

## California – Child and Family Services Review Signature Sheet

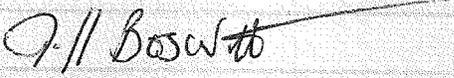
For submittal of: SIP Progress Report

County	Sierra County
CSA Period Dates	2007-2010
SIP Period Dates	March 12, 2011 to March 12, 2014
Outcome Data Period	March 30, 2011 to March 30, 2014

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**\*Signatures must be in blue ink**

Mail the original Signature Sheet to:

Children and Family Services Division  
Outcomes and Accountability Bureau  
California Department of Social Services  
744 P Street, MS 8-12-91  
Sacramento, CA 95814

# California Child and Family Services Review

## Annual System Improvement Plan Progress Report

MARCH 30, 2011 TO MARCH 30, 2014

SIERRA COUNTY HEALTH AND HUMAN SERVICES-  
SOCIAL SERVICES DEPARTMENT



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# Introduction

## INTRODUCTION

SIERRA COUNTY'S SOCIAL SERVICES DEPARTMENT IN COLLABORATION WITH THE SIERRA COUNTY PROBATION DEPARTMENT COMPLETED THE SIERRA COUNTY SYSTEM IMPROVEMENT PLAN FOR THE PERIOD OF MARCH 12, 2011 THROUGH MARCH 12, 2014. SIERRA COUNTY'S SOCIAL SERVICES DEPARTMENT UTILIZED THE CALIFORNIA CHILD AND FAMILY SERVICES REVIEW (C-CFSR) COMPONENTS, AS OUTLINED IN THE ASSEMBLY BILL 636 IN JANUARY OF 2004, TO CREATE THE SYSTEM IMPROVEMENT PLAN. THE THREE COMPONENTS OF THE C-CFSR ARE, AS LISTED:

- **PEER QUALITY CASE REVIEW** – SIERRA COUNTY'S PEER QUALITY CASE REVIEW WAS COMPLETED IN MAY OF 2010 BY PEERS FROM HUMBOLDT, LASSEN AND SHASTA COUNTY PROBATION DEPARTMENTS AND PLUMAS, YUBA, TUOLUMNE, DEL NORTE AND HUMBOLDT COUNTY SOCIAL SERVICES DEPARTMENTS. THE FOCUS ARE OF THE PEER QUALITY CASE REVIEW WAS THE "EXIT TO PERMANENCY AND/OR AFTERCARE WITH A FOCUS ON RELATIVE PLACEMENT".
- **COUNTY SELF ASSESSMENT**- SIERRA COUNTY COMPLETED THE COUNTY SELF ASSESSMENT ON DECEMBER 15, 2010. SIERRA COUNTY CONVENED A PLANNING COMMITTEE/WORKGROUP THAT PLANNED AND COORDINATED THE COUNTY SELF ASSESSMENT PROCESS, ALONG WITH DRAFTING THE ACTUAL COUNTY SELF ASSESSMENT REPORT.
- **SYSTEM IMPROVEMENT PLAN**- SIERRA COUNTY COMPLETED THE SYSTEM IMPROVEMENT PLAN ON MARCH 12, 2011. SIERRA COUNTY UTILIZED A PLANNING COMMITTEE/WORKGROUP AGAIN TO PLAN AND COORDINATE THE SYSTEM IMPROVEMENT PLAN PROCESS. THIS COMMITTEE/WORKGROUP REVIEWED ALL THE INFORMATION LEARNED THROUGH THE PEER QUALITY CASE REVIEW PROCESS AND THE COUNTY SELF ASSESSMENT PROCESS AND DRAFTED THE SYSTEM IMPROVEMENT PLAN. THE SYSTEM IMPROVEMENT PLAN OUTLINES IMPROVEMENTS IN OUTCOMES THAT SIERRA COUNTY WILL STRIVE TO ACHIEVE OVER THE COURSE OF THE SYSTEM IMPROVEMENT PLAN. THIS SYSTEM IMPROVEMENT PLAN ALSO SERVES AS AN OPERATIONAL AGREEMENT BETWEEN THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES AND SIERRA COUNTY. THE SYSTEM IMPROVEMENT PLAN WAS APPROVED BY SIERRA COUNTY'S LOCAL GOVERNING BOARD.

AS PART OF THE C-CFSR PROCESS TO ENSURE CONTINUOUS MONITORING, COUNTIES ARE TO COMPLETE AND SUBMIT ANNUAL SYSTEM IMPROVEMENT PLAN PROGRESS REPORTS. SIERRA COUNTY WAS REQUIRED TO COMPLETE THE FOLLOWING ANNUAL SYSTEM IMPROVEMENT PLAN PROGRESS REPORTS: MARCH 2012, MARCH 2013 AND MARCH 2014. UNFORTUNATELY, THE CHILDREN'S SERVICES OUTCOMES AND ACCOUNTABILITY BUREAU (CSOAB) DID NOT RECEIVE ANY OF THE SIERRA COUNTY ANNUAL SYSTEM IMPROVEMENT PLAN PROGRESS REPORTS THAT WERE DUE ANY OF THESE YEARS. IN AN EFFORT TO MEET THE REQUIREMENTS EXPLAINED IN WELFARE AND INSTITUTIONS CODE SECTION 10601.2 THAT ALL COUNTIES ARE REQUIRED TO PARTICIPATE IN THE C-CFSR PROCESS, CSOAB HAS GRACIOUSLY ALLOWED SIERRA COUNTY TO COMPLETE A COMPILED ANNUAL SYSTEM IMPROVEMENT PLAN PROGRESS REPORT TO COVER THE SPAN OF THE YEARS FROM MARCH 2011 TO MARCH OF 2014. COMPLETING AND SUBMITTING THE COMPILED 2011-2014 ANNUAL SYSTEM IMPROVEMENT PLAN PROGRESS REPORT WILL NOT ONLY BRING SIERRA COUNTY INTO COMPLIANCE WITH THE C-CFSR PROCESS, BUT WILL ALSO ALLOW SIERRA COUNTY TO ADEQUATELY PREPARE FOR THE COMPLETION FOR THE NEXT COUNTY SELF ASSESSMENT DUE IN OCTOBER OF 2014, ALONG WITH THE NEXT SYSTEM IMPROVEMENT PLAN THAT IS DUE IN MARCH OF 2015.

SIERRA COUNTY HEALTH AND HUMAN SERVICES HAS UNDERGONE SERIOUS RESTRUCTURING IN REGARDS TO PERSONNEL SINCE THE COMPLETION OF THE SYSTEM IMPROVEMENT PLAN IN 2011. ALL OF THE HEALTH AND HUMAN SERVICES STAFF THAT WORKED ON THE 2011 SYSTEM IMPROVEMENT PLAN ARE NO LONGER EMPLOYED WITH THE AGENCY, INCLUDING THE DIRECTOR OF HEALTH AND HUMAN SERVICES, THE ASSISTANT DIRECTOR OF HEALTH AND HUMAN SERVICES, THE SOCIAL WORKER SUPERVISOR, ALONG WITH SOME OF THE SOCIAL SERVICES LINE AND SUPPORT STAFF. THE LOSS OF INSTITUTIONAL KNOWLEDGE REGARDING CRITICAL PROTOCOLS, PROCEDURES, REQUIREMENTS, DEADLINES, REPORTS, ETC. . . IS MASSIVE AND DEVASTATING TO A DEPARTMENT. DEPARTMENTS CAN FEEL THE LOSS OF THIS INSTITUTIONAL KNOWLEDGE WHEN ONE STAFF RETIRES AFTER YEARS OF SERVICE, SO THE LOSS THAT SIERRA COUNTY HAS ENDURED OVER THE PAST FEW YEARS WITHIN THE SOCIAL SERVICES DEPARTMENT HAS BEEN MONUMENTAL. IT IS FOR THIS REASON THAT SIERRA COUNTY HAS FAILED TO COMPLETE AND SUBMIT ANNUAL SYSTEM IMPROVEMENT PLAN PROGRESS REPORTS FOR THE YEARS OF 2011, 2012 AND 2013.

IT IS ALSO WORTH NOTING THAT THIS COMPILED 2011-2014 SIERRA COUNTY ANNUAL SYSTEM IMPROVEMENT PLAN PROGRESS REPORT WILL BE COMPLETED TO THE BEST EFFORT POSSIBLE BY THE CURRENT SIERRA COUNTY HEALTH AND HUMAN SERVICES LEADERSHIP AND SOCIAL WORKER SUPERVISOR, ALTHOUGH THESE STAFF WERE NOT EMPLOYED IN THEIR CURRENT ROLES WITH SIERRA COUNTY AT THE TIME OF THE INITIAL DEVELOPMENT OR IMPLEMENTATION OF THE 2011 SIERRA COUNTY SYSTEM IMPROVEMENT PLAN. THE CURRENT LEADERSHIP STAFF AND SOCIAL WORKER SUPERVISOR WERE NOT AWARE OF THE 2011 SYSTEM IMPROVEMENT PLAN OR THE ESTABLISHED STRATEGIES AND GOALS OF THIS PLAN UNTIL RECENTLY.

THE 2011 SIERRA COUNTY SYSTEM IMPROVEMENT PLAN WAS DEVELOPED FROM THE INFORMATION GAINED THROUGH THE PEER QUALITY CASE REVIEW AND COUNTY SELF ASSESSMENT PROCESSES OF THE C-CFSR, ALONG WITH THE INPUT FROM THE PLANNING COMMITTEE/WORKGROUP. THE 2011 SIERRA COUNTY SYSTEM IMPROVEMENT PLAN WAS CREATED TO MATCH THE SOCIAL SERVICES AND PROBATION DEPARTMENTS NEEDS AT THAT CURRENT TIME. SINCE THERE HAVE BEEN MANY PERSONNEL CHANGES, SEVERE LOSS OF INSTITUTIONAL KNOWLEDGE AND LACK OF LEADERSHIP AND SUPERVISION DURING TRANSITIONAL TIMES, THE SOCIAL SERVICES DEPARTMENT LOOKS DIFFERENT TODAY THAN IT MUST HAVE IN 2010 AND 2011. THE STRATEGIES, GOALS AND TIMEFRAMES ESTABLISHED THROUGH THE 2011 SIERRA COUNTY SYSTEM IMPROVEMENT PLAN WERE GEARED TO IMPROVE THE DEPARTMENT AND THE OFFERED SERVICES AT THAT SPECIFIC TIME. THE STRATEGIES, GOALS AND NEEDS OF THE CURRENT SOCIAL SERVICES DEPARTMENT DO NOT ALIGN WITH THE PREVIOUSLY ESTABLISHED SYSTEM IMPROVEMENT PLAN AS THE DEPARTMENT HAS CHANGED GREATLY.

CHANGE IS OFTEN VIEWED AS INTIMIDATING BY MANY, BUT THE SIERRA COUNTY HEALTH AND HUMAN SERVICES STAFF BELIEVE THAT CHANGE IS A POSITIVE EXPERIENCE. CHANGE OFTEN BRINGS ABOUT NEW LEARNING OPPORTUNITIES, ADVANCEMENT IN SERVICES, THE ABILITY TO GROW FROM FEEDBACK AND SUGGESTIONS, ALONG WITH GAINING A STRONGER AND MORE COHESIVE TEAM OF EMPLOYEES. SIERRA COUNTY SOCIAL SERVICES STAFF WELCOME THE OPPORTUNITY TO ASSESS THE CURRENT SYSTEM IMPROVEMENT PLAN, OBJECTIVES AND GOALS WHILE DETERMINING THE CHANGES THAT WILL NEED TO BE MADE IN THE UPCOMING 2015 SYSTEM IMPROVEMENT PLAN.

SIERRA COUNTY IS THE SECOND SMALLEST COUNTY IN CALIFORNIA, FOLLOWING ALPINE COUNTY, WITH 3,200 RESIDENTS. DUE TO THE LOW POPULATION IN SIERRA COUNTY, THE AMOUNT OF REFERRALS RECEIVED, INVESTIGATIONS OF REFERRALS AND PLACEMENT OF CHILDREN ARE ALSO LIMITED, ESPECIALLY IF COMPARED TO SMALL, MEDIUM OR LARGE COUNTIES THROUGHOUT CALIFORNIA. THE SOCIAL SERVICES DEPARTMENT EMPLOYS ONE SOCIAL WORKER SUPERVISOR, THREE SOCIAL WORKER LINE STAFF (TWO STAFF ARE SOCIAL WORKER IIIS AND A NEWLY HIRED SOCIAL WORKER I) AND TWO SUPPORT STAFF THAT ALSO ASSIST OTHER DEPARTMENTS. ALL THE SOCIAL WORKER STAFF ARE TRAINED AND RESPONSIBLE FOR COVERING THE THREE

PROGRAMS THAT MAKE UP THE SOCIAL SERVICES DEPARTMENT: ADULT PROTECTIVE SERVICES, CHILD WELFARE SERVICES AND IN-HOME SUPPORT SERVICES.

SIERRA COUNTY PROBATION DEPARTMENT IS STAFFED BY A CHIEF PROBATION OFFICER, ONE PROBATION OFFICER AND A NEWLY HIRED PROBATION SPECIALIST. THESE THREE PROBATION DEPARTMENT STAFF HANDLE ALL THE PROBATION CASES THROUGHOUT THE COUNTY, REGARDLESS OF AGE. THE PROBATION DEPARTMENT OFTEN DOES NOT HAVE MORE THAN ONE OR TWO JUVENILES ON PROBATION THROUGHOUT A YEAR'S TIME.

DATA ANALYSIS CAN OFTEN BE SKEWED WHEN THE NUMBER OF PERSONS RECEIVING SERVICES IS SO LIMITED AND SMALL. THERE WILL BE TIMES THROUGH THE ANALYSIS SECTIONS OF THIS COMPILED 2011-2014 ANNUAL SYSTEM IMPROVEMENT PLAN PROGRESS REPORT THAT THE MOST RECENT DATA PRESENTED FOR SIERRA COUNTY IS ZERO. IT IS DIFFICULT TO APPROPRIATELY GAUGE IF OBJECTIVES AND ACTIONS ARE SUCCESSFUL WHEN THE CURRENT DATA DOES NOT SUPPORT CONCRETE IMPROVEMENTS THROUGH PERCENTAGES OR AMOUNTS, INCREASES OR DECREASES. WHEN SUCH A QUESTION IS PRESENTED WITHOUT SUPPORTING DATA, IT WAS DETERMINED TO DEEM THE OBJECTIVE OR GOAL SUCCESSFUL, AS THE SOCIAL SERVICES DEPARTMENT VIEWS LESS INVOLVEMENT WITH OUR DEPARTMENT IS A GOOD OUTCOME.

## SIP Progress Report Narrative

### STAKEHOLDERS PARTICIPATION

ONE OF THE BENEFITS OF OFFERING SERVICES WITHIN A SMALL COUNTY IS THAT THE COMMUNITY MEMBERS ARE ALWAYS INTERESTED IN PARTICIPATING IN THE PLANNING OF NEW ACTIVITIES AND SERVICES. THE COMMUNITY MEMBERS CREATE OWNERSHIP IN THE PROJECT OR SERVICES, WHILE THE SOCIAL SERVICES DEPARTMENT VALUES THE COLLABORATION WITH THE COMMUNITY MEMBERS. SINCE THE COMMUNITY MEMBERS FIND OWNERSHIP IN THE PROJECT OR SERVICES, THEY TYPICALLY CONTINUE TO HOLD INTEREST IN THE OUTCOMES OR MANAGEMENT OF THE SPECIFIC PROJECT OR SERVICE.

THE FOLLOWING IS A LIST OF COMMUNITY MEMBERS THAT PARTICIPATED IN THE COUNTY SELF ASSESSMENT AND 2011 SIERRA COUNTY SYSTEM IMPROVEMENT PLAN, WHO HAVE CONTINUED TO SHOW INTEREST IN THE OUTCOMES AND MANAGEMENT OF THE SYSTEM IMPROVEMENT PLAN.

- SIERRA COUNTY BOARD OF SUPERVISORS
- FAMILY RESOURCE CENTER EXECUTIVE DIRECTOR AND STAFF
- CHILD CARE COUNCIL MEMBERS
- TODDLER TOWERS, INC. MANAGEMENT AND STAFF
- PUBLIC HEALTH STAFF
- LOCAL NEWSPAPER/MEDIA STAFF
- FIRST 5 COMMISSION MEMBERS
- SIERRA SAFE PROGRAM STAFF
- SIERRA PLUMAS JOINT UNIFIED SCHOOL DISTRICT STAFF

IN THE PAST YEARS, THERE HAVE NOT BEEN MANY FOLLOW UP MEETINGS OR INFORMATION DISSEMINATION FOR THE SYSTEM IMPROVEMENT PLAN, SPECIFICALLY. SIERRA COUNTY SOCIAL SERVICES IS PLANNING TO IMPLEMENT A BI-ANNUAL STAKEHOLDER UPDATES FOR THE SYSTEM IMPROVEMENT PLAN. THERE ARE SEVERAL DIFFERENT METHODS THAT COULD BE UTILIZED TO MEET THIS NEED AND LEADERSHIP STAFF ARE CURRENTLY DETERMINING THE BEST METHOD(S) TO USE IN 2014 AND 2015. THE FOLLOWING IS A LIST OF POTENTIAL METHODS THAT CAN BE USED TO DISSEMINATE INFORMATION REGARDING THE SYSTEM IMPROVEMENT PLAN.

- ATTEND THE SIERRA COUNTY HEALTH CARE COMMITTEE MEETINGS AND PROVIDE SYSTEM IMPROVEMENT PLAN UPDATES AT EACH QUARTERLY MEETING.
- ATTEND THE CHILD CARE COUNCIL MEETINGS AND PROVIDE UPDATES AT EACH MONTHLY MEETING.
- ATTEND TODDLER TOWERS, INC AND SIERRA PLUMAS JOINT UNIFIED SCHOOL DISTRICT STAFF MEETINGS ONCE A MONTH TO PROVIDE THE STAFF WITH UPDATES ON THE SYSTEM IMPROVEMENT PLAN.
- CREATE A BROWN BAG DISCUSSION MEETING ONCE A MONTH THAT WOULD FOCUS ON CHILD ABUSE AND PREVENTION AND INVITE ALL STAKEHOLDERS AND COMMUNITY MEMBERS THAT HAVE INTEREST. UPDATES ON THE SYSTEM IMPROVEMENT PLAN COULD BE INCLUDED ON THE STANDING AGENDA FOR THESE BROWN BAG DISCUSSION MEETINGS.
- ADD INFORMATIONAL UPDATES TO ALREADY ESTABLISHED NEWSLETTERS FROM SIERRA COUNTY HEALTH AND HUMAN SERVICES THAT ARE WIDELY DISTRIBUTED THROUGHOUT THE COUNTY AND TO EXTERNAL ENTITIES.
- CONSISTENTLY UPDATE THE SOCIAL SERVICES DEPARTMENT'S PAGE OF THE COUNTY'S WEBSITE WITH INFORMATION ON THE SYSTEM IMPROVEMENT PLAN.

## CURRENT PERFORMANCE TOWARDS SIP IMPROVEMENT GOALS

**\*PRIORITY OUTCOME MEASURE: 4B- LEAST RESTRICTIVE PLACEMENT (ENTRIES FIRST PLACEMENT RELATIVE).**

SIERRA COUNTY HAS BEEN WORKING DILIGENTLY TOWARDS THE GOAL TO INCREASE PERFORMANCE IN LEAST RESTRICTIVE SETTINGS (FIRST ENTRIES) TO 75%. AT THIS CURRENT TIME, SIERRA COUNTY HAS MET THE GOAL, AS THE DEPARTMENT DID NOT HAVE ANY PLACEMENTS DURING THE THIRD QUARTER OF 2013.

ONE OF THE STRATEGIES OF THIS GOAL IS TO INCREASE DIFFERENTIAL RESPONSE SERVICES. SIERRA COUNTY SOCIAL SERVICES DEPARTMENT DOES NOT USE DIFFERENTIAL RESPONSE, DUE TO THE SMALL SIZE OF THE COUNTY. THERE HAS BEEN A LOSS OF INSTITUTIONAL KNOWLEDGE WITHIN THE DEPARTMENT, BUT IT HAS BEEN DETERMINED THAT THE SOCIAL SERVICES DEPARTMENT HAS NEVER IMPLEMENTED NOR UTILIZED DIFFERENTIAL RESPONSE SERVICES, AS THE SERVICES ARE OUTLINED BY THE DIFFERENTIAL RESPONSE MANUAL. SIERRA COUNTY SOCIAL SERVICES STAFF HAVE NEVER ENTERED A DIFFERENTIAL RESPONSE CODE IN THE CWS/CMS SYSTEM EITHER. ALTHOUGH THE OBJECTIVES TIED TO THIS STRATEGY CAN STILL BE IMPLEMENTED AND CARRIED OUT THROUGH OTHER GOALS OR STRATEGIES, THE STRATEGY 1.4 TO INCREASE THESE SERVICES NEEDS TO BE ELIMINATED OR ALTERED TO MEET THE CURRENT DEPARTMENT. THE SOCIAL SERVICES STAFF DO FOLLOW THE CONCEPTS OF DIFFERENTIAL RESPONSE, BUT DO NOT OFFICIALLY USE DIFFERENTIAL RESPONSE DUE TO THE SMALL SIZE OF SIERRA COUNTY.

- **DATA ANALYSIS** –THERE IS NO NATIONAL STANDARD FOR THIS OUTCOME MEASURE. THE COUNTY SELF ASSESSMENT BASELINE PERFORMANCE WAS 100% FOR THE MOST RECENT 12- MONTH STUDY PERIOD OF 01/2009 TO 12/2009. THE 2011 SYSTEM IMPROVEMENT PLAN REPORTED THAT 50% WAS THE PERFORMANCE LEVEL OF THIS GOAL. SIERRA COUNTY’S CURRENT DATA ON THIS MEASURE FROM Q3 2013 IS ZERO (0) AND THE DATA FOR 2011-2012 WAS ALSO ZERO (0).

**\*PRIORITY OUTCOME MEASURE: C4.1- IMPROVE PLACEMENT STABILITY FOR KIDS IN CARE EIGHT DAYS TO TWELVE MONTHS.**

SIERRA COUNTY HAS MET THIS GOAL TO MATCH THE NATIONAL STANDARD OF 86%, AS THE DATA INDICATES THAT SIERRA COUNTY IS NOT PLACING MANY, IF ANY, CHILDREN AND IF WE ARE PLACING CHILDREN THAT THE SOCIAL SERVICES STAFF HAVE IMPROVED THE PLACEMENT STABILITY FOR THE YOUTH IN CARE.

ONE OF THE OBJECTIVES LISTED UNDER STRATEGY 2.1 STATES THAT A WRAPAROUND IMPLEMENTATION PLAN WILL BE SUBMITTED AND APPROVED BY THE CALIFORNIA DEPARTMENT OF SOCIAL SERVICES. SIERRA COUNTY HAS OPTED OUT OF SENATE BILL 163 WRAPAROUND PARTICIPATION, AS IT IS NOT COST EFFICIENT OR EFFECTIVE FOR SIERRA COUNTY TO ATTAIN WRAPAROUND STATUS. DUE TO THE SIZE OF SIERRA COUNTY, THERE IS A LACK OF FUNDING AVAILABLE TO MEET THE REQUIRED COUNTY MATCH. THIS SPECIFIC OBJECTIVE, 2.1.1, WILL NEED TO BE REMOVED FROM THE SYSTEM IMPROVEMENT PLAN. SIERRA COUNTY SOCIAL SERVICES DOES UTILIZE INDIVIDUALIZED CASE MANAGEMENT, WHICH MIMICS A WRAPAROUND STYLE AND FOCUS.

- **DATA ANALYSIS** –THE NATIONAL STANDARD FOR THIS OUTCOME MEASURE IS 86%. THE COUNTY SELF ASSESSMENT BASELINE PERFORMANCE WAS 100%. THE 2011 SYSTEM IMPROVEMENT PLAN REPORTED THAT SIERRA COUNTY’S PERFORMANCE WAS 66.7% FOR THOSE CHILDREN WITH TWO OR LESS PLACEMENTS AND 33.3% FOR THOSE CHILDREN THAT HAD MORE THAN TWO PLACEMENTS. SIERRA COUNTY’S CURRENT DATA FROM Q3 2013 SHOWS A ZERO (0). IN 2010-2011, THE DATA SHOWS THAT THIS MEASURE WAS 100% AND THERE WAS A ZERO (0) FOR THE DATA FROM 2011-2012.

**\*PRIORITY OUTCOME MEASURE: 2B AND 2C- TIMELY PROBATION OFFICER VISITS.**

SIERRA COUNTY PROBATION REPORTS ONLY TWO PLACEMENTS DURING THIS REPORTING PERIOD- ONE CHILD WAS IN A GROUP HOME PLACEMENT FROM MARCH TO JULY 2011 AND ONE CHILD WAS IN A FOSTER HOME PLACEMENT FROM MAY TO OCTOBER OF 2012. IT IS UNKNOWN AT THIS TIME IF THE PROBATION DEPARTMENT DOCUMENTED THE TIMELY VISITS OF THESE YOUTH IN THE CWS/CMS SYSTEM.

THE SOCIAL WORKER SUPERVISOR HAS BEEN WORKING CLOSELY WITH THE PROBATION OFFICER THAT IS STATIONED IN LOYALTON, REGARDING THE CWS/CMS SYSTEM. THIS PROBATION OFFICER NOW HAS A USER NAME AND PASSWORD FOR THE SYSTEM AND HAS CUSTODY OF A CWS/CMS TOKEN IN HIS OFFICE SPACE.

THIS OUTCOME MEASURE IS NO LONGER NUMBERED 2B AND 2C AS INDICATED IN THE 2011 SIERRA COUNTY SYSTEM IMPROVEMENT PLAN. THE OUTCOME MEASURE NUMBER THAT CORRELATES TO THE GOALS, STRATEGY AND OBJECTIONS LISTED IN THE PLAN IS NOW 2F. THIS CORRECTION WILL NEED TO BE MADE TO THE SYSTEM IMPROVEMENT PLAN TO REMAIN ACCURATE.

- **DATA ANALYSIS**- THE NATIONAL STANDARD FOR THIS OUTCOME MEASURE IS 90%. THE COUNTY SELF ASSESSMENT DID NOT INCLUDE A BASELINE PERFORMANCE FOR THIS OUTCOME MEASURE. THE SYSTEM IMPROVEMENT PLAN STATED THAT THERE WAS NO MECHANISM IN PLACE TO TRACK PROBATION OFFICER VISITS WITH YOUTH IN OUT-OF-HOME PLACEMENTS. THE SYSTEM IMPROVEMENT

PLAN REPORTED THAT ONCE SIERRA COUNTY WAS FULLY UTILIZING THE CWS/CMS SYSTEM THAT THE PROBATION OFFICERS VISITS WOULD BE TRACKED THROUGH THE SYSTEM. SIERRA COUNTY'S CURRENT DATA FROM Q3 2013 SHOWS A ZERO (0). THE PROBATION DEPARTMENT HAS NOT HAD A CHILD IN PLACEMENT SINCE OCTOBER 2012.

## State and Federally Mandated Child Welfare/Probation Initiatives

IN CALIFORNIA, THE KATIE A. SETTLEMENT AGREEMENT HAS BEEN A CATALYST FOR CHANGING THE WAY CHILD WELFARE AND MENTAL HEALTH DEPARTMENTS WORK TOGETHER. KATIE A. V. BONTA IS A FEDERAL CLASS ACTION LAWSUIT FILED ON BEHALF OF CALIFORNIA FOSTER YOUTH AND CHILDREN AT RISK OF OUR-OF-HOME PLACEMENT. THE KATIE A. SETTLEMENT DESIGNS A NEW FRAMEWORK FOR OFFERING AND PROVIDING MENTAL HEALTH SERVICE TO THIS SPECIALTY SUBCLASS. THE TWO KEY COMPONENTS THAT DRIVE THIS NEW FRAMEWORK ARE INTEGRATED SERVICE DELIVERY AND SHARED MANAGEMENT STRUCTURE.

THE INTEGRATED SERVICE DELIVERY IS IMPLEMENTED THROUGH THE CORE PRACTICE MODEL, THROUGH INTENSIVE CARE COORDINATION AND INTENSIVE HOME BASED SERVICES. THE SHARED MANAGEMENT STRUCTURE ENSURES THAT DECISIONS REGARDING POLICY AND PROGRAM DIRECTION ARE MADE BETWEEN THE DEPARTMENT OF SOCIAL SERVICES AND THE DEPARTMENT OF HEALTH CARE SERVICES.

ALTHOUGH SIERRA COUNTY IS A SMALL COUNTY AND A HEALTH AND HUMAN SERVICES AGENCY THAT HOUSES BOTH THE SOCIAL SERVICES AND BEHAVIORAL HEALTH DEPARTMENTS ON THE SAME CAMPUS, THERE HAD NOT BEEN AN ESTABLISHED AND SEAMLESS REFERRAL AND/OR SERVICE DELIVERY SYSTEM IN PLACE UNTIL THE RECENT WORK OF THE ACTING/ASSISTANT DIRECTOR. THE ACTING/ASSISTANT DIRECTOR ALSO HOLDS THE POSITION OF THE BEHAVIORAL HEALTH SUPERVISOR, ALONG WITH BEING RESPONSIBLE FOR THE DIRECT SUPERVISION OF THE SOCIAL SERVICES DEPARTMENT AND THE CORRESPONDING STAFF MEMBERS. THE CONNECTION OF THE ACTING/ASSISTANT DIRECTOR WITH BOTH DEPARTMENTS ALLOWS SIERRA COUNTY TO ACCURATELY IDENTIFY THESE SUBCLASS CHILDREN AND YOUTH, ALONG WITH PROMPTLY CONNECTING THEM TO NEEDED MENTAL HEALTH SERVICES.

PREVIOUSLY, THERE HAD BEEN A VAST DEAL OF MISTRUST AND/OR MISUNDERSTANDING BETWEEN THE EMPLOYEES OF EACH DEPARTMENT DUE TO THE LACK OF COMMON WORK PRACTICES. THE BRIDGE THAT THE ACTING/ASSISTANT DIRECTOR HAS BEEN ABLE TO PUT IN PLACE BETWEEN THE DEPARTMENTS AND THE STAFF MEMBERS, ALONG WITH THE IMPLEMENTATION OF SYSTEMATIC STRUCTURE THAT SUPPORTS THE INTERACTION AND COORDINATION BETWEEN THE DEPARTMENTS HAS BEEN TRIUMPHANT IN OVERCOMING THE MISTRUST AND MISUNDERSTANDING AMONG THE EMPLOYEES AND FOSTERED A COLLABORATIVE WORKING RELATIONSHIP TO BENEFIT THE CHILDREN AND YOUTH IN FOSTER PLACEMENTS.

THE ACTING/ASSISTANT DIRECTOR OF HEALTH AND HUMAN SERVICES CURRENTLY PROVIDES MONTHLY KATIE A. CLAIM STATUS UPDATES TO THE DEPARTMENT OF HEALTH CARE SERVICES, ALONG WITH COMPLETING SEMI-ANNUAL KATIE A. PROGRESS REPORTS WHICH REPORTS THE WORK FOR BOTH THE DEPARTMENTS IN SIERRA COUNTY. THE BEHAVIORAL HEALTH DEPARTMENT HAS RECENTLY ENTERED INTO AN AGREEMENT WITH KINGS VIEW CORPORATION FOR ELECTRONIC HEALTH RECORDS AND ALL-PAY BILLING SOURCES. THE ELECTRONIC HEALTH RECORDS IMPLEMENTATION TEAM, OF STAFF FROM BOTH SIERRA COUNTY BEHAVIORAL HEALTH DEPARTMENT AND KINGS VIEW CORPORATION, HAVE JUST CREATED THE KEYING GUIDE FOR THE

INFRASTRUCTURE OF SIERRA COUNTY'S SYSTEM. THE KATIE A. SUBCLASS WAS ADDED AS A SUBUNIT WITHIN THE MAIN MENTAL HEALTH SERVICES UNIT. INTENSIVE CARE COORDINATION AND INTENSIVE HOME BASED SERVICES WERE ALSO ADDED INTO THE SERVICE CODES FOR BILLING PURPOSES.

THE CHILDREN AND YOUTH REQUIRING FOSTER PLACEMENT FROM SIERRA COUNTY ARE TYPICALLY PLACED IN OUT-OF-COUNTY PLACEMENTS, DUE TO THE LIMITED IN-COUNTY PLACEMENT OPPORTUNITIES AVAILABLE. THE UNAVAILABILITY OF IN-COUNTY FOSTER PLACEMENTS PROVES TO BE THE LARGEST CHALLENGE THAT SIERRA COUNTY'S SOCIAL SERVICES DEPARTMENT FACES AT THIS CURRENT TIME. THE COORDINATION OF NEEDED MENTAL HEALTH SERVICES FOR THIS POPULATION IS HARD TO MANAGE WITH DISTANCE BETWEEN THE PLACEMENT AND THE COUNTY OFFERED BEHAVIORAL HEALTH SERVICES.

# SIERRA COUNTY ANNUAL SIP PROGRESS REPORT- ATTACHMENT 1

## Sierra County Five- Year SIP Chart

<b>OUTCOME/SYSTEMIC FACTOR:</b> Outcome Measure 4B. Least Restrictive Placement (Entries First Placement: Relative)					
<b>COUNTY'S CURRENT PERFORMANCE:</b> During the time period reviewed, Sierra County's performance was 50%. However, this is based on only two placements.					
<b>IMPROVEMENT GOAL 1.0:</b> Sierra County will increase performance in least restrictive settings (first entries) to 75%.					
<b>STRATEGY 1. 1:</b>		<b>CAPIT</b>	<b>STRATEGY RATIONALE:</b>		
<p>Increase placement with relatives or NREFMs, aided by the consistent use of Emergency Placement TDMs that include relatives/NREFMs who are potential placement sources.</p> <p><b>Sierra County did increase performance in least restrictive settings (Entries First Placement: Relative) from the baseline data of 50% to 66.7%. This improved performance did not meet the goal of 75% and was based on three (3) placements. The most current data from CDSS/ UC Berkeley Center of Social Services Research for 2013 was zero.</b></p>			<p>Research shows that children placed with relatives experience more stability in placement. Research of practice shows that use of Emergency Placement TDMs is effective in increasing the numbers of children placed with relatives or NREFMs.</p>		
<b>Milestone</b>	<b>1.1.1</b> Revise and implement policy and procedure regarding Emergency Placement TDMs, to include step-by-step procedure for arranging for, attending, and follow-up from TDMs.	<b>Timeframe</b>	<p><del>By February 2012</del></p> <p><b>Not Completed- Include in next System Improvement Plan.</b></p> <p><b>The Social Services Department needs to continue to focus on</b></p>	<b>Assigned to</b>	<p><b>Health and Human Services Leadership staff,</b> Social Worker Supervisor, with assistance of social services staff</p>

# SIERRA COUNTY ANNUAL SIP PROGRESS REPORT- ATTACHMENT 1

	<p><b>establishing, revising, implementing and training of critical policies and procedures. Health and Human Services leadership will ensure the development of a Team Decision Making policy, which will include protocols for Emergency Placement TDMs.</b></p>	
<p><b>1.1.2</b></p> <p>Train all Social Workers on the policy and procedure for arranging for Emergency Placement TDMs.</p>	<p><del>By March 2012</del></p> <p><b>Not Completed- Include in the next System Improvement Plan.</b></p> <p><b>Social Workers will require training on the Team Decision Making policy and included protocols for Emergency Placement TDMs.</b></p>	<p><b>Health and Human Services Leadership staff and Social Worker Supervisor</b></p>
<p><b>1.1.3</b></p> <p>In 90% of cases where children are removed, an Emergency Placement TDM will be held within 24 hours (or on the next business day if removal occurs over a weekend) and prior to a detention petition being heard in Court.</p>	<p><del>By March 2012 and ongoing</del></p> <p><b>Not Completed- Include in the next System Improvement Plan.</b></p> <p><b>Health and Human Services Leadership staff, along with all Social Workers, will create a tracking mechanism to monitor</b></p>	<p><b>Health and Human Services Leadership staff, CWS social workers and Social Worker Supervisor to monitor and attend</b></p>

# SIERRA COUNTY ANNUAL SIP PROGRESS REPORT- ATTACHMENT 1

			<b>this action step, after action steps 1.1.1 and 1.1.2 have been completed. The tracking mechanism will be reviewed on a monthly basis and reported to Health and Human Services Leadership staff.</b>		
<b>STRATEGY 1. 2</b>		<b>PSSF</b>	<b>STRATEGY RATIONALE</b>		
Recruit more families in Sierra County in order to increase the number of potential relative and/or NREFM placements.			Recruitment and education of more relatives and/or NREFMs will lead to increased, stable initial relative placements.  <b>The Social Services Department feels that educating and increasing the awareness within the community in regards to relative and NREFM placement could impact the number of potential families available for these services. Although there has not been any monitoring tool utilized to determined if more families have been recruited or not within Sierra County by the following action steps.</b>		
<b>Milestone</b>	<b>1.2.1</b>  Develop recruitment materials within 6 months with ongoing media placement for information regarding foster care and becoming a foster provider. This will include recruitment and education within the school system, in collaboration with the school district and county mental health.	<b>Timeframe</b>	<del>By December 2011 and ongoing</del>  <b>Not Completed- No longer applicable.</b>	<b>Assigned to</b>	<del>Administrative Secretary III, with assistance of CWS Social Workers, Social Worker Supervisor, and Assistant Director</del> <b>Family Resource Center, Plumas-Sierra Unified School District Personnel, Sierra County Behavioral Health Department staff and Health and Human</b>

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		<b>Services Leadership staff</b>
<p><b>1.2.2</b></p> <p>Identify speakers and available trainings to offer to the community by contracting with local CBO to develop curriculum and implement trainings and education for interested potential foster families.</p>	<p><del>By June 2012 and ongoing</del></p> <p><b>Completed.</b></p> <p><b>The Family Resource Center has been tasked with this action step and provides reports on the status of the action step at monthly Child Abuse Prevention Council meetings, which members of the Social Services Department attend.</b></p>	<p><del>Social Worker Supervisor, with assistance of staff and Agency Director</del></p> <p><b>Family Resource Center staff and Social Worker Supervisor</b></p>
<p><b>1.2.3</b></p> <p>Develop and implement a foster parent support group, to include relative caregivers. This would include potential collaboration with the peer mentor programs already in place through MHSA.</p>	<p><del>Begin Efforts by September 2011</del></p> <p><b>Completed.</b></p> <p><b>Collaboration with the established Peer Mentor programs through the Mental Health Services Act did not take place. The Family Resource Center has been tasked with this action step as part of their outlined PSSF work. The Family Resource Center provides reports on the status of this action step at monthly Child Abuse</b></p>	<p><del>Social Worker Supervisor with assistance of staff, Agency Director, Assistant Director and MHSA Coordinator</del> <b>and Family Resource Center staff</b></p>

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			<b>Prevention Council meetings, which members of the Social Services Department attend.</b>		
<b>STRATEGY 1.3</b>  Continue to utilize Structured Decision Making (SDM) Safety, Risk and Strengths and Needs Assessment Tools to all referrals and cases.		<b>NA</b>	<b>STRATEGY RATIONALE</b>  Regular and consistent use of the SDM tools will promote the most efficient use of limited resources. Families with the highest level of need will receive service.  <b>Social Workers are utilizing Structured Decision Making in the referral process and throughout case work, under the current supervision.</b>		
<b>Milestone</b>	<b>1.3.1</b>  SDM training and protocol development.	<b>Timeframe</b>	By August 2011  <b>Completed.</b>  <b>All Social Workers have attended formal Structured Decision Making training and continue to receive training through direct supervision. A Structured Decision Making policy has been created and implemented within the Social Services Department.</b>	<b>Assigned to</b>	Social Worker Supervisor, <del>with assistance of staff and Agency Director</del> <b>Social Workers and Health and Human Services Leadership staff</b>
	<b>1.3.2</b>  Continue to apply Structured Decision Making		Ongoing		All social worker staff, with

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<p>Tools to all referrals and cases.</p>	<p><b>Completed.</b></p> <p><b>All Social Workers are utilizing Structured Decision Making tools for all referrals and cases, under current supervision. The Social Services Department has three weekly Staff Meetings in which referrals and case staffing are discussed. Structured Decision Making tools are often discussed and reviewed during these scheduled Staff Meetings.</b></p>	<p><del>oversight provided by Social Worker Supervisor, <b>Social Workers and Health and Human Services Leadership staff</b></del></p>
<p><b>1.3.3</b></p> <p>Monitor areas of the child welfare system where Structured Decision Making is not being applied based on reports from Children’s Research Center and data from Safe Measures. Give feedback to supervisors and staff in areas where compliance with goal is not being met.</p>	<p><del>Quarterly, beginning in September of 2011</del></p> <p><b>Not Completed- Include in next System Improvement Plan, if necessary.</b></p> <p><b>Sierra County Social Services Department does not have access to Safe Measures at this time, although there is a strong interest in obtaining this access. Health and Human Services Leadership staff was able to review a print out of Sierra County’s Structured Decision Making Safe Measures report from September of 2013</b></p>	<p><del>Social Worker Supervisor, with assistance of staff</del></p> <p><b>Social Services Fiscal staff and Health and Human Services Leadership staff</b></p>

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			<p>and found that the information presented in the dashboard printout would be extremely helpful to the department, along with staff, to maintain compliance and monitor completion.</p> <p>Health and Human Services Leadership staff, along with the Social Services Supervisor, would like to research the possibility of obtaining access to Safe Measures and this will be the priority for the upcoming months.</p>	
<p><b>STRATEGY 1.4</b></p> <p>Increase Differential Response Services.</p>		<p><b>CAPIT, CBCAP, PSSF</b></p> <p><b>STRATEGY RATIONALE:</b></p> <p>Least restrictive placement will be achieved by prevention of entry/re-entry into the CWS system through family assessment, referrals to community based training such as parenting skills, respite/care and counseling.</p> <p><b>Social Workers are utilizing Differential Response concepts.</b></p> <p><b>The Social Services Department does not officially utilize Differential Response Services, due to the size of Sierra County and the number of referral/cases. The Social Workers do, however, practice the concept of Differential Response in their scope of work on a daily basis.</b></p>		

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<p><b>1.4.1</b></p> <p>Implementation of the Triple P- Positive Parenting Program, which is a system of easy to implement, proven parenting solutions that helps solve current parenting problems and prevents future problems before they arise.</p>	<p><del>By June 2013</del></p> <p><b>Not Completed.</b></p> <p><b>The implementation of the Triple P- Positive Parenting Program has not occurred. The Health and Human Services Leadership staff was able to confirm that the Family Resource Center was scheduled to implement this parenting program through their OCAP funding, but the Family Resource Center staff reported that the program was never purchased and provided to their program as indicated by the Social Services Department.</b></p> <p><b>The Health and Human Services Leadership staff would like to determine if there is a better use of funding than to purchase this parenting program for the Family Resource Center, such as providing Evidence Based Practice curriculum training for the Family Resource Center staff. The Family Resource Center has three parenting programs</b></p>	<p><del>Assistant Director, with assistance of the Social Worker Supervisor</del> <b>Heath and Human Services Leadership staff, Social Worker Supervisor, Social Worker staff, Family Resource Center staff and potentially Sierra County Behavioral Health Department staff</b></p>
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		<p>currently and the Health and Human Services Leadership staff feels that the Family Resource Center staff could benefit from implementation and fidelity training on the three current programs.</p> <p>The Family Resource Center could also be encouraged to purchase the Triple P- Positive Parenting Program through their funding streams, as well.</p>	
<p><b>1.4.2</b></p>	<p>Continued support of counseling services provided through community resources, such as the Victim Witness program and Family Resource Center through referrals for cases not warranting intervention by CWS.</p>	<p><del>Ongoing</del></p> <p><b>Completed.</b></p> <p><b>Social Workers provide referrals and information to other entities, agencies and community based organizations for services to persons who do not warrant intervention through the CWS system.</b></p> <p><b>Sierra County's Social Services Department continues to maintain and grow strong, supportive working relationships with outside entities, external and</b></p>	<p><del>Social Worker Supervisor, with assistance of staff, Agency Director and Assistant Director.</del> <b>Social Workers, Health and Human Services Leadership staff and all collaborative partners throughout Sierra County</b></p>

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			<p><b>internal agencies and community based organizations throughout the entire county. These positive relationships are necessary for continued collaborative work towards the care and safety of the community’s children.</b></p>
	<p><b>1.4.3</b> Continued support of respite care.</p>		<p><del>Ongoing</del> <b>Completed.</b> <b>Social Workers continue to provide referrals and information to those in need of respite care. Toddler Towers, Inc. offers respite care for the majority of the county through their OCAP funding. Other services will be found if alternative respite care is needed.</b></p>
<p><b>OUTCOME/SYSTEMIC FACTOR:</b> Outcome Measure C4.1. Improve Placement Stability for kids in care 8 days – 12 months.</p>			
<p><b>COUNTY’S CURRENT PERFORMANCE:</b> During the time period reviewed, Sierra County’s performance was 66.7% for those with two or fewer placements, and 33.3% for those with more than two placements.</p>			
<p><b>IMPROVEMENT GOAL 2.0:</b> Improve Placement Stability for youth in care 8 days – 12 months to meet the National Standard/Goal of 86%.</p>			
<p><b>Sierra County has improved Placement Stability for youth in care eight (8) days to 12 months from the baseline performance of 66.7% to 100% in 2011. 100% on this Outcome Measure of C4.1- Improve Placement Stability for Kids in Care eight (8) days to</b></p>			

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<p><b>12 months exceeds the National Standard/Goal of 86%. The most recent data from 2012 and 2013 shows that Sierra County does not have any data (0) for this measure.</b></p>					
<p><b>STRATEGY 2.1</b></p> <p>Implementation and utilization of Wraparound services <b>concepts in service delivery.</b></p>		<p><b>CAPIT, PSSF</b></p> <p><b>STRATEGY RATIONALE:</b></p> <p>Wraparound is designed to meet the complex needs of children who are involved with several child and family-serving systems (e.g. mental health, child welfare, juvenile justice, special education, etc.); who are at risk of placement in institutional settings; and, who experience emotional, behavioral or mental health difficulties.</p> <p><b>Sierra County is not an established Wraparound SB 163 county, due to the size of the county. Sierra County does implement and utilize the concept of wraparound through case management services offered to persons receiving services in various departments throughout the agency.</b></p>			
<b>Milestone</b>	<p><b>2.1.1</b></p> <p>Wraparound Implementation Plan submitted and approved by CDSS.</p>	<b>Timeframe</b>	<p><del>By June 2012</del></p> <p><b>Not Completed- No longer applicable.</b></p> <p><b>Sierra County is not an established Wraparound County, as it is not fiscally feasible due to the county's small population and the lack of funding for the required county match.</b></p>	<b>Assigned to</b>	<p><del>Social Worker Supervisor, with assistance of Agency Director and Assistant Director</del></p>
	<p><b>2.1.2</b></p> <p>Train staff on Wraparound services and</p>		<p><del>By September 2012 and ongoing</del></p>		<p>Services will be provided by</p>

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	<p>implement policies and procedures for the utilization of Wraparound <b>case management</b> services.</p>	<p><b>Not Completed- Include in next System Improvement Plan, if necessary.</b></p> <p>The majority of Health and Human Services employees have received official training on Wraparound services over the course of the past five years or so. Some employees have received extensive training on the subject matter. The Behavioral Health Case Manager and Parent Partner have both been trained on Wraparound services and implement the Wraparound case management practices in their daily interactions with persons receiving services. The Behavioral Health Case Manager is knowledgeable and skilled at Full Service Partnerships, through the Mental Health Services Act, which is comparable to Wraparound services.</p> <p>There currently are no policies or procedures in place within the agency for Wraparound case management practices. The Health and Human Services</p>	<p><del>CBO, as determined, with oversight by Social Worker Supervisor</del> <b>Health and Human Services Leadership staff, Behavioral Health Case Manager, Parent Partner and workgroup of pertinent employees, if needed</b></p>
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		<p>Leadership staff would need to assess if there is a strong need for policies and/or procedures pertaining to the Wraparound case management practices for the agency. If the assessment deemed that such a policy or procedure is warranted, then a workgroup of pertinent employees would be created to draft and finalize such a policy/procedure.</p>	
	<p><b>2.1.3</b> Fully implement and engage families in Wraparound <b>case management</b> services.</p>	<p><del>By June 2013</del> <b>Not Completed- Include in next System Improvement Plan, if necessary.</b>  The Health and Human Services Leadership staff will need to determine the level of inter-agency support and appropriate duties, if any, that the Behavioral Health Case Manager and Parent Partner could provide to the Social Services Department for wraparound case management services.</p>	<p>Social Worker Supervisor, <del>and CWS social workers</del> <b>Behavioral Health Case Manager, Parent Partner, Health and Human Services Leadership staff, Social Services Fiscal staff and Social Workers</b></p>

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<p><b>STRATEGY 2.2</b></p> <p>Educate community members and agencies on services provided to CWS parents and families.</p>		<p><b>NA</b></p>	<p><b>STRATEGY RATIONALE</b></p> <p>By educating the community about resource availability and engaging the community as much as possible in this process, it creates buy-in regarding certain programs offered for the purpose of child welfare services and changes the community's perception of offered services, ultimately contributing to placement stability by increasing placement options.</p> <p><b>The Social Services staff continuously educates and informs community members and agencies on the various services provided to CWS families, children and parents. The Social Services Department has community partnerships with the Family Resource Center, the Court System, Plumas-Sierra Unified School District, health care providers, day care providers, Public Health Department, Behavioral Health Department and the Sheriff's Department.</b></p>		
<p><b>Milestone</b></p>	<p><b>2.2.1</b></p> <p>Update information regarding CWS on the county website.</p>	<p><b>Timeframe</b></p>	<p><del>By December 2014</del></p> <p><b>Completed- Include in next System Improvement Plan.</b></p> <p><b>Sierra County has recently upgraded the website host. The Social Services Department had to provide current and accurate information for the department specific page at the time of the</b></p>	<p><b>Assigned to</b></p>	<p>Social Worker Supervisor and <del>with assistance of Agency Director and Assistant Director</del> <b>Health and Human Services Leadership staff</b></p>

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		<p><b>upgrade. There are processes in place to approve all changes made to Health and Human Services pages, whether the changes are additions, deletions, alterations, etc...</b></p> <p><b>The Social Work Supervisor will be responsible for ensuring that all information on the county website-</b></p> <p><b><a href="http://www.sierracounty.ca.gov">www.sierracounty.ca.gov</a> is current and accurate for the Social Services Department. If any changes are required, the Social Work Supervisor will follow the appropriate process to gain approval and implement the necessary changes.</b></p>	
	<p><b>2.2.2</b></p> <p>Educate all Health &amp; Human Services staff on various components of CWS so that they may be informed proponents of the community-based services offered and cross-train staff between HHS departments (e.g. Public Health, Mental Health, Eligibility, etc.) so that they are better able to explain available services to the clients that they serve and who are seen across systems.</p>	<p><del>Begin by December 2014</del></p> <p><b>Completed- Include in the next System Improvement Plan.</b></p> <p><b>Policies and Procedures regarding when a case should be referred to Social Services have been written and distributed to all Health and Human Services staff. Health and Human Services</b></p>	<p><del>Administrative Secretary III, with assistance of CWS social workers, Social Worker Supervisor and Assistant Director,</del> <b>Health and Human Services Leadership staff and all Health and Human Services employees</b></p>

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		<p><b>Leadership staff has scheduled joint Social Services Department team meetings to encourage collaboration and communication between the two departments, along with heightening understanding of each program specifics. Behavioral Health staff members have received training on the services offered through the Social Services Department.</b></p> <p><b>Health and Human Services Leadership staff has requested the Social Work Supervisor to create and schedule a Mandated Reporter Training for all Health and Human Services staff to attend on an annual basis.</b></p>	
	<p><b>2.2.3</b></p> <p>Reach out to community partners to form a collaborative relationship to better serve clients/consumers and connect them with those services and programs that will assist with things such as better parenting and how to avoid contact with the CWS system.</p>	<p><del>By June 2013</del></p> <p><b>Completed- Include in next System Improvement Plan, if necessary.</b></p> <p><b>As indicated above in Strategy 2.2, the Social Services Department has several positive community partnerships. A Memorandum of Understanding</b></p>	<p><b>Social Workers, Social Work Supervisor, Health and Human Services Leadership staff, other Health and Human Services Department staff and community partners</b></p>

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			<p>has been entered into with the Public Health Department to provide coordination of services. The previous Director of Health and Human Services was in the process of developing a Memorandum of Understanding between CWS and the Behavioral Health Department. It is anticipated that this development can be continued by the current Health and Human Services Leadership staff. The Social Services Department works closely with both the Family Resource Center and Toddler Towers, Inc. for referrals and coordination of services.</p>	
<p><b>STRATEGY 2.3</b></p> <p>Utilize former CWS clients and/or parent partners to provide support to foster parents.</p>	<p><b>PSSF</b></p>	<p><b>STRATEGY RATIONALE</b></p> <p>The ability to refer clients to an established aftercare program developed especially for child welfare families leaving the system will allow for increased support for the families and some continuing accountability after they leave the child welfare system, thus decreasing the chances for recidivism and reentry.</p> <p><b>The Social Services Department staff and Health and Human Services Leadership staff strongly believe in the outcomes of aftercare programs, along with the positive outcomes of peer support services. The Social Services Department has not yet implemented any system to utilize former CWS clients and/or parent</b></p>		

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		<p>partners to provide support to current foster parents at this point.</p> <p>The main concern that the Social Services staff has with this specific Strategy is that any foster families/parents that might be used through the Child Welfare System would be fully connected with a Foster Family Agency in a different, adjacent county.</p>		
<b>Milestone</b>	<p><b>2.3.1</b></p> <p>Collaborate with the Mental Health Services Act Coordinator in order to utilize the two parent partner and peer mentor positions already in place to facilitate the development of a foster care/caregiver support group or for bridging the gap during the reunification process between foster parents and biological parents is being suggested during the current plan period.</p>	<b>Timeframe</b>	<p><del>By December 2012</del></p> <p><b>Not Completed- No longer applicable.</b></p> <p><b>The Health and Human Services Leadership staff currently holds the position of the Mental Health Services Act Coordinator and has since November of 2010. The stated collaboration in this action step was not requested of the Mental Health Services Act Coordinator and the interest in utilizing the parent partner (Peer Mentor position is vacant at this point) was not known until the Leadership staff became involved in this System Improvement Plan Annual Report process through holding a different title within the agency.</b></p> <p><b>The Family Resource Center has</b></p>	<p><del>Social Worker Supervisor with assistance of Agency Director and Assistant Director</del> <b>and Family Resource Center staff</b></p>

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	<p>been tasked with this support group creation and implementation as part of their outlined PSSF work. The Family Resource Center provides reports on the status of this action step at monthly Child Abuse Prevention Council meetings, which members of the Social Services Department attend.</p>	
<p><b>2.3.2</b> Begin education within the community and local school system regarding newly established foster care/caregiver support group and promote utilization of this resource, as applicable.</p>	<p><del>By June 2013</del> <b>Not Completed.</b> As the support group has been assigned to the Family Resource Center, the Social Services Department and staff have not been closely involved in the promotion of information or education involving this resource. The Health and Human Services Leadership staff has requested that the Social Work Supervisor connect with the Family Resource Center staff to obtain a full update on the created foster care/caregiver support group,</p>	<p>Social Worker Supervisor <del>with assistance of Agency Director, Assistant Director and MESA Coordinator</del> <b>and Family Resource Center staff</b></p>

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			<p><b>including group schedule and location, average attendance, outreach activities, outreach materials used in community and school systems, etc....</b></p>		
<p><b>OUTCOME/SYSTEMIC FACTOR:</b> Outcome Measure 2B &amp; 2C <b>2F-</b> Timely Probation Officer Visits.</p>					
<p><b>COUNTY'S CURRENT PERFORMANCE:</b> We currently have no way to track Probation Officers- Foster Family visits. Once Sierra is fully utilizing CWS, this data will be able to be tracked accordingly.</p>					
<p><b>IMPROVEMENT GOAL 2.0:</b> Increase the rate of Timely Probation Officer visits with youth in out-of-home placements to 100%.</p> <p><b>There was no baseline data to compare the current data to, but the National Standard for this Outcome Measure is 90%. The fact that the Sierra County Probation Department does not place many youth in out-of-home-placements makes the Improvement Goal of increasing the rate of timely probation officer visits to 100%, which is above the National Standard, achievable. Sierra County's current date form Q3 2013 shows that there is no data (0). The Probation Department reports that they have not had a child in placement since October of 2012.</b></p>					
<p><b>STRATEGY 3.1</b></p> <p>Increased utilization of CWS/CMS system for monthly visit documentation by probation staff.</p>		<p><b>NA</b></p>	<p><b>STRATEGY RATIONALE:</b></p> <p><b>Monthly visitations with youth placed in out-of-home placements ensures proper case coordination and verifies that the needed services are being provided as the goal is to return the youth to a least restrictive setting.</b></p> <p><b>The Probation Department staff do not have many out-of-home placements and it is unknown their exact utilization of the CWS/CMS system to document the completed monthly visits.</b></p>		
<p><b>Milestone</b></p>	<p><b>3.1.1</b></p> <p>Train probation officers and office staff in CWS</p>	<p><b>Timeframe</b></p>	<p>By June 2011</p>	<p><b>Assigned to</b></p>	<p>Social Worker Supervisor, <b>Health and Human</b></p>

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	reporting requirements and procedures.	<p><b>Completed.</b></p> <p>Probation Department staff was officially trained on CWS reporting requirements and procedures during this reporting period.</p>	<p><b>Services Leadership staff and all Probation Department staff</b></p>
	<p><b>3.1.2</b></p> <p>Work with CWS Social Worker Supervisor on policies and procedures for inputting data on behalf of probation, particularly if data entry responsibilities will remain with CWS staff.</p>	<p><del>By December 2011</del></p> <p><b>Not Completed.</b></p> <p>The Probation Department staff is responsible for the input of their case specific data into the CMS/CWS system, as this responsibility does not fall within the scope of duties for the Social Services Department.</p>	<p><del>Social Worker Supervisor, Chief Probation Officer, with assistance of CWS and probation staff, as applicable</del> and <b>Probation Department staff</b></p>
	<p><b>3.1.3</b></p> <p>Regular, ongoing <del>in-service</del> training of probation personnel on the use of CWS/CMS.</p>	<p><del>Ongoing</del></p> <p><b>Completed.</b></p> <p>The Probation Department staff received official training on the use of CWS/CMS from UC Davis personnel staff during this reporting period.</p>	<p><del>Social Worker Supervisor, and Chief Probation Officer, with assistance of applicable assigned staff,</del> <b>UC Davis Personnel Staff and Probation Officers</b></p>

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<p><b>STRATEGY 3. 2</b></p> <p>Timely Probation Officer visits.</p>		<p><b>NA</b></p>	<p><b>STRATEGY RATIONALE:</b></p> <p><b>Per review of 2F Outcome Measure in CWS for Probation and per the report of the Chief Probation Officer, there were two placements during this reporting period. It could not be determined if the Probation Department staff completed the minimum visitations of one time per month or if the Probation Department staff entered their visitation data in by the end of each month.</b></p>		
<p><b>Milestone</b></p>	<p><b>3.2.1</b></p> <p>Visit children in foster placement a minimum of one time per month.</p>	<p><b>Timeframe</b></p>	<p><del>By July 2011 and ongoing</del></p> <p><b>Unable to be determined by review conducted of the data present in the CMS/CWS system.</b></p> <p><b>The Probation Department staff is responsible for the input of their case specific data into the CMS/CWS system, as this responsibility does not fall within the scope of duties for the Social Services Department.</b></p>	<p><b>Assigned to</b></p>	<p>Chief Probation Office and <del>probation officers</del> <b>Probation Department staff</b></p>

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<b>3.2.2</b>	Input visitation data by the end of each month, with oversight of reporting and visitation requirements being assigned to the Chief Probation Officer monthly.		<p><del>By July 2011 and ongoing</del></p> <p><b>Unable to be determined by review conducted of the data present in the CWS/CMS system.</b></p> <p>The Probation Department staff is responsible for the input of their case specific data into the CMS/CWS system, as this responsibility does not fall within the scope of duties for the Social Services Department.</p>	<p><del>Social Worker Supervisor and Chief Probation Officer with assistance of applicable assigned staff and</del></p> <p><b>Probation Department staff</b></p>
<p><b>DESCRIBE ANY ADDITIONAL SYSTEMIC FACTORS NEEDING TO BE ADDRESSED THAT SUPPORT THE IMPROVEMENT PLAN GOALS.</b></p> <p><b>NO ADDITIONAL SYSTEMIC FACTORS NEED TO BE ADDRESSED TO SUPPORT THE IMPROVEMENT PLAN GOALS.</b></p>				
<p><b>DESCRIBE EDUCATIONAL/TRAINING NEEDS (INCLUDING TECHNICAL ASSISTANCE) TO ACHIEVE IMPROVEMENT GOALS.</b></p> <p><b>IF AND WHEN SIERRA COUNTY SOCIAL SERVICES DEPARTMENT IMPLEMENTS SAFE MEASURES, THERE WILL BE NEED FOR SOME TECHNICAL ASSISTANCE OR TRAINING FOR THE SUPERVISORY LEVEL AND LEADERSHIP STAFF.</b></p>				
<p><b>IDENTIFY ROLES OF THE OTHER PARTNERS IN ACHIEVING THE IMPROVEMENT GOALS.</b></p> <p><b>PROBATION OFFICERS DO NOT HAVE ACCESS TO A CMS/CWS COMPUTER FOR INPUT OF DATA/DOCUMENTATION. THIS PROVES TO BE A CONCERN ON THE BEHALF OF THE SOCIAL SERVICES DEPARTMENT AS THE LACK OF ACCESS TO THE APPROPRIATE COMPUTER SYSTEM IS NOT CONDUSIVE TO TIMELY DOCUMENTATION ENTRY AND THERE IS A RELIANCE ON THE SOCIAL SERVICES DEPARTMENT/STAFF TO COMPLETE A TASK THAT IS ASSIGNED TO THE PROBATION DEPARTMENT.</b></p>				

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THERE ARE A FEW ACTION STEPS THAT ARE ASSIGNED DIRECTLY TO THE FAMILY RESOURCE CENTER FOR IMPLEMENTATION AND COMPLETION. THERE IS A CONCERN THAT THE FAMILY RESOURCE CENTER STAFF ARE NOT FULLY AWARE OF THEIR DETAILED ROLE AS OUTLINED IN THIS SYSTEM IMPROVEMENT PLAN. THE HEALTH AND HUMAN SERVICES LEADERSHIP STAFF SIMPLY NEEDS TO REVIEW THE ROLE OF THE FAMILY RESOURCE CENTER AND STAFF WITH THE FAMILY RESOURCE CENTER STAFF TO ENSURE THERE IS COMPLETE UNDERSTANDING OF THE EXPECTATIONS.

IDENTIFY ANY REGULATORY OR STATUTORY CHANGES NEEDED TO SUPPORT THE ACCOMPLISHMENT OF THE IMPROVEMENT GOALS.

NO REGULATORY OR STATUTORY CHANGES ARE NEEDED TO SUPPORT THE ACCOMPLISHMENT OF OUR IMPROVEMENT GOALS.