, 2008 and March 31, 2009. Ventura County's current performance falls below the National Standard for this measure (94.6%) as well as recent statewide performance (93.1%). The County of Ventura will improve performance on this measure from 91.1% to 95.0%, increasing the percentage of children who do not experience substantiated abuse/neglect during the six-month period following an initial substantiated abuse/neglect referral.

**Improvement Goal 1.0: Standardize response and intervention models for referrals that do not result in an open case.**

**Strategy 1.1** Gain an understanding of the reasons for recurrence in families involved in referrals that are substantiated but do not result in open cases.

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

**Strategy Rationale** – The county's performance has fluctuated on this measure. A more consistent performance for this measure can be expected with improvements in SDM and TDM implementation.

Milestone	Timeframe	Assigned to	Completed
<p><b>1.1.1</b> The Data Management Team will review and monitor CWS/CMS and SDM data to identify and separate data entry errors from actual instances of recurrence.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	East County Regional Program Manager	Completed
<p><b>1.1.2</b> Develop and conduct targeted-staff data-entry training as identified and recommended by the data management team. Establish a workgroup to review current referral association policy and make recommendations for possible change to policy.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                      Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	Administration and Ventura/Central Regional Program Managers	In Progress
<p><b>1.1.3</b> A random sample of cases will be selected and an in-depth case review of identified instances of recurrence to evaluate and categorize common factors in recurrence.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	Administration and Ventura/Central Regional Program Managers	Completed

	<p><b>1.1.4</b> Utilize the data and case review information to examine services for need capacity and utilization. Modify and augment existing response and intervention models.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>East County Regional Program Manager</p>	<p>Pending</p>									
	<p><b>Strategy 1.2</b> Standardize the completion of the Structured Decision-Making (SDM) Risk Assessment</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>CAPIT</td> </tr> <tr> <td><input type="checkbox"/></td> <td>CBCAP</td> </tr> <tr> <td><input type="checkbox"/></td> <td>PSSF</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>N/A</td> </tr> </table>	<input type="checkbox"/>	CAPIT	<input type="checkbox"/>	CBCAP	<input type="checkbox"/>	PSSF	<input checked="" type="checkbox"/>	N/A	<p><b>Strategy Rationale</b> – To appropriately identify needs and link to services based on the risk level.</p>		
<input type="checkbox"/>	CAPIT												
<input type="checkbox"/>	CBCAP												
<input type="checkbox"/>	PSSF												
<input checked="" type="checkbox"/>	N/A												
<p>Milestone</p>	<p><b>1.2.1</b> The Structured Decision-Making work group will analyze <del>utilize</del> Safe Measures application SDM Risk Assessment completion compliance data. <del>to isolate and reveal possible barriers to compliance.</del></p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>In Progress</p>									
	<p><b>1.2.2</b> Conduct SDM process (Ongoing) continuous process improvement event (Kaizen) to streamline SDM tool completion.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Kaizen Team</p>	<p>In Progress</p>									
	<p><b>1.2.3</b> Establish a county-level minimum compliance goal and monitor via current data quality assurance methods.</p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Pending</p>									
	<p><b>1.2.4</b> Utilize Children’s Research Center case reading model to determine and assist individual social workers in addressing barriers to assessment compliance.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Pending</p>									
	<p><b>1.2.5</b> Modify existing SDM policy and procedure.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p>	<p>Pending</p>									

	<p><b>1.2.6</b> Develop and conduct training specific to SDM policy changes.</p>		<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p>	<p>Pending</p>
<p><b>Strategy 1.3</b> Standardize the use of risk Team Decision Making (TDM).</p>		<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> – Risk Team Decision Making provides family engagement and linkage to services.</p>		
<p><b>Milestone</b></p>	<p><b>1.3.1</b> Utilize TDM strategy group to review existing risk TDM process and related policies and procedures to identify opportunities for engagement of family and linkage to services and make recommendations for policy change.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Consider moving milestone after 1.3.3. Need to complete focus group before policy changes.</p>	<p>Assigned to</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>In Progress</p>
	<p><b>1.3.2</b> Review substantiated referral data by the Data-Management Team to Determine the reasons factors-including-resource-needs as to why a TDM was not held.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>In Progress</p>
	<p><b>1.3.3</b> Utilizing the results of a focus group targeted at TDM participants policies and procedures will be modified.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Administration and Ventura/ Central Regional Program Managers</p>	<p>Pending</p>
	<p><b>1.3.4</b> Develop and conduct targeted training. Monitor to ensure compliance by reviewing monthly data at the supervisor's and manager's meetings.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Administration and Ventura/ Central Regional Program Managers</p>	<p>Pending</p>

<p><b>Strategy 1.4</b> Standardize the use and process of the Multi-Disciplinary Team (MDT) - Differential Response model.</p>	<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> – Multi-Disciplinary Teams facilitate engagement of community partners that support family stability through the provision of targeted services.</p>
<p><b>1.4.1</b> Establish a workgroup to review MDT policy and procedures. in order to identify current gaps in services, procedures and/or resources.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p> <p>Completed</p>
<p><b>1.4.2</b> Assess and monitor the current MDT process through observation and discussion at MDT meetings. In addition, barriers or gaps in services will be identified through MDT consumer surveys.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p> <p>Completed</p>
<p><b>1.4.3</b> Develop and administer consumer surveys to identify barriers or gaps in services.</p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                      Year 2: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p> <p>In Progress</p>
<p><b>1.4.4</b> Determine policy and procedure changes and identify necessary resources.</p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p> <p>In Progress</p>
<p><b>1.4.5</b> Develop and conduct targeted training. MDT coordinator will monitor to ensure compliance by attending MDT meetings on a reviewing monthly data quarterly basis. at the supervisor's and manager's meetings.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                      Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p> <p>In Progress</p>

Assigned to

Timeframe

Milestone

	<p><b>1.4.6</b> Implement MDT model throughout Ventura County.</p>		<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4          Year 3: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Completed</p>
<p><b>Strategy 1.5</b> Initiate an evidence based prevention program for child abuse referrals.</p>			<p><input type="checkbox"/> CAPIT  <input checked="" type="checkbox"/> CBCAP  <input checked="" type="checkbox"/> PSSF  <input type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> – Use of evidence based, in home service model will address environmental safety, child health and parent-child bonding.</p>	
<p><b>Milestone</b></p>	<p><b>1.5.1</b> Research and identify an evidence based program that addresses the needs of the targeted children and their families.</p>	<p>Timeframe</p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Completed</p>
	<p><b>1.5.2</b> Establish a workgroup to assess needs and resources.</p>	<p>Timeframe</p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Completed</p>
	<p><b>1.5.3</b> Assess needs and resources to develop policy and procedure to begin program implementation.</p>	<p>Timeframe</p>	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to Administration and Ventura/ Central Regional Program Managers</p>	<p>Completed</p>

	<p><b>1.5.4</b> Develop and conduct targeted training to implement a pilot program.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p>	<p>Completed</p>
	<p><b>1.5.5</b> MDT workgroup will monitor to ensure compliance with policies and procedures. by reviewing monthly data at the supervisor's and manager's meetings.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Pending</p>
<p><b>Improvement Goal 2.0: Standardize current intervention models for substantiated referrals that result in Family Maintenance (FM) cases.</b></p>				
<p><b>Strategy 2.1</b> Gain an understanding of the reasons for recurrence in families involved in referrals that are substantiated and result in FM cases.</p>				
		<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> - The county's performance has fluctuated on this measure. A more consistent performance for this measure can be expected with continued analysis of data related to recurrence.</p>	
<p>Milestone</p>	<p><b>2.1.1</b> The data management team will review and monitor CWS/CMS and SDM data to identify FM cases that experience a recurrence of abuse and/or neglect in order to gain an understanding of the reasons for recurrence.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to Ventura/ Central Regional Program Managers</p>	<p>Completed</p>
	<p><b>2.1.2</b> The data management team will conduct an in-depth case review of identified instances of recurrence to evaluate and categorize common factors in recurrence.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to Ventura/ Central Regional Program Managers</p>	<p>In Progress</p>
	<p><b>2.1.3</b> Utilize the data and case review information to examine services for need capacity and utilization. Modify and augment existing response and intervention models.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to Ventura/ Central Regional Program Managers</p>	<p>Pending</p>

<p><b>Strategy 2.2</b> Standardize face-to-face contacts to ensure that the parent has the support needed to maintain custody of child(ren).</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> – Quality of contacts are predictors of recurrence.</p>
<p><b>2.2.1</b> Through the use of workgroups assess current policies and procedures to identify consistency of information included in a face to face contact.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p> <p>Completed</p>
<p><b>2.2.2</b> Ensure that the type of information entered into CWS/CMS consistently meets expectations.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p> <p>In Progress</p>
<p><b>2.2.3</b> Develop and conduct targeted training regarding consistency of information entered during a face to face contact.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p> <p>Pending</p>
<p><b>Strategy 2.3</b> Services provided will be matched to client's needs.</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> – SafeMeasures data show that while the family strengths and needs assessments are being completed, the importance of matching the services to the results of these assessments is critical to reducing the recurrence of maltreatment.</p>
<p><b>2.3.1</b> Establish a workgroup to review current process and timeframe focusing on the provision of matching services. Case plans services will be reviewed to ensure they address petition counts and the areas of priority identified on the SDM Family Strengths and Needs Assessment.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to Ventura/ Central Regional Program Managers</p> <p>Pending</p>

<p><b>2.3.2</b> Facilitate a focus group to determine how services are secured once the case goes from family reunification to family maintenance.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Pending</p>
<p><b>2.3.3</b> Utilizing the results of the focus group and workgroup, policies and procedures will be modified and resource needs identified.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Pending</p>
<p><b>2.3.4</b> Develop service matrix to map current services offered to parents and children placed at home.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Ventura/ Central Regional Program Managers</p>	<p>Pending</p>
<p><b>2.3.5</b> Develop and conduct targeted training. Monitor to ensure compliance by reviewing monthly data at the supervisor's and manager's meetings.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Administration and Ventura/ Central Regional Program Managers</p>	<p>Pending</p>

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

- Focus on ensuring the consistency in operational issues across CFS regions.
- Philosophical/cultural shift towards ensuring consistency of the incorporation of best practice and evidence based models.
- Identify and develop subject matter experts. Specifically for evidenced based programs.
- Coordinate with community partners as it relates to their lack of resources, specifically poverty prevention resources. This factor hinders the efforts to keep children safe and support families in their effort to maintain a safe and stable home.
- The need to integrate prompt delivery of Public Assistance programs, such as Food Stamps and Cash Assistance to families in crisis.

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

Education and training to develop subject matter experts, in order to increase buy in from staff in regards to standardized response and intervention for referrals that do not result in a child removal. Training would include:

- Technical support and training from Children's Resource Center (CRC).
- Technical training by CWS/CMS helpdesk.
- Standardize the completion of Structured Decision Making (SDM) Risk Assessment.
- Utilization of continuous improvement tools and methodologies.

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

- Review existing contracts with community partners, and outline areas of specialization in order to ensure resources are being maximized.
- Collaborate with Children's Research Center to provide technical support to assist CWSW's in assessing barriers to compliance.
- Assess and standardize the goals of TDM Strategy Group in collaboration with the Data Management Team to identify opportunities for engaging families and linking to services available.

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

Mandated time frames have been identified as creating circumstances whereby children have to be returned home sooner than would have been preferred:

- Promote legislation to change the mandate to complete the investigation within the first 30 days. Currently if the investigation goes over 30 days a case plan needs to be prepared and services need to be offered. Many times this is unnecessary, if there was more time allowed.
- Make regulatory changes to FR and FM case time frames. Many times time runs out trying to get the services in and completed, thereby reunifying sooner than the agency feels appropriate.

**Target 2: Decrease the percent of children who re-enter care during the 12 months following reunification (Child Welfare Only -Measure C1.4).**

**Current Performance:**

Based on the most recent results for California, the County's performance will have exceeded statewide levels for the first time in seven consecutive report periods. Results reported in SafeMeasures show that 9.4% of children reentered foster care during the 12-month period between October 1, 2007 and September 20, 2008. Ventura County's current performance exceeded the National Standard for this measure (9.9%) as well as recent statewide performance (11.3%). The County of Ventura will maintain performance to exceed the National Standard resulting in fewer children who re-enter care during the 12 months following reunification. Strategies selected to improve this measure will positively impact other measures such as placement stability.

**Improvement Goal 1.0: Standardized use of SDM reunification assessment and risk reassessment tools.**

**Strategy 1.1** Standardize completion of Structured Decision Making (SDM) Reunification Assessment.

<input type="checkbox"/>	CAPIT	<b>Strategy Rationale</b> – To effectively and consistently
<input type="checkbox"/>	CBCAP	assess a family's readiness for reunification.
<input type="checkbox"/>	PSSF	
<input checked="" type="checkbox"/>	N/A	

Milestone	Timeframe	Year 1: Year 2: Year 3:	Assigned to	In Progress
<p><b>1.1.1</b> The Structured Decision-Making work group will utilize SafeMeasures application SDM Reunification Assessment completion compliance data to isolate and reveal possible barriers to compliance.</p> <p><b>1.1.2</b> Establish a county-level minimum compliance goal and monitor via current data quality assurance methods.</p> <p><b>1.1.3</b> Utilize Children's Research Center case reading model to determine and assist individual social workers in addressing barriers to assessment compliance.</p>		<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p> <p>Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	East County Regional Program Manager	In Progress
		<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	East County Regional Program Manager	Pending
		<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	East County Regional Program Manager	Pending

	<p><b>1.1.4</b> Modify existing policy and procedure.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration/ East County Regional Program Manager</p>	<p>Pending</p>
	<p><b>1.1.5</b> Develop and conduct targeted training. Monitor to ensure compliance by reviewing monthly data at the supervisor's and manager's meetings.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Administration/ East County Regional Program Manager</p>	<p>Pending</p>
	<p><b>Strategy 1.2</b> Standardize completion of Structured Decision Making Risk Reassessment.</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> – To effectively and consistently assess family's risk level in order to prevent early termination of services.</p>	
	<p><b>1.2.1</b> The Structured Decision-Making work group will utilize SafeMeasures application SDM Risk Reassessment completion compliance data to isolate and reveal possible barriers to compliance.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>East County Regional Program Manager</p>	<p>In Progress</p>
	<p><b>1.2.2</b> Establish a county-level minimum compliance goal and monitor via current data quality assurance methods.</p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>East County Regional Program Manager</p>	<p>Pending</p>
	<p><b>1.2.3</b> Utilize Children's Research Center case reading model to determine and assist individual social workers in addressing barriers to assessment compliance.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>East County Regional Program Manager</p>	<p>Pending</p>
	<p><b>1.2.4</b> Modify existing policy and procedure.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration/ East County Regional Program Manager</p>	<p>Pending</p>
	<p><b>1.2.5</b> Develop and conduct targeted training. Monitor to ensure compliance by reviewing monthly data at the supervisor's and manager's meetings.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Administration/ East County Regional Program Manager</p>	<p>Pending</p>

Milestone

Timeframe

Assigned to

**Improvement Goal 2.0: Standardized case dismissal process and procedures.**

Strategy 2.1 Gain an understanding of reasons for re-entry.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		<b>Strategy Rationale</b> - To identify additional preventive strategies to reduce the incidence of re-entry.	
<b>Milestone</b> 2.1.1 The data management team will review and monitor CWS/CMS and SDM data to identify and separate data entry errors from actual instances of re-entry.  2.1.2 Develop and conduct targeted staff data entry training as identified and recommended by the data management team.  2.1.3 Conduct an in-depth case review of identified instances of re-entry to evaluate and categorize common factors in re-entry.  2.1.4 Utilize the data and case review information to examine services for need capacity and utilization. Modify and augment existing response and intervention models.	Timeframe	Year 1: <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4	Completed		
		Year 1: <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4	In Progress		
		Year 1: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4	In Progress		
		Year 1: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4	Pending		
<b>Strategy 2.2</b> Aftercare Services will be provided by matching services to client's needs.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		<b>Strategy Rationale</b> – Aftercare Services matched to client's needs will reduce the risk of re-entry.	
<b>Milestone</b> 2.2.1 The data team will review cases resulting in reentry to identify and evaluate common factors.	Timeframe	Year 1: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4 Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4	In Progress		
		Year 1: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4 Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4	In Progress		

<p><b>2.2.2</b> Develop a service matrix that addresses identified needs.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>East County Regional Program Manager</p>	<p>Pending</p>
<p><b>2.2.3</b> Determine policy &amp; procedure changes and resource needs.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration/ East County Regional Program Manager</p>	<p>Pending</p>
<p><b>2.2.4</b> Develop and conduct targeted training. Monitor to ensure compliance by reviewing monthly data at the supervisor's and manager's meetings.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Administration/ East County Regional Program Manager</p>	<p>Pending</p>
<p><b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b></p> <ul style="list-style-type: none"> <li>• Need to establish and integrate the consistent use of SDM in decision making in a timely manner</li> <li>• Use SDM data to identify barriers to assessment compliance.</li> <li>• Incorporate best practices policies to establish minimum level compliance.</li> <li>• Train and implement the case reading model developed by Children's Research Center to ensure consistency in operational practices</li> </ul>			
<p><b>Describe educational/training needs (including technical assistance) to achieve the improvement goals.</b></p> <ul style="list-style-type: none"> <li>• Develop subject matter experts</li> <li>• Develop and conduct targeted training related to data entry.</li> <li>• Technical support and training from Children's Resource Center (CRC)</li> <li>• Technical training by CWS/CMS helpdesk</li> <li>• Utilization of continuous improvement tools and methodologies.</li> </ul>			
<p><b>Identify roles of the other partners in achieving the improvement goals.</b></p> <ul style="list-style-type: none"> <li>• Children's Research Center to provide technical support.</li> <li>• Development of community organization plan with community partners</li> </ul>			

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

- Regulatory changes to clarify varying interpretations of case management timeframes.



	<p><b>1.1.4</b> Determine policy and procedure changes and identify necessary resources.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Oxnard/ Central Regional Program Managers</p>	<p>Pending</p>									
	<p><b>1.1.5</b> Develop and conduct targeted training. Monitor to ensure compliance.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Administration and Oxnard/ Central Regional Program Managers</p>	<p>Pending</p>									
	<p><b>Strategy 1.2</b> Initiate the adoption home study process earlier.</p>	<table border="1"> <tr> <td><input type="checkbox"/></td> <td>CAPIT</td> <td rowspan="4"><b>Strategy Rationale</b> – Improved stability for foster youth to be placed in a home that has been approved for adoption.</td> </tr> <tr> <td><input type="checkbox"/></td> <td>CBCAP</td> </tr> <tr> <td><input type="checkbox"/></td> <td>PSSF</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>N/A</td> </tr> </table>	<input type="checkbox"/>	CAPIT	<b>Strategy Rationale</b> – Improved stability for foster youth to be placed in a home that has been approved for adoption.	<input type="checkbox"/>	CBCAP	<input type="checkbox"/>	PSSF	<input checked="" type="checkbox"/>	N/A		
<input type="checkbox"/>	CAPIT	<b>Strategy Rationale</b> – Improved stability for foster youth to be placed in a home that has been approved for adoption.											
<input type="checkbox"/>	CBCAP												
<input type="checkbox"/>	PSSF												
<input checked="" type="checkbox"/>	N/A												
<p>Milestone</p>	<p><b>1.2.1</b> Establish a workgroup to review current licensing and adoption processes to develop a Unified Home Study project plan and a Unified Home Study process which can be used for both adoption and licensing purposes. Combine Foster Care and Adoption materials.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Oxnard/ Central Regional Program Managers</p>	<p>Pending</p>									
	<p><b>1.2.2</b> Determine policy and procedure changes and identify necessary resources.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Oxnard/ Central Regional Program Manager</p>	<p>Pending</p>									
	<p><b>1.2.3</b> Develop and conduct targeted training.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Administration and Oxnard/ Central Regional Program Managers</p>	<p>Pending</p>									

Assigned to

Timeframe

	<p><b>1.2.4</b> Implement Unified Home Study process and monitor to ensure compliance. Monitor to ensure compliance by reviewing monthly data at the supervisor's and manager's meetings.</p>		<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	Oxnard/ Central Regional Program Managers	Pending
	<p><b>Strategy 1.3</b> Increase the number of guardianship/ adoptions for children without a specified home through child specific targeted recruitment.</p>		<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> – Matching available children with committed caregivers will increase permanency outcomes.</p>	
Milestone	<p><b>1.3.1</b> Identify the barriers/reasons to match the children.</p>	Timeframe	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	Oxnard/ Central Regional Program Managers	Pending
Milestone	<p><b>1.3.2</b> Obtain technical assistance on child specific recruitment (Annie E. Casey foundation and other counties)</p>	Timeframe	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	Oxnard/ Central Regional Program Managers	Pending
	<p><b>1.3.3</b> Develop targeted child recruitment work plan.</p>	Timeframe	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	Oxnard/ Central Regional Program Managers	Pending
<p><b>Improvement Goal 2.0: Provide services to address barriers to permanency.</b></p>					
	<p><b>Strategy 2.1</b> Develop resources and strategies to match unmet needs of youth exiting to permanency.</p>		<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> - Youth and children often exhibit behaviors that pose barriers to permanency.</p>	
Milestone	<p><b>2.1.1</b> Explore the viability of implementing Multidisciplinary Treatment Foster Care (MTFC) program.</p>	Timeframe	<p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	Oxnard/ Central Regional Program Managers	Completed

	<p><b>2.1.2</b> Identify and address barriers and gaps to services through consumer focus groups or surveys.</p> <p><b>2.1.3</b> Secure public and/or private providers to fill identified gaps in service.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p> <p>Indicate completion date for defining process.</p>	<p>Administration and Oxnard/ Central Regional Program Managers</p> <p>Oxnard/ Central Regional Program Managers</p>	<p>Completed</p> <p>Pending</p>
<p><b>Strategy 2.2</b> Provide permanency support services to caregivers.</p>	<p><b>Strategy Rationale</b> – Providing permanency support to caregivers will increase the likelihood that caregivers will make a permanent commitment.</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input checked="" type="checkbox"/> PSSF  <input type="checkbox"/> N/A</p>		
<p>Milestone</p>	<p><b>2.2.1</b> Develop written case manager responsibility materials relevant to the support of caretakers.</p> <p><b>2.2.2</b> Develop policy and procedures and identify necessary resources.</p> <p><b>2.2.3</b> Re-evaluate existing contracted services being offered and assess gaps to expand current resources and strategies and/or develop new services.</p> <p><b>2.2.4</b> Develop and conduct targeted training. Monitor to ensure compliance by reviewing monthly data at the supervisor's and manager's meetings.</p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 1: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Administration and Oxnard/ Central Regional Program Managers</p>	<p>Pending</p> <p>Pending</p> <p>Pending</p> <p>Pending</p>

<p><b>Strategy 2.3</b> Reassess and provide services to biological parents to support reunification post PP.</p>		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A		<p><b>Strategy Rationale</b> – Return to biological parents is another form of permanency.</p>		
		<p><b>Timeframe</b></p>		<p><b>Assigned to</b></p>		
<p>Milestone</p>	<p><b>2.3.1</b> Evaluate and modify current policy and procedures to include reassessment of biological parents in Permanency Planning cases.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Oxnard/ Central Regional Program Managers</p>			<p>Pending</p>
	<p><b>2.3.2</b> Evaluate current contracted family reunification services for gaps and accessibility.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Administration and Oxnard/ Central Regional Program Managers</p>			<p>Completed</p>
	<p><b>2.3.3</b> Develop a service matrix that addresses identified needs.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input checked="" type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Oxnard/ Central Regional Program Managers</p>			<p>Pending</p>
	<p><b>2.3.4</b> Develop resources and strategies to meet unmet needs.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4</p>	<p>Oxnard/ Central Regional Program Manager</p>			<p>Pending</p>
<p><b>Describe any additional systemic factors needing to be addressed that support the improvement plan goals.</b></p>						
<ul style="list-style-type: none"> <li>• The need to develop subject matter experts.</li> <li>• The diminishing resources for advertising and media.</li> <li>• Recognize caregivers perception/ belief system (reluctance to get emotionally engaged) and internal culture and responsibilities of long term foster care.</li> <li>• Overcome apathy towards biological parents at the 18 month mark of planning (i.e. the perception that services/resources are terminated).</li> <li>• Case management culture based on legal timeframes (mandates/regulations) relating to continued involvement of parents.</li> <li>• Continued budgetary crisis resulting in inconsistent resources (e.g. community worker availability)</li> </ul>						

- Need to develop buy-in from staff (licensing & adoptions).

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

- Develop subject matter experts.
- Promote buy-in from staff (licensing, adoptions, & court staff).
- Annie Casey will provide technical support, for cross-training between licensing and adoptions to maximize resources.
- Foster Care and Kinship Education through community colleges to provide education to caregivers interested in adoption.
- Utilization of continuous improvement tools and methodologies.

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

- Annie Casey will provide technical support.
- Foster Parent Association will provide marketing (Foster Parent mentors)
- Kids and Families Together to provide pre-adoption and post-adoption services and in-home training for relative caregivers.
- Ventura County faith based organization (Cornerstone, ACTION, Ventura Missionary Church, Clergy Council) participate in current recruitment strategies.
- Recruitment Committee (comprised of Supervisor Bennett's office, Sup. Zaragosa, ACTION John Franklin, Arrow Child and Family Ministries, Children Services Auxiliary) will team up to link resources.
- Education to adoptive families regarding the continuity of services at adoption.

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

- Case management timelines/parameters.
- Redefine the method of entering placement changes in order to prevent recording multiple same placements.
- Increase the reimbursement rate for foster parents.
- Ongoing guidance and support services for guardianship cases to prevent re-entry.

**Target 4: Increase the percent of children who are reunified with their parent(s) or primary caregiver(s) within 12 months of entering care (Probation Only - Measure C1.1)**

**Current Performance:**

Data from the CSSR website (CWS/CMS 2008 Quarter 3 Extract) indicated that during the last of these periods (Oct 07-Sep 08), five children exited to reunification and of these, none exited within 12 months of entry. Results from the CWS/CMS 2009 Quarter 1 Extract refresh the Oct 07-Sep 08 point (2 of 10 [20%] exits to reunification occurred within 12 months) and provide two new points for 12-month periods ending Dec 08 and Mar 09. During the latter periods, 2 of 10 (20%) and 2 of 6 (33%) children respectively exited to reunification within 12 months. The County's recent results fall well below statewide performance levels for probation-supervised youths. Between January 2007 and March 2009, statewide levels ranged from 51.5% (Jan-Dec 08) to 54.8% (Jul 07-Jun 08). The County of Ventura will improve performance on this measure by meeting the National Standard (75.2%) to increase the percentage of children who are reunified with their parent(s) or primary caregiver(s) within 12 months of entering care.

**Improvement Goal 1.0: Improve assessments and case plans.**

**Strategy 1.1** Improve assessments and case plans to increase reunification outcomes.

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

**Strategy Rationale** - The Peer Quality Case Review (PQCR) process indicated the need for (a) early family engagement and case planning prior to youth placement; (b) communication of case plan goals with the youth's caregivers; (c) developing case plans that are individualized; and (d) case plan development training.

<p><b>Milestone</b></p>	<p><b>1.1.1</b> Attend specialized training for placement Probation Officers working with foster youth including, but not limited to Probation Placement Officer Core, case planning, and family engagement. Attend training offered by UC Davis Extension (The Resource Center for Family-Focused Practice) and in-house training provided by the Probation Agency and Children Family Services.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Placement Supervisor, Agency Training Coordinators, Supervision Probation Officers, Assigned Probation Officers</p> <p>Steve/Leonard Arturo/Karin (Ongoing work in progress – all to attend appropriate training as scheduled by UC Davis, VCPA Training Unit and CFS)</p>
<p><b>1.1.2</b> Revise current intake process that occurs while the youth is in custody and before he/she is placed or returned to an out-of-home placement. Engage youth, birth parents, probation staff, counselors, therapist, coaches, relatives and/or group home providers in the case planning process by scheduling on-going appointments, and contacting them via telephone and mail.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Placement Supervisor, SrDPO</p> <p>Steve/Leonard (Revision of intake process complete, engagement of assigned POs ongoing)</p>	<p>Placement Supervisor, SrDPO</p> <p>Steve/Leonard (completed)</p>
<p><b>1.1.3</b> Identify community resources that assist foster youth with challenges that impede reunification efforts (substance abuse counseling, anger management, mental health therapy, parenting classes, domestic violence, etc). A resource list will then be created immediately for Probation Officers, including but not limited to community organizations and websites. The tool will be used as needed for each individual case.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Placement Supervisor, SrDPO</p> <p>Steve/Leonard (completed)</p>	<p>Placement Supervisor, SrDPO</p> <p>Steve/Leonard (completed)</p>
<p><b>Strategy 1.2</b> Develop an intake questionnaire tool designed to assist youth, families, and assigned Probation Officers to develop realistic case plans.</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF</p>	<p>Assigned to</p>	<p>Strategy Rationale - It is the philosophy of the Probation Agency that the goal of reunification should guide placement, case planning, case management and</p>	<p>Strategy Rationale - It is the philosophy of the Probation Agency that the goal of reunification should guide placement, case management and</p>

<p><input checked="" type="checkbox"/> N/A</p>	<p>service delivery. Developing a questionnaire tool to assist all parties involved with foster youth would reinforce growth in developing realistic case plans for families.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Juvenile Division Manager Placement Supervisor</p>	<p>Assigned to</p>	<p>Gina/Steve (completed)</p>
<p>1.2.1 Develop questions that assist Probation Officers to obtain participation from youth and families to create a case plan with realistic goals and timeframes.</p> <p>1.2.2 Develop questions that facilitate early concurrent planning. Identify immediate family members (parents, grandparents, aunts/uncles, great aunts/great uncles, siblings, non-relatives) and educate parents/caregivers about the foster care process.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Placement Supervisor SrDPO Assigned POs</p>	<p>Steve/Leonard Arturo/Karin (completed &amp; ongoing work in progress)</p>	
<p>Milestone</p>	<p>Developing a questionnaire tool to assist all parties involved with foster youth would reinforce growth in developing realistic case plans for families.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Placement Supervisor Sr DPO</p>	<p>Steve/Leonard (JPOC on a quarterly basis, JF critical case reviews on a monthly basis)</p>
<p>Milestone</p>	<p>1.3.1 Schedule meetings to educate JF Commitment Staff about placement youth risk factors and needs. This may occur during staff meetings. Other training may involve Supervising Deputy Probation Officers and Senior Deputy Probation Officers who will then forward the information to Juvenile Hall staff.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Placement Supervisor Sr DPO</p>	<p>Steve/Leonard (JPOC on a quarterly basis, JF critical case reviews on a monthly basis)</p>
<p>Milestone</p>	<p>1.3.1 Schedule meetings to educate JF Commitment Staff about placement youth risk factors and needs. This may occur during staff meetings. Other training may involve Supervising Deputy Probation Officers and Senior Deputy Probation Officers who will then forward the information to Juvenile Hall staff.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Placement Supervisor Sr DPO</p>	<p>Steve/Leonard (JPOC on a quarterly basis, JF critical case reviews on a monthly basis)</p>

<p><b>1.3.2</b> Assigned Probation Officer and JF Commitment Staff to begin meeting on a bi-monthly basis to review youth's progress while in custody, case plan objectives, child/family's needs, and release plans. The process should also include parents. They are to be invited to a minimum of one meeting per month.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>SrDPO, JF Commitment Supervisors</p>	<p>Leonard (work on bi-monthly mtg. w/ JF staff and to meet with parents on a monthly basis)</p>
<p><b>Improvement Goal 2.0: Enhance family engagement.</b></p>			
<p><b>Strategy 2.1</b> Involve birth families in the planning and decision-making process.</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> - Probation utilizes local group home providers to encourage family involvement in treatment. Involving birth families enhances the chances for reunification. Also, facilitating visits between foster youth with their parents is a vital component to reunify families.</p>	
<p><b>2.1.1</b> Develop and implement family team meetings during the intake process to review reunification needs and goals. The assigned Probation Officer will facilitate the meeting. Team meetings should include parents, relatives, group home providers, JF Detention Staff and the assigned Probation Officer.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>SrDPO Assigned POs</p>	<p>Leonard Arturo/Karin (ongoing work in progress)</p>
<p><b>2.1.2</b> Identify relatives and/or individuals that will offer support to birth parents/guardian during the reunification process and after the youth is reunified with his/her family.</p>	<p>Year 1: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4          Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>SrDPO Assigned POs</p>	<p>Leonard Arturo/Karin (ongoing work in progress)</p>
<p>Milestone</p>	<p>Assigned to</p>		

<p><b>2.1.3</b> Increase the frequency of visits to exceed the current mandate leading up to reunification to help facilitate the reunification transition.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>SrDPO Assigned POs</p>	<p>Leonard Arturo/Karin (ongoing work in progress)</p>
<p><b>Strategy 2.2</b> Improve communication between the assigned Probation Officer and the birth parent. The Court and Probation's expectations should be discussed with families from the beginning.</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> - Increasing a family's knowledge of the process from the beginning will provide a clear understanding of how to successfully reunify with their child.</p>	
<p><b>2.2.1</b> Engage group home providers, Probation Officers, parents, and/or relatives within 60 days of placement to discuss expectations and goals in efforts to achieve successful reunification. Revisions can then be made for those case plans that were initiated prior to the 60 days.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned Probation Officers</p>	<p>Arturo/Karin (ongoing work in progress)</p>
<p><b>2.2.2</b> Implement a work schedule that permits Probation Officers will to be available a few weekend and evening hours during the week to increase meetings with youth and families that cannot meet during regular business hours (8 a.m.-5 p.m.). Weekend hours may be scheduled on an as-needed basis.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to Placement Supervisor, SrDPO Assigned POs</p>	<p>Steve/Leonard Karin/Arturo (completed)</p>
<p><b>2.2.3</b> Seek resources and funding for families in need of services; transportation, housing, parenting classes.</p>	<p>Year 1: <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>SrDPO Assigned POs</p>	<p>Leonard Karin/Arturo (ongoing work in progress)</p>
<p><b>Strategy 2.3</b> Identify support groups that support family engagement and reunification.</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> - The County's Children and Family Services Agency offers support services to foster families. Probation foster families could also benefit from those support systems. Identifying those specific services could offer support and stability once youth reunifies with his/her family.</p>	

Milestone

Assigned to

Milestone	Timeframe	Assigned to	Terry/Steve Leonard/Karin Arturo (ongoing work in progress thru mtgs. like CSOC, IPERC & PAC)
<p><b>2.3.1</b> Meet with Community Partners and group home providers to identify supportive services available to biological families.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Division Mgr., Plcmt Supervisor, SrDPO, Assigned POs</p>	<p>Terry/Steve Leonard/Karin Arturo (ongoing work in progress thru mtgs. like CSOC, IPERC &amp; PAC)</p>
<p><b>2.3.2</b> Seek input from Children's Services System Oversight Committee (CSOC) to identify services that promote timely reunification, best practices, gaps in services that support reunification and to evaluate the roles and expectations of group home providers that promote family participation. This process will be captured via survey. The information will be included in a resource guide to be utilized by Probation Officers.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Division Mgr., Placement Supervisor, SrDPO</p>	<p>Terry/Steve Leonard (ongoing work in progress)</p>
<p><b>2.3.3</b> Seek assistance from the Probation Advisory Committee to identify successful reunification services and best practices from other probation departments. The information will be provided to the Probation Officers.</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 2: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                      Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Division Mgr., Placement Supervisor, SrDPO</p>	<p>Terry/Steve Leonard (ongoing work in progress)</p>
<p><b>Improvement Goal 3.0: Enhance service delivery.</b></p>			
<p><b>Strategy 3.1</b> Refer families to community resources that offer support and contribute to positive reunification outcomes including: in-home services, mental health or counseling services, substance abuse services, parenting support, child care, housing, financial assistance and transportation.</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p><b>Strategy Rationale</b> - Targeted services that meet individualized needs of children and families are instrumental to achieving family reunification and ensuring youth safety.</p>	

<p>Milestone</p>	<p><b>3.1.1</b> Obtain resource guides utilized by Community Partners that include services for foster youth. Identify effective community-based interventions and programs that emphasize family interactions. The information is to be provided to youth and families in the form of a resource guide.</p>	<p>Timeframe</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>Division Mgr., Placement Supervisor</p>	<p>Terry/Steve (ongoing work in progress)</p>
<p><b>3.1.2</b> Refer families to in-home services and community services. Identify successful services and maintain contact with service providers to monitor assistance to families.</p>			<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input checked="" type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>SrDPO Assigned POs</p>	<p>Leonard/ Karin Arturo (ongoing work in progress)</p>	
<p>Milestone</p>	<p><b>Strategy 3.2</b> Implement a resource guide for linkages and referrals to services to include housing employment, health care, transportation, education, support groups and counseling.</p>	<p>Timeframe</p>	<p><input type="checkbox"/> CAPIT  <input type="checkbox"/> CBCAP  <input type="checkbox"/> PSSF  <input checked="" type="checkbox"/> N/A</p>	<p>Strategy Rationale - Educating parents about what is available in their community is important in their discovery for independence. A family will have a better chance of being successful if they can utilize resources in their own community as transportation is often a problem for these families.</p>		
<p>Milestone</p>	<p><b>3.2.1</b> The Probation Officer is to provide a resource guide to families that reunify and to youth with plans to emancipate.</p> <p><b>3.2.2</b> Educate parents and youth to utilize resource guide(s) and seek services independently as needed.</p>	<p>Timeframe</p>	<p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input checked="" type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p> <p>Year 1: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 2: <input type="checkbox"/> Q1 <input type="checkbox"/> Q2 <input checked="" type="checkbox"/> Q3 <input type="checkbox"/> Q4                  Year 3: <input type="checkbox"/> Q1 <input checked="" type="checkbox"/> Q2 <input type="checkbox"/> Q3 <input type="checkbox"/> Q4</p>	<p>Assigned to</p>	<p>SrDPO Assigned POs</p> <p>SrDPO Assigned POs</p>	<p>Leonard, Karin, Arturo</p> <p>Leonard, Karin, Arturo</p>

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

- Miscoding of data (e.g. results and values reported for the numerators and denominators used to compute the percents for Measure C1.1 likely reflect local miscoding of reunification for Probation-supervised youth exiting foster care)
- Local problems in coding exits from foster care and ambiguity of the data in CWS/CMS regarding entries to care make it difficult to gain a clear understanding of the reunification results for probation supervised youth.
- During the POCR process, Probation Officers and Peer Counties recommended that Placement Probation Officer complete Placement Officer CORE training before or shortly after being assigned to the Juvenile Placement Unit. However, new Probation staff is generally assigned to the Juvenile Placement Unit because usually there is a need to fill a position in the unit. Due to other required training for peace officers, it makes it extremely difficult to require that placement training also be completed during the first year of employment. The same would apply if a new supervisor or other management employees are assigned to the Juvenile Placement Unit.
- In addition, having a small number of probation staff operating the Juvenile Placement Unit is a deficiency for foster youth and their families. It simply does not allow for probation staff to fully explore resources, implement procedures, seek funding streams, develop programs, etc. Given the various State mandates and regulations, it is simply overwhelming for a small unit to carry out all the possible operations that Children and Family Services (CFS) offers. Although it is an impediment, with the collaborative relationship with CFS it is hoped that we will continue to improve the delivery of services.

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

- During the POCR process, Probation Officers expressed a need for training in several aspects of youth services related to timely reunification, specifically in regards to Title IV-E and Division 31 regulations and group home expectations and requirements. The interviews and focus groups revealed that parents' unwillingness to participate in services as a significant barrier to achieving reunification (parents' lack of participation; parents would not sign case plan; parents' unwillingness to participate and engage in services; resistive parents. Parents' unwillingness to participate is important because the court is not able to order resistive parents to participate in reunification services. This in turn, highlights the critical role that case management plays in achieving successful parent engagement with unwilling parents.
- Probation Officers assigned to case work could benefit from training specifically designed for probation staff to create effective case plans, develop mechanisms to build relationships with youth and their families, and strengthening the

process for transitioning youth from foster care to his/her family or primary caregiver. Refer to Improvement Goal 1.0 for strategies identified to improve in this area.

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

The Ventura County Probation Agency continues to work collaboratively with other County Departments and Community Partners. The partnership includes Children and Family Services, Behavioral Health, Juvenile Delinquency Court, and community-based organizations. These partnerships all have one goal in common and that is to provide quality care to foster youth in our County and address issues that face this population when needed. Their input and support will be extremely vital for Probation to accomplish the goals as identified. Assistance from the Probation Training Unit and UC Davis Extension, The Family Resource Center for Family-Focus Practice, will also be instrumental in increasing the percent of children who are reunified with their parents or primary caregiver within 12 months of entering care.

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

No regulatory or statutory changes are suggested at this time. The Probation Agency is committed to making changes as identified with hopes to improve the percent of youth reunified with their families within 12 months of entering care.

## CWSOIP Narrative

In FY 09-10, CWSOIP funds were used to support a variety of activities that supported implementation of the system improvement plan. In support of efforts to reduce recurrence of abuse or neglect (Target 1), Ventura County has implemented differential response services to provide early intervention services to family. In some cases early intervention specialists accompany emergency response social workers in meeting with families and in others, the early intervention specialists engage the family in services subsequent to the emergency response investigation.

There are two main components of the County's differential response services, both operating under the oversight of a common multi-disciplinary team. The first component is the PATH program and the second is the SafeCare program. The SafeCare program is an evidence-based, in-home parent training curriculum. Designed to reduce the recurrence of child maltreatment, families served are those identified as having a history of neglect and/or physical abuse, or have risk factors for neglect and/or abuse. Based on a home visitation model, SafeCare services are focused on children ages 0-8 and include enhancing and improving parenting skills in three primary areas as follows:

1. Child Healthcare;
2. Home Safety and Hazard Prevention; and
3. Parent-Child/Parent-Infant Interaction.

Services are provided via weekly 90 minute sessions over the course of approximately four months with approval by County to extend the time. SafeCare is typically delivered in the home by trained, Bachelor-level staff carrying caseloads of approximately 10 families each.

PATH is the other main component of the County's differential response services. PATH in Ventura County is an approach to ensuring safety by expanding the ability of child welfare to respond to reports of possible child abuse and neglect. This fundamental shift in practice utilizes three paths, allowing for a broader set of responses for engaging families at the first signs of concern. Involvement occurs through innovative community partnerships that help support families in need before further problems develop. The three paths are as follows:

- Path 1: Community Response;  
 Path 2: Joint Child Welfare and Community Response; and  
 Path 3: Child Welfare Services Response.

Allegation types accepted for PATH services include:

- Lack of basic necessities
- Unattended health/medical needs
- Parent/Child Discord
- Parental discord, child present
- Inadequate Supervision
- Chronic Neglect

- Excessive Corporal Punishment
- Teen Pregnancy

Services include an average of 4 - 6 visits per case and include the Family Matrix or other evidence-based assessment tool and an exit interview, whenever possible.

System Improvement Plan strategies to reduce the number of children in long-term care (Target 3) are also supported through a variety of foster care recruitment and retention strategies broadly referred to as “best match.” A primary goal of the Recruitment, Development and Support program is to increase the number of licensed foster homes. Achieving this goal promotes the best match effort by increasing placement options, thereby increasing the likelihood that the child is placed in a home that is best matched to the needs of the child. The Recruitment/Retention staff provide assistance with the pre-application process, complete initial best match assessments, offer support for caregivers in connection with a child’s entering a new placement and are available on an ongoing basis to “trouble-shoot” and provide assistance to caregivers to help maintain and/or stabilize the placement.

Making and supporting relative placements are also considered key components of the best match strategy. Securing a relative home as a child’s initial placement following an ER investigation requires two things. The first is identifying an individual(s) who is able and willing to accept placement of a relative child. Second, the required approval process must be completed. Recent efforts to strengthen the existing approval process for emergency placements will allow more children to be placed initially with a relative(s). These efforts have focused on (a) freeing up staff in the Relative Approval Unit to respond to social worker requests for relative approval during dayshift hours and (b) training the nightshift and a backup team to complete emergency relative approvals during nights and weekends.

Three-year CAPIT/CBCAP/PSSF Services and Expenditures Summary  
Proposed Expenditures  
Worksheet 1

(1) COUNTY: Ventura County (2) PERIOD OF PLAN: 1/29/10 thru 1/28/13 (3) YEAR: 1  
 (4) FUNDING ESTIMATES — CAPIT: \$230,368.00 CBCAP: \$48,176.00 PSSF: \$547,210.00 OTHER: \_\_\_\_\_

Line No.	Title of Program / Practice	SIP Strategy No., if applicable	Name of Service Provider, if available	CBCAP			PSSF						OTHER SOURCES	NAME OF OTHER	TOTAL	
				CAPIT	HI	I2	I3	I4	G1	G2	G3	G4				G5
1	CANEC	1	Kids and Families Together		\$48,176			\$48,176								\$48,176
2	Partnership for Safe Families and Communities, The Designated Child Abuse Prevention Council" (CAPC activities and infrastructure)	N/A	Aspirant	\$117,121												\$117,121
3	Clinical Case Management (CCM)	3	Kids and Families Together					\$32,000								\$32,000
4	Post-Adoption Therapy (PAT)	3	Kids and Families Together					\$48,000								\$48,000
5	In-Home Parent Aide Services	3	Kids and Families Together					\$30,000								\$30,000
6	In-Home Parent Aide Services	1	Aspirant					\$174,426		\$158,634	\$15,792					\$174,426
7	In-Home Therapy Services	1	Aspirant					\$147,796			\$147,796					\$147,796
8	Child Abuse Prevention Program (CAPP)	N/A	Public Health	\$113,247												\$113,247
9	School Based Child Welfare Support	N/A	Oxnard School District					\$114,988		\$114,988						\$114,988
Totals				\$230,368	\$48,176			\$48,176	\$547,210	\$158,634	\$130,780	\$147,796	\$10,000			\$825,754

