



EL DORADO COUNTY
HEALTH AND HUMAN SERVICES AGENCY

Daniel Nielson, M.P.A.
Director

Child Protective Services

Rec'd
5-24-12
BMR

May 17, 2012

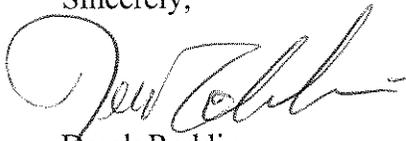
Bureau Chief
Outcomes & Accountability Bureau
Children & Family Services Division
California Department of Social Services
744 P Street, MS 8-12-91
Sacramento, CA 95814

Dear Bureau Chief,

El Dorado County's 2012 System Improvement Plan (SIP) for CWS/Probation, effective May 21, 2012 to May 20, 2017, is enclosed along with the required original signed documents and attachments.

Please contact Angela Wilson, Program Manager I - Protective Services, at angela.wilson@edcgov.us or 530-642-7385, if you have any questions.

Sincerely,



Derek Reddin
Staff Services Analyst II

Encl.

RECEIVED MAY 22 2012

Strengthening, Empowering and Protecting the Residents of El Dorado County

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EL DORADO COUNTY

System Improvement Plan

May 2012



PREPARED FOR
THE HEALTH AND HUMAN SERVICES AGENCY,
CHILD WELFARE SERVICES AND THE PROBATION DEPARTMENT,
JUVENILE SERVICES
AS PART OF THE CALIFORNIA CHILD AND FAMILY SERVICES REVIEW

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A. The SIP Narrative

2009 SIP Update

Outcome/Systemic Factor: S1.1 No Recurrence of Maltreatment

Of the six quarters since the implementation of strategies from the 2009 System Improvement Plan (SIP), 5 quarters exceeded the goal of 92.5%. Strategies including expanding usage of the Structured Decision Making (SDM) tool and the implementation of Team Decision Making (TDM) appeared to positively affect this outcome.

Outcome/Systemic Factor: C1.4 Reentry Following Reunification

Since July 2009 reentry has been reduced to under the goal of 19.9%. Strategies including expanding SDM usage, CalWORKs Linkages, TDM protocol for all case plans and family engagement are believed to have made a positive effect on reducing reentry.

Outcome/Systemic Factor: C4 Placement Stability

Since July 2009 this outcome measure has continued to fall short of the goal. The strategy to develop and implement concurrent planning was hampered due to a staffing shortage, primarily in the Adoption Unit. The strategy to increase local foster homes was not completely implemented. However, the recent implementing of Parent's Resource for Information Development Education (P.R.I.D.E.) training appears to have had positive affects already as none of the parents with foster children who have completed this training have given notice.

Outcome/Systemic Factor: Children are maintained in their own homes whenever possible and appropriate

The Probation Department employs one Supervising Deputy Probation Officer and two Deputy Probation Officers who each engage in placement activities on a part time basis while performing other duties. These serve a small population of Probation minors, usually less than 10. The majority of these are placed in group homes outside of El Dorado County. 2009 SIP improvement goals were met. All above in-custody programs remain in effect. In addition to the above programs, in December of 2011, the El Dorado County Probation Department in an effort to address minors with increasingly difficult behavioral issues and to add an additional level of services to help prevent the need of removal from the parental home, has contracted with Madera County to utilize the Madera County Correctional Camp. This camp provides a 180-day program that utilizes a combination of structure, discipline, physical conditioning and accountability in a nurturing approach in order to emphasize self-control and improve self-esteem.

The Development of El Dorado County's 2012 SIP

Formal development of the County's SIP began in January 2012 as soon as the County Self-Assessment (CSA) was completed. Focus outcomes and strategies were already being formulated by the County during the Peer Quality Case Review (PQCR) and CSA processes. Areas which stood out included placement stability, which was the focus of the May 2011 PQCR, adoption timeframes, health and education passports and reentry.

In February, El Dorado County's California Department of Social Services (CDSS) Outcomes and Accountability Bureau (CSOAB) consultant, Office of Child Abuse Prevention (OCAP) consultant and OCAP manager attended an in-person meeting with Child Protective Services (CPS) managers, a the Health and Human Services Agency (HHS) analyst assigned to CPS and the Supervising Deputy Probation Officer over placement. The meeting focused on the role and responsibilities of the new integrated 5-year SIP. Timelines were reviewed, possible focus outcomes and strategies were discussed, and the SIP Template and the OCAP SIP Checklist were reviewed.

The primary data source used to analyze the County's child welfare outcomes was the University of California, Berkeley's Center for Social Research web-based Child Welfare Dynamic Report System (http://cssr.berkeley.edu/ucb_childwelfare/). The Children's Research Center web-based SafeMeasures application was also used, especially for AB 636 outcome measure 5A Health and Education Passport, the data for which is not available through Berkeley's system at this time.

A community input form was developed which included a brief explanation of the C-CFSR cycle and the SIP. The chosen focus outcome measures included on this form in individual charts that allowed for suggesting actions that could be taken to improve each measure and identifying how the action may affect the measure. The next section of the form delineated each of the CAPIT/CBCAP/PSSF funds along with their purposes. Below each of these was a section to recommend services and note why these were important. Lastly, the form included the respondent's contact information and information for return the form to the Agency. This form was distributed to each stakeholder meeting attendee to provide written input if they preferred. This community input form was also distributed to those who could not attend one of the stakeholder meetings.

Two stakeholder meetings were held, one in February and one in March. Invitees included core representatives and recommended stakeholders along with other community partners. Both meetings were productive as possible strategies to affect the chosen focus outcomes were solicited and discussed with stakeholders. Strategy ideas were documented on large sheets of paper displayed around the room for each outcome they were expected to affect. Current and possible future uses for CAPIT/CBCAP/PSSF funds were discussed and documented in the same manner.

A South Lake Tahoe stakeholder meeting was conducted as part of a Lake Tahoe Collaborative meeting. At the previous Lake Tahoe Collaborative meeting, the community input form was distributed so members would have a month prior to the meeting to formulate ideas and discussion points.

Focus groups meetings were also conducted, and included the following participants:

- Juvenile Court Bench Officers
- Foster Parent Licensing and Education
- Social Workers and Supervisors
- Independent Living Program (ILP) Youth
- Signs of Safety (SOS) Coordinator

SIP Team Composition

Required core representatives are denoted in bold.

Child Abuse Prevention Council (CAPC)	Lori Evers, CAPC Chair
County Children’s Trust Fund (CCTF)	Elizabeth Blakemore, CAPC Coordinator
County BOS designated agency to administer CAPIT/CBCAP/PSSF Programs	Health and Human Services Agency (HHSA) Daniel Nielson, Director
County Health Department	Lynnan Svensson, Supervising Public Health Nurse
County Mental Health Department	Jenyn Darnell, LMFT - Program Coordinator
CWS administrators, managers, and social workers (includes CAPIT/CBCAP/PSSF Liaisons)	Patty Moley-Dunn, Program Manager II Angela Wilson, Program Manager I - Protective Srvs. Suzanne Ballen, Program Manager I - Protective Srvs. Jayle Goucher, Program Manager I - Protective Srvs. Anne Spuur, Social Services Supervisor II Doris Jones, Social Services Supervisor II Deidre Day, Social Worker Lisa Garcia, Social Worker Debra Brown, Social Services Aide
Foster Youth	Independent Living Program (ILP) Youth
Juvenile Court Bench Officer	Presiding Judge Suzanne N. Kingsbury Judge Steven C. Bailey Judge Warren C. Stracener Judge James R. Wagoner
Native American tribes served within the community	Malissa Tayaba, Social Services Director - Shingle Springs Band of Miwok Indians
Parents/Consumers (Last names withheld to protect confidentiality)	Ellen Jessica
Probation administrators, supervisors and officers	Gregory S. Sly, Chief Probation Officer Gary Romanko, Supervising Deputy Probation Officer Beth Borovich, Deputy Probation Officer Fabian Blanco, Deputy Probation Officer
PSSF Collaborative	Core Representatives
Resource families and other caregivers	Sheila Silan Suzanne Allen de Sanchez Bonnie Resendes
Alcohol and Drug Treatment	Cathy Ciampa
Community Action Partnerships	Tahoe Collaborative
County Children and Families Commission (Prop. 10 Commission)	Rick Alford, First 5
Court Appointed Special Advocates (CASA)	Cathie Watson, Program Director Robin Stanley
Domestic violence prevention provider	Cathy Bourland, The Center for Violence-Free Relationships Wendy Wood, Executive Director, Family Connections El Dorado
Early childhood education	Elizabeth Blakemore, Early Care and Education Planning Council, Ready by 5

Economic Development Agency	Ren Scammon, Administrative Services Officer, Housing Commission and Economic Development Health and Human Services Agency
Education	Gail Healy, Assistant Director, El Dorado County Office of Education Kaye Medellin, Executive Director Child Development, El Dorado County Office of Education Sheila Silan, Foster Youth Services

The decision-making process for determining focus areas, strategies and action steps took place during multiple SIP development meetings which included the HHSA Director, Chief Assistant Director, Assistant Director of Human Services, Program Manager II for CPS, Program Manager I - Protective Services and Staff Services Analyst II. The input received from the community stakeholder meetings and focus groups were presented and discussed at these meetings. Suggestions from the County's CDSS consultants were also considered during these discussions. Decisions regarding the SIP were made at the Department Head and management level.

Improvement goals for each focus area were discussed at multiple meetings with CWS management. Factors taken into consideration included past performance, current performance and the possible effectiveness of the strategies to be employed and agency capacity. The decision-making process for determining Probation's focus areas, goals, strategies and action steps took place during participation in the PQCR and CSA with the HHSA, SIP development meetings with the HHSA and CDSS, internal Probation SIP development meetings and other correspondence with the HHSA and CDSS.

2012 SIP Improvement Focus Outcomes / Systemic Factors

Placement Stability (Over 24 Months In Care) was identified early in the process as quarterly data reports were received and analyzed. This outcome is important because children who experience frequent placement changes often have poorer well-being outcomes. Because of this, Placement Stability was chosen as the focus of the County's PQCR which was held in May 2011. The CSA also clearly noted the room for improvement in this area. The State's Performance Improvement Plan (PIP) also notes the State-wide need for improvement in this area. The below data chart from the CSA shows the need for improvement in this area.

CFSR Measure C4.3												
Placement Stability (at least 24 months): Two or fewer placement settings												
▶ Of all children in foster care during the selected 12-month period who were in care for at least 24 months, what percent had two or fewer placements?— National Goal: 41.8%												
Start End	Jul07 Jun08	Oct07 Sep08	Jan08 Dec08	Apr08 Mar09	Jul08 Jun09	Oct08 Sep09	Jan09 Dec09	Apr09 Mar10	Jul09 Jun10	Oct09 Sep10	Jan10 Dec10	Apr10 Mar11
California	33.3	33.4	33.4	33.4	33.4	33.2	33.0	32.9	32.7	32.6	32.3	32.9
El Dorado	31.6	33.7	34.6	35.2	37.1	29.4	31.4	34.9	30.4	21.7	22.0	23.8
Difference	- 1.7	+ 0.3	+ 1.2	+ 1.8	+ 3.7	- 3.8	- 1.6	+ 2.0	- 2.3	- 10.9	- 10.3	- 9.1
% of Goal	75.6	80.6	82.8	84.2	88.8	70.3	75.1	83.5	72.7	51.9	52.6	56.9

While the County typically maintains an average near 90% of the goal for C4.1 Placement Stability (8 days to 12 months) and C4.2 Placement Stability (12 to 24 months), it has an average outcome of 73% of the goal for C4.3. The last three quarters show a significant movement away from the goal.

Adoption within 12 months (of being legally free) was selected also as recent County performance was less than 36% of the goal. The County historically has performed well in this area but has recently experienced a significant decline in adoptions completed within 12 months of a child being legally free. Currently the County's C2 Adoptions Composite is only 21.4% of the goal.

CFSR Measures C2.5												
Adoption Within 12 Months (Legally Free)												
▶ Of all children in foster care who became legally free for adoption during the selected 12-month period, what percent were then discharged to a finalized adoption within the following 12 months?- National Goal: 53.7%												
Start	Jul06	Oct06	Jan07	Apr07	Jul07	Oct07	Jan08	Apr08	Jul08	Oct08	Jan09	Apr09
End	Jun07	Sep07	Dec07	Mar08	Jun08	Sep08	Dec08	Mar09	Jun09	Sep09	Dec09	Mar10
California	55.1	55.2	55.0	55.4	56.0	56.9	58.0	59.6	61.5	63.2	64.3	65.0
El Dorado	53.8	55.8	50.0	42.6	41.7	46.5	48.4	64.0	54.2	18.8	11.1	3.4
Difference	- 1.3	+ 0.6	- 5.0	- 12.8	- 14.3	- 10.4	- 9.6	+ 4.4	- 7.3	- 44.4	- 53.2	- 61.6
% of Goal	100.2	103.9	93.1	79.3	77.7	86.6	90.1	119.2	100.9	35.0	20.7	6.3

The El Dorado County Adoption Unit has recently experienced the loss of experienced adoption social workers and experienced challenges recruiting qualified replacements. Social workers who are inexperienced in this specialized area need to be trained. During this time of transition, adoption outcomes have fallen below goal levels.

A review of County outcome measures discussed in the CSA revealed another area that CPS management felt should be immediately addressed. Initiation of Health and Education Passports experienced a substantial decline in 2008 and again in 2011. This documentation is very important for foster children as it is related to the children's health. The passport is used as a document to inform the many people who work with foster children of their individual health needs. It includes the children's medical conditions, treatments, medications and doctors contact information. At a recent foster care conference attended by El Dorado County CPS managers a previous foster child expressed the importance of having a complete and up-to-date Health and Education Passport.

This measure indicates if a health passport has been initiated for all children entering foster care. Success for this measure entails not only entering the child's health record information into the Child Welfare Services/Case Management System (CWS/CMS) but the effort required to obtain the information from pertinent sources. A Public Health Nurses (PHN) is employed to assist social workers in initiating and maintaining health passport records.

AB636 Process Measure 5A*
Health and Education Passport

▶ Percent of children entering foster care, for the first time, who have an initiated health passport (health record).

Year Quarter	2008 Q4	2009 Q1	2009 Q2	2009 Q3	2009 Q4	2010 Q1	2010 Q2	2010 Q3	2010 Q4	2011 Q1	2011 Q2	2011 Q3
California	91.0	94.6	94.3	93.5	91.6	91.6	92.8	93.2	92.3	93.1	92.2	87.9
El Dorado	50.0	91.4	90.9	81.8	81.8	86.7	95.6	86.2	76.7	76.5	46.2	33.3
Difference	- 41.0	- 3.2	- 3.4	- 11.7	- 9.8	- 4.9	+ 2.8	- 7.0	- 15.6	- 16.6	- 46.0	- 54.6

* This measure was not available in the UC Berkeley CWS/CMS Dynamic Report System and so this data was obtained from SafeMeasures. This measure is still in development and currently only tracks health records.

Again, retaining experienced staff has been an issue and it is felt that this has affected the measure. The Public Health Department and the Human Services Department were recently merged into the Health and Human Services Agency along with the Community Services and Mental Health Departments. With both CPS and Public Health being under the same umbrella agency, the coordination of efforts to maintain PHN's in the CPS unit will become more efficient.

Systemic Factor: Foster/Adoptive Parent Licensing, Recruitment and Retention

There is a continued need for additional County foster homes and foster parent recruitment. The lack of available foster homes means that having a choice to place a child with two or more prospective family is rarely an option. A child may have to be placed with a family that may not be the best fit or they may even need to be placed out of the County.

Foster parents also need to receive more ongoing support. Due to heavy caseloads responsibilities, foster parents are not always able to contact social workers quickly and easily. Relationships among foster parents should be strengthened as another form of support. This can be accomplished by encouraging monthly attendance at foster parent meetings, implementing foster parent mentoring and foster family recreational events.

Increasing the number of foster homes and encouraging closer foster parent relationships with other foster parents are likely to improve placement stability by providing more home options and strengthening the foster parents' ability to effectively manage challenges that arise.

Local System Factors

The overarching improvement area for El Dorado County is the recruitment and retention of CPS social workers. CPS has experienced frequent social worker turnover, resulting in low staffing levels. Without a solid core of experienced social workers and adequate staffing levels, the ability to maintain outcomes and the implementation of strategies to improve outcomes are hindered.

During the time period from 2005 to 2008 the social worker turnover rate was 25.14%. In 2009 and 2010 this rate dropped dramatically to 5 and 12%. It is believed that this unusually low rate was attributed to local economic conditions and nearby counties laying-off many of their child welfare workers. During 2011 and the first part of 2012 the County is beginning to see higher turnover rates again. As the job market improves and social worker positions become more plentiful, there is concern that the turnover rate will increase. El Dorado County continues to be a training ground for new social workers who often leave when a higher paying position with another county or organization becomes available. The HHS management team is actively determining other possible reasons for social worker turnover and planning strategies to improve social worker development and retention. Social worker turnover negatively affects experienced social workers who remain by increasing their workload and increasing stress, which in-turn may cause even experienced social workers who would otherwise stay with the HHS to seek employment elsewhere.

CPS challenges related to recent Adoption outcomes and Health and Education Passport performance have been primarily attributed to the loss of experienced staff members. Turnover in social workers and PHNs assigned to CPS negatively affects the ability of the HHS to complete adoptions timely and gather health information. The recruitment and training period required to bring new staff members up to speed negatively affects outcomes in the short-term. An experienced social worker is knowledgeable and connected, which allows them to accomplish much more with limited time. Without enough experienced social workers it becomes a major challenge to meet mandates and outcome goals. Addressing social worker recruitment and retention is a high priority for child welfare management. With adequate personnel, the ability to improve the County's outcomes will be substantially enhanced.

Improvement Goals

CWS: CFSR C4.3 Placement Stability (Over 24 Months in Care)

El Dorado County's goal is to increase the current eight quarter average of the percentage of goal achieved to 71% by January 1, 2013. Increase 1% more each subsequent year of the plan to attain an eight quarter average of 75% by May 20, 2017.

CWS: CFSR C2.5 Adoption Within 12 Months (Legally Free)

El Dorado County intends to increase the current eight quarter average of percentage of goal to 69% by May 20, 2013. Increase 2% more each subsequent year of the plan to attain an eight quarter average of 77% by May 20, 2017.

CWS: AB 636 5A Health and Education Passport

El Dorado County intends to increase the completion of health passports by at least 10% each plan year to achieve a total completion rate of at least 80% completion by May 20, 2017.

Probation: Children are maintained in their own homes whenever possible and appropriate

El Dorado County intends to continue to refer minors to local resources in an attempt to keep minors in their homes with their families, keeping the number of minors placed out of the home under 15. Probation will utilize local resources in an attempt to keep a minor at home with his/her family, including out-patient counseling and related services, negating the need for

placement. Local resources also include in-custody (juvenile hall) programs, such as the 60-day Substance Abuse Turnaround Education Program (STEP), the 120-day Family Reunification Program (FRP), and the 180-day Challenge Program.

Logic Model: Implemented Activities to Outcome Improvement

Focus Outcome / System Factor	Implement Activities	Impact: Outcome Improvement	
		Short/Mid-Term	Long-Term
<p>CWS Improve Placement Stability</p>	<p>Family Team Meetings Foster Parent and Kinship Support HHSA / Foster Parent Liaison P.R.I.D.E. Training Family Finding Effort (FFE) Procedure SOS Practice Integration Foster Parent Recruitment</p>	<p>Improve family engagement - better prepare and support foster families who will be better equipped to overcome challenges</p>	<p>Enhance service delivery and outcomes among children and families by maximizing the likelihood that case plans will be relevant and that families will comply with their plans.</p>
<p>CWS Improve Adoption Timeliness</p>	<p>Social Worker Recruitment, Development and Retention Structured SW Training Program Internship & LCSW Program</p>	<p>Increase the number of adoptions finalized within 12 months of being legally free</p>	<p>Increase in number of foster children who attain placement stability and the improved outcomes associate with it.</p>
<p>CWS Increase Health & Education Passport</p>	<p>Social Worker Recruitment, Development and Retention Structured SW Training Program Public Health PHN Assistance</p>	<p>Increase completion by at least 10% each year for a total rate of 80% by May 2017</p>	<p>Children are better served when their Health and Education information is documented and available</p>
<p>PROBATION Children are maintained in their own homes whenever possible and appropriate</p>	<p>Continue to refer minors to local resources to help keep minors in their homes with their families Minors ordered by the Court to participate in an in-custody program will be supervised by a DPO while in the program and will be referred to appropriate local resources upon release from custody.</p>	<p>The number of minors placed out of the home will be less than 15</p>	<p>Minors are maintained in their own home have better outcomes</p>

Current Activities

The County HHSA does have a small Placement Unit that makes placement matches and assists foster parents and kin providers. The Foster Care Licensing Unit is another small unit which assists County foster homes and provides training including P.R.I.D.E.

The County has successfully implemented a multi-disciplinary team program designated as Children and Parents Resource Team (CPRT) along with a Differential Response (DR) program.

CPRT members consist of professionals from many disciplines including CPS, Public Health, Mental Health, Office of Education, CASA and community partners. This activity has been supported by a court order which allows these organizations to share information regarding their clients. The CPRT, which meets once a week, is well attended and has become regarded as a highly effective program. Statistics have shown that families staffed at CPRT meetings and served through the DR program have a low rate of involvement with CPS thereafter.

The Linkages project has been fully implemented in El Dorado County. The Linkages project is a collaboration between the CalWORKs program and CPS. Linkages joint staffing meetings are held every other week and include the assigned CPS social worker and CalWORKs Welfare-to-Work (WTW) worker, as well as CPS supervisors, CPS and manager and WTW supervisors. During the meetings, common clients are discussed to ensure that they have a coordinated case plan through both CPS and WTW, they are receiving the most appropriate services possible and information is not lost, and that families are not falling through the cracks.

The Linkages project has served to encourage and enhance the relationship between CPS and WTW. By enhancing this relationship, the families greatly benefit by having coordinated case plans and are not being asked to complete conflicting services, for example not being required to choose between getting employment and getting their children back. Additionally, when the CPS and WTW workers discuss the family, they often learn important case details from the other. This helps them to identify the true issues in the family that need to be addressed and what services will best meet their needs. Another positive result of Linkages is that resources are pooled between CPS and WTW, thus maximizing program funding. WTW is benefited as the tasks that they are requiring of the client can be added into the court ordered CPS case plan, giving WTW's requests more weight. The success of Linkages has largely been due to management's support for the program, understanding the benefits of Linkages and the continued commitment to keep staff remain involved in the process.

The Safety Organized Practice of Signs of Safety (SOS) is beginning to be implemented in the County by CPS social workers. The University of California, Davis (UCD) Northern California Training and Research Academy has been facilitating the implementation of this new practice. The SOS practice and its tools like Safety Mapping are currently being employed during case staffing meetings. SOS has been well received by CPS staff and is already seen as a valuable practice.

New Activities

Family engagement is an area that the County would like to improve during child welfare activities. Implementation of a Family Teaming approach for families involved in or at risk of entering the child welfare system, is seen as practice which will increase placement stability as families are included in decisions regarding placement issues. This approach is based on the belief that children's outcomes improve when families are involved in decision making and when team members share responsibility for returning children to safely living with their family. This collaborative and strength-based approach can result in tailor-made plans designed to support families and ensure the safety and well-being of children. These plans identify the specific activities to be carried out by parents, friends, extended families, and other formal and

informal supports. Because the families have input in this process, better plans are developed with family ownership of the actions. This, oftentimes, means more dedication to the plan as opposed to one which someone else decided for them.

The expansion of SOS practice into many other critical case events is intended. The goal of the HHSA is to continue to work with the UCD Northern Training and Research Academy to provide continuing training to staff and expand the SOS practice throughout case lifetimes. There are immediate plans to modify the investigative narrative document used by social workers to incorporate SOS practice and terminology. It is also intended that SOS practice will be incorporated into Family Teaming approach.

Additional and improved supports for foster parents have been identified as an essential element in improving placement stability. Because of challenging caseload responsibilities of social workers, foster parent concerns are not always the first to be addressed. It can be frustrating for foster parents who cannot quickly make contact with their foster child's social worker or another staff member who can help them. A need for a foster parent liaison has been identified. This single point of contact for foster parents will be readily available to take phone calls and quickly return phone messages. This contact will serve as intermediary between foster parents and case social workers when needed. Both foster parents and social workers will benefit from this liaison as foster parents receive better customer service and social workers receive more concise requests for help.

PQCR and CSA Executive Summaries

See Attachments 1 and 2

B. Part I: CWS / Probation

1. Cover Sheet

See Attachment 3

2. CWS/Probation Narrative

All three of the previous components of current C-CFSR process including Quarterly Data Reports, 2011 Peer Quality Case Review (PQCR) and 2012 County Self-Assessment (CSA) pointed towards the need for improvement in the area of placement stability. The California Performance Improvement Plan (PIP) has also shown a State-wide need for improvement in this area. Research over the last two decades has demonstrated a strong association between frequent placement moves in foster care and poor outcomes. El Dorado County has chosen to focus on this important area by implementing a Family Teaming approach, providing more support and education to current foster parents and implementing increased foster parent recruitment.

The El Dorado County HHS feels that permanency and adoption are as important a priority as the traditional mission of ensuring safety and security for children. Quarterly data reports and the 2012 CSA clearly shows that the number of adoptions with 12 months of being legally free have declined substantially in recent quarters. The HHS chose to include this outcome as a SIP focus and believes that it can employ effective strategies to improve adoptions with 12 months of a child being legally free.

The process used to develop outcome goals, strategies, action items and timeframes began with a concerted effort to obtain wide community input on the selected focus outcomes. Efforts included identifying required and recommended stakeholders, organizing stakeholder meetings and focus groups, and organizing the input received for analysis. The effort produced a wide scope of community input which was taken into consideration during the formulation of the SIP.

Community partners expressed the desire for CPS to collaborate more with them. They feel that they could be helpful in assisting social workers by performing tasks that are many times performed by social workers, but could be performed by them. In many cases they are more suited and connected to perform these tasks efficiently. All community partners seemed to recognize the challenging workloads of CPS social workers and expressed their desire to help in various ways.

Court Appointed Special Advocate (CASA) volunteers are valuable resource and feel they should be utilized more by social workers. These volunteers have a close relationship with their assigned youth and know their situations very well. CASA volunteers are willing to help provide needed documentation or information, provide transportation and perform other tasks related the youth's well-being. In a system that is overloaded, they can make a difference not only by advocating for the youth's needs, but also by assisting the social workers who serve their children.

The El Dorado County Office of Education (EDCOE) felt that they could especially help with children ages zero to five. It was suggested that when children of this age are referred to CPS, one of the first things that happen should be a check to see if the child is involved in any of EDCOE's programs. There are many resources for children of this age and EDCOE is very well aware of them.

Several meetings were held with CPS managers to discuss the strategies, action items, timeframes and person responsible for each action item. The goal when determining each action item and timeframe was that they were specific, achievable and measureable.

The Probation Department continues to focus on maintaining minors safely in their homes whenever possible and appropriate. The strategies outlined remain continuous and ongoing. All Deputy Probation Officers supervising minors continue to implement these strategies in order to maintain these minors in their own homes. Probation supervision, in conjunction with in custody and out of custody programs, which focus on substance abuse, family counseling, and life skills, have assisted most minors to remain in the homes of their parent(s)/guardian(s). These programs have proven helpful, as the number of minors from December of 2010, to present have shown a significant decrease in the number of out-of-home placements, which includes those minors placed in relative and non-relative extended family member homes. All minors are referred to services addressing the emotional, mental health, and educational needs of each, whether they remain in the home or are placed out of the home. These strategies remain inherent to the philosophy of the Department to maintain children in their own homes whenever possible and appropriate. When placement becomes necessary, the first options researched are relative and non-relative extended family member homes, when appropriate.

C. CWS/Probation SIP Matrix

Priority Outcome Measure or Systemic Factor: CWS: CFSR Measure C4.3 Placement Stability (At Least 24 Months In Care) - This measure computes the percentage of children with two or fewer placements who have been in foster care for 24 months or more. Time in care is based on the latest date of removal from the home. The denominator is the total number of children who have been in care for 24 months or more; the numerator is the count of these children with two or fewer placements.

National Standard: 41.8% of higher of one or two settings

Current Performance: According to the January 2012 Quarterly Data Report¹ (Quarter 3 of 2011), of the 112 children who have been in foster care for 24 months or more, 79 have had two or fewer placements. This is a 29.5% rate of placement stability.

Target Improvement Goal: El Dorado County's goal is to increase the current eight quarter average of the percentage of goal achieved from 68.9% to 71% by May 20, 2013. El Dorado County will increase by 1% more each subsequent year of the plan to attain an eight quarter average of 75% by May 20, 2017.

Priority Outcome Measure or Systemic Factor: CWS: CFSR Measure C2.5 Adoption Within 12 Months (Legally Free) - This measure computes the percentage of children discharged from foster care to adoption within 12 months of becoming legally free. The denominator consists of all children declared legally free for adoption during the year; the numerator includes those children who were then discharged to a finalized adoption within the next 12 months.

National Standard: 53.7% or higher adopted within 12 months

Current Performance: According to the January 2012 Quarterly Data Report (Quarter 3 of 2011), of the 48 children who were declared legally free for adoption, six were discharged to a finalized adoption within the next 12 months. This is a 12.5% rate of adoption within 12 months.

Target Improvement Goal: El Dorado County intends to increase the current eight quarter average of percentage of goal from 67.0% to 69% by May 20, 2013. El Dorado County will increase 2% more each subsequent year of the plan to attain an 8 quarter average of 77% by May 20, 2017.

¹ Needell, B., et. All, (2009). Child Welfare Services Reports for California. Retrieved March, 6 2012, from University of California at Berkeley Center for Social Services Research website. URL: http://cssr.berkeley.edu/ucb_childwelfare

Priority Outcome Measure or Systemic Factor: CWS: AB 636 Measure 5A Health and Education Passport - This measure computes the percentage of children entering foster care, for the first time, who have an initiated health passport. The denominator consists of all children entering foster care for the first time; the numerator includes those children who have an initiated health passport.

National Standard: Not applicable

Current Performance: According to SafeMeasures² (Quarter 4 of 2011), of the 27 children who entered foster care for the first time, six had an initiated health passport. This is a 22.2% rate of initiated health passports.

Target Improvement Goal: El Dorado County intends to increase the completion of health passports by at least 10% each plan year to achieve a total completion rate of at least 80% by May 20, 2017.

Priority Outcome Measure or Systemic Factor: Probation: Children are maintained in their own homes whenever possible and appropriate

National Standard: Not applicable

Current Performance: Less than 15 minors placed out of home

Target Improvement Goal: Continue to refer minors to local resources in an attempt to keep minors in their homes with their families, keeping the number of minors placed out of the home under 15. Probation will utilize local resources in an attempt to keep a minor at home with his/her family, including out-patient counseling and related services, negating the need for placement. Local resources also include in-custody (juvenile hall) programs, such as the 60-day Substance Abuse Turnaround Education Program (STEP), the 120-day Family Reunification Program (FRP), and the 180-day Challenge Program.

Key to the success of the following strategies and action steps is the recruitment of additional social workers and the retention of effective and experienced social workers. Adequate staffing levels are required to maximize the effectiveness of the identified strategies.

² Children's Research Center SafeMeasures® Data. El Dorado County AB 636 Measure 5A: Health and Education Passport. Retrieved March 6, 2012 from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>

Strategy 1		Applicable Outcome Measure(s) and/or Systemic Factor(s)	
CWS: Implement a Family Teaming Approach which incorporates Signs of Safety (SOS) practice		CAPIT	CFSR Measure C4.3 Placement Stability (at least 24 months in care)
		CBCAP	CFSR Measure C2.5 Adoption Within 12 Months (Legally free)
		PSSF	AB 636 Measure 5C Health and Education Passport
X		N/A	
Action Steps		Person Responsible	
Timeframe		Person Responsible	
A. Research, analyze and choose a family teaming model to implement		May 21, 2012 - August 31, 2012	CPS Program Manager I - Protective Services CPS Staff Services Analyst II
B. Identify case events that will benefit from a family teaming approach and develop procedures for each event.		September 1, 2012 - October 31, 2012	CPS Program Manager I - Protective Services
C. Train social workers		November 1, 2012 - December 31, 2012	CPS Program Manager I - Protective Services
D. Implement		January 1, 2013	CPS Program Manager I - Protective Services
E. Evaluate effectiveness and adjust strategy as needed		SIP Annual Progress Report each April 15 th	CPS Program Manager I - Protective Services CPS Staff Services Analyst II

Strategy 2		Applicable Outcome Measure(s) and/or Systemic Factor(s)	
CWS: Foster Parent and Kinship Support		CAPIT	CFSR Measure C4.3 Placement Stability (At least 24 months in care)
		CBCAP	CFSR Measure C2.5 Adoption Within 12 Months (Legally free)
		PSSF	Systemic Factor: Foster/Adoptive Parent Licensing, Recruitment and Retention
X		N/A	
Action Steps		Person Responsible	
Timeframe		Person Responsible	
A. Continue to provide P.R.I.D.E. training to all foster parents and extend training to kinship providers on a voluntary participation basis		May 21, 2012 - May 20, 2017	CPS Program Manager I - Protective Services Foster Care Licensing Program Manager I - Protective Services
B. Assign a Foster Parent Liaison who is a single point of contact for foster parents		September 1, 2012	CPS Program Manager I - Protective Services
C. Provide an updated resource guide for foster and kinship providers		Once each plan year	CPS Program Manager I - Protective Services
E. Provide continuing education in the form of 6 relevant trainings delivered during Foster Parent Association Meetings		Each plan year	CPS Program Manager I - Protective Services
F. Evaluate effectiveness and adjust strategy as needed		SIP Annual Progress Report each April 15 th	CPS Program Manager I - Protective Services CPS Staff Services Analyst II

Strategy 3		Applicable Outcome Measure(s) and/or Systemic Factor(s)	
CWS: Implement Parent Engagement, Training and Mutual Support Program		CAPIT	CFSR Measure C4.3 Placement Stability (At least 24 months in care)
		CBCAP	CFSR Measure C2.5 Adoption Within 12 Months (Legally free)
X		PSSF	AB 636 Measure 5C Health and Education Passport
		N/A	Systemic Factor: Foster/Adoptive Parent Licensing, Recruitment and Retention
Action Steps		Person Responsible	
Timeframe			
A. Institute a yearly Parent Leadership Course		CPS Program Manager I - Protective Services	
B. Develop a Parents Anonymous® (PA) or similar group chapter		CPS Program Manager I - Protective Services	
C. Develop a parent mentor program using academy graduates and PA participants		CPS Program Manager I - Protective Services	
D. Evaluate effectiveness and adjust strategy as needed		CPS Program Manager I - Protective Services CPS Staff Services Analyst II	

Strategy 4		Applicable Outcome Measure(s) and/or Systemic Factor(s)	
CWS: Implement Foster Parent Recruitment		CAPIT	CFSR Measure C4.3 Placement Stability (At least 24 months in care)
		CBCAP	CFSR Measure C2.5 Adoption Within 12 Months (Legally free)
		PSSF	Systemic Factor: Foster/Adoptive Parent Licensing, Recruitment and Retention
X		N/A	
Action Steps		Person Responsible	
Timeframe			
A. Recognize and promote National Foster Care Month each May		CPS Program Manager I - Protective Services	
B. Promote foster parenting in local publications and community groups		CPS Program Manager I - Protective Services	
C. Identify staff member to become part-time or full-time recruiter and implement foster parent recruitment		CPS Program Manager I - Protective Services	
D. Evaluate effectiveness and adjust strategy as needed		CPS Program Manager I - Protective Services CPS Staff Services Analyst II	

Strategy 5		Applicable Outcome Measure(s) and/or Systemic Factor(s)	
CWS: Implement Structured Family Finding Effort (FFE) Procedure		CAPIT	CFSR Measure C4.3 Placement Stability (At least 24 months in care)
		CBCAP	CFSR Measure C2.5 Adoption Within 12 Months (Legally free)
		PSSF	
		X N/A	
Action Steps		Person Responsible	
Timeframe		Person Responsible	
A. Develop a plan for ongoing FFE at specific case events or time periods.	May 21, 2012 - July 31, 2012	CPS Program Manager I - Protective Services	
B. Train staff how to track FFE in CWS/CMS	August 1, 2012 - August 31, 2012	CPS Program Manager I - Protective Services	
C. Develop report to show FFE	August 1, 2012 - September 30, 2012	CPS Program Manager I - Protective Services	
D. Evaluate effectiveness and adjust strategy as needed	SIP Annual Progress Report each April 15th	CPS Program Manager I - Protective Services CPS Staff Services Analyst II	
Strategy 6		Applicable Outcome Measure(s) and/or Systemic Factor(s)	
CWS: Increase collaboration between CPS and community partners such as Court Appointed Special Advocates (CASA) volunteers		CAPIT	CFSR Measure C4.3 Placement Stability (at least 24 months in care)
		CBCAP	AB 636 Measure 5C Health and Education Passport
		PSSF	Systemic Factor: Foster/Adoptive Parent Licensing, Recruitment and Retention
		X N/A	
Action Steps		Person Responsible	
Timeframe		Person Responsible	
A. Continue to promote the Children and Parents Resource Team (CPRT)	July 1, 2012 - May 20, 2017	CPS Program Manager I - Protective Services	
B. Contact primary community partners and collect ideas on how collaboration can be increased	May 21, 2012 - September 30, 2012	CPS Program Manager I - Protective Services CPS Staff Services Analyst II	
C. Review ideas collected, discuss ideas with CPS management and determine several focus areas	September 1, 2012 - September 30, 2012	CPS Program Manager I - Protective Services	
D. Develop at least two programs to enhance collaboration	October 1, 2012 - December 31, 2012	CPS Program Manager I - Protective Services	
E. Implement each program one-at-a-time	January 1, 2013 - January 1, 2017	CPS Program Manager I - Protective Services	
F. Evaluate effectiveness and adjust strategy as needed	SIP Annual Progress Report each April 15th	CPS Program Manager I - Protective Services CPS Staff Services Analyst II	

Strategy 7 Probation: Continue to refer minors to local resources in an attempt to keep minors in their homes with their families, keeping the number of minors placed out of the home under 15. Probation will utilize local resources in an attempt to keep a minor at home with his/her family, including out-patient counseling and related services, negating the need for placement. Local resources also include in-custody (juvenile hall) programs, such as the 60-day Substance Abuse Turnaround Education Program (STEP), the 120-day Family Reunification Program (FRP), and the 180-day Challenge Program.	CAPIT CBCAP PSSF X N/A	Applicable Outcome Measure(s) and/or Systemic Factor(s) Children are maintained in their own homes whenever possible and appropriate	
Action Steps		Timeframe	Person Responsible
A. Deputy Probation Officer (DPO) will review the case file and case management system, investigate the minor's needs, and discuss these needs with the minor and parent(s) at the initial meeting to determine necessary services; the DPO will then make a referral to an appropriate local resource.	May 21, 2012 - May 20, 2017		DPO
B. The Supervising DPO will review cases regularly to ensure appropriate local resources are in place or the minor has been referred.	May 21, 2012 - May 20, 2017		Supervising DPO
C. The DPO will continue to supervise the minor during participation, and after completion, of a program.	May 21, 2012 - May 20, 2017		DPO

Strategy 8 Probation: If a minor is ordered by the Court to participate in an in-custody program, the minor will be supervised by a DPO while in the program and will be referred to appropriate local resources upon release from custody.	CAPIT CBCAP PSSF N/A	Applicable Outcome Measure(s) and/or Systemic Factor(s) Children are maintained in their own homes whenever possible and appropriate
Action Steps		Person Responsible
A. DPO will evaluate minor's needs with the Coordinator of the appropriate in-custody program and either (1) a referral will be made prior to the minor's release, or (2) an appointment will be made for the minor to attend an appointment as soon as possible following release.	Timeframe May 21, 2012 - May 20, 2017	DPO
B. The Supervising Deputy Probation Officer (SDPO) will review cases regularly to ensure appropriate local resources are in place or the minor has been referred.	Timeframe May 21, 2012 - May 20, 2017	Supervising DPO

D. CWSOIP Narrative

Not required due to realignment.

E. Part II: CAPIT/CBCAP/PSSF

1. CAPIT/CBCAP/PSSF Cover Sheet

See Attachment 4

2. CAPIT/CBCAP/PSSF Plan

a. County SIP Team Composition

See page 3.

b. Child Abuse Prevention Council (CAPC)

El Dorado County's CAPC was established by the Board of Supervisors on April 9, 2002 and acts as an independent entity within County government. CAPC members are each appointed by the El Dorado Board of Supervisors and represent all areas of the County. The CAPC is a community driven, multi-disciplinary collaborative made up of consumers and representatives from public and private agencies. The CAPC is dedicated to integrating prevention and family support activities as a means of improving child and family well-being.

The CAPC works with the community to fulfill their mission "to increase awareness and respect for the rights of children to be free from abuse and neglect." The CAPC has a strategic plan to use the limited funds available wisely, educate the community on issues that affect children, families, their health and well-being, as well as addressing issues which put children at potential risk of abuse or neglect. Poverty, lack of education regarding safe child rearing and parenting practices, failure to report potential abuse or neglect, isolation from others, and the lack of resources and quality connections for new parents are each important areas that impact the health and safety of children in El Dorado County.

There will be a contract for services with the CAPC covering the services to be delivered with each funding source. The contract will include reporting requirements covering client demographics, program effectiveness, client satisfaction and is based on needs identified through the CSA process.

The CCTF is supported by birth certificates, Kids Plates, interest and donations. The approximate yearly income is \$40,000 from these sources. The current balance of the CCTF is approximately \$80,000.

Approximate Amounts Spent to Support the CAPC	
Fund	Dollar Amount
CAPIT	-
CBCAP	\$15,000
PSSF Family Support	\$20,000
CCTF*	\$40,000
Kids Plate	\$3,000
Other:	
<i>*The CCTF is supported by birth certificates, Kids Plates and donations.</i>	

c. PSSF Collaborative

The core SIP team membership, including CAPC, serves as the PSSF Collaborative.

d. CCTF Commission, Board or Council

The County of El Dorado Board of Supervisors has designated the El Dorado County CAPC as the County Children’s Trust Fund (CCTF) Commission. The CAPC is entrusted with expending the CCTF for the prevention and intervention of child abuse, sponsorship of child abuse prevention and intervention events, such as the El Dorado County Kid’s Expo, and child abuse conferences.

A summary of the programs and services funded by CCTF are available on the El Dorado County CAPC Website <http://eldoradocapc.org/meetings.html>.

e. Parent Consumers

The CAPC has developed a comprehensive plan to recruit, train and engage parent leaders. The Parent Leadership Development program is a dynamic training program designed to empower parents to advocate for their families, become change agents for their children and work constructively to gain a voice for children and families. While parent involvement is nationally recognized as an important component to service planning and evaluation, many boards and human service agencies find it difficult to recruit and retain parent leaders. Many parents involved with government support and assistance systems are unaware of how to get their voices heard and often feel unprepared and lack the confidence to maneuver in a world of program planning, meetings and board rooms. Parent Leadership Development is an effective program designed to engage parents and support them as they address the challenges of parenting, gain the knowledge and skills to function in meaningful leadership roles and represent a “parent voice” to help shape direction for their families, programs and communities. The goal for these parents will be to participate in advisory groups, community collaboratives and serve as mentors for at-risk and CWS parents. A parent mentor program will be developed using selected parents developed from this program. This model is based upon 30 years of research with Parents Anonymous®.

The CAPC includes parent consumers and is part of the planning, implementation and evaluation of CAPIT/CBCAP/PSSF funded programs. The CAPC has participated in the development of the 2012 CSA and SIP. The CAPC votes to approve the County's SIP.

Parents are financially supported through mileage reimbursement and stipend in the event they miss work. Child care may also be covered when necessary. The Parent Leadership Development program training plan has child care provided to ensure removal of barriers.

Logic Model: Parent Leadership Development

Resources/Inputs	Activities to be Conducted	Outputs	Outcomes/Benefits	Impact
Recruitment partners Meeting spaces and child care space Budget and funding for meals and child care Funding for facilitator Funding for printing Curriculum materials Project Coordinator	Develop recruitment materials including flyers, letters and talking points for personal presentations Develop parent friendly application Develop recruitment strategy, timeline and selection criteria Calendar Training Academy meetings Coordinate meals and child care Calendar guest speakers for each day Contract with facilitator Develop incentives for participation	10 – 15 parent participants will complete a 10 week Parent Leadership Training Program, with one meeting a week for two hours plus multi-hour orientation meeting, complete a program evaluation	Parents will increase their knowledge of community resources Parents will develop the skills and confidence to move into meaningful leadership roles Parents will develop advocacy and communication skills needed to make their voices heard and get their needs met Parents will build relationships with community leaders and peers Participants will build tolerance and appreciation of diverse opinions and perspectives	Parent leaders engaged in a variety of meaningful leadership roles in community-based and government organizations. Strong and effective Parent Advisory Council for CAPC Sustainable network of parents to support parents in the CWS

f. The Designated Public Agency

The HHSA has been designated by the County Board of Supervisors to administer CAPIT/CBCAP/PSSF programs. The HHSA is responsible for monitoring subcontracted service providers, integrating local services, fiscal compliance, data collection, preparing amendments

to the County plan, preparing annual reports, outcome evaluation and overall quality assurance.

Monitoring of CAPIT/CBCAP/PSSF programs will be done by requiring and reviewing reports from contracts which will address client demographics, program effectiveness and client satisfaction. For the in-house usage of PSSF Adoption Promotion and Support Service funds a tracking system will be developed which will provide information to satisfy the reporting requirements of client participation rates, demographics, program effectiveness and client satisfaction.

g. The Role of the CAPIT/CBCAP/PSSF Liaison

The role of the CAPIT/CBCAP/PSSF Liaison is to ensure that all program, fiscal, and statistical requirements are met in a timely manner. The HHSA employs a Program Manager I - Protective Services for this role and the manager is assisted by a Staff Services Analyst II. The liaison is responsible for program coordination, collecting data from subcontractors, compiling and analyzing subcontractor data, preparing required reports and submitting reports in a timely manner. Data submitted to OCAP is done in aggregate form as opposed to individual subcontractor data.

The liaison is responsible for the distribution of prevention information to the appropriate organizations and groups in the county and overall quality assurance for CAPIT/CBCAP/PSSF-funded programs and services. The liaison will address any identified issues regarding quality assurance. The liaison participates in monthly CAPC meetings. The liaison assists CAPC in trainings and other child abuse prevention activities.

h. Fiscal Narrative

The County CAPIT/CBCAP/PSSF liaison will receive monthly expenditure invoices for CAPIT/PSSF delivered services from the contractors. These invoices will identify the contract and funding stream being utilized. These invoices will be reviewed for contract compliance, including all reporting requirements, before being approved for processing and payment. Approved invoices will then be forwarded to HHSA accounting so that the expenditures can be reconciled to the County's fiscal accounting system. This authorizes the County Auditor to pay the contractors within the limit of their contract budget, from the CAPIT/CBCAP/PSSF grants. Expenditures are tracked in the accounting system by "user code" to track activity/program. The County then requests reimbursement from the State on the quarterly County Expense Claim for CAPIT and PSSF funds. CBCAP funds are initially deposited as deferred revenues in a Special Revenue Fund (SRF), and transferred to the operating fund on the basis of expenditures. Funds are received as a one-time payment. Transfers from SRF to operating fund to recognize revenues receive fiscal review.

Contractors and subcontractors may draw on a variety of funding sources to pay for services. Clients will be screened to determine their ability to pay for services and to determine eligibility for Medi-Cal, Healthy Families, CalWORKs, or Victim Witness compensation. If no third-party funding source was available, services will be funded with CAPIT/CBCAP/PSSF.

CAPIT/CBCAP/PSSF funds are used to leverage funds from other sources, including private foundations and the State/Federal government to the extent allowed.

CAPIT/CBCAP/PSSF funds received will supplement, not supplant, other State and local public funds and services. A minimum of 20% of the PSSF allocation is distributed to each of the PSSF service categories.

El Dorado County will continue the current CAPIT/CBCAP/PSSF contracts in place from the 2009 OCAP 3 Year Plan until the end of the current fiscal year on June 30, 2012. This will allow time for Request for Proposal (RFP) processes to be completed and contracts awarded for services being funded by CAPIT/CBCAP/PSSF.

The Adoption Promotion and Support Services component of PSSF will be utilized by the HHSA Adoption Unit and the component will help fund the social workers in this unit when they are performing tasks related to pre- and post-adoptive services and other activities which are designed to expedite the adoption process and support adoptive families. Adoption Unit social workers will time study to program code 6751 PSSF - Adoption Promotion and Support. In addition to this a tracking system will be developed which Adoption Unit social workers will use to detail the client demographics, service effectiveness and client satisfaction.

i. Local Agencies - Request for Proposal

El Dorado County will conduct a RFP process for determining subcontractors of each program funded by CAPIT. The CAPIT/CBCAP/PSSF County liaison will submit a written request to HHSA Contracts Unit identifying the projects in general terms, identifying the funding, and the projected timeframe for the project. The liaison will work with the Contracts Unit to develop a RFP for the 5-year CAPIT/CBCAP/PSSF cycle. The RFP will be published in the local newspaper and on the County web site. The RFP will also be sent out to a list of interested bidders. On the date established in the RFP, the proposals are opened in public in the Procurement Office. Submitted proposals will be reviewed by the El Dorado County Office of Procurement and Contracts and the HHSA. The lowest responsible bidder(s) whose proposals most closely match the service needs as identified in a RFQ are recommended to the Board of Supervisors to receive the CAPIT and PSSF contracts. The Board of Supervisors has final authority to award contracts.

The County follows all pertinent requirements with respect to procurement and purchase of services. The usual service period for contracts begins July 1.

The HHSA has established and staffed a dedicated Contracts Unit in order to maintain full compliance with County Charter and purchasing requirements, provide for ongoing fiscal accountability and ensure that contracts are in place to allow for a wide range of available services that are immediately accessible and can be selected to best meet individual client needs. The County Charter and purchasing requirements direct that there must be a contract in place for most services provided to the County. Contracts for services have been established with interested local community partners and multiple individual providers.

The contracts put in place using CAPIT/CBCAP/PSSF grants will include detailed scopes of services and reporting requirements. The reporting requirements will be based on program descriptions, previous annual reporting requirements and current statute and funding requirements.

Assurances

- A competitive process will be used to select and fund programs
- Priority is given to private, nonprofit agencies with programs that serve the needs of children at risk of abuse or neglect and that have demonstrated effectiveness in prevention or intervention
- Agencies eligible for funding will provide evidence that demonstrates broad-based community support, are based on needs of children at risk, and are supported by a local public agency
- The projects funded will be culturally and linguistically appropriate to the populations served. Training and technical assistance will be provided by private, nonprofit agencies to those agencies funded to provide services
- Services to minority populations shall be reflected in the funding of projects
- Projects funded are clearly related to the needs of children, especially those 14 years of age and under
- The County complied with federal requirements to ensure that anyone who has or will be awarded funds has not been suspended or debarred from participation in an affected program. (For specifics visit: <http://www.epls.gov/>).
- All non-profit subcontract agencies have the capacity to transmit data electronically.
- For the use of CAPIT funds, priority for services shall be given to children who are at high risk, including children who are being served by the County HHSA for being abused or neglected and other children who are referred for services by legal, medical, or social services agencies.
- The agency funded shall demonstrate the existence of a 10 percent cash or in-kind match, other than funding provided by the CDSS.

All of the above assurances will be written into RFP/RFQ processes employed and contracts executed with providers. The HHSA will conduct RFP/RFQ processes for services to be delivered with CAPIT and PSSF Family Preservation, Family Support & Family Reunification component funding.

j. CBCAP Outcomes

Engagement Outcomes

The community will be engaged in issues related to child abuse prevention and the services available to assist families.

Short Term Outcomes

Child Abuse Prevention Month Activities and Community Child Abuse Prevention Education will make the community aware of child abuse and neglect issues, connect the community with resources for help and train community members about mandated reporting.

Intermediate Term Outcomes

A community that is well-educated and aware of child abuse prevention will be more alert for signs of child abuse and neglect and more inclined to report possible cases. Families at-risk may come to the attention of the community sooner and community resources may resolve challenges before CPS needs to become involved. Families that are experiencing challenges will be more inclined to use community services that they are aware of. A decrease in cases of child abuse and neglect is an intermediate term outcome.

Long Term Outcomes

A decrease in cases of child abuse and neglect is a long term outcome.

k. Peer review

El Dorado County will research and plan peer review activities for CBCAP delivered programs.

l. Service Array

CAPIT funded services are coordinated with the array of services available in county as the Home Visitation program assesses the needs of families and refers them to various services available. CBCAP funded services provide community awareness and education of the array of services available. PSSF contractors and the HHS Adoption unit are aware of the array of services available in the community and will coordinate their services with these. The CAPC currently provides a Family Service Guide which lists family service providers, their locations and contact information.

m. CAPIT/CBCAP/PSSF Services and Expenditure Summary

See Attachment 5

3. Attachments

- A. PQCR Executive Summary
- B. CSA Executive Summary
- C. CWS/Probation Cover Sheet
- D. CAPIT/CBCAP/PSSF Cover Sheet
- E. CAPIT/CBCAP/PSSF Services and Expenditures Summary
- F. CAPIT/CBCAP/PSSF Program Descriptions
- G. Board of Supervisors Resolution Approving SIP
- H. Board of Supervisors Establishment of CAPC
- I. CAPIT/CBCAP/PSSF Notice of Intent

El Dorado County CAPC and CCTF Commission Roster

Community Based Organizations

Gaily Healy - El Dorado County Office of Education

Lorrie Evers - Family Connections

Leanne Wagoner - South Lake Tahoe Women's Center

Health and Mental Health Providers

David Ashby - New Morning Youth & Family Services

Alissa Nourse - Tahoe Youth and Family Services

Michael Ungehauer - El Dorado County Health and Human Services Agency

Public Agencies

Cheryl Warchol - El Dorado County District Attorney's Office

Kim Nida - Placerville Police Department

Cathie Watson - CASA El Dorado

Community Representation

Kevin Brown - Pollock Pines

Suzanne Allen de Sanchez, MPA - Placerville

Parents and Primary Caregivers

Ellen Baldwin - Georgetown

Tanya Walker - Cameron Park

Verna Dreisbach - Parent/Licensed Foster Parent

Coordinator

Elizabeth Blakemore - Early Care and Education Planning Council

PSSF Collaborative Roster

HHS Child Welfare Services

Patty Moley-Dunn, Program Manager II

Angela Wilson, Program Manager I - Protective Services

Suzanne Ballen, Program Manager I - Protective Services

Ren Scammon, Administrative Services Officer

Derek Reddin, Staff Services Analyst II

El Dorado CAPC

See above El Dorado County CAPC Roster

SIP Planning Committee Roster

See page 3

OCAP SIP Checklist

The checklist is required to be submitted to the OCAP with the draft and final version of the SIP to expedite the review process.

County Name: El Dorado

Start date of the System Improvement Plan: May 21, 2012

End date of the System Improvement Plan: May 20, 2017

No.	Page in Guide	Element	Element Present (provide page no.)	Element Not Present	Element N/A
CONTACT INFORMATION					
1	21	Name, mailing address, e-mail address and phone number of lead agency (BOS Designated Public Agency to administer CAPIT/CBCAP/PSSF programs).	Att. E		
2	21	Name, mailing address, e-mail address and phone number of CAPIT liaison.	Att. E		
3	21	Name, mailing address, e-mail address and phone number of CBCAP liaison.	Att. E		
4	21	Name, mailing address, e-mail address and phone number of PSSF liaison.	Att. E		
APPROVALS					
5	21	Evidence that the plan was approved and signed by the BOS	Att. E		
6	21	Evidence that the plan was approved and signed by the BOS designated public agency to administer CAPIT/CBCAP/PSSF programs.	Att. E		
7	21	Evidence that the plan was approved and signed by CAPC representative.	Att. E		
8	21	Evidence that the plan was approved and signed by parent consumer/former consumer if the parent is not a member of the CAPC.	Att. E		
9	21	Evidence that the plan was approved and signed by PSSF Collaborative representative, if appropriate.	Att. E		
CAPC					
10	22	Description of the structure and role of the local CAPC.	<u>20</u>		
11	22	Proposed dollar amount from CAPIT, CBCAP, PSSF Family Support, CCTF, KidsPlate, or other funds that will be used to support the local CAPC.	<u>21</u>		
Promoting Safe and Stable Families (PSSF) Collaborative					
12	23	Description of the membership or the name of the agency, commission, board or council designated to carry out this function. If the county does not have a PSSF collaborative, description of who carries out this function.	<u>21</u>		

		County Children's Trust Fund (CCTF) Commission, Board or Council			
13	23	Description of the CCTF membership or identification of the name of the commission, board or council designated to carry out this function.	<u>21</u>		
14	23	Description of how and where the county's children's trust fund information will be collected and published.	<u>21</u>		
		PARENTS/CONSUMERS			
15	23	Description of activities and training that will be implemented to enhance parent participation and leadership.	<u>21</u>		
16	23	Description of how parents will be involved in the planning, implementation and evaluation of funded programs.	<u>22</u>		
17	23	Description of any financial support that will be provided for parent participation.	<u>22</u>		
		FISCAL NARRATIVE			
18	24	Description of processes and systems for fiscal accountability, including the established or proposed process for tracking, storing, and disseminating separate CAPIT/CBCAP/PSSF and Children's Trust Fund fiscal data as required.	<u>23</u>		
19	24	Description on how funding will be maximized through leveraging of funds for establishing, operating, or expanding community-based and prevention-focused programs and activities.	<u>23</u>		
20	24	Assurance that funds received will supplement, not supplant, other State and local public funds and services.	<u>23</u>		
21	24	Does the attached CAPIT/CBCAP/PSSF Expenditure Summary demonstrate a minimum of twenty (20) percent to each service category for PSSF funds? If not, a rationale is provided. A plan of correction is also provided to meet compliance in this area.	<u>23</u>		
		LOCAL AGENCIES – REQUEST FOR PROPOSAL (Narrative regarding the following is present in the SIP)			
22	25	Assurance that a competitive process was used to select and fund programs.	<u>24</u>		
23	25	Assurance that priority was given to private, nonprofit agencies with programs that serve the needs of children at risk of abuse or neglect and that have demonstrated effectiveness in prevention or intervention.	<u>24</u>		
24	25	Assurance that agencies eligible for funding provided evidence that demonstrates broad-based community support and that proposed services are not duplicated in the community, are based on needs of children at risk, and are supported by a local public agency.	<u>24</u>		
25	25	Assurance that the project funded shall be culturally and linguistically appropriate to the populations served.	<u>24</u>		
26	25	Assurance that training and technical assistance shall be provided by private, nonprofit agencies to those agencies funded to provide services.	<u>24</u>		
27	25	Assurance that services to minority populations shall be reflected in the funding of projects.	<u>24</u>		

28	25	Assurance that projects funded shall clearly be related to the needs of children, especially those 14 years of age and under.	<u>24</u>		
29	25	Assurance that the county complied with federal requirements to ensure that anyone who has or will be awarded funds has not been suspended or debarred from participation in an affected program. (For specifics visit: http://www.epls.gov/)	<u>24</u>		
30	25	Indicates that non-profit subcontract agencies have the capacity to transmit data electronically.	<u>24</u>		
31	25	For the use of CAPIT funds, assurance that priority for services shall be given to children who are at high risk, including children who are being served by the county welfare departments for being abused and neglected and other children who are referred for services by legal, medical, or social services agencies.	<u>24</u>		
32	26	For the use of CAPIT funds, assurance that the agency funded shall demonstrate the existence of a 10 percent cash or in-kind match, other than funding provided by the State Department of Social Services.	<u>24</u>		
CBCAP Outcomes:					
33	26	Description of the plan to evaluate Engagement Outcomes.	<u>25</u>		
34	26	Description of the plan to evaluate Short Term Outcomes.	<u>26</u>		
35	26	Description of the plan to evaluate Intermediate Term Outcomes.	<u>26</u>		
36	26	Description of the plan to evaluate Long Term Outcomes.	<u>26</u>		
Peer Review					
37	26	Description of intended CBCAP peer review activities.	<u>26</u>		
Service Array					
38	26	Description of how CAPIT/CBCAP/PSSF funded services are coordinated with the array of services available in the county.	<u>26</u>		
CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY					
39	26	Submits an electronic copy in excel format of the CAPIT/CBCAP/ PSSF Services and Expenditure Summary that contains a comprehensive expenditure plan for CAPIT/CBCAP/PSSF.	Att. F		
40	26	Submits a hardcopy of the CAPIT/CBCAP/PSSF Services and Expenditure Summary that contains a comprehensive expenditure plan for CAPIT/CBCAP/PSSF.	Att. F		
41	27	CAPIT/CBCAP/PSSF Services and Expenditure Summary contains the cross reference to the CSA of the unmet need for each of the planned programs and/or activities.	Att. F		
42	27	CAPIT/CBCAP/PSSF Services and Expenditure Summary provides an inventory of the planned programs/strategies.	Att. F		
43	27	A half page description for each of the planned programs is attached to the SIP.	Att. G		

CBCAP Services and Expenditure Summary Sheet					
44	excel worksheet	The level of evidence-based or evidence-informed using the Program Assessment Rating Tool (PART) has been determined for programs/ practices funded by CBCAP.	Att. F		
45	excel worksheet	Identification on whether the logic model exists for CBCAP funded programs or whether it will be developed.	Att. F		
BOS RESOLUTIONS					
46	28	Board of Supervisors (BOS) resolution approving the SIP is attached.	Att. H		
47	28	BOS resolution establishing a Child Abuse Prevention Council (CAPC) is attached.	Att. I		
48	28	BOS resolution identifying the Commission, Board or Council for administration of the County Children's Trust Fund (CCTF) is attached.	Att. I		
ROSTERS					
49	28	Copy of the Child Abuse Prevention Council (CAPC) roster is attached	<u>27</u>		
50	28	Copy of the PSSF Collaborative roster, if appropriate, is attached.	<u>27</u>		
51	28	Copy of County Children's Trust Fund (CCTF) roster is attached.	<u>27</u>		
52	28	Copy of the SIP Planning Committee roster. List should contain the name, title and affiliation of the individuals involved in SIP planning process. List includes parents, local nonprofit organizations and private sector representatives. Roster identifies the required core representatives.	<u>3</u>		
ASSURANCES					
53	28	Attach the "Notice of Intent" letter identifying the public agency(s) to administer CAPIT/CBCAP/PSSF programs. The letter also confirms the county's intent to contract.	Att. J		

2011 Peer Quality Case Review Executive Summary

The purpose of the Peer Quality Case Review (PQCR) is to learn, through intensive examination of county practice, how to improve child welfare and probation services in a specific focus area. To do so, the PQCR focuses on one specific outcome, analyzes specific practice areas, identifies key patterns of agency strengths and concerns and aligns the findings with research to guide practice improvement. The process uses peers from other counties to promote the exchange of best practice ideas between the host county and peer reviewers.

Focus Areas

The El Dorado County Health and Human Services Agency (HHSA) chose the C-CFSR outcome measure C4.3 which attempts to measure the placement stability of all children served in foster care during the year that were in foster care for at least 24 months as the focus area for this PQCR. The El Dorado County Probation Department chose to focus on permanency, specifically how to help minors remain stable in placement and improve permanency options when reunification is not feasible.

Findings

The issue of foster parent training was one that was agreed upon almost unanimously throughout the PQCR, in that foster parents need, and want, more information about the realities of foster care. They are not adequately prepared for foster children and the myriad issues these children often display. PRIDE training was well regarded, but not considered to be adequate. Foster families themselves expressed the difficulties of not being able to provide a safe and successful placement for children with special needs.

One resource issue noted is that there are not enough foster homes within El Dorado County so social workers needed to make out of county placements for foster youth. Not only does this create significant stress on the foster youth in needing to adjust to a new community and new school, but further, their ability to visit family members can be hindered.

Additionally, El Dorado County regularly uses an emergency shelter when placements are disrupted. It was noted that this could become an easy avenue for placement instead of working to keep placements together.

Recommendations

For Child Welfare Services consider decreasing the reliance on the shelter for children who need to change placements. Enhance efforts to resolve the conflicts that cause seven-day notices. Implement formalized policy to utilize Team Decision Making or other family engagement model. Conduct relative searches throughout the entire life of the case. Consider training for foster parents to assist in setting realistic expectations for foster children. Continued work with SDM to show applicability and how it can be utilized to make informed critical decisions. The most significant recommendation for Probation is to increase efforts to collaborate with Child Welfare to obtain more information regarding minors with prior Child Welfare history. Additionally, consider implementing Functional Family Probation to enhance work with families and youth.

2012 County Self-Assessment Executive Summary

Focus Areas

Some of the key system focus areas that County Self-Assessment (CSA) identified include Placement Stability, the need for additional quality assurance tools and procedures to better determine the effectiveness of CBCAP/CAPIT/PSSF funded programs and better meet State and Federal reporting requirements, further implementation of all Structure Decision Making (SDM) tools and to promote and support the expanded use of the Home Visitation Program.

Challenges

Placement stability of children in foster care was the focus area during the County's PQCR in May 2011. Challenges in this area include the lack of a receiving home, the need for more foster homes, the limited training, preparation and support that foster parents receive and the need for family engagement through implementation of a Family Team Meeting process

Finalization of Adoptions with 12 months of being legally free and initialization of children's Health and Education Passports was identified as two areas needing attention and improvement.

While CWS social worker retention improved greatly during 2009 and 2010, it is felt that this was a temporary effect caused by the poor employment market and the fact that several local counties laid off many social workers during this time period. The County is again beginning to experience a higher turnover rate as CWS social workers leave to take other employment opportunities in their field. Ongoing factors contributing to social worker turnover include competing for social workers with other child welfare agencies, particularly in surrounding counties that offer higher salary and benefits and with the non-profit community where caseloads and requirements are not equivalent to those in the County CWS. Continuous staff turnover interferes with continuity in training procedure, process and effectiveness.

Community Input

Community input included the recognition of alcohol and drug abuse as a major contributing factor to CPS cases. The continued need for treatment programs and post-treatment support was expressed. Another primary issue brought by the community was the lack of parenting skills and support from others, especially in the case of many young parents. Home visitation was emphasized as an early intervention which is effective and the community would like to concentrate on this as a strategy to prevent child abuse and neglect. Implementing Team Decision Making / Family Team Meetings to engage families were seen as good strategies to improve placement decisions and case plan effectiveness. More parent involvement and leadership, including parent mentoring, was expressed as another strategy. The community feels that the partnerships developed between the HHSA and community partners during CPRT meetings has improved service delivery and prevented the necessity for CPS involvement.

The community members also recognized the issues of social worker recruitment, development and retention. They understand the challenges of high caseload responsibilities and expressed their desire to assist. In order for them to assist they feel that a closer relationship should be fostered between social workers and their community partners so they can offer assistance.

2012 System Improvement Plan Executive Summary

The implementation of Assembly Bill 636 brought a new Child Welfare Services Outcome and Accountability System to California, also known as the California-Children and Family Services Review (C-CFSR). The C-CFSR includes several processes all California counties must participate in including Quarterly Outcome and Accountability Data Reports, Peer Quality Case Review (PQCR), County Self-Assessment (CSA), System Improvement Plan (SIP) and Annual SIP Updates and is overseen by the State of California Department of Social Services (CDSS);

The SIP outlines how the County will remodel its Child Welfare Services (CWS) and Probation services to improve outcomes for children, youth and families and includes specific action steps, timeframes, and improvement targets. The SIP uses information gathered from quarterly data reports, the PQCR and the CSA components of the C-CFSR cycle to determine focus areas and strategies for improvement. The SIP serves as a commitment to specific, measurable improvements in prevention and performance outcomes that the County will achieve within a defined timeframe. The SIP has recently been expanded to include the Child Abuse Prevention, Intervention and Treatment (CAPIT)/Community-Based Child Abuse Prevention (CBCAP)/Promoting Safe and Stable Families (PSSF) Three-Year Plan. The California Department of Social Services (CDSS), which is responsible for overseeing and approving the SIP, has extended the SIP from a three-year plan to a five-year plan. The 2012 El Dorado County SIP for CWS/Probation will be effective May 21, 2012 through May 20, 2017.

Priority Outcome Measures and Systemic Factors

The CWS program within the Health and Human Services Agency (HHSA) focused on placement stability of children at least 24 months in care during the May 2011 Peer Quality Case Review (PQCR) and will continue to focus on this measure during the SIP. Adoptions within 12 months of a child being legally free is the second focus for the HHSA and it will employ strategies including foster parent recruitment and support, family finding and engagement to improve this measure. A final focus area for the HHSA will be the completion of Health and Education Passports. Social Worker recruitment, development and retention have been identified as an overarching factor negatively affecting the HHSA's success in these areas. The Probation Department will focus on maintaining children in their own homes whenever possible and appropriate.

Strategies

Key to the success of the following strategies and action steps is the recruitment of additional social workers and the retention of effective and experienced social workers. Adequate staffing levels are required to maximize the effectiveness of these strategies.

- CWS: Implement a Family Teaming Approach
- CWS: Foster Parent and Kinship Support
- CWS: Develop a Parent Engagement, Training and Mutual Support Program
- CWS: Implement Foster Parent Recruitment
- CWS: Implement Structured Family Finding Procedure
- CWS: Increase collaboration between CPS and Community Partners

Attachment C

- Probation: Continue to refer minors to local resources in an attempt to keep minors in their homes with their families, keeping the number of minors placed out of the home under 15.

CAPIT/CBCAP/PSSF

Program funds will be expended in the following manner:

- CAPIT: Home Visitation Services
- CBCAP: Child Abuse Prevention Month Activities and Community Child Abuse Prevention Education
- PSSF Family Preservation and Time-Limited Reunification Components: Request for Qualifications (RFQ) process to contract with Community-Based Organization (CBO)
- PSSF Family Support Component: Parent Leadership Development, Strengthening Families - Protective Factors Framework and Shaken Baby Syndrome/Safe Sleeping Habits Training
- PSSF Adoption Promotion and Support Component: HHS Adoption Unit

The HHS will work with Probation to submit annual update reports to CDSS. While this plan is to cover five years, it may be adjusted by the County with CDSS approval to meet changing needs.

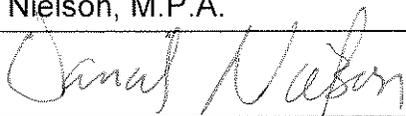
California's Child and Family Services Review System Improvement Plan

County:	El Dorado
Responsible County Child Welfare Agency:	Health and Human Services Agency
Period of Plan:	May 21, 2012 - May 20, 2017
Period of Outcomes Data:	Quarter ending: September 30, 2011
Date Submitted:	May 18, 2012

County System Improvement Plan Contact Person

Name:	Angela Wilson
Title:	Program Manager I, Protective Services
Address:	3057 Briw Road, Suite A, Placerville, CA 95667
Fax:	(530) 626-7427
Phone & E-mail:	(530) 642-7385 angela.wilson@edcgov.us

Submitted by each agency for the children under its care

Submitted by:	County Child Welfare Agency Director (Lead Agency)
Name:	Daniel Nielson, M.P.A.
Signature:	

Submitted by:	County Chief Probation Officer
Name:	Gregory S. Sly
Signature:	

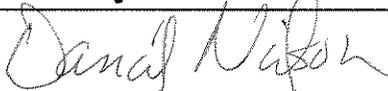
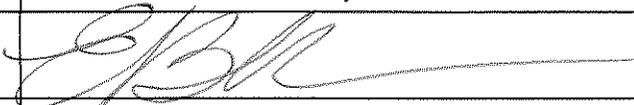
Board of Supervisors (BOS) Approval

BOS Approval Date:	5/15/12
Name:	John R. Knight
Signature:	

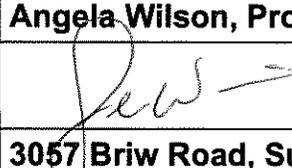
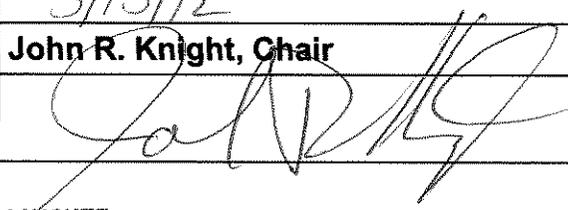
ATTEST: SUZANNE ALLEN de SANCHEZ,
Clerk of the Board of Supervisors

By 
DEPUTY

RECEIVED MAY 22 2012

CAPIT/CBCAP/PSSF Contact and Signature Sheet	
Period of Plan:	May 21, 2012 - May 20, 2017
Date Submitted:	May 18, 2012
Submitted by:	Board of Supervisor Designated Public Agency to Administer CAPIT/CBCAP/PSSF Programs
Name & title:	Daniel Nielson, M.P.A. Director El Dorado County Health and Human Services Agency
Signature:	
Address:	3057 Briw Road, Suite A Placerville, CA 95667
Fax:	(530) 626-7734
Phone & E-mail:	(530) 642-7300
Submitted by:	Child Abuse Prevention Council (CAPC) Representative
Name & title:	Elizabeth Blakemore, CAPC Coordinator
Signature:	
Address:	6767 Green Valley Road, Building I Placerville, CA 95667
Fax:	(530) 295-1506
Phone & E-mail:	(530) 295-2312 ebgakemore@edcoe.org
Submitted by:	Parent Consumer/Former Consumer (Required if the parent is not a member of the CAPC)
Name & title:	Parent consumers are members of the CAPC
Signature:	
Address:	
Fax:	
Phone & E-mail:	

Attachment E

Submitted by:	PSSF Collaborative Representative, if appropriate
Name & title:	Angela Wilson, Program Manager I - Protective Services
Signature:	
Address:	3057 Briw Road, Suite A Placerville, CA 95667
Fax:	(530) 626-7734
Phone & E-mail:	(530) 642-7358 angela.wilson@edcgov.us
Submitted by:	
Submitted by:	CAPIT Liaison
Name & title:	Angela Wilson, Program Manager I - Protective Services
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Phone & E-mail:	(530) 642-7358 angela.wilson@edcgov.us
Submitted by:	
Submitted by:	CBCAP Liaison
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Phone & E-mail:	(530) 642-7358 angela.wilson@edcgov.us
Submitted by:	
Submitted by:	PSSF Liaison
Name & title:	Angela Wilson, Program Manager I - Protective Services
Address:	3057 Briw Road, Suite A Placerville, CA 95667
Fax:	(530) 626-7734
Phone & E-mail:	(530) 642-7358 angela.wilson@edcgov.us
Board of Supervisors (BOS) Approval	
BOS Approval Date:	<i>5/15/12</i>
Name:	John R. Knight, Chair
Signature:	

ATTEST: SUZANNE ALLEN de SANCHEZ,
Clerk of the Board of Supervisors

By 
DEPUTY

Program Descriptions

Home Visitation

Funding: 100% CAPIT

The Home Visitation program will focus on supporting the parent as well as supporting parent-child interaction and child development in at-risk family homes. Families at-risk will be determined by community referral and through the Children and Parents Resource Team (CPRT). The high quality model employed will be either: 1) affiliated with a national model and be currently certified or credentialed by the national office of that program model; or 2) federally-funded and authorized to provide the program model. Home visitation begins with the assessment of family member knowledge and skills. Based on the results of the assessment, in-home education including but not limited to teaching positive parenting skills, developmental stages expectations, housekeeping, homemaking and organizational skills will be delivered. Parents will also be connected to community resources and the provider will complete follow-up assessments to monitor effectiveness.

This program fulfills a need for delivering services to at-risk families who are isolated by rural locations, transportation challenges or other situations which may make travel difficult. These are families who are known to be at-risk but may not be able to participate in suggested services because of their travel challenges. The target population will be families with children five years of age or younger and will be culturally and linguistically appropriate to the population served. In addition to provider reports on family demographics, service effectiveness and family satisfaction the HHSA will measure the effectiveness by tracking if those families served become involved with CPS thereafter.

Child Abuse Prevention Month Activities

Funding: 66% CBCAP

The El Dorado County CAPC participates in child abuse and neglect prevention services by funding, coordinating and participating in Child Abuse Prevention Month activities. These activities include the Kid's Expo which targets families with children ages 1 - 10 years and brings together nearly 100 local agencies to provide a variety of hands on activities and share information about their family and children's services. The CAPC also produces a family service guide, flyers, places banners and assures media awareness of this special month. These activities increase community connections, concrete supports, knowledge of parenting and child development, and social and emotional competence of children.

Community Child Abuse Prevention Education

Funding: 34% CBCAP

This program focuses on the needs of the community regarding child abuse and neglect prevention. Many of these trainings are delivered through partnerships with Infant Parent Center, Family Connections anger management and parenting programs, the California School Age Families Education (Cal SAFE) program, Transition Age Youth - Independent Living Program

(ILP), high school senior child development classes, child care providers, foster parent training, and public health nursing. Each training class will include a section discussing community resources for child abuse prevention and a Family Service Guide with contact information for all of the resources discussed, and more, will be distributed.

Mandated Reporter is geared to recognizing signs of at-risk families with an emphasis on prevention. A Mandated Reporter Training Handbook is included and covers the following areas: prevention education, community resources for child abuse and neglect prevention, The California Child Abuse Neglect and Reporting Law; Identification of Environmental Problems, Parental Clues, Physical and Behavioral indicators; Guidelines to Determine Reasonable Suspicion; and Major Treatment Issues. This training fulfills a need for community professionals to be able to recognize at-risk families, signs of child abuse or neglect, know how to report these concerns as well as education regarding prevention concepts, services and other resources within El Dorado County. The target population is social workers, teachers and other personnel, physicians and other health-care workers, mental health professionals, child care providers and law enforcement officers.

El Dorado County has had several cases of Shaken Baby Syndrome (SBS) injuries and a current need was seen to address this danger with community training. This 90 minute training includes printed training materials, demonstration with a SBS simulator doll, and tools for coping to help parents and caregivers avoid shaking a child. The target population is families with infants.

During 2005-2007 the El Dorado County Multidisciplinary Death Review Team reviewed four child deaths and three of them were found to involve unsafe sleeping habits. The implementation of Safe Sleeping Habits Education was seen as an important need for families who engage in co-bedding or co-sleeping or who have infants or children who do not have proper bedding in the home. This is a 1 hour training which includes printed training materials and education on safe co-bedding practices. This training is usually given in conjunction with Shaken Baby Syndrome training unless otherwise requested.

Effectiveness will be determined by the number of parents educated and the number of cases of these types of abuse reported during the years of the plan, and pre and post tests completed by training participants. The types of education offered each year may be changed according to community needs and will be documented and approved during Annual SIP Update process.

Parent Leadership Development

Funding: 10% of PSSF - Family Support Services

The Parent Leadership Development program is a dynamic training program designed to empower parents to advocate for their families, become change agents for their children and work constructively to gain a voice for children and families. It will increase parents' confidence and competence in their parental capacity. Parent Leadership Development is an effective program designed to engage parents and support them as they address the challenges of parenting, gain the knowledge and skills to function in meaningful leadership roles and represent a "parent voice" to help shape direction for their families, programs and

communities. These parents will be encouraged to become members of the CAPC, community collaboratives, community volunteer organizations such as CASA and serve as mentors for parents both at-risk and involved in CWS.

Immediate participant impacts include increased knowledge of community resources, government policies and regulations, development of new skills and confidence to move into meaningful leadership roles, improved advocacy and communication skills that are critical to having their voices heard and their needs met, establishment of relationships with community leaders and peers, and increased tolerance and appreciation of diverse opinions and perspectives. Long term outcomes to our community include parent leaders engaged in meaningful leadership roles in community based and government organizations, a Parent Advisory Council for CAPC, and a sustainable network of parents to support parents in the Child Welfare System as mentors can then be developed.

This is part of SIP Strategy 3: Implement Parent Engagement, Training and Mutual Support Program.

Family Preservation & Time-Limited Reunification

Funding: 20% PSSF - Family Preservation (FP) Services and 20% PSSF - Time-Limited Reunification Services (FR)

This program is used to support services to strengthen parental relationships and promote healthy marriages, to improve parenting skills and increase relationship skills within the family to prevent child abuse and neglect, while also promoting timely family reunification when children must be separated from their parents for their own safety. Access to these services will be through HHSA approved community referrals and the HHSA DR program. The program is funded by Family Preservation and Family Reunification components of PSSF.

Services will include:

Substance Abuse Treatment

This service will include sessions of therapeutic counseling, client treatment plans and written reports, substance abuse testing and treatment, intensive outpatient treatment, outpatient group counseling sessions, individual counseling sessions, residential treatment and transitional housing services to address and treat Client's identified or diagnosed problems including but not limited to social, psychological, substance abuse, medical and/or other problems.

Parenting Classes

This program is designed to help people become the parents they want to be, the parents their children deserve in order to have a safe, secure and loving childhood. There will be specific parenting classes for certain child age groups, in-depth (52 week) classes, classes addressing co-parenting and parent-child interactive therapy.

Individual, Group or Family Counseling/Therapy/Classes

This program will include, but not be limited to, therapeutic counseling, psychotherapeutic counseling, classes and/or training programs, anger management, domestic violence and other

related services to address and treat a client's identified or diagnosed problems including but not limited to social, psychological, substance abuse, medical and/or other problems.

Transportation

Transportation to any of the above services can be funded by PSSF Family Support Services or Time-Limited Family Reunification Services.

Effectiveness of the above FP services will be determined by provider reports detailing client demographics, service effectiveness and client satisfaction. The HHSA will also track the clients served to determine if they became involved with CPS after receiving these services. For FR services the HHSA will track the number of families reunified who have received services funded by the PSSF FR component.

Strengthening Families Protective Factors Framework

Funding: 10% PSSF Family Support Services

Five Protective Factors are the foundation of the Strengthening Families Approach: parental resilience, social connections, concrete support in times of need, knowledge of parenting and child development, and social and emotional competence of children. Research studies support the common-sense notion that when these Protective Factors are well established in a family, the likelihood of child abuse and neglect diminishes.

Strengthening Families /Protective Factors Framework Trainings will be brought to the community, attended by home visiting program providers, parents, Family Resource Center staff, mental health providers and other community based organization staff. Each year a specific Protective Factor will be focused on until all of them have been addressed. These activities address many of the underlying issues contributing to child abuse and neglect. Some of these contributing issues noted the CSA include the need for more community connections and collaboration, concentrating on family strengthening, building concrete supports and the need for parent mentors to increase the strength and stability of families.

PSSF Adoption Promotion and Support

Funding: 40% PSSF - Adoption Promotion and Support Services

This program is used to remove barriers which impede the process of adoption when children cannot be safely reunited with their families and to address the unique issues adoptive families and children may face.

El Dorado County adoption social workers are assigned as secondary case workers during Concurrent Planning. Part of their secondary assignment is to determine permanency options for children to prepare in the event the children are unable to reunify with their birth parents.

The HHSA currently employees two full time adoption social workers and one supervisor that attend to the adoption services provided by the County. The Adoptions Unit is currently referring families to private adoption agencies to have their home studies completed given the workload issue. The Adoptions Unit is not able to do home studies as the two social workers are focusing on the court related child welfare activities. With the support of the PSSF funding

an additional social worker will be added to the Adoptions Unit. The goal is to be able to complete some of the home studies for families who are matched with the child that has been in their home during the court dependency. The adoption social workers will be working closer with the families to assist them with the adoption process and any issues that may come up during the home study process.

The Adoptions Unit supervisor will continue to provide post adoption services to families that have finalized their adoption. The HHSA continues to carry Adoption Assistance Program (AAP) cases until the child has reached the age of eighteen or twenty-one. Post adoption services consist of providing referral information to the families, out of home placement information, etc.

As part of maintaining the AAP caseload, the Adoption Supervisor is responsible for providing information about therapists in the area that provide adoption related counseling services, works with our local adoption agencies and knows when they are having activities for families who have adopted, such as social activities, and provides this information when families call asking about groups. These agencies also have support groups and the HHSA will provide this information. The supervisor is also responsible for working with families regarding adoption subsidies. They assist the families in identifying the required documentation that is needed when an increase is being requested for the AAP grant. We determine with their assistance if the grant is to be increased and the reason for the increase.

Post-adoption services also include maintaining records and when a request is received from either adult adoptees or birth parents asking for information, the information that is allowable is provided. Research efforts also take place, including reviewing contact forms to try to connect birth parents and their children if they have both signed the waiver and it is on file. If criteria are met, the supervisor will assist in providing addresses to one another and assist in making the connection.

A procedure and tracking system for number of clients served, demographics, effectiveness and client satisfaction is being developed and implemented by the start of this plan, July 1, 2012.



RESOLUTION NO. 051-2012

OF THE BOARD OF SUPERVISORS OF THE COUNTY OF EL DORADO

WHEREAS, In January 2004, the implementation of Assembly Bill 636 brought a new Child Welfare Services Outcome and Accountability System to California, also known as the California-Children and Family Services Review (C-CFSR); and

WHEREAS, The C-CFSR includes several processes all California counties must participate in including Quarterly Outcome and Accountability Data Reports, Peer Quality Case Review (PQCR), County Self-Assessment (CSA), System Improvement Plan (SIP) and Annual SIP Updates and is overseen by the State of California Department of Social Services (CDSS); and

WHEREAS, The SIP outlines how the County will remodel its Child Welfare Services (CWS) and Probation services to improve outcomes for children, youth and families and includes specific action steps, timeframes, and improvement targets; and

WHEREAS, the CDSS has combined the Child Abuse Prevention, Intervention and Treatment (CAPIT)/Community-Based Child Abuse Prevention (CBCAP)/Promoting Safe and Stable Families (PSSF) Three-Year Plan, overseen by its Office of Child Abuse Prevention (OCAP), with the SIP; and

WHEREAS, the SIP serves as a commitment to specific measurable improvements in performance outcomes that the County will achieve within a defined timeframe including prevention strategies; and

WHEREAS, the CDSS has extended the combined SIP from a three-year to a five-year plan and the 2012 El Dorado County SIP for CWS/Probation will be effective May 21, 2012 through May 20, 2017

NOW, THEREFORE, BE IT RESOLVED that the Board of Supervisors of the County of El Dorado approves the 2012 El Dorado County SIP for CWS/Probation which now incorporates the CAPIT/CBCAP/PSSF Plan for the five year period of May 21, 2012 through May 20, 2017 and authorizes the Chair to sign the Notice of Intent to contract with public or non-profit agencies to provide services in accordance with the CAPIT/CBCAP/PSSF section of the SIP.

PASSED AND ADOPTED by the Board of Supervisors of the County of El Dorado at a regular meeting of said Board, held the 15 day of May, 2012, by the following vote of said Board:

Attest:
Theresa Daly
Acting Clerk of the Board of Supervisors

Ayes: Sweeney, Nutting, Knight, Briggs, Santiago
Noes: None
Absent: None

By: Marcie MacFarland
Deputy Clerk

[Signature]
Chairman, Board of Supervisors
John R. Knight

I CERTIFY THAT:
THE FOREGOING INSTRUMENT IS A CORRECT COPY OF THE ORIGINAL ON FILE IN THIS OFFICE.
Attest: Theresa Daly, Acting Clerk of the Board of Supervisors of the County of El Dorado,
State of California

By: Marcie MacFarland Date: 5/15/12
Marcie MacFarland, Deputy Clerk

**EL DORADO COUNTY
BOARD OF SUPERVISORS
AGENDA TRANSMITTAL
MEETING OF APRIL 9, 2002**

AGENDA TITLE: Establishment of Child Abuse Prevention Council (CAPC)

DEPARTMENT: Social Services **DATE:** March 28, 2002 **CAO USE ONLY** 4.2.02

CONTACT: LOIS L. PATRICK *Lois Patrick* **PHONE:** 7272 *C. Brunet*

DEPARTMENT SUMMARY AND REQUESTED BOARD ACTION: The Department of Social Services requesting your Board:
1) Disband the Children's Trust Fund Commission; and 2) Authorize the establishment of a Child Abuse Prevention Council (CAPC) comprised of up to 15 members pursuant to Welfare and Institutions Code Section 18950 Chapter 12.5 which mandates that each county establish a CAPC to coordinate the community's efforts to prevent and respond to child abuse. The previous Children's Trust Fund Commission's role will be incorporated into the CAPC.

CAO RECOMMENDATION:

CAO CONCURS

APR 2 4 04 PM '02
EL DORADO COUNTY

Financial impact? () Yes (X) No **Funding Source:** () Gen Fund () Other

BUDGET SUMMARY:
 Total Est. Cost \$ 0.00
 Funding
 Budgeted \$ 0.00
 New Funding \$
 Savings* \$
 Other \$
 Total Funding Available \$ 0.00
 Change in Net County Cost \$ 0.00
 * Explain

CAO Office Use Only:
 4/5's Vote Req'd. () Yes (X) No
 Change in Policy (X) Yes () No
 New Personnel () Yes (X) No
CONCURRENCES:
 Risk Management
 County Counsel
 Other

BOARD ACTIONS: APR - 9 2002 - Approved.

Vote: Unanimous _____ Or
Ayes: Baumann, Humphreys, Duprey, Solero
Noes: None
Abstentions: None
Present: Scirelli
 Rev. 7/98 [agendatag980rev

I hereby certify that this is a true and correct copy of an action taken and entered into the minutes of the Board of Supervisors.
Date:
Attest: DIXIE L. FOOTE, Board of Supervisors Clerk
By:

BOS Notice of Intent

STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY

CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

NOTICE OF INTENT CAPIT/CBCAP/PSSF PLAN CONTRACTS FOR EL DORADO COUNTY

PERIOD OF PLAN (MM/DD/YY): 05/21/12 THROUGH (MM/DD/YY): 05/20/17

The undersigned confirms that the county intends to contract, or not contract with public or private nonprofit agencies, to provide services in accordance with Welfare and Institutions Code (W&I Code Section 18962(a)(2)).

In addition, the undersigned assures that funds associated with Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) will be used as outlined in statute.

The County Board of Supervisors designates the El Dorado County Health and Human Services Agency as the public agency to administer CAPIT and CBCAP.

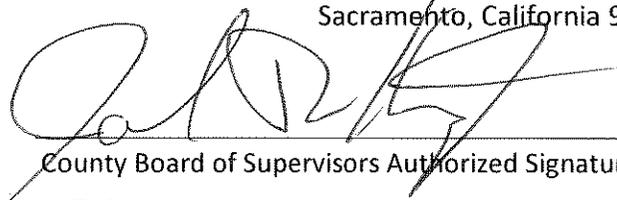
W&I Code Section 16602 (b) requires that the local Welfare Department shall administer PSSF. The County Board of Supervisors designates the El Dorado County Health and Human Services Agency as the public agency to administer PSSF.

Please enter an X in the appropriate box.

- The County intends to contract with public or private nonprofit agencies to provide services.
- The County does not intend to contract with public or private nonprofit agencies to provide services and will subcontract with _____ County to provide administrative oversight of the projects.

In order to receive funding, please sign and return the Notice of Intent with the County's System Improvement Plan:

California Department of Social Services
Office of Child Abuse Prevention
744 P Street, MS 8-11-82
Sacramento, California 95814



County Board of Supervisors Authorized Signature

John R. Knight

Print Name

5/15/12

Date

Chair

Title

ATTEST: SUZANNE ALLEN de SANCHEZ
Clerk of the Board of Supervisors

By 

DEPUTY