



**Kern County  
California Child and Family Services  
Review  
County System Improvement Plan**

**Submitted December 4, 2012**

**Kern County Department of Human Services**

**Kern County Probation Department**

**Submitted to the California Department of Social Services**

FIRE DEPARTMENT

- CA-21) Request to appropriate unanticipated revenue in the amount of \$693,555 from Homeland Security Grant Funds, establish capital asset accounts for the purchase of equipment and authorize transfer of capital assets to other agencies (Fiscal Impact: \$693,555; State Homeland Security Grant; Not Budgeted; Discretionary) - APPROVED; AUTHORIZED AUDITOR-CONTROLLER TO PROCESS THE SPECIFIED BUDGETARY ADJUSTMENTS AND ACCOUNTING TRANSACTIONS

**McQuiston-Goh: 4 Ayes; 1 Absent - Watson**

- CA-22) Request to employ retired County employee, Don Hill, as a Fire Equipment Mechanic, Step E, for a period not to exceed 120 working days or 960 hours, whichever is greater, in the 12-month period following date of employment (Fiscal Impact: \$25,000 FY 2012-2013; Fire Fund; Budgeted; Discretionary) - APPROVED

**McQuiston-Goh: 4 Ayes; 1 Absent - Watson**

HUMAN SERVICES

- 23) Request approval of Kern County Child Welfare System Improvement Plan for submission to California Department of Social Services (Fiscal Impact: None) - LISA MOLINAR, CONSULTANT, SHARED VISION CONSULTING, HEARD; APPROVED; AUTHORIZED CHAIRMAN TO SIGN

**Goh-Maggard: 4 Ayes; 1 Absent – Watson**

NOTE: Item No. 24 was heard following Item No. 7 and prior to Item No. 23

- 24) Request to accept in-kind donation from the Junior League of Bakersfield for children's clothing, toys, games, books and health and beauty items valued at \$5,500 for the A. Miriam Jamison Children's Center (Fiscal Impact: None) - HEARD PRESENTATION BY CARL GUILFORD, PROGRAM DIRECTOR, A. MIRIAM JAMISON CHILDREN'S CENTER, WHO INTRODUCED JUNIOR LEAGUE OF BAKERSFIELD MEMBERS COLLEEN DILLAWAY AND SARAH DOWNIE; COLLEEN DILLAWAY HEARD; APPROVED; AUTHORIZED CHAIRMAN TO SIGN LETTER OF APPRECIATION

**Maggard-Goh: 4 Ayes; 1 Absent - Watson**

LIBRARY

- CA-25) Request for acceptance of donation to Kern County Library from Friends of the Ridgecrest Library, in the amount of \$13,000 (Fiscal Impact: \$13,000 Donation; Not Budgeted; Discretionary) - APPROVED; AUTHORIZED CHAIRMAN TO SIGN LETTER OF APPRECIATION

**McQuiston-Goh: 4 Ayes; 1 Absent - Watson**

- CA-26) Request to apply for and accept Motion Picture Licensing Corporation (MPLC) Umbrella License Agreement for one year term, containing non-standard terms and conditions (Fiscal Impact: None) - APPROVED; AUTHORIZED DIRECTOR OF LIBRARIES TO SIGN

**McQuiston-Goh: 4 Ayes; 1 Absent - Watson**

**CERTIFICATE OF ADOPTION OF RESOLUTION  
AUTHORIZING CHAIRMAN TO SIGN INSTRUMENT**

The undersigned, Clerk of the Board of Supervisors of the County of Kern, hereby certifies that the following resolution was adopted by said Board of Supervisors at a regular meeting duly convened on the 4<sup>th</sup> day of December 2012:

“WHEREAS, this Board has determined that the County of Kern should approve Kern County Child Welfare System Improvement Plan for submission to California Department of Social Services

NOW, THEREFORE, BE IT RESOLVED by the Board of Supervisors of the County of Kern, State of California, that said instrument be, and it is hereby executed on behalf of and in the name of said County of Kern, and the Chairman of this Board is hereby authorized and directed to sign his name thereto on behalf of said County.”

The undersigned further certifies that on the date last mentioned the person who so signed said instrument was the duly elected Chairman of said Board and that his signature on said instrument is genuine.

The undersigned further certifies that said resolution was adopted by the following vote:

Ayes: McQuiston, Scrivner, Maggard, Goh

Noes: None

Absent: Watson

Dated: December 4, 2012



KATHLEEN KRAUSE  
Clerk of the Board of Supervisors  
County of Kern

By:

Christina Tillett  
Deputy Clerk

Ref: 12/4/2012 - Agenda Item 23 A.M.

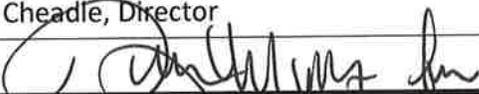
**California's Child and Family Services Review  
System Improvement Plan**

<b>County:</b>	<b>Kern County</b>
<b>Responsible County Child Welfare Agency:</b>	Kern County Department of Health and Human Services
<b>Period of Plan:</b>	<b>7/17/2012-7/17/2017</b>
<b>Period of Outcomes Data:</b>	<b>QUARTER ENDING: QUARTER 2 OF 2012</b>
<b>Date Submitted:</b>	

**COUNTY SYSTEM IMPROVEMENT PLAN CONTACT PERSON**

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<b>Title:</b>	Program Specialist
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**Submitted by each agency for the children under its care**

<b>Submitted by:</b>	<b>County Child Welfare Agency Director (Lead Agency)</b>
<b>Name:</b>	Pat Cheadle, Director
<b>Signature:</b>	

<b>Submitted by:</b>	<b>County Chief Probation Officer</b>
<b>Name:</b>	David Kuge, Chief Probation Officer
<b>Signature:</b>	

**Board of Supervisors (BOS) Approval**

<b>BOS Approval Date:</b>	<b>DEC 04 2012</b>
<b>Name:</b>	<b>ZACK SCRIVNER</b>
<b>Signature:</b>	

APPROVED AS TO FORM  
Office of County Counsel  
Kern County  
By: 

## Required Core Representatives

Name	Affiliation
Jayme Stuart Kern County Network for Children	Child Abuse Prevention Council (CAPC), also acting as Children's Trust Fund (CCTF) Commission
Tom Corson Kern County Network for Children	Children's Trust Fund Commission via Kern County Children's Coalition
Tom Corson Kern County Network for Children	County BOS designated agency to administer CAPIT/CBCAP/PSSF Programs
Monique Morland	County Public Health Department
Deanna Cloud	County Mental Health Department
Monique Hawkins Marti Garrett Joy Earnest Jill Christopher Kristy Powers-Stacy Jeaniene Reneau Ray Gomez Steve Cecil Carl Guilford Hal Lockey Mary Erwin	CPS Managers
Macy Albertson Jeff Mendoza	CPS Supervisors
Kristie Esquivel	CPS Social Worker
Maria Bermudez	CAPIT/CBCAP/PSSF Liaison
Olivia Villarreal	Foster Youth/CYC
Judge Jon Stuebbe	Juvenile Bench Officer and court staff
Opal Morland	Native American Tribe –
Parent	Focus Group Participation
Susan Lerude	Probation Manager
Jeremy Roberts	Probation Supervisor
Karen Cooley	Family Supportive Collaborative
Gayla Gibson	Resource Family
Antanette Jones	CWS Administrator, Kern County Department of Human Services

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## A. SIP Narrative

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Historically, the effectiveness of child welfare services across the country was heavily reliant upon anecdotal evidence. It was very difficult to point to empirical data to measure whether the services being provided by child welfare staff were actually making any difference for the children and families they were designed to serve on anything other than an individual case by case basis.

Pursuant to AB636, effective January 2004, a new Child Welfare Services Outcome and Accountability System began operating in California. It focuses primarily on data analysis and measuring outcomes in the areas of Safety, Permanence and Child and Family Well-Being. The system is based upon a philosophy of continuous quality improvement, interagency partnerships, community involvement, and public reporting of program outcomes.

This new California Outcomes and Accountability System (CAOS), also known as the California Child and Family Services Review (C-CFSR), include three process components which together provide a comprehensive picture of county child welfare practices. The Peer Quality Case Review (PQCR) is the first component of the process, followed by the County Self Assessment (CSA) and finally the development of the county child welfare System Improvement Plan (SIP). Counties are expected to partner with their community and prevention partners to develop a SIP that focuses on service to families from prevention through the continuum of care.

Until 2008, there was a similar but separate planning process in place required for counties receiving funding through the Office of Child Abuse Prevention (OCAP). In recognition of the fact that these two parallel processes were duplicative and required the involvement of many of the same community partners, the state and counties agreed to merge the two planning processes. Thus, in June 2008, the California Department of Social Services (CDSS) issued an All County Information Notice (01-41-08) introducing new guidelines to integrate the COAS with the OCAP plan for counties like Kern County who receive Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and/or Promoting Safe and Stable families (PSSF) funding.

The SIP serves as the operational agreement between the county and state, outlining how the county will improve its system to provide better outcomes for children, youth and families. Quarterly county data reports, quarterly monitoring by CDSS, and annual SIP progress reports are the mechanism for tracking a county's progress.

In Kern County, the Department of Human Services is the primary entity for providing child welfare services to families experiencing child abuse and neglect. The Probation Department is responsible for providing services to children/youth involved in the juvenile delinquency system

and placed in out-of-home care. Prevention services funded through OCAP are provided by the Kern County Network.

The Kern County 2012 - 2017 System Improvement Plan (SIP) report includes two parts as prescribed, in addition to this narrative:

Part 1 –This section of the SIP includes the CWS/Probation narrative, the SIP matrix and the Child Welfare Services Outcome Improvement Project (CWSOIP) narrative. This section of the SIP explains the basis for how outcomes targeted for improvement and program development were selected by Child Welfare Services and Probation for the 2012-2017 SIP. The matrix specifically outlines the outcome improvement goals, strategies, action steps, timelines and person responsible for the strategy.

Part II – This section focuses on community child abuse prevention efforts and includes the CAPIT/CBCAP/PSSF narrative and five year plan to meet the requirements for counties seeking CAPIT/CBCAP/PSSF funds administered through OCAP.

This SIP process would not have been possible without the assistance and contributions of all stakeholders that participated in any or all of the activities that informed this process. A complete list of all SIP participants is included in this report. As required, the 2012-2017 County SIP and CAPIT/CBCAP/PSSF 5-Year Plan is being submitted to the Board of Supervisors (BOS) for approval prior to the final submission to the CDSS. Board approval verifies that public, private and community partners were involved in the development of these reports.

## **SIP Process**

The 2011 Peer Quality Case Review (PQCR) addressed the focus area of Placement Stability for Child Welfare Services; 8 days to 12 months in care (Entry Cohort C4.1) because it is a priority for the County to ensure children maintain a stable placement. Probation chose to address the impact of ILP services for their youth transitioning from foster care. The PQCR gathered information utilizing interviews, focus groups, literature reviews, and data analysis.

In September 2011, Kern County initiated the County Self Assessment (CSA) process to evaluate the effectiveness of child welfare services as well as the OCAP funded prevention services provided to families in our community. A group of stakeholders came together including agency staff from Child Welfare Services and Probation, community partners, stakeholders and partners from the California Department of Social Services. The charge to the group was to review and analyze performance data, identify strengths and challenges and offer recommendations.

The CSA process consisted of discussion regarding county demographics; participation rates in child welfare and probation; safety, permanency and well being outcomes; public agency collaborations; service array and agency responsiveness to the community. It was viewed through the lens of prevention, intervention and treatment across the continuum of care.

In January 2012, the System Improvement Planning process was initiated. An internal meeting was conducted with staff to review the PQCR and CSA information and outcomes for inclusion in the SIP were identified. A stakeholder meeting was conducted which was attended by staff, probation, the First Five Commission, California Department of Social Services, and other stakeholders. Each outcome that had been identified for inclusion in the SIP was discussed to identify strategies. This information was taken back to the agency and a process utilized to further hone the strategies to be included in this plan. Data was used in the PQCR, CSA and SIP to inform the processes.

The data used for the CSA was obtained from the AB636 Quarter 3 2011 Data Report accessed through the CDSS website, <http://www.childsworld.ca.gov/res/CtyReport/>. Data was also extracted from the following resources:

The Center for Social Services Research: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Glasser, T., Williams, D., Zimmerman, K., Simon, V., Putnam-Hornstein, E., Frerer, K., Cuccaro-Alamin, S., Winn, A., Lou, C., & Peng, C (2009). *Child Welfare Services Report for California*. Retrieved June 2010, from University of California at Berkeley Center for Social Services research website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

Children's Research Center SafeMeasures® Data. *Kern County, CFSR Composite Reports*, . Retrieved from Children's Research Center website. URL: <https://www.safemeasures.org/ca/safemeasures.aspx>

### **Selection of Outcomes Needing Improvement**

CDSS recommends that counties choose three to four outcomes or systemic factors for specific improvement strategies in the SIP. All of the other outcomes that are not listed in this plan will continue to be monitored by both our agency and the California Department of Social Services at least quarterly. If a concerning situation arises, a plan will be put in place quickly to address that outcome. It should be noted that a specific strategy, although listed in one specific outcome area can affect numerous outcomes. For example the strategy of Family Finding and Engagement, while listed with the outcome "placement stability" will also impact "timely reunification", "timely adoptions" and many other outcomes.

Our county chose the following six outcomes to focus on for our 2012-2017 SIP:

- S.1.1 Safety Outcome: No Recurrence of Maltreatment
- C1.4 Re-Entry following Reunification Outcome
- C4.1 Placement Stability (8 days to 12 months in care)
- C4.2 Placement Stability (12 months to 24 months in care)
- C4.3 Placement Stability (at least 24 months in care)
- 8A. Well-Being (Probation)

The goal for each of these outcomes is to meet the Federal Standard by 2017.

**Current Activities in  
Place  
Or  
Partially Implemented**

1. Collaborate with community resources to ensure family stability and children’s safety, and to reduce the reoccurrence of maltreatment and reentry following reunification.
2. Provide Differential Response (DR) Services to children and families who are at risk for experiencing child abuse or neglect, and to reduce the reoccurrence of maltreatment.
3. Expand Team Decision Making Meetings (TDM) and Family Decision Meetings (FDM) in an effort to increase placement stability and decrease reoccurrence of maltreatment and reentry following reunification.

**Probation**

1. Continuous dialogue with youth about ILP services even when refused by youth.
  - a. including telling youth about eligibility
  - b. Improved communication with ILP workers

**Contribution to  
The State PIP**

Kern County’s SIP has been created to improve outcomes for children and families within the county. However, it also supports the state’s Program Improvement Plan. These include:

1. Strategy 1 of the PIP is “Expand use of participatory case planning strategies.” Kern’s SIP supports this strategy in its expansion of the use of Team Decision Making meetings which are participatory case planning meetings. TDMs will be used to increase placement stability and decrease re-entry following reunification.
2. Strategy 2 “Sustain and enhance permanency efforts across the life of the case” is supported by Kern in its development of upfront and back end family finding engagement teams, aka Kids Connection Teams (KCT).
3. Strategy 4 “Expand options and create flexibility for services and supports to meet the needs of children and families” is supported by Kern in that it is enhancing its Differential Response Program, one of the state’s action steps. Kern will also be implementing a mentor program for families receiving family maintenance services as a supportive option for families. These programs will impact outcomes of no recurrence of maltreatment outcome and reentry following reunification.
4. The Differential Response, Team Decision-Making

Meetings and mentoring parent program services are Kern’s calculated efforts and planned activities to target the elimination of disparities identified in services and outcomes for children of color in the county’s child welfare system.

***Use of Logic Models***

Developing a logic model helps to delineate the specific methods by which proposed changes from the SIP will improve performance. Logic Models have been developed for our CAPIT/CBCAP/ programs as part of this process. These internal planning documents will be revised along the process to help inform the strategic planning process.

***Integration into the  
CAPIT/CBCAP/PSSF  
Plan***

Stakeholders representing the entire continuum of prevention through services, treatment and follow up prevention participated in the PQCR/CSA/SIP planning process and assisted in identifying strategies to be included in to the plan. As a community our focus is to build on the promising collaborations that we have in place to enhance our continuum of services. The use of CAPIT/CBCAP/PSSF and Children's Trust Fund money helps us to do that. As permitted by funding, we will continue to provide parenting, differential response, and community education.

***Child Welfare  
League  
Of America  
(CWLA)***

The Board of Supervisors contracted with CWLA from July 07-June 08 to facilitate the implementation of a strategic plan and monitoring system. The CWLA plan included twenty two recommendations of which many have already been implemented. Some of the SIP strategies are similar and directly related to the CWLA recommendations. Kern County continues to integrate the recommendations in an effort to improve outcomes. Strategies that were recommended and that are integrated into the SIP are:

- Examine current levels of staff expertise in engagement skills. A review and improvement of practice to family engagement in decision processes, e.g., family group decision-making would be included in this recommendation. (CWLA, Rec.3). Correlates to SIP Strategy #5, “Increase engagement with families and children through the use of TDMs”.
- Resolve issues of continuity of mental health services for

children who move from one foster home/relative placement to a different mental health catchment area. (CWLA, Rec.4). Correlates to SIP Strategy #6, “Improve family’s access to mental health services”.

- Examine needs of relative caregivers and develop training and support services as needed. (CWLA, Rec. 10). Correlated to SIP Strategy #5, “Increase engagement with families and children through the use of TDMs” and SIP Strategy #9 “Streamline Relative Appeal Process”.

Please see the attached CWLA matrix (Attachment 5)

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## B. PQCR

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### *Executive Summary*

Placement stability is a critical component of the well-being of children in foster care. Kern's rate of children with two or more placements has been steadily climbing from a baseline low of 15% in 1998. The national standard for placement stability in the measure 8 days to 12 months is 86.0. Kern County CWS' performance was 72.9 for Q3 2011 and 75.8 for Q4 2011. It is of utmost importance that we make substantial improvements in our ability to provide stable placements for the children in Kern County who cannot reside at home. Thus the 2011 Peer Quality Case Review (PQCR) addressed the focus area of Placement Stability for Child Welfare Services; 8 days to 12 months in care (Entry Cohort C4.1) because it is a priority for the County to ensure children maintain a stable placement. Kern County's performance is below state and national averages.

Transition from foster care is another important component of well-being. For Probation this is a critical concern. There are approximately 201 probation youth residing in out-of-home placement. Of those out-of-home placements, 144 reside in group homes and 34% of probation youth are placed out of county. Because 87% of the group home placements are between the ages of 16 – 18 years old, and because the issues facing this population are numerous, including: financial resources, emotional instability, negative support system, degraded family relationships, and educational deficiencies, the ILP and other transitional programs are of utmost importance and it becomes imperative that CPS and Probation work collaboratively to provide the most effective and efficient ILP service for the youth in Kern County. Thus Probation chose to address the impact of ILP services for their youth transitioning from foster care.

Kern County's PQCR for 2011 included a combination of focus groups and social worker and deputy probation officer interviews to gather the information for the PQCR report. Child Welfare Services held a total of six focus groups comprised of Social Service Workers (SSW), Social Service Supervisors (SSS), biological parents, youth, caretakers and service providers from Kern County Mental Health. Kern County Probation held focus groups with youth and caregivers. Focus group discussions and stakeholder meetings centered on the entire continuum of care. Both departments chose individual cases to obtain case specific information for this report as well. A Case Summary was prepared by the SSW or the Probation Officer to

provide case information to the interview panel prior to the interviews taking place. CPS was provided case ID numbers for sixty (60) cases that were identified by CDSS as meeting the criteria of the focus area. Those cases were narrowed down to eighteen (18) primary and ten (10) overmatch cases which could be used as substitutes if any of the primary cases needed replacing.

The Kern County Probation Department chose to evaluate transitional aged youth and the Independent Living Program (ILP) as part of the PQCR process. In doing so, all active Probationers eligible for the ILP program were compiled. Once compiled, one youth from each of the 12 Probation Officer caseloads was randomly selected. Since every officer is responsible for supervising different categories of youth, the selection process led to a wide variety of ILP eligible youth including youth placed in Kern County and out of county, youth placed in group homes, foster homes, and with non-related extended family members (NREFM), as well as youth who returned home upon complying with Court and Probation orders.

Many strengths and promising practices for child welfare in Kern were identified during the process including the passion of the social workers who care about the work they do with families. A positive theme emerged which showed them to be loyal and driven to help families and children. Many social workers have contact with the children on their case loads weekly to provide transportation, visitation supervision and emotional support. Additionally, the focus groups revealed that social workers value sibling visitation, and work hard to provide the caretakers with needed referrals to services to assist them in maintaining the children in their homes. CPS social workers also have a strong commitment to keeping siblings placed together and reunifying the children with their parents. When reunification was not possible, they were diligent in their efforts to reestablish and to maintain family connections and to engage everyone involved in the case.

Child welfare staff also showed strength in their use of Team Decision Meetings to preserve placement as well as engaging the caretakers to mitigate the circumstances which caused the caretaker to issue a seven-day notice. It was also noted that child welfare social workers often met with age- appropriate children to discuss placement options prior to making a placement decision for the child, and they made regular use of respite care homes to help alleviate the stress on the full- time caretaker. Initial mental health assessments which are conducted at the Jamison Children's Center when children are first placed into protective custody, along with the practice of the Emergency Response social worker identifying

relatives early in the case were noted to be promising practices.

Many promising strengths for Kern County Probation were also discovered which should be capitalized upon to address the common problems. One of the major strengths included the passion of the probation officer and their constant communication with their assigned youth. This passion for the success of their respective youth has led to improved communication with CPS over the last several months. The officers have decided to correct the problem by attempting to learn about ILP services in their daily operations so youth can reap the rewards and be provided the same opportunities afforded to CPS youth.

Furthermore, the probation officer has also developed extremely positive relationships with out of county providers and ILP workers, thus resulting in becoming aware of the dichotomy between in county and out of county ILP service delivery. At the group home level, the PQCR revealed most group homes were already providing informal ILP services to prepare their youth for transition and many out of county group homes receive assistance from community partners, colleges, and other stakeholders to assist with transitional services.

In regard to barriers, challenges, training needs, systemic and policy changes, resource issues, and the need for state technical assistance and documentation trends within Kern County Child Protective Services, themes that emerged fall into approximately five general categories or areas of responsibility: Early placements, family finding and relative assessment, mental health services, policy and practices for case transfers and TDMs, and caregiver concerns.

Regarding barriers and challenges identified for Probation, the most common theme was the need for increased communication between CPS and Probation, as well as there need to communicate more effectively with providers, community partners, and transitional youth. This communication will lead to an overall understanding regarding the ILP program's operational services and parameters. These common themes include the need for increased Probation knowledge of ILP services, inequity in services and quality of services to Probation youth, as well as needs in the areas of training, technical assistance, resources, and documentation. As a result of the PQCR, a number of recommendations emerged that will address the above challenges and build upon the strengths of both departments.

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## C. COUNTY SELF ASSESSMENT

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### *Executive Summary*

The Department of Human Services and Probation Department continue to implement systemic changes in accordance with California's Child and Family Service Review (C-CFSR) guidelines. The C-CFSR implemented an outcome-based accountability system to measure each County's performance in providing child welfare services.

The previous reporting cycle began with the submission of an updated Self-Assessment to the California Department of Social Services (CDSS) in February 2009. The Self-Assessment provided an analysis of the County's performance as reported in the October 2008 Quarterly Report, and served as the foundation for the three-year System Improvement Plan (SIP) (July 1, 2009-June 30, 2012).

Upon completion of the previous Peer Quality Case Review (PQCR) and the Self Assessment in December 2009, Kern County embarked upon a three year System Improvement plan (SIP).

The lead agency for completing the SIP is the Department of Human Services. The Probation Department is a contributing agency to the SIP and is responsible for assessing outcomes for children under its direct supervision who also receive child welfare services. The data source for these reports is the Child Welfare Services/Case Management System (CWS/CMS), reports that are published by the California Department of Social Services in collaboration with University of California Berkeley at [http://cssr.berkeley.edu/ucb\\_childwelfare/RefRates.aspx](http://cssr.berkeley.edu/ucb_childwelfare/RefRates.aspx).

New to this SIP cycle is the integration of the Office of Child Abuse Prevention Needs Assessment. The integration of child abuse prevention, intervention, and treatment allows for the county to look holistically at its service delivery model across the continuum of care. The CDSS continues to provide valuable consultation on an ongoing basis.

Kern County is the eleventh most populous of the 58 California counties. The population has grown by 26.1% since 2001. Over half of the population is Latino (55.1%) and 40% of people over the age of five years speak a language other than English at home. The child poverty level is

significantly higher (30.3% compared to 19.6%) in Kern County than the rest of California. These demographics start to tell the story of a diverse and geographically large county. The recent economic down turn has necessitated a reduction in staff and services. This County Self Assessment was conducted to take a look at how children, youth and families are faring in Kern County, and how services are designed to meet their needs. To that end a multitude of information gathering activities occurred:

- The Peer Quality Case Review (PQCR)
- Community Stakeholder meeting
- Focus groups with Social Workers and Supervisors (Independent Living Skills, Domestic Violence Unity, Emergency Response, Court and Wrap around)
- Focus group with Management
- Focus group with Probation team
- Focus Group with Birth Parents
- Focus Group with Relative Providers
- Focus Group with local Group Home providers
- And numerous individual interviews with numerous stakeholders for e.g. Judge, Director of services etc
- Survey with Educational Providers regarding AB 490

Kern County has many committed and passionate staff and community members that are dedicated to providing services to children and families in the county, and looks forward to combining the information found in the PQCR with the information in this report to develop a five year System Improvement Plan (SIP).

The Outcomes are broken down in to three major categories, Safety, Permanency and Well-being. A complete review of all of the Federal outcomes and Well-being measures are included in the body of the report. What is reported in this summary are those outcomes that Kern is considering including in the SIP.

## **G.2. Participation Rates:**

The SIP will develop strategies aimed at addressing issues identified in this process regarding participation rates. At this time recommendations include exploring opportunities to improve relationships with local law enforcement agencies and developing a plan for social workers to assist

Local Enforcement Agencies (LEA) in all removals, to possibly prevent children entering the system and being released shortly thereafter. Another strategy to be explored is to re-train social workers who take the calls and screen the referrals to ensure consistency and comprehensive assessments.

### **G.3. Safety Outcomes:**

#### **S 1.1: Safety Outcome Measure - No Recurrence of Maltreatment**

From the baseline period from the previous CSA of 90.6% to the most recent period from 4/1/10 to 9/30/10, there was an increase of .3%. Current performance is below the Federal Standard of 94.6%. This outcome will be included in the 2012 SIP:

This outcome was included in the previous SIP. The County previously implemented 13 strategies to address this outcome.

1. Search Counties north and south of Kern for services.
2. Collaborate with community resources to ensure family stability and children's safety.
3. Provide Differential Response (DR) Services to children and families who are at risk for experiencing child abuse or neglect.
4. Provide parent education, case management and counseling services for parents whose children are at risk or have experienced maltreatment.
5. Expand Team Decision Making Meetings (TDM) and Family Decision Meetings (FDM) to Emergency Response.
6. Develop Chronic Neglect Unit. Please refer to description below

In February 2008, a two year pilot to serve chronic neglect families began. A unit was formed and was named Engage, Assess, Serve and Empower, (EASE). The unit provided what is referred to as "vertical social work". Social Service

Workers (SSW) in the EASE unit were assigned referrals to investigate. If they determined the family needed on-going services, the investigating worker kept the voluntary case, providing intensive services and contact with the family. If the voluntary services were not successful in protecting the children, the EASE social worker removed the children from the parents, but continued to be assigned to the case throughout the court process which could entail providing court ordered family reunification services and/or court ordered family maintenance services for sometimes more than 12 months.

Some families in the EASE unit received services (voluntary and then court ordered) for more than two years. The EASE SSWs provided intensive services, using the contact guidelines from Structured Decision Making; in all cases making contact with the family at least twice per month and in most cases one time each week. Families qualified for EASE services if there had been five or more referrals made on their behalf since January 1, 2000. Phone room staff screened incoming referrals and assigned the referral to an EASE SSW for investigation. Whenever a referral was assigned to the EASE unit, another EASE-eligible referral was assigned to an ER SSW for regular services, thus creating a control group with which to compare the results of EASE services.

The results of this pilot revealed several things. Initially clients receiving services via the EASE unit had a higher rate of re-referral than the control group. Over time, this trend reversed. At the end of the project, clients receiving services via the EASE unit showed that 23% of those families had a subsequent referral, down from an original rate of 41%. The control group's re-referral rate was 31%, down from an original rate of 35%. As this was the initial purpose of the pilot, providing intensive services appears to have lessened the amount of re-referrals for the EASE families as opposed to the control group; however the amount was not significant enough to show an effect on our outcome for this safety measure (no recurrence of maltreatment). The decrease in the re-referral rate for the EASE unit was most likely linked to the fact that all of the children assigned to the EASE unit ended up being removed from their parents and made dependants of the court; and for 55% of the children involved, this was not the first time they had been declared a dependent child of the court. These statistics aligned with

what research tells us; for families with a history of chronically neglecting their children, voluntary, short term intensive services do not work. Based on the data and funding constraints, the unit was disbanded in 2010.

The department implemented all but one of the six strategies. The fifth strategy, Expanding Team Decision Meetings and Family Decision Meetings to Emergency Response, was removed from our SIP due to budgetary factors. Although, it should be noted that Team Decision Making Meetings and Family Decision Meetings are conducted in Emergency Response on a voluntarily basis. The OCAP money is used to provide prevention services to meet the unmet needs of the community to reduce maltreatment and recurrence in the community. The services are provided to families across the county including isolated areas and to monolingual families. Differential Response (DR) has been proven to be effective in providing those services (See program description for a description of DR services).

#### **S 2B: Safety Outcome Measure -Timeliness of Investigations for 10-day and Immediate Referrals**

From January 1, 2011 to March 31, 2011, we had 91.9% compliance on timeliness of immediate investigations. Current performance is below the Federal Standard (95%). This outcome measure was not included in previous SIP.

#### **S 2C: Safety Outcome Measures- Timely Social Worker Visits with Child**

In January 2011, we had 92.9% compliance on timeliness of monthly social worker visits. This is below the Federal Standard (95.5%).

Even with the additional funding provided by our local Board of Supervisors resources are limited and due to fiscal constraints and reorganization of the agency, it has impacted Kern's ability to meet the Federal Standards of timeliness of visits. These outcomes will be considered for inclusion in the SIP. This outcome measure was not included in previous SIP.

## **G.4 Permanency Outcomes**

### **Permanency Measure C1.1: and C1.3 Reunification Probation**

From the baseline of April 1, 2007 to March 31, 2008, the percentage of children who were discharged from foster care to reunification has increased from 26.7% to 29.4%. Current performance is below the federal standard of 75.2%. This was an outcome identified for Probation in the previous SIP and will be considered for inclusion in the 2012 SIP.

### **Permanency Measure C1.4: Re-Entry Following Reunification (Exit Cohort)**

From the baseline of April 1, 2006 to March 31, 2007, there has been a decrease in the number of children who exited to reunification within the year and re-entered foster care from 14.0% to 12.5%; movement in the right direction. However, current performance is above the Federal Standard (9.9%). This outcome measure was not included in previous SIP.

### **Permanency Measure C4.1 - 4.3: Placement Stability Outcome: Placement Stability**

From the baseline of April 1, 2007 to March 31, 2008, the number of children who had two or fewer placement settings decreased from 71.8% to 69.4%. Current performance is below the Federal Standard (86.0%).

This outcome was included in the previous SIP. The County previously implemented 13 strategies to address this outcome.

1. Reduce the number of placement for youth who have been in care over 24 months.
2. Develop and implement the immediate Assessment Process for relatives and non-relative extended family members (NREFM).
3. Stabilize placements by increasing supportive services to foster parents.
4. Hold TDMs prior to placement changes in Family Services and Permanent Placement

5. Address runaway youth problem.
6. Pilot and Implement SDM Substitute Care Provider module.
7. Relocate annual and regular foster care recruiting events to targeted neighborhoods.
8. Stabilize placements by providing training on behavioral and health needs to foster parents and staff.
9. Provide education-related and supportive services to improve academic success of participating foster and group home youth.
10. Recruit, develop and train foster parents on Teen/Youth Crisis Resolution.
11. Train Probation Officers assigned to Placement Unit in Probation Department to understand Division 31 mandates.
12. Increase Probation referrals and placements with Foster Family Agency (FFA)s.
13. Improve communication between Probation and Child Welfare staff when placing minors in Foster Family Homes (FFA)s, pending capability to share information in CWS/CMS.

Placement stability is an area that Kern is consistently analyzing and the plan around this outcome will be a major part of the SIP. Many systemic and practice issues were identified as part of the PQCR (which was conducted on placement stability) and the CSA process.

## **G.5 Well Being Outcomes**

### **Well Being Independent Living Skills Services for Probation youth**

The well being outcomes measure how well the child welfare and probation system are caring for the children and youth that are in the system. At this time these measures do not

have Federal standards and data collection on some measures has been problematic.

Probation conducted their PQCR on examining the level of ILP services provided to Probation youth. This is an area that will be included in the 2012 SIP. This was an outcome measure not included in previous SIP.

## **G.6. Strategies for the Future**

Through the PQCR and CSA process Kern County has identified outcomes that will be considered for the 2012 SIP. Much information has been gathered in this process and will be carefully analyzed and strategies developed in going forward.

The following are the services that we believe CSA data and stakeholder input point to as important strategies to continue to provide and will be the focus of the FY 2012-2017CAPIT/CBCAP/PSSF/CCTF RFP process:

1. Differential Response services county-wide. During FY 2012-2017, the North Carolina Family Assessment Scale (NCFAS) will be used as a family assessment and program evaluation tool. The California Evidence-Based Clearinghouse for Child Welfare gives the NCFAS its highest rating for assessment tools with demonstrated reliability and validity.
2. Voluntary and Court-Ordered parent education services that utilize uniquely designed curriculums for special needs populations (deaf, mentally ill, developmentally disabled, Spanish speaking), in addition to curriculums designed for general populations. Curriculums will fulfill California Welfare and Institutions Code requirements; use research based practices, include pre and post tests, and client satisfaction tools. Case management and counseling services will also be available to these families.

Subject to approval by the Kern County Board of Supervisors, but not subject to RFP (via sole source justifications), we think the following services should continue to be funded:

1. Kern Cares/Kern Child Abuse Prevention Council

activities. CCTF and CBCAP funds will be utilized so that KCNC can continue to conduct Child Abuse Prevention Council activities and provide Kern Cares' public awareness and prevention education services.

2. Time Flies! PSSF funded Time-Limited Family Reunification Services.
3. Adoption Promotion and support services funded by PSSF funds are currently being provided by a local contractor through a professional services agreement pending selection of a provider through formal RFP process. Provider anticipated to be selected by 12/1/2012.

## D. CWS Summary of Outcomes for inclusion in the SIP

**Priority Outcome Measure or Systemic Factor:** S1.1 No Recurrence of Maltreatment

**National Standard:** 94.5%

**Current Performance:** According to the October 2012 Quarterly Data Report (Quarter 2 of 2012), of the 2,301 children who had a substantiated allegation, 2115 did not have a recurrence of maltreatment. This is a 91.9% rate of no recurrence of maltreatment.

- **Target Improvement Goal:** The County will improve performance in this measure from 91.9% to 93% by 2017, an increase of 1.1% and/or 27 children. According to the Child Welfare Dynamic Report System for Q2, 2012 of the 163 children with a recurrence of maltreatment, 27 children were between 1-2 years of age. Data reviews of entries from July 2005 to June 2012 indicate that children 0-5 make up 58%. Several strategies identified in the SIP would impact the identified target group within this measure, children 0-5, and result in a 1.1% improvement in this measure (data extracted October 11, 2012)

**GOAL:** Increase by 1.1% and/or 27 children to a performance rate of 93%.

**Priority Outcome Measure or Systemic Factor:** C1.4: Re-Entry Following Reunification (Exit Cohort)

**National Standard:** 9.9%

**Current Performance:** According to the October 2012 Quarterly Data Report (Quarter 2 of 2012), of the 833 children who exited to reunification, 136 re-entered foster care within 12 months. This is a 16.3% rate of re-entry into foster care.

- **Target Improvement Goal:** The county will improve performance in this measure from 16.3% to 12% by 2017, a decrease of 4.3% (36 children) According to the Child Welfare Dynamic Report for Q2, 2012 of the 136 children who reentered in less than 12 months, 50 children were between 0 and 2 years of age. Data reviews of children who re-entered following Reunification from July 2005 to June 2010 indicates 20% of children under one year re-entered following reunification, and children 0-5 have a higher re-entry rate of 16% in comparison to 11.8% for children 6-17 years of age. Several strategies identified in the SIP would impact the identified target group within this measure ( children 0 to 2) and result in a 3.5% improvement in this measure (data extracted October 11, 2012)

**GOAL:** Decrease by 4.3% and/or 36 children to a performance rate of 12%.

**Priority Outcome Measure or Systemic Factor:** C4.1: Placement Stability Outcome: Placement Stability (8 days to 12 months)

**National Standard:** 86.0%

**Current Performance:** According to the October 2012 Quarterly Data Report (Quarter 2 of 2012), of the 1119 children in placement 8 days to 12 months, 775 had two or fewer placements. This is a 69.3% rate of placement stability.

**Target Improvement Goal:** The County will improve performance in this measure from 69.3% to 77.3% by 2017, an increase of 8% and/or 90 children. According to the Child Welfare Dynamic Report System for Q2, 2012 of the 344 children with two or more placements 90 children were between 3-5 years of age. Children 0 to 5 accounted for about 80% of all children who experienced more than 2 placement changes in this measure and a third of those children were 3-5 years of age. Several strategies identified in the SIP would impact the identified target group within this measure, children 1-2, and result in a 7.5% improvement in this measure (data extracted October 11, 2012)

**Goal:** Increase by 8% and/or 90 children to a performance rate of 77.3%.

**Priority Outcome Measure or Systemic Factor:** C4.2: Placement Stability Outcome: Placement Stability (12 to 24 Months in Care)

**National Standard:** 65.4%

**Current Performance:** According to the October 2012 Quarterly data report (Quarter 2 of 2012), of the 655 children in placement more than 12 months but less than 24 months, 298 had two or fewer placements. This is a 45% rate of placement stability.

**Target Improvement Goal:** The county will improve in this measure from 45% to 52.3% by 2017, an increase of 7.3%, and/or 45 children. According to the October 2012 Quarterly data report (Quarter 2 of 2012), Kern had a total of 655 children in foster care at least 12 months but less than 24 months from July 1, 2011 to June 30, 2012. Of those children in foster care, 21% or 140 children were between the ages of 3 to 5. Of those children ages 3 to 5, 94 of them experienced two or more placements. This indicates that 67% of children ages 3 to 5 experienced more than two placement changes during their time in foster care. This is a higher percentage than for any other age group for this measure. Several strategies identified in the SIP would impact the identified target group within this measure (children ages 3 to 5 in foster care for at least 12 months but less than 24 months) and result in a 7.3% improvement in this measure (data extracted October 15, 2012.)

**Goal:** Increase by 7.3% and/or 45 children to a performance of 52.3%.

**Priority Outcome Measure or Systemic Factor:** C4.3: Placement Stability Outcome: Placement Stability (At Least 24 Months In Care)

**National Standard:** 41.8%

**Current Performance:** According to the October 2012 Quarterly data report (Quarter 2 of 2012), of the 684 children in placement at least 24 months, 156 had two or fewer placements. This is a 23% rate of placement stability.

**Target Improvement Goal:** The county will improve in this measure from 23% to 29.8% by 2017, an increase of 6.8%, and/or 48 children. According to the October 2012 Quarterly data report (Quarter 2 of 2012), Kern had a total of 684 children who had been in foster care for at least 24 months from July 1, 2011 to June 30, 2012. Of those children in foster care, 12% or 81 children were between the ages of 3 to 5. Of those children ages 3 to 5, 65 of them experienced two or more placements. This indicates that 80% of children ages 3 to 5 experienced more than two placement changes during their time in foster care. This is a higher percentage than for any other age group for this measure. Several strategies identified in the SIP would impact the identified target group within this measure (children ages 3 to 5 in foster care for at least 24 months) and result in a 6.8% improvement in this measure (data extracted October 15, 2012.)

**Goal:** Increase by 6.8% and/or 48 children to a performance of 29.8%.

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## E. Part 1. CWS/Probation Justification Rationales

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**STRATEGY 1:** Provide Differential Response Services (DR) to children and families who are at risk for experiencing child abuse or neglect, and evaluate the impact of those services.

**JUSTIFICATION RATIONALE:** The U.S. Department of Health and Human Services identified evidenced based practices as an effective intervention for the promotion of social and emotional

well-being for children and youth receiving child welfare services. Evidence based and evidence-informed practices show measurable improvements or promising results in decreasing emotional/behavioral symptoms; diminishing depression, anxiety, increasing the ability to self-regulate; improving physical health; and helping traumatized children and youth form and maintain healthy attachments (ACYF-CB-IM12-04, issuance date 04/17/2012)

According to the Child Welfare Information Gateway, during the past several decades, child protective services agencies have been challenged by large volumes of child abuse and neglect reports, growing caseloads involving increasingly complex problems, and limited resources. At the same time, there has been growing recognition that the “one size does not fit all” in responding to child maltreatment reports. As a result, one such report is differential response in which CPS agencies offer both traditional investigations and assessment alternatives to families reported for child abuse and neglect. The introduction of differential response has been driven by the desire to:

- Be more flexible in responding to child abuse and neglect reports
- Recognize that an adversarial focus is neither needed nor helpful for all cases
- Understand better the family issues that lie beneath maltreatment reports
- Engage parents more effectively to use services that address their specific needs

Accordingly, research compiled by the Child Welfare Information Gateway found families who were provided services via DR.

- Services were provided more often to children and families
- The number of services received by families on the assessment track was greater than on the investigation track.
- Services may be provided to families earlier on the assessment track.
- Greater use of Community Resources.
- Children were more likely to enter foster care if they received an investigation.

Differential response services are working to reduce Kern’s substantiated referral rate, and foster care entry rates. However, Kern referral rates and entry rates continue to be higher than the state averages. An analysis of DR and KCDHS records from October 2008 to June 2010 showed that families referred to DR who did not receive case management were 1.5 times more likely to be re-referred to CPS than families who received DR services. A change to the current DR practice outlined in the SIP is the implementation of the evidence based assessment, North Carolina Family Assessment Scale General. The assessment will be used to assess family needs and to gauge family functioning.

**EVALUATION:** Refer to the Differential Response Program Description (page 62)

**Describe system changes needed to be addressed that support that improvement plan goal.**  
None identified at this time.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Effective July 1, 2012, all Differential Response providers will be utilizing the North Carolina Family Assessment Scale – General (NCFAS-G) for assessing family needs and gauging family functioning. The Kern County Network for Children (KCNC) provided DR service providers with training on the NCFAS tool on June 19, 2012. During the training, participants practiced using the tool first on an artificial case study provided by the NCFAS-G developers, and then on an actual case from their current caseload. Each participant received a binder that included the training materials and tool. KCNC will monitor the use of the tool, resulting data, and provide continuing training and technical assistance on an on-going basis.

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

To achieve this improvement goal, the DHS’s primary partner is the KCNC. As the planning and oversight body for Kern’s child abuse prevention funds, KCNC sub-contracts with qualified community-based organizations to provide DR. To minimize administrative costs and ensure that DR services are available countywide, a service area approach is utilized. KCNC sub-contracts with trained, qualified community-based organizations who each serve as the hub for a select service area within Kern County. They provide integrated case management, a range of in-home supportive services (e.g. teaching and demonstration, advocacy, and transportation), as well as linkages for at-risk families to counseling, parenting education, job training, food and housing assistance, etc.

Upon receipt of a DHS referral, DR providers meet with families (most often during a joint home call with the referring DHS Social Worker), they conduct an assessment with an evidence-based tool, and then work with the continuum of health and social service providers, schools, and Family Resource Centers within each family’s community that are best able to assist families with meeting their needs so that they can measurably improve child safety and family well-being. KCNC provides DR providers with training, technical assistance, oversight, monitoring and evaluation. DHS Emergency Response Managers, Supervisors and Social Workers meet with KCNC and the staff from each DR Service area on a tri-annual basis to discuss shared DR policies and procedures, implementation strategies, as well as challenges and successes. To provide child abuse and neglect prevention education information to services providers monthly, and ensure that child and family services are coordinated throughout Kern County, KCNC hosts a monthly General Collaborative meeting that is attended by social service agencies, community members, community collaboratives, schools, and Family Resource Centers throughout Kern. During FY 2010-2011, an average of 72 service providers and community members attended monthly General Collaborative meetings that promoted networking, information sharing and cross-training. These attendees represented 121 local agencies and community organizations

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None identified at this time**

**STRATEGY 2:** Implement practice and policy for referring children with a substantiated case of child abuse or neglect “under age 3” to early intervention services.

**JUSTIFICATION RATIONALE**

During the last 25 years, research has emerged about the importance of social and emotional development of young children. According to Zero to Three, National Institute for Infants, Toddlers and Families, infants and toddlers are disproportionately at risk for maltreatment. They account for over three-quarters of child maltreatment fatalities. Younger children make up a larger proportion of abuse and neglect victims than do older children, and are most likely to experience serious harm and longer foster care placement. Young children can recover from early maltreatment due to the rapidity of early development and the capacity of the growing brain to respond to new experiences. With early support and intervention maltreated infants and toddlers healthy development can be restored. Recently, there has been a growing recognition of the importance of communitywide efforts to prevent child maltreatment before abuse or neglect occurs by offering a continuum of services that promote the health of the population as a whole. Kern County has selected this strategy in order to maintain compliance with the Keeping Children and Families Safe Act of 2003 that emphasizes enhanced linkages between child protective services, public health, mental health and developmental disabilities agencies, and the CAPTA requirement that child protective services refer children “under the age of 3” who are involved in a substantiated case of child abuse or neglect to early intervention services. This strategy is being implemented to also address the reoccurrence of maltreatment that was an outcome for the SIP. The target population will be children 0-3 with a substantiated case of child abuse or neglect.

**EVALUATION:** Kern County will evaluate the outcome of this strategy for effectiveness on the targeted outcome of no recurrence of maltreatment by the following methods:

- CFSR reports for outcome S1.1 to monitor compliance with the mandated outcome
- Case dashboards in Safe Measures to monitor compliance with the mandated outcome
- Internal Business Objects reports to monitor children with a substantiated case of child abuse or neglect are screened using a developmental screening tool.
- Child Welfare Dynamic Reporting System to monitor an increase in no reoccurrence of maltreatment.

**Describe system changes needed to be addressed that support that improvement plan goal.** Funding and community partnerships are needed to implement the practice.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Add special project code in CWS/CMS to evaluate compliance and effectiveness. Train staff and community partners on practice.

**Identify roles of the other partners in achieving the improvement goals.** Collaborate with Kern County Public Health and First 5 of Kern.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** None identified at this time.

**STRATEGY 3:** Create two pre-detention/pre-dependency Kid’s Connections Teams (KCT) of SSWs to jointly work with staff from the Emergency Response and/or Court Intake Divisions. The Kids’

Connections Team SSWs will assist in finding appropriate and safe alternative placements for children who have been referred by ER and CI staff who may or may not be coming into protective custody to facilitate the creation of a network of supportive people to assist the family in crisis; will conduct 'UP FRONT Family Finding' using the Six-Steps to Family Finding model and will complete initial relative assessments for placement both before and after a child is brought into protective custody. KCT SSWs will also participate in TDMs prior to detention and/or dependency.

**JUSTIFICATION RATIONALE:** On October 4, 2011, the Children's Bureau (CB) confirmed that in California, all of the target improvement goals were met with the exception of Composite 4-Stability in Foster Care (also referred to as Placement Stability). California implemented a multi-faceted strategy to address this area. After completing the analyses of the largest counties who exhibited good placement stability rates, the state identified the following practices for improving placement stability:

By far the two most effective and common methods identified by counties as good practices for improvement in placement stability are Family to Family Interventions and Team Decision Making (TDM) meetings. These two interventions ensure that community and family support systems are in place at the onset of a child welfare case. Implementation of early family finding practices to locate appropriate and capable family members at case initiation is critical. Research finds that children placed with kin experience fewer moves. In addition, the CB recommends implementation of an after-hours response through a Relative Assessment Unit (RAU). Responding social workers specialize in relative and non-related extended family member (NREFM) home assessments. This has also assisted in ensuring that children are rapidly placed in relative/NREFM homes.

Per the recently approved County Self Assessment for the County of Kern, the percentage of children in Kern County with substantiated maltreatment within the 6-month period that did not have another substantiated maltreatment allegation within the next 6 months increased from 90.6% to 90.9%, which shows a slight movement in the right direction. However current performance does not meet the Federal Standard (94.6%) by 3.7%. For 2011, Kern County had an entry rate per 1000 children of 4.9, while the rate for the state was 3.2. A recommendation made as a result of the PQCR completed in 2011 was to analyze the current relative assessment process and explore opportunities to improve the engagement of relatives and matching of placements to the children's needs. One idea presented was to create a specialized placement unit which would include social workers cross-trained in Family Finding and engagement, relative assessment, ICPC, and concurrent planning. These workers could be assigned as secondary workers to apply much needed attention toward the effort to locate family and make matched placements which best meet the needs of the child.

Although focusing family finding and relative assessment efforts prior to protective custody and dependency may not appear to be a strategy that will positively affect the targeted outcome (no recurrence of maltreatment), efforts to surround a family in crisis with supportive family members and friends has been shown to decrease the amount of children being removed and placed into foster care, as well as having stabilizing effects on the nuclear family for long periods of time. Additionally the assistance of a supportive network creates new methods of coping for parents struggling with child welfare issues which can potentially decrease the likelihood the same problem will recur.

With the implementation of the Kid’s Connections Teams, Kern expects to see a decrease in re-referral rates, a decrease in entry rates and an increase in children whose first placement is with a relative or non-related extended family member, which will assist Kern in meeting placement stability federal standards.

## **EVALUATION**

Kern County will evaluate the outcome of this strategy (implementation of the Kid’s Connections Teams) for effectiveness on the targeted outcome of no recurrence of maltreatment by the following methods:

- CFSR reports for outcome S1.1 to monitor compliance with the mandated outcome
- Case dashboards in Safe Measures to monitor compliance with the mandated outcome
- Internal Business Objects reports to check for first placement type to monitor for an increase in first placements with relatives
- Child Welfare Dynamic Reporting System to monitor for increases in placements of children with relatives

**Describe system changes needed to be addressed that support that improvement plan goal.** Develop clear roles and responsibilities between program areas. Continued funding needed to hire staff, and maintain staffing levels. Develop community partnerships to assist in implementing practice.

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

Train staff and community partners on practice. Create baseline numbers to measure effectiveness of strategy. Hire new staff, train staff on Family Finding practice and policy. Supervisor and manager to develop tools to measure reasonable work production and establish timelines. Continued training for staff on TDM/FDM facilitation and relative assessment approval process. Implementation of this strategy to begin August 1, 2012.

**Identify roles of the other partners in achieving the improvement goals.** Collaboration and training with law enforcement on establishment of unit.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** None identified at this time.

**STRATEGY 4:** Implement Crisis Responder Units in Emergency Response to immediately respond to law enforcement calls to prevent the unnecessary removal of children.

**JUSTIFICATION RATIONALE:** Although Kern County Child Welfare has shown improvement in many areas, when compared to the state as a whole, Kern has about a two-third higher rate of children

coming into care and has not seen quite as much improvement in keeping children out of foster care as the state has.

It became evident during the PQCR and CSA processes that Kern was unusual in its procedures in one specific area which was a very large contributor to the above listed challenges: all eleven law enforcement jurisdictions in Kern County routinely place children into protective custody (during and after normal working hours) without the assistance of any social worker, and that a majority of these children are subsequently released with no petition for dependency being filed and a good portion being released with no further services needed. There appears to be few if any other county within the state that operates in this manner. In addition, Kern County Child Welfare does not have evening or nighttime shifts. Currently, only two workers are on call for the entire county starting at 5:00PM on weekdays, and for weekends and holidays. The data was obtained via business objects reports which were analyzed to determine exactly how many children were coming into protective custody; how long they remained in custody; which type of agency was placing the children into custody/signing the transfers of custody (a law enforcement agent or social worker), and what time of the day and night children were being brought into protective custody and by which agency type. Data pulled was for 2006 through 2011, for a total of six years:

According to the Child Welfare Information Gateway, law enforcement tends to view child abuse and neglect as a crime, not a social problem. Generally officers focus their energy on preservation and collection of evidence for criminal prosecution. Unless they have been trained in the philosophy of child protection, law enforcement officers will generally see little importance in family preservation. Many officers will believe a parent who abuses or neglects a child has abdicated parental responsibilities and does not deserve care for the maltreated child. As officers gain experience in cases of child maltreatment, they often begin to appreciate the civil protection alternatives CPS offers, the value of casework intervention, and the need for efforts to protect children without resorting to out-of-home placement. A team approach, or collaboration, with law enforcement thus can become very effective in the investigation of child maltreatment cases.

The data showed that over the six year time span, 44% of all children who were brought into protective custody were released within 30 days with no petition being filed. Children placed into custody by law enforcement agents are more than two times as likely to be released as those placed by a social worker. Children placed into protective custody by law enforcement are more than two times as likely to be placed after 6:00PM as if they are placed by a social worker. Three quarters of the referrals received by the CPS hotline and/or the on-call SSW are received prior to 6:00PM, leaving around one quarter being received after 6:00PM.

It is clear that there is a lot of work that needs to be done in partnering with our law enforcement agencies in the county as well as within our own agency to improve (decrease) our entry rate of children who are coming into care needlessly. This presents a significant increase in our workload (44%), and also presents a major hurdle to overcome as the agency will need to make the largest changes to internal and external processes that has ever previously been done.

By implementing the Crisis Responder Units to partner with our law enforcement agencies to respond to all situations where law enforcement has encountered children who appear to come within the provisions of Welfare and Institutions Code Section 300 and make a concerted effort to

prevent the child from coming into care while assuring safety using the aforementioned Kid's Connection Teams and other methods available, Kern expects to see a significant decrease in entry to care rates and will help to move the county toward meeting expected standards.

## **EVALUATION**

Kern County will evaluate the outcome of this strategy (the implementation of Crisis Responder units) for its effectiveness on the targeted outcome of no recurrence of maltreatment by the following methods:

- Internal Business Objects reports to monitor numbers of children being placed into protective custody by agency type
- Internal monthly statistical reports to monitor total numbers of children coming into care
- Child Welfare Dynamic Reporting System to monitor entry rates

**Describe system changes needed to be addressed that support that improvement plan goal.** Develop clear roles and responsibilities between program areas. Continued funding needed to hire staff. Propose and seek approval from DHS executive team and County Administrative Office. Discuss shift work with union and county counsel.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Train staff and community partners on practice. Create baseline numbers to measure effectiveness of strategy.

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

Collaboration and training with law enforcement and other community partners on establishment of crisis responder unit.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** None identified at this time.

**STRATEGY 5:** Increase engagement with families and children through the use of TDMs

**JUSTIFICATION RATIONALE:** Placement stability continues to be an area that Kern County struggles with. The data indicates that placement stability for children in out of home care continues to decrease. From the baseline of April 1, 2007 to March 31, 2008, the number of children who had two or fewer placement settings decreased from 71.8% to 69.2%, which continues to remain below the federal standard. During the PQCR process TDMs were identified as a strength/promising practice by caregivers and social workers for preserving placements. Furthermore, one of the core strategies identified by CDSS to improve placement stability was Team Decision Making Meetings (TDM). When a TDM is completed at placement change they ensure that the placement of children is in the least restrictive and most appropriate setting, they reduce unnecessary placement moves for children and assist families with needed support to successfully reunify (ACIN I-31-12) According to Family to Family, decisions regarding out-of-home placements are critical, complex and have lifetime impacts. To make the best placement-related decision, every TDM meeting must carefully examine safety/protection needs, consider the child's point of view, and weigh

ramifications. A quality TDM decision does not seek to prevent removals but to ensure placements only occur when it is evident that the child/youth is at high risk and cannot be protected in their own home; to encourage stability by examining every requested change of placement; to promote safe families when reunified, and to support a secure future for children/youth in every permanency decision.

## **EVALUATION**

Kern County will evaluate the outcome of this strategy for its effectiveness on the targeted outcome of placement stability and re-entry following reunification by the following methods:

- Internal Business Objects reports to monitor the number of children being moved and whether a TDM was held in accordance with TDM policy.
- An internal monthly TDM compliance report will be disseminated to managers for review and to ensure accountability of staff.

**Describe system changes needed to be addressed that support that improvement plan goal.**  
Child Welfare funding needed to support best practice caseload sizes.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Train staff and community partners on practice. Create baseline numbers to measure effectiveness of strategy. Continued TDM training for TDM facilitators and case carrying social workers.

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

Continued collaboration with the courts, caregivers, schools, mental health, faith-based community and other community partners.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** None identified at this time.

**STRATEGY 6:** Provide mentor services to families receiving family maintenance.

**JUSTIFICATION:** Concerns resulting from the County Self Assessment in regards to reducing re-entry after reunification are shown below:

- Stakeholders focused on the fact that sometimes children are returned home too quickly and the reasons for entry into placement in the first place have not been rectified, therefore leading to re-entry after reunification. .
- Parents stated that sometimes they are so focused on getting the child back that they don't think past that and integrate what they have learned.
- Relative care providers were concerned with the short time frames of visits prior to the children being reunified. It was noted that it is easier to parent for two to three hour visitation time frames than 24/7. This leads to parents not realizing and practices their skills and may lead to re-entry to foster care.
- Parents stated that they were frequently ill-equipped to handle their children who exhibited trauma, and grief and loss after going through the removal process and being

in foster care. They are frequently unable to effectively manage these new behavior problems.

- The majority of families who successfully reunify are provided Family Maintenance Services at least six months post reunification. Information from focus groups indicates that there is a lack of mental health treatment for children in the system when they are returned home.
- Frequently families become dependent on the child welfare system, and when children are returned home and services terminated they flounder.

Generational poverty and neglect are issues that cannot be overcome within eighteen months of services. Parent Partner Programs for Families Involved in the Child Welfare System are defined as programs that include parents with experience in the child welfare system (who may be called veterans, alumni, or other similar titles) as mentors, advocates, and/or peer support to parents currently involved with the child welfare system. The goals of parent partner programs may vary, but are typically to engage parents more fully in the child welfare case planning and services process; provide information to parents about the child welfare system and their right and responsibilities; and provide support, modeling, and linkages to assist families in meeting their safety, permanency, and well-being goals. The California Evidence Based Clearinghouse discusses effective parent engagement/support programs. One includes, Parents as Partners in New York. New York City Children's Services developed the **Parents as Partners** program to improve their ability to engage parents. By employing parents who have experience with the system as Family Specialists, Children's Services capitalizes on the opportunity to sensitize child welfare staff to the client perspective. In addition, parents coming into the system can connect with Family Specialists who share a mutual understanding of their experience and can actively relate to their situation. Family Specialists provide crucial advice and guidance regarding expectations of parents and services available to them. The Family Specialists also provide essential feedback that can be utilized to improve the effectiveness of the system. Family Specialists work closely with and in support of birth parents with children in foster care and families receiving preventive services. This program improves the agency's ability to:

- Engage parents
- Inform policy and program decision-making
- Enhance training and staff development by providing insight to professionals from the perspective of parents.

Kern County would expect to see a decrease in re-entry rates following the implementation of this strategy, which will help the county move toward meeting expected standards.

## EVALUATION

Kern County will evaluate the outcome of this strategy (Provide mentor services to families receiving family maintenance) for its effectiveness on the targeted outcome of Re-entry following Reunification by the following methods:

- Child Welfare Dynamic Reporting System to monitor re-entry rates.
- The contractor will provide a monthly report indicating

- The number of participants who complete and sign a mentor agreement and are assigned a volunteer mentor within 30 days of accepting mentoring.
- The number of mentoring participants who successfully completed their outlined goals as determined by KCDHS.
- The number of participants who attended workshops.
- A minimum of seventy-five percent (75%) of overall results on mentoring satisfaction surveys shall be rated average or above.
- A minimum of seventy-five percent (75%) of overall results on workshop satisfaction surveys shall be rated average or above.

**Describe system changes needed to be addressed that support that improvement plan goal.** Conduct a competitive request for proposal (RFP) process to establish program.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Train staff and selected community provider on practice. Create baseline numbers to measure effectiveness of strategy.

**Identify roles of the other partners in achieving the improvement goals.** Collaboration and training with selected provider.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** None identified at this time.

**STRATEGY 7:** Implement a post-dependency Family Permanency Team of SSWs in the Family Services Program to centralize the placement process by utilizing a central placement unit that serves to identify the best and least restrictive placement options to improve stability of out-of-home placements.

**JUSTIFICATION RATIONALE:** On October 4, 2011, the Children’s Bureau (CB) confirmed that in California, all of the target improvement goals were met with the exception of Composite 4-Stability in Foster Care (also referred to as Placement Stability). After completing the analyses of the largest counties in California who exhibited good placement stability rates, the state identified the following practices for improving placement stability:

The CB recommends the centralization of placement processes. Utilizing a central placement unit that serves to identify the best and least restrictive placement options by taking into consideration the foster child’s emotional and developmental needs and the ability of the caregiver to meet those needs improves placement stability. To assist the centralized placement unit, the CB recommended that counties develop and maintain a placement matching database and develop and implement procedures for matching, tracking and monitoring placements. Additionally, it is important to track placement disruptions in order to improve the process of identifying the needs of the child and the ability of the care provider to meet those needs.

A recommendation that was made as a result of the 2011 PQCR was the creation of a specialized placement unit which would include social workers cross-trained in Family Finding and engagement,

relative assessment, ICPC, and concurrent planning. These workers could be assigned as secondary workers to apply much needed attention toward the effort to locate family and make matched placements which best meet the needs of the child.

The National Institute for Permanent Family Connectedness (NIPFC) promotes:

- Every child needs and deserves a safe and loving family; Family is the most normative and healing environment to raise children
- Current Child Welfare practice does not consistently ensure that children/youth are provided the benefit of a loving family, and research clearly demonstrates this failure endangers the lives of young adults and their subsequent children
- Children and youth in foster care need consistent connectedness to loved ones during their stay in care
- Entry, lengths of stay and placement changes in foster care can be significantly reduced by energizing a lifetime network of loving family inclusive of a primary parenting relationship
- Permanency and safety issues can be addressed and pursued with the same urgency, and doing so will yield greater well being for children, youth and families
- Practice knowledge and skill exists (albeit in pockets of promising practices) to provide a loving lifetime family network for every youth in the foster care system.
- Child welfare organizations must continuously evaluate its results and learn of its staff and trainers, as well as all those involved in child welfare is necessary to improve the results of our efforts for children, youth and families

Additionally, federal law under title IV-E of the Social Security Act requires that child welfare agencies “consider giving preference to an adult relative over a nonrelated caregiver when determining placement for a child.” Counties have an obligation to search for relatives and find suitable permanent placements for children in their care.

By implementing this strategy Kern County expects to see an increase in placement stability rates for children placed in out of home care and will move the county toward meeting expected standards.

## **EVALUATION**

Kern County will evaluate the outcome of this strategy (create a post-dependency Family Permanency Team) for its effectiveness on the targeted outcome of composite C-4, Placement stability by the following methods:

- Child Welfare Dynamic Reporting System to monitor compliance with outcome C-4, placement stability

**Describe system changes needed to be addressed that support that improvement plan goal.** Continued funding needed to hire staff, as well as community partnerships are needed to implement practice.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Train staff and community partners on practice. Create baseline numbers to measure

effectiveness of strategy. Hire new staff, train staff on Family Finding. Supervisor and manager to develop tools to measure reasonable work production and establish timelines.

**Identify roles of the other partners in achieving the improvement goals.** Collaboration and training with law enforcement, caregivers, courts and CASA. CASA of Kern has received a grant to conduct family finding on ongoing cases. DHS and CASA are currently working together to implement the CASA Family Connections program, a back-end family finding program.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** None identified at this time.

**STRATEGY 8:** Streamline the Relative Approval Process.

**JUSTIFICATION RATIONALE:** For 2011, Kern County had an entry rate per 1000 children of 4.9, while the rate for the state was 3.2. A recommendation made as a result of the PQCR completed in 2011 was to analyze the current relative assessment process and explore opportunities to improve the engagement of relatives and matching of placements to the children's needs.

Streamlining the relative approval process will shorten the amount of time it takes for relatives to be assessed and approved for placement of children which will move the county toward meeting expected standards and will improve placement stability.

#### **EVALUATION**

To evaluate the success of this of this strategy, Kern County will use customized tracking reports to track the length of time it takes for relative/NREFM applications to move through the approval process. Kern should also see an overall increase in children being placed with relatives/NREFMs.

**Describe system changes needed to be addressed that support that improvement plan goal.** Continued funding needed to hire staff and funding needed to support best practice caseload sizes.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Train staff and community partners on practice. Create baseline numbers to measure effectiveness of strategy.

**Identify roles of the other partners in achieving the improvement goals.** None identified at this time.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** None identified at this time.

**STRATEGY 9:** Explore making Jamison Children's Center a 23 hour facility

#### **JUSTIFICATION RATIONALE**

One of the innovative processes and program pilots identified by CDSS to improve placement stability is the elimination of emergency shelters, receiving homes and the use of foster homes as emergency placements to reduce unnecessary placement changes. (ACIN I-31-12).

## EVALUATION

Kern County will evaluate the outcome of this strategy for its effectiveness on the targeted outcome of placement stability by the following method:

- Complete analyses of California counties processes and program pilots regarding the elimination of emergency shelters and receiving homes and the use of foster homes as emergency placements to reduce unnecessary placement changes.

**Describe system changes needed to be addressed that support that improvement plan goal.** Dependent on several variables including entry rates, number of available county foster homes, success of streamlining the relative approval process and cooperation from Foster Family Agencies and the community.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Training for community providers, law enforcement, caregivers, and Foster Family Agencies and DHS staff on change.

**Identify roles of the other partners in achieving the improvement goals.** Assistance and cooperation from law enforcement agencies, FFAs, caregivers and community.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** None identified at this time.

**STRATEGY 10:** Enhance supportive services for children in out-of-home care exhibiting emotional and behavioral problems.

## JUSTIFICATION RATIONALE

During the PQCR and CSA process training for foster parents on behavioral issues of children in out of home care was identified as a concern for impacting placement stability. Findings identified during the PQCR process are as follows:

- Training for foster parents on behavioral issues
- Training for foster parents on how placement moves affect children and youth and their placement stability
- Timeliness when 7-day notice is received, does not leave enough time for TDM
- In FFA when 7-day notice is received, FFA does their own internal placement change – notifies worker late
- Lack of foster and fost-adopt homes in county

Three distinctive action steps have been identified in this strategy include: implementing a training component for foster parents who are requesting special care increments for children in their care with behavior issues and secondly, implementing Memorandum of Understanding with Group Homes and Foster Family Agencies to ensure assistance with placement stability, and increasing WRAP services for children in care. Studies suggest that without adequate preparation, training and support for foster parents, children will experience disruptions in their placement and one of the core strategies identified by CDSS to improve placement stability is Wraparound services.

Wraparound necessitates that families, providers, and significant members of the family's social support network in partnership to construct a practical plan that responds to the precise needs of the child and family. (ACIN 1-31-12) Additionally, the California SB 163 Legislation requires Wraparound services to:

- Be family centered, individualized, culturally relevant and strength based;
- Be team and community based;
- Rely on natural community supports, develop a child and family team plan to identify service needs;
- Place child in the least restrictive environment;
- Track and evaluate outcomes;
- Be cost neutral to the State; and

Reinvest cost saving into child welfare programs.

### **EVALUATION**

Kern County will evaluate the outcome of this strategy for its effectiveness on the targeted outcome of placement stability by the following methods:

- Internal monthly statistical reports to monitor total numbers of children experiencing placement moves.
- Child Welfare Dynamic Reporting System to monitor placement stability outcomes
- FFAs will provide a monthly report to KCDHS of all children in their care who have experienced a placement change within the previous calendar month. Monthly report shall include:
  - Reason child was moved
  - Number of placement changes the child has experienced while placed with FFA.
  - Was KCHDS provided 7 day notice
  - Was a TDM conducted prior to placement move
  - What intervention services were being provided to child, such as mental health services, WRAP, etc.
  - Percentage of children who experienced placement moves in comparison to their total population.

**Describe systemic changes needing to be addressed that support the improvement plan goals.** Provide resources and support to caregivers for placement stability. Develop recruitment efforts for respite and other specialized foster parents to attract retired professionals, educators, etc. Change current SCI policy and implement MOU.

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Train staff and caregivers on SCI policy. Create baseline numbers to measure effectiveness of FFA and Group Home compliance.

**Identify roles of the other partners in achieving the improvement goals.** Assistance and cooperation from FFA, Group Homes and county licensed foster homes. Community involvement to increase available foster homes to better serve children in out-of home care.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals.** Placement stability measure needs revision to reflect moves to a lower level of care or moves to unify siblings as positive outcomes.

### **Probation**

Kern County Probation Department is committed to ensuring that Wards in the foster care system have their transitional needs met. In Kern County 87% of the wards in group home placement are between the ages of 16-18 years old, and because the issues facing this population are numerous, including: financial resources, emotional instability, negative support system, degraded family relationships, and educational deficiencies, the ILP and other transitional programs are of utmost importance. It is imperative that CPS and Probation work collaboratively to provide the most effective and efficient ILP service for the youth in Kern County. Probation chose this topic area for their Peer Quality Case Review and further assessment was completed in the County Self Assessment Process.

Two strategies were identified to ensure that the needs of the wards are being met:

**STRATEGY 1:** Improve policies and processes to ensure that the well-being of wards in foster care.

#### **JUSTIFICATION RATIONALE:**

Probation is relatively new to utilizing the CWS/CMS case management system. To be able to track if the needs of the youth are being addressed is the first step to ensure that the data is being accurately entered. To improve long term permanent connections for youth to improve their well-being, Family Finding will be implemented. A family advocate will work to identify and engage relatives. As mentioned earlier, The National Institute for Permanent Family Connectedness (NIPFC) promotes:

- Every child needs and deserves a safe and loving family; Family is the most normative and healing environment to raise children
- Current Child Welfare practice does not consistently ensure that children/youth are provided the benefit of a loving family, and research clearly demonstrates this failure endangers the lives of young adults and their subsequent children
- Children and youth in foster care need consistent connectedness to loved ones during their stay in care
- Entry, lengths of stay and placement changes in foster care can be significantly reduced by energizing a lifetime network of loving family inclusive of a primary parenting relationship
- Permanency and safety issues can be addressed and pursued with the same urgency, and doing so will yield greater well being for children, youth and families
- Practice knowledge and skill exists (albeit in pockets of promising practices) to provide a loving lifetime family network for every youth in the foster care system.

- Child welfare organizations must continuously evaluate its results and learn of its staff and trainers, as well as all those involved in child welfare is necessary to improve the results of our efforts for children, youth and families

**EVALUATION:**

This strategy will be assessed to see if relative placements and supportive connections have increased to improve the well-being of foster youth. Cases will be reviewed semi-annually and the results of the evaluation will determine if further policy changes and staff training needs to occur.

**Describe system changes needed to be addressed that support that improvement plan goal.**

Purchasing technical assistance/ programming to aid the staff member

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** The Family Advocate will be trained in the Family Finding process by DHS and participate in other trainings that are identified.

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

The ability for DHS to provide training to Probation staff will be important for this strategy to be effective.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None identified at this time.**

None identified

**STRATEGY 2:** Improve the coordination and delivery of ILP services to Probation youth.

**JUSTIFICATION RATIONALE:**

Improving the communication between Probation and Child Welfare Services to effectively utilize existing structures to maximize the delivery of ILP services for Probation youth will improve their well-being outcomes. The California Evidence Based Clearinghouse notes that ILP programs have high relevance for foster youth. Counties generally serve youth 16-21 and provide life skills and information regarding education, housing, and employment.

Other ideas include the use of laptop cameras (skyping) to assist families and probation officers, in staying in close contact with wards placed in out of county placements will assist in making sure the youth’s service needs are being met.

**EVALUATION:**

Conduct periodic focus groups with probation and child welfare ILP staff to monitor the results of the above strategies.

**Describe system changes needed to be addressed that support that improvement plan goal.**

None needed

**Describe educational/training needs (including technical assistance) to achieve the improvement goals.** Cross training between child welfare ILP workers and Probation staff

**Identify roles of the other partners in achieving the improvement goals.**  
Collaboration between child welfare and probation.

**Identify any regulatory or statutory changes needed to support the accomplishment of the improvement goals. None identified at this time.** None identified

Target Improvement Goal Refer to Page 25 and 26

Strategy 1: Provide Differential Response (DR) Services to children and families who are at risk for experiencing child abuse or neglect, and evaluate the impact of those services.	Applicable Outcome Measure(s) and/or Systemic Factor(s): S1.1 No Recurrence of Maltreatment	
	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input checked="" type="checkbox"/> PSSF <input type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Develop Differential Response Providers trained and skilled in utilizing the Evidence Based NCFAS (North Carolina Family Assessment Tool) assessment tool.	July 2012	Jayne Stuart, Kern County Network for Children
B. Implement the use of NCFAS assessment tool with all Differential Response Providers	August 2012	Jayne Stuart, Kern County Network for Children
C. Evaluate results of this strategy by assessing if DR services have been provided to metro Bakersfield and the NCFAS tool is utilized by providers.	September 2012 and quarterly thereafter	Jayne Stuart, Kern County Network for Children
D. Develop an internal evaluation process for DR including a comparative group of families that do and don't receive services, and track outcomes across the groups.	July 2012 - December 2012	Kristy Powers-Stacy, Court Services PS
E. Utilize the ongoing results from the evaluation process to update procedural and practice policies.	January 2013 and quarterly thereafter	Kristy Powers-Stacy, Court Services PS

<b>Strategy 2:</b> Implement practice and policy for referring children with a substantiated case of child abuse or neglect “under age 3” to early intervention services.	<input type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> S1.1 No Recurrence of Maltreatment C1.4 Re-Entry Following Reunification (Exit Cohort)
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
	<b>Timeframe:</b> July 2014	
<b>Action Steps:</b> <b>A.</b> Explore other county programs and possible funding streams	<b>Person Responsible:</b> Maria Bermudez, PS assigned to AD office	
<b>B.</b> Propose to Executive Team, Seek Approval, develop policy	Antanette Jones, AD	
<b>C.</b> Implement practice and policy, and review on an on-going basis.	Maria Bermudez, PS assigned to AD office	
<b>Strategy 3:</b> Create two pre-detention/pre-dispo Kid’s Connection Teams of SSW’s for the Emergency Response and Court Intake Divisions, for preparation of the new tasks of conducting family finding UP FRONT, relative assessment, and placement matching when child brought into protective custody by Crisis Responder.	<input type="checkbox"/> CAPIT	<b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> S1.1 No Recurrence of Maltreatment C1.4 Re-Entry Following Reunification (Exit Cohort) C4.1 Placement Stability Outcome: Placement Stability (8 days to 12 Months in Care) C4.2 Placement Stability Outcome: Placement Stability (12 to 24 Months in Care) C4.3 Placement Stability Outcome: Placement Stability (At Least 24 Months in Care)
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
	<b>Timeframe:</b> July 2012 – July 2013	
<b>Action Steps:</b> <b>A.</b> Propose to Executive Team, Seek Approval, develop policy	<b>Person Responsible:</b> Jill/Monique Kristy Powers-Stacy, Court Services PS	

<p><b>B. Recruit and train</b></p>	<p>July 2013 – July 2014</p>	<p>Human Resources Sheri Redding, Staff Development</p>				
<p><b>C. Monitor data, Review quarterly reports from Berkeley Web Site</b></p>	<p>July 2013 - ongoing</p>	<p>Kristy Powers-Stacy, Court Services PS Marti Garrett, Emergency Response PS</p>				
<p><b>Strategy 4:</b> Implement Crisis Responder Units in Emergency Response to immediately respond to Law Enforcement calls.</p>	<table border="1"> <tr> <td data-bbox="430 1102 495 1375"> <input type="checkbox"/> CAPIT         </td> <td data-bbox="430 210 722 1102" rowspan="4"> <p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> C4.1 Placement Stability Outcome: Placement Stability (8 days to 12 Months in Care) C4.2 Placement Stability Outcome: Placement Stability (12 to 24 Months in Care) C4.3 Placement Stability Outcome: Placement Stability (At Least 24 Months in Care)</p> </td> </tr> <tr> <td data-bbox="495 1102 560 1375"> <input type="checkbox"/> CBCAP         </td> </tr> <tr> <td data-bbox="560 1102 625 1375"> <input type="checkbox"/> PSSF         </td> </tr> <tr> <td data-bbox="625 1102 722 1375"> <input checked="" type="checkbox"/> N/A         </td> </tr> </table>	<input type="checkbox"/> CAPIT	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> C4.1 Placement Stability Outcome: Placement Stability (8 days to 12 Months in Care) C4.2 Placement Stability Outcome: Placement Stability (12 to 24 Months in Care) C4.3 Placement Stability Outcome: Placement Stability (At Least 24 Months in Care)</p>	<input type="checkbox"/> CBCAP	<input type="checkbox"/> PSSF	<input checked="" type="checkbox"/> N/A
<input type="checkbox"/> CAPIT	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> C4.1 Placement Stability Outcome: Placement Stability (8 days to 12 Months in Care) C4.2 Placement Stability Outcome: Placement Stability (12 to 24 Months in Care) C4.3 Placement Stability Outcome: Placement Stability (At Least 24 Months in Care)</p>					
<input type="checkbox"/> CBCAP						
<input type="checkbox"/> PSSF						
<input checked="" type="checkbox"/> N/A						
<p><b>Action Steps:</b></p>	<p><b>Timeframe:</b></p>	<p><b>Person Responsible:</b></p>				
<p><b>A. Propose to Executive Team, Seek approval, develop policy, meet and confer with the union</b></p>	<p>July 2015</p>	<p>Antanette Jones, AD</p>				
<p><b>B. Recruit, train staff, implement</b></p>	<p>January 2016</p>	<p>Human Resources Sheri Redding, Staff Development Kristy Powers-Stacy, Court Services PS</p>				
<p><b>C. Monitor data, Review quarterly reports</b></p>	<p>July 2016 to ongoing</p>	<p>Kristy Powers-Stacy, Court Services PS Marti Garrett, Emergency Response PS</p>				

<p><b>Strategy 5:</b> Increase engagement with families and children through the use of TDMs.</p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b>          C1.4: Re-Entry Following Reunification (Exit Cohort)          C4.1 Placement Stability Outcome: Placement Stability (8 days to 12 Months in Care)          C4.2 Placement Stability Outcome: Placement Stability (12 to 24 Months in Care)          C4.3 Placement Stability Outcome: Placement Stability (At Least 24 Months in Care)</p>
<p><b>Action Steps:</b></p> <p><b>A.</b> Evaluate current process and update TDM policy to reduce the number of exemptions.</p> <p><b>B.</b> Pilot the policy in Family Services</p> <p><b>C.</b> Identify staffing needs and train staff</p> <p><b>D.</b> Publish policy and roll out the use of TDMs</p>	<p><b>Timeframe:</b></p> <p>July 2013</p> <p>July 2013 – July 2015</p> <p>July 2013 – July 2014</p> <p>January 2016</p>	<p><b>Person Responsible:</b></p> <p>TDM Supervisor: Sheri Redding Family Services PS' Steve Cecil and Ray Gomez</p> <p>Jeaniene Reneau, Family Services Program Director</p> <p>Jeaniene Reneau, Family Services Program Director</p> <p>TDM Supervisor: Sheri Redding Jeff Mendoza, Policy Family Services PS' Steve Cecil and Ray Gomez</p>

E. Explore implementing TDMs at the point of reunification and upon dismissal of cases	July 2014 – July 2015	Jeaniene Reneau, Family Services Program Director Family Services PS' Steve Cecil and Ray Gomez
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Strategy 6: Provide mentor services to families receiving family maintenance.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	Applicable Outcome Measure(s) and/or Systemic Factor(s): C1.4: Re-Entry Following Reunification (Exit Cohort)	
	<b>Action Steps:</b>		
		<b>Timeframe:</b>	<b>Person Responsible:</b>
	A. Develop and publish RFP.	July 2012 – July 2013	Jeaniene Reneau, Family Services PD Martha Garcia, Contracts
	B. Select agency to provide mentor services and create contract.	July 2013 – July 2014	Jeaniene Reneau, Family Services PD Martha Garcia, Contracts
C. Refer parents to mentor services at the point of reunification and/or at 3 months prior to dismissal of case.	July 2014 – July 2015	Jeaniene Reneau, Family Services PD Martha Garcia, Contracts	

D. Evaluate mentoring program and make any needed programmatic changes	July 2015 – July 2017	Jeaniene Reneau, Family Services PD
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<p><b>Strategy 7:</b> Implement post-detention Family Permanency Team of SSWs in the Family Services program to centralize the placement process by utilizing a central placement unit that serves to identify the best and least restrictive placement options to improve stability of out-of-home placements.</p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b>          C1.4: Re-Entry Following Reunification (Exit Cohort)          C4.1 Placement Stability Outcome: Placement Stability (8 days to 12 Months in Care)          C4.2 Placement Stability Outcome: Placement Stability (12 to 24 Months in Care)          C4.3 Placement Stability Outcome: Placement Stability (At Least 24 Months in Care)</p>
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>
A. Propose to Executive Team, seek approval, develop policy	July 2015 – January 2016	Antanette Jones, AD
B. Recruit staff and train	January 2016	FS PSS Steve Cecil and Ray Gomez
C. Monitor data, review quarterly reports from Child Welfare Dynamic Reporting System	January 2016 – July 2016	Tim Stevens, Permanency Team SSS and Kristy Esquivel, Family Finding SSW
D. Develop and maintain placement matching database.	July 2016	Tim Stevens, Permanency Team SSS and Kristy Esquivel, Family Finding SSW Staff Development, Sheri Redding

<p><b>E. Develop and implement procedures for matching, tracking and monitoring placements; and tracking placement disruptions</b></p>		
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<p><b>Strategy 8:</b> Streamline Relative Approval Process.</p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> C4.1: Placement Stability Outcome: Placement Stability (8 days to 12 months)</p>
<p><b>Action Steps:</b></p> <p><b>A.</b> Form a workgroup to develop policy and practice for assessing relatives in the field and review current policy to determine if it can be streamlined</p> <p><b>B.</b> Implement new policy, monitor for implementation/compliance</p>	<p><b>Timeframe:</b></p> <p>July 2012 – July 2013</p> <p>July 2013 – July 2017</p>	<p><b>Person Responsible:</b></p> <p>Tim Stevens, Kid’s Connection Permanency TEAM SSS, April Adams, Licensing Program Specialist, Kristy Powers-Stacy, Court Services PS.</p> <p>Jeff Mendoza, Program Support Services Supervisor</p>

<p><b>Strategy 9:</b> Explore making Jamison Children’s Center a 23 hour facility.</p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b> C4.1: Placement Stability Outcome: Placement Stability (8 days to 12 months)</p>
<p><b>Action Steps:</b></p>	<p><b>Timeframe:</b></p>	<p><b>Person Responsible:</b></p>

<p>A. Form work group to research other County practices</p>	<p>July 2014</p>	<p>Carl Guilford, Jamison Center PD Hal Lockey, Jamison Center PS</p>
<p>B. Workgroup to evaluate results of research and present to Executive Team</p>	<p>July 2015</p>	<p>Carl Guilford, Jamison Center PD Hal Lockey, Jamison Center PS</p>

<p><b>Strategy 10:</b> Enhance supportive services for children in out of home care exhibiting emotional and behavioral problems.</p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Applicable Outcome Measure(s) and/or Systemic Factor(s):</b>          C4.2: Placement Stability Outcome: Placement Stability (12 to 24 Months in Care)          C4.3: Placement Stability Outcome: Placement Stability (At Least 24 Months In Care)          C1.4 Re-Entry Following Reunification (Exit Cohort)</p>
<p><b>Action Steps:</b></p> <p><b>A.</b> Implement training for foster parents on behavioral issues and how placement moves affects children and youth and their placement stability</p> <p><b>B.</b> Review SCI policy and add a required training component for foster parents who are requesting a SCI for behavior issues, prior to approving the SCI; monitor for compliance</p> <p><b>C.</b> Implement MOU with Group Homes and Foster Family Agencies to ensure assistance with placement stability outcomes</p>	<p><b>Timeframe:</b></p> <p>July 2012 – ongoing</p> <p>July 2012 – July 2015</p> <p>July 2013 : FFA MOU July 2014: Group MOU</p>	<p><b>Person Responsible:</b></p> <p>April Adams, Licensing Unit Maria Bermudez, PS assigned to AD office</p> <p>Jeaniene Reneau, Family Services Pd Maria Bermudez, PS assigned to AD office Darla Munoz, Family Services Administrative Coordinator</p> <p>Steve Cecil, Family Services PS</p>

D. Increase referrals to WRAP for children in care.	July 2013 – July 2014	Cherilyn Price, Wraparound Supervisor Ray Gomez, Program Specialist for Wraparound
E. Explore the potential for expanding WRAP services to families transitioning to reunification.	July 2015 – July 2016	Cherilyn Price, Wraparound Supervisor Ray Gomez, Program Specialist for Wraparound

System Improvement Plan for Kern County Probation

<p><b>Strategy 1: Improve policies and processes to ensure that the well-being of wards in foster care is being met.</b></p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p>Measure 8A. Children Transition to Self-Sufficient Adulthood</p>
<p><b>Action Steps:</b></p>	<p><b>Timeframe:</b></p>	<p><b>Person Responsible:</b></p>
<p>A. Ensure that the Child Welfare Services/Case Management System data is correct and updated in a timely manner, and conduct case reviews on a quarterly basis.</p>	<p>July 2012 and quarterly on going</p>	<p>Placement Supervisor</p>
<p>B. Develop procedural guide and best practice tool using Family Search and Engagement training materials.</p>	<p>September 2012 - March 2013</p>	<p>Placement Supervisor</p>

<p><b>C.</b> Develop trained and skilled probation officers in family search and engagement.</p>	<p>March 2013 - September 2013</p>	<p>Placement Supervisor</p>
<p><b>D.</b> Implement Family Search and Engagement program to serve foster youth.</p>	<p>September 2013</p>	<p>Placement Supervisor</p>
<p><b>E.</b> Evaluate results of strategy by assessing to see if relative placements and supportive connections have increased to improve the well-being of foster youth. Cases will be reviewed semi-annually and the results of the evaluation will determine if further policy changes and staff training needs to occur.</p>	<p>September 2013 and ongoing</p>	<p>Placement Supervisor</p>

Strategy 2: Improve the coordination and delivery of ILP services to probation youth.		Measure 8A. Children Transition to Self-Sufficient Adulthood			
		<input type="checkbox"/> CAPIT	<input type="checkbox"/> CBCAP	<input type="checkbox"/> PSSF	<input checked="" type="checkbox"/> N/A
<b>Action Steps:</b>	<b>Timeframe:</b>	<b>Person Responsible:</b>			
A. Attend monthly ILP meetings with Child Welfare Services ILP staff.	July 2012 and ongoing	Probation Division Director - Juvenile Programs			
B. Identify a probation liaison that will attend CWS ILP staff unit meetings, and be based out of the dream center every afternoon from 1-5pm.	July 2012 and ongoing	Probation Division Director - Juvenile Programs			
C. Explore the possibility of ILP services for Kern County to be contracted out.	July 2012 - July 2013	Probation Division Director - Juvenile Programs			
D. Utilize technology such as "skyping" computers and lap tops to increase communication with youth placed in group homes.	July 2012 and ongoing	Probation Division Director - Juvenile Programs			

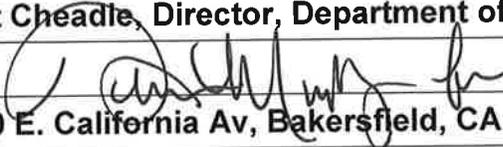
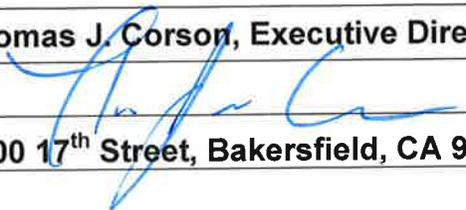
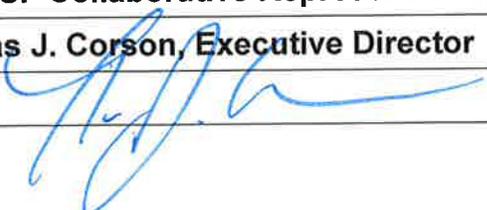
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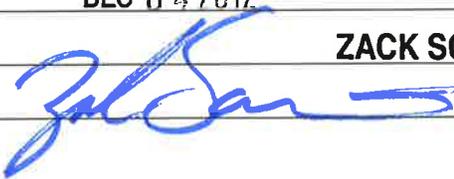
## **CWSOIP Narrative**

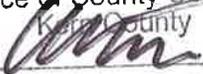
CWSOIP funds will be utilized for the following services:

- I. KCNC Related CWSOIP services (does not include DHS & Probation CWSOIP services) Funds support identified performance outcomes, S1.1 No Recurrence of Maltreatment and measure 8A: Children Transition to Self-Sufficient Adulthood with the following services:
  - Dream Center/Foster Youth Resource Center: job training, education support, independent living skills, and comprehensive support services for current and current and emancipated foster youth; includes a .75 FTE Foster Youth Mentor paid staff position
  - Prevention and early intervention services: County-wide Differential Response services.
- II. CWSOIP funds support identified performance outcomes, S1.1 No Recurrence of Maltreatment and measure 8A: Children Transition to Self-Sufficient Adulthood with the following services
  - Permanency and youth transition: Independent Living Program / Emancipated Services. Funds used to provide emancipated foster youth with stipends to meet basic education and job training needs.
  - Prevention and early intervention services: County-wide Differential Response services.
- III. Probation OIP funds support identified performance outcomes 8A. Children transition to self sufficient adulthood with the following services:
  - Kern County Probation Department is committed to Family Finding which is being supported by CWSOIP monies. It is anticipated that the Family Advocate/Family Finder which was recently hired through existing CWSOIP monies will continue over the next five years. Additional money will be used to purchase equipment such as laptops with cameras that will be used to skype with our foster youth residing out of county to encourage well-being and placement stability, as well as for families and youth to visit to support reunification.

## F. Part II - CAPIT/CBCAP/PSSF

CAPIT/CBCAP/PSSF CONTACT AND SIGNATURE SHEET	
Period of Plan:	7/17/2012-7/17/2017
Date Submitted:	
Submitted by:	<b>Board of Supervisor Designated Public Agency to Administer CAPIT/CBCAP/PSSF programs</b>
Name & title:	Pat Cheadle, Director, Department of Human Services
Signature:	
Address:	100 E. California Av, Bakersfield, CA 93307
Fax:	(661) 631-6631
Phone & E-mail:	(661) 631-6550 & cheadlp@co.kern.ca.us
Submitted by:	<b>Child Abuse Prevention Council (CAPC) Representative</b>
Name & title:	Thomas J. Corson, Executive Director
Signature:	
Address:	1300 17 <sup>th</sup> Street, Bakersfield, CA 93301
Fax:	
Phone & E-mail:	(661) 636-4488 & tocorson@kern.org
Submitted by:	<b>Parent Consumer/Former Consumer (Required if the parent is not a member of the CAPC)</b>
Name & title:	Parent Deceased: Parent past away prior to the SIP being completed.
Signature:	N/A
Address:	N/A
Fax:	N/A
Phone & E-mail:	N/A
Submitted by:	<b>PSSF Collaborative Representative, if appropriate</b>
Name & title:	Thomas J. Corson, Executive Director
Signature:	

<b>Address:</b>	<b>1300 17<sup>th</sup> Street, Bakersfield, CA 93301</b>
<b>Fax:</b>	<b>(661) 636-4501</b>
<b>Phone &amp; E-mail:</b>	<b>(661) 636-4488 &amp; tocorson@kern.org</b>
<b>Submitted by: CAPIT Liaison</b>	
<b>Name &amp; title:</b>	<b>Maria Bermudez, Program Specialist</b>
<b>Address:</b>	<b>100 E. California Av, Bakersfield CA 93307</b>
<b>Fax:</b>	<b>(661) 631-6102</b>
<b>Phone &amp; E-mail:</b>	<b>(661) 631-6071 &amp; bermudm@co.kern.ca.us</b>
<b>Submitted by: CBCAP Liaison</b>	
<b>Name &amp; title:</b>	<b>Maria Bermudez, Program Specialist</b>
<b>Address:</b>	<b>100 E. California Av, Bakersfield CA 93307</b>
<b>Fax:</b>	<b>(661) 631-6102</b>
<b>Phone &amp; E-mail:</b>	<b>(661) 631-6071 &amp; bermudm@co.kern.ca.us</b>
<b>Submitted by: PSSF Liaison</b>	
<b>Name &amp; title:</b>	<b>Maria Bermudez, Program Specialist</b>
<b>Address:</b>	<b>100 E. California Av, Bakersfield CA 93307</b>
<b>Fax:</b>	<b>(661) 631-6102</b>
<b>Phone &amp; E-mail:</b>	<b>(661) 631-6071 &amp; bermudm@co.kern.ca.us</b>
<b>Board of Supervisors (BOS) Approval</b>	
<b>BOS Approval Date:</b>	<b>DEC 04 2012</b>
<b>Name:</b>	<b>ZACK SCRIVNER</b>
<b>Signature:</b>	

APPROVED AS TO FORM  
Office of County Counsel  
Kern County  
By: 

## County SIP Team Composition

### Required Core Representatives

Name	Affiliation
Jayne Stuart Kern County Network for Children	Child Abuse Prevention Council (CAPC), also acting as Children's Trust Fund (CCTF) Commission
Tom Corson Kern County Network for Children	Children's Trust Fund Commission via Kern County Children's Coalition
Tom Corson Kern County Network for Children	County BOS designated agency to administer CAPIT/CBCAP/PSSF Programs
Monique Morland	County Public Health Department
Deanna Cloud	County Mental Health Department
Monique Hawkins Marti Garrett Joy Earnest Jill Christopher Kristy Powers-Stacy Jeaniene Reneau Ray Gomez Steve Cecil Carl Guilford Hal Lockey Mary Erwin	CPS Managers
Macy Albertson Jeff Mendoza	CPS Supervisors
Kristie Esquivel	CPS Social Workers
Maria Bermudez	CAPIT/CBCAP/PSSF Liaison
Olivia Villarreal	Foster Youth/CYC
Judge Jon Stuebbe	Juvenile Bench Officer and court staff
Opal Morland	Native American Tribe –
Parent	Focus Group Participation
Susan Lerude	Probation Manager
Jeremy Roberts	Probation Supervisor
Karen Cooley	Family Supportive Collaborative
Gayla Gibson	Resource Family
Antanette Jones	CWS Administrator, Kern County Department of Human Services

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## G.CAPIT/CBCAP/PSSF Plan

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**CAPC**  
**Description**

As designated by the Kern County Board of Supervisors, the Kern County Network for Children (KCNC) serves as Kern's Child Abuse Prevention Council. As required by California's Welfare and Institutions Code (WIC) Section 18983.5, KCNC is a nonprofit corporation that operates within a framework of articles of incorporation and bylaws.

KCNC's Governing Board membership exceeds the requirements set forth in WIC Section 18982.1, and includes representatives of: the County Department of Human Services, Probation, Health, Mental Health, County Administrative Office and Public Defender; Bakersfield Police Department; Kern County Sheriff/Coroner's Office; the Presiding Juvenile Court Judge; community-based social and health service providers; Kern County Superintendent of Schools Office; Kern High School District; Greenfield Family Resource Center; Kern's Child Care Council; local private businesses; First 5 Kern; United Way of Kern County; the Housing Authority of the County of Kern; vocational training programs; and, the Kern County Board of Supervisors.

As required by WIC Section 18982.2, KCNC's primary functions include:

- Providing a forum for interagency cooperation and coordination in the prevention, detection, treatment and legal processing of child abuse cases.
- Promoting public awareness of the abuse and neglect of children and the resources available for intervention and treatment.
- Encouraging and facilitating training of professionals in the detection, treatment, and prevention of child abuse and neglect.
- Recommending improvements in services to families and victims.
- Encouraging and facilitating community support for child abuse and neglect programs.

To maximize child abuse prevention resources and prevent the duplication of services, as designated by the Kern County Board of

Supervisors, KCNC also serves as Kern’s interagency coordinating council for child and family services, as well as the County’s planning body and administrative agent for Promoting Safe and Stable Families (PSSF); Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP) and County Children’s Trust Funds (CCTF).

KCNC staff report to the Governing Board and includes the following positions: Executive Director, Child and Family Services Facilitator, Research Associate, and Secretary.

KCNC CAPC activities are supported by the following funding resources: CAPIT (\$0), CBCAP (\$44,553), CCTF (\$180,455), and private donations (\$5,000).

***Promoting Safe  
And Stable Families  
(PSSF) Collaborative***

As designated by the Kern County Board of Supervisors, the KCNC serves as Kern’s PSSF Collaborative. Through a contract with the Kern County Department of Human Services (DHS), KCNC is responsible for service planning as well as the administration, monitoring and evaluation of Kern’s PSSF subcontract programs. KCNC submits PSSF program data and reports to the DHS.

***County Children’s  
Trust Fund  
(CCTF) Commission,  
Board or Council***

The KCNC has also been designated by the Kern County Board of Supervisors as Kern’s CCTF Commission. In compliance with WIC Section 18970 (c), KCNC collects CCTF revenue, expenditure and program outcome data and then publishes an annual report that describes the types of programs and services funded, the target populations benefiting from CCTF funded services, as well as the amounts in the CCTF and disbursed during the preceding year. The report is presented during a public KCNC Governing Board meeting and is available to the public at anytime.

***Parents/  
Consumers***

To ensure that services are designed to best meet parent needs, the KCNC involves parents in the planning implementation, and evaluation of funded services in the following ways:

- Parents participated throughout the PQCR, CSA and SIP processes.
- Parents, including the parent of a special needs child, serve as members of the Child Advocacy Committee, KCNC’s advisory body for prevention education, community awareness and training activities. These activities include the development of an annual calendar of public awareness abuse prevention campaigns, education materials, and trainings that are marketed throughout Kern County.

- media and marketing relations
- Legislative advocacy.
- Participants learn how to advocate for those who cannot advocate for themselves and how to pass these skills onto others. Participants also develop a network of allies among fellow team members and trainers who can be called upon for advice, assistance and guidance. Each participant is expected to take what they have learned back into their own neighborhood, community Parents who receive services are encouraged to complete client satisfaction surveys and provide suggestions for improvements to service delivery strategies.

To enhance parent participation and leadership, parents are encouraged to participate in free training opportunities as well as KCNC’s Annual Leadership Development program. The Leadership Development Program includes 56 hours of instruction time in nine subject areas including:

- powerful public speaking
- effective time management
- facilitating effective community and organizational meetings,
- strategic planning for communities and organizations
- conflict resolution practice
- community mobilization techniques
- resource development and organization - helping make positive systems change for children and families in Kern County. Due to budgetary constraints, financial support is not provided for parent participation.

Leadership development program direct costs (e.g. supplies, lunches, materials, etc.) are funded by an enrollment fee that participants pay. It should be noted that the enrollment fee is waived for participants if it will cause a financial hardship. CAPIT/CBCAP/PSSF funds are not utilized nor required since presenters donate their time on an in-kind basis.

***Designated Public Agency***

The Kern County Department of Human Services is the agency designated to administer the CAPIT/CBCAP/PSSF programs and is responsible for monitoring subcontractors, integrating local services, fiscal compliance, data collection, preparing amendments to Kern’s CAPIT/CBCAP/PSSF Plan, evaluating program outcomes and preparing annual reports

***The Role of the  
CAPIT/CBCAP/PSSF  
Liaison***

Kern's CAPIT/CBCAP/PSSF Liaison is an employee of the Kern County Department of Human Services. They are responsible for:

- Ensuring that KCNC fulfills all CAPIT/CBCAP/PSSF program, fiscal, and statistical requirements in a thorough and timely manner.
- Gathering and submitting Kern's Annual CAPIT/CBCAP/PSSF report and aggregate data to the Office of Child Abuse Prevention (OCAP) timely.
- Communicating regularly with KCNC regarding CAPC activities.
- Communicating with Kern's OCAP Consultant.

Any changes to the Liaison's contact information will be communicated to OCAP within 30 days of the change.

***Fiscal Narrative***

The DHS contracts with the KCNC for the oversight, monitoring, evaluation and network development related to CAPIT/CBCAP/PSSF/Children's Trust funds. The KCNC then sub-contracts with community-based organizations best qualified to provide them, as selected through a competitive Request for Proposal process and approved by the Kern County Board of Supervisors.

KCNC, the administrative agent for CAPIT/CBCAP/PSSF/CCTF funds, monitors all sub-contracts and ensures fiscal accountability. Sub-contractors are required to submit monthly claims for all expenses. The KCNC's Account Clerk and Accountant review the claims to ensure that all costs have been calculated correctly, that back up documentation submitted with the claims (e.g. general ledgers, receipts, etc.) total that the amounts claimed, and that funds expended for each budgeted line item do not exceed the amounts budgeted. Audited claims are then submitted to the KCNC's Child and Family Services Facilitator for review to ensure that costs claimed are appropriate and justified. Approved claims are then forwarded to the KCNC's Executive Director for final review and approval. KCNC does not utilize CAPIT, CBCAP, or PSSF funds for administrative costs. These funds are dedicated to direct services.

CAPIT/CBCAP/PSSF/CCTF funds expended by the KCNC are carefully recorded and spent in accordance with the line item budget approved by the Kern County Board of Supervisors. KCNC submits monthly claims with required back up documentation, to the Kern County Department of Human Services (DHS) for review, approval and payment. The DHS, as the county agency responsible for CAPIT, CBCAP, and PSSF funds, reviews and audits claims submitted to

ensure that amounts and expenses are appropriate and justified. DHS approved claims are submitted to the Kern County Auditor's Office for final review, approval and payment.

KCNC Fiscal data is stored via password protected software programs as well as hard copy files located in locked cabinets within secured areas. To ensure that CAPIT/CBCAP/PSSF/CCTF funds are accurately tracked, a series of Excel worksheets are used monthly. Funds are tracked by: line item and total contract amount for each sub-contractor and KCNC, total amounts expended by each sub-contractor and KCNC per fund type, and aggregated total amounts expended monthly for each fund type by all sub-contractors and KCNC. Current, detailed expenditure data for CAPIT/CBCAP/PSSF/CCTF funds is available for review and reporting purposes at any time.

By using an integrated and evaluations-focused approach to child abuse and neglect prevention services, Kern County has been able to effectively leverage CAPIT/CBCAP/PSSF/CCTF funds. To minimize rent, operating and administrative costs all programs are co-located with other social service programs. To increase financial support, CAPIT/CBCAP/PSSF/CCTF program outcome data that clearly demonstrates the powerful ways services are helping to strengthen and support families and improve Child Welfare Services' outcomes has been instrumental in convincing other funders to support child abuse prevention initiatives. First 5 Kern is now not only a supporter, but a key funder for county-wide Differential Response services. Lastly, by developing firmly rooted partnerships with local print, television and radio media, private businesses have been impressed with the local attention/viewer, reader, and listener numbers that child abuse and neglect prevention education and awareness messages are reaching and they have begun making monetary contributions to fund internet website/communication costs and the printing of resource and educational materials. These strategies have demonstrated effectiveness and will continue throughout FY 2012-2017.

As the Coordinating Council for Kern's Child and Family Services, KCNC is continually abreast of local service needs and existing resources and is committed to ensuring that CAPIT/CBCAP/PSSF/CCTF funds are used to supplement, not supplant, other State and local public funds and services.

***Local Agencies  
Request for Proposal***

In compliance with WIC Section 18961, the KCNC will comply with the following requirements for CAPIT/CBCAP/PSSF/CCTF funding:

- A competitive request for proposal (RFP) process was used to select and fund CAPIT/CBCAP/PSSF/CCTF programs. Two separate RFP's were issued to provide services identified in Kern's County Self Assessment as needed for families who

are at-risk of or have experienced child abuse or neglect: 1) for the provision of Differential Response services, and 2) for the provision of parent education services (for general and special needs populations) that include case management and counseling. It should be noted that the PSSF funds for Time-Limited Family Reunification services were sole sourced rather subject to RFP. The Board of Supervisors approved a sole source agreement since Kern's approach to these services, as described in the attached program description, utilizes unique approaches and is obtaining outcomes that meet or exceed state and national standards.

- The RFP's for CAPIT/CBCAP/PSSF/CCTF funds were issued by KCNC on February 1, 2012. All proposals were due March 14, 2012. An independent evaluation committee reviewed and scored all proposals received. Funding recommendations were announced to all proposers on March 22, 2012. Proposers were provided the opportunity to protest funding recommendations through March 29, 2012. No protests were received. The KCNC Governing Board convened on April 4, 2012 to determine final funding recommendations. KCNC's funding recommendations for FY 2012-2017 CAPIT/CBCAP/PSSF/CCTF funded programs were considered and approved by the Kern County Board of Supervisors on April 24, 2012. As clearly stated on page one of both RFP's, priority for CAPIT/CBCAP/PSSF/CCTF funds 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.
- Agencies eligible for funding must provide 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.
- All CAPIT/CBCAP/PSSF/CCTF programs shall be culturally and linguistically appropriate to the populations served.
- KCNC will provide training and technical assistance to agencies funded to provide services.
- Funded programs will include services to minority populations.
- Services funded will clearly relate to the needs of children,

especially those 14 years of age and under.

- KCNC will comply 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.
- All non-profit subcontract agencies will have the capacity to transmit data electronically.
- All non-profit subcontract agencies must give priority for services to children who are at high risk, including children who are being neglected and other children who are referred for services by legal, medical, or social service agencies.
- Agencies funded shall demonstrate the existence of a 10 percent case or in-kind match, other than funding provided by the California Department of Social Services.

### ***CBCAP Outcomes***

Child abuse and neglect prevention education and awareness services and prevention network development services funded with CBCAP funds will measure engagement, short term and long term program outcomes. Engagement and short term outcomes will be measured utilizing community and participant evaluation surveys. Community members and social service agencies will be asked to provide opinions and suggestions regarding prevention calendar monthly themes; indicate if they are routinely incorporating prevention education information in the work they do with children and families; and, if KCNC forums continue to be an effective means of facilitating interagency cooperation and coordination for prevention, intervention and treatment services. Training participants will be asked to provide opinions regarding trainings, if their knowledge has increased as a result of the training, and suggest future training. Long-term outcomes will be measured by continually reviewing and monitoring Kern's child abuse substantiation and foster care entry rates.

### ***Peer Review***

KCNC uses elements and strategies from FRIENDS National Resource Center for Community-Based Child Abuse Prevention guide entitled, "Peer Review in CBCAP: A Source Document for Assessment and Best Practice to guide Peer Review activities. Kern's Peer Review process:

- Provides opportunity for peers to discuss each program's outcomes to identify strengths and challenges.

- Creates a plan for enhancing strengths and overcoming challenges that includes recommendations from peers.
- Provides targeted technical assistance and ongoing professional development to enhance the capacity of service providers.
- Provides opportunity for programs to showcase their successes to peers who will fully appreciate them.

During FY 2012-2017, Peer Review meetings will be held triennially for Kern's network for Differential Response (DR) service providers. DR Supervisors from all seven geographic regions across Kern County gather to discuss: implementation strategies, policies and procedures; program outcomes; program successes; barriers to effective service delivery and/or improved outcomes; networking opportunities; training needs; service activities; and, new and/or sun setting community resources. KCNC staff develops meeting agendas, facilitate discussions, and utilize the information shared to focus technical assistance and training services. These meetings provide invaluable opportunities for the network of providers to learn from one another, improve practices, see how their program outcomes compare to others, and support one another. These meetings also provide KCNC staff with rich information and dialogue that quarterly progress reports and scheduled site visits do not similarly provide.

### ***Service Array***

CAPIT/CBCAP/PSSF funded Differential Response and parent education services both include integrated case management components. All families receiving these services are assessed so that their strengths and needs can be identified. Assessment domains include: environment (e.g. housing, safety in the community, etc.), parental capabilities (e.g. disciplinary practices, supervision, etc.), family interactions (e.g. expectations of and communication with children, etc.), family safety (e.g. absence/presence of domestic violence and physical abuse, etc.), child well being (e.g. school performance, relationship with parent/caregiver, etc.), social/community life (e.g. social relationships, connection to the neighborhood/community, etc.), self-sufficiency (e.g. employment, family income, etc.), and family health (e.g. health and mental health needs/conditions, etc.). For a complete description of the PSSF, CAPIT and CBCAP services that will be provided during FY 2012-2017, see the attached program description.

Family needs become the focus of the Family's Care Plan and drive all service activities. To assist families with obtaining their Family Care Plan goals and becoming strong and self-sufficient,

Case Managers link families with the continuum of social and supportive services that are available throughout Kern County. The following are the types of community services that families most often utilize: family resource centers, emergency housing assistance; domestic violence, mental health, and substance abuse counseling; health care by a primary care physician instead of hospital emergency room; dental services; emergency food, clothing, and utility assistance; child care/pre-school; public assistance/CalFresh; employment and job training services; adult education; family income budgeting; legal assistance; and public transportation vouchers. To ensure that families are able to access and fully utilize the array of services that are available, Case Managers teach families how to advocate for themselves, how to overcome any barriers to services, how to complete applications and obtain missing documents (e.g. social security cards, birth certificates, etc.) that are required, and how to stay organized so that follow up appointments are kept and they will have resource information available should they require supportive services again in the future.

***CAPIT/CBCAP/PSSF*** See Attached Worksheet  
***Services***  
***And***  
***Expenditure Summary***

## **H. ATTACHMENTS**

**Kern County Description of PSSF/CAPIT/CBCAP Services  
FY 2012-2017**

**Child Abuse Prevention Council Activities (CAPC): Prevention Education and Network Development**

**Service Provider:** Kern County Network for Children (KCNC)

**Funding:** CBCAP & CCTF. Through a contract with the Kern County Department of Human Services (KCDHS), KCNC is the direct provider of CBCAP and CCTF prevention education, network development services and CAPC activities and does not use CBCAP or CCTF funds for administrative activities

California's Welfare and Institutions Code (WIC) Section 18983 states: "Each county shall fund child abuse prevention coordinating councils which meet the criteria in Section 18982 from the county's trust fund." The KCNC meets all requirements set forth in WIC Section 18982, and was designated by the Kern County Board of Supervisors as Kern's Child Abuse Prevention Council on October 27, 2009. The following are KCNC's primary roles, as required by WIC Section 18982.2 (a), (d) and (e), and the CAPC activities that relate to them:

- **WIC 18982.2(a): Providing Interagency Coordination and Cooperation:** Since 1992, the KCNC has served as Kern's Coordinating Council for child and family services; KCNC's Child Advocacy Committee is comprised of representatives from social service agencies, local business and the faith based community and serves as a powerful prevention education voice throughout Kern; KCNC serves as external oversight for process improvement and best practice strategies for the Department of Human Services; KCNC convenes monthly General Collaborative meetings for service providers and community members throughout Kern; and, KCNC staff participate on numerous committees including Kern's Child Death Review Team, Methamphetamine Prevention Task Force, and First 5 Kern's Technical Advisory Committee.
- **WIC 18982.2(c): Educating the Community and Training Service Providers:** KCNC's Child advocacy Committee utilizes child death and safety data, and community needs information to develop Kern Cares' annual calendar of prevention campaigns. During FY 2010-2011, an estimated 3,129,000 newspaper readers; 331,000 television viewers; 526,800 radio listeners; 2,130 [www.kerncares.org](http://www.kerncares.org) website visitors; and, 163,334 newsletter, public presentation, and promotional material recipients received Kern Cares' prevention messages on topics related to leading causes of Kern child deaths, abuse and injury. Additionally, 20.5 total hours of free quality professional development training was attended by 89 agencies, schools and community groups, with an average of 65 attendees per training. 98% of training attendees found KCNC trainings beneficial and 97% would recommend them to colleagues. Throughout FY 2012-2017, KCNC, through Kern Cares, will continue to implement monthly child abuse prevention education and awareness campaigns and provide free quality, community trainings, educational materials, and community resource information. Child abuse and neglect prevention education services

reach community members and service providers throughout Kern County. Evaluation forms are utilized for community trainings to gauge effectiveness.

- **WIC 18982.2 (d) and (e): Improving Services and Facilitating Community Support for Child Abuse and Neglect Programs:** As designated by the Kern County Board of Supervisors in 1995, KCNC will continue to serve as the planning and administrative body for Kern's PSSF, CAPIT, CBCAP, and Trust funded services. Network development activities for child abuse neglect programs include:

- 1) Monthly General Collaborative meetings that promote networking, information sharing and cross-training are attended by an average of 72 service providers and community members. During FY 2010-2011, Collaborative attendees represented 121 local agencies and community organizations.

- 2) Peer Review meetings will be held triennially with Differential Response service providers. These meetings provide a unique opportunity for DR service providers to: discuss each program's outcomes to identify strengths and challenges; create a plan for enhancing strengths and overcoming challenges that includes recommendations from peers; receive targeted technical assistance and ongoing professional development to enhance their capacity; and, showcase their successes to peers who will fully appreciate them.

- 3) To ensure that services are meeting community needs, improving outcomes for children and families, and impacting County Child Welfare outcomes, KCNC's Social Solutions Software is used by all CAPIT and PSSF programs to track program data and measure service outcomes. KCNC reviews the quality of services provided quarterly and analyzes impacts to County Child Welfare Service outcomes annually. Outcome data is utilized to identify needed refinements in practices, policies and protocol. The above described child abuse and neglect prevention education and awareness services and prevention network development services funded with CBCAP and CCTF funds will measure engagement, short term and long term program outcomes. Engagement and short term outcomes will be measured utilizing community and participant evaluation surveys. Community members and social service agencies will be asked to provide opinions and suggestions regarding prevention calendar monthly themes; indicate if they are routinely incorporating prevention education information in the work they do with children and families; and, if KCNC forums continue to be an effective means of facilitating interagency cooperation and coordination for prevention, intervention and treatment services. Training participants will be asked to provide opinions regarding trainings, if their knowledge has increased as a result of the training, and suggest future training. Long-term outcomes will be measured by continually reviewing and monitoring Kern's child abuse substantiation and foster care entry rates. This information is reported to the KCDHS. Annual Reports are presented to the KCNC Governing Board and Kern County Board of Supervisors, and are available to the public.

#### **Differential Response (DR) Services:**

**Service Providers:** Clinica Sierra Vista, Richland School District, Taft City School District, and Kernville Union School District

**Funding:** PSSF Family Preservation and Family Support/CCTF/CWSOIP/First 5 Kern (F5K). The KCDHS contracts with the KCNC for prevention education and network development services, and to provide oversight, monitoring, and evaluation of direct services related to CAPIT/PSSF/Children's Trust funds. KCNC sub-contracts with community-based organizations through a competitive Request for Proposal process and selected providers are then approved by the Kern County Board of Supervisors. KCNC does not use CCTF, CAPIT or PSSF funds for administrative activities.

DR is an effective, research-based strategy to improve Child Welfare Service outcomes that is being used nationally. DR expands the ability of Child Protective Services to respond differently to suspected reports of child abuse/neglect, by assisting families at the first signs of trouble.

When the Kern County Department of Human Services receives a report of suspected child abuse or neglect, a risk assessment is completed. Dependent on the level of safety risk, each referral is designated as Path 1, Path 2, or Path 3, with Path 3 being the most severe. If formal Child Welfare Service intervention is not required, Path 1, 2 and 3 referrals are made to DR service providers. Services are provided countywide, with the exception of Path 1 level cases within the metro Bakersfield. Due to funding restrictions, Metro Bakersfield DR serves only Path 2 and Path 3 referrals. If funds become available, Path 1 families will be served by Metro Bakersfield as well.

DR services are provided by trained, qualified, community-based organizations. DR services include, but are not limited to the following: information and referral; case management; home visitation; transportation; provision of basic and emergency need items; a range of in-home supportive services (e.g. teaching, advocacy, and demonstration); and, linkages for at-risk families to counseling, parenting education, job training, substance abuse treatment, food, and housing assistance. DR families also receive primary prevention education materials (e.g. information about the dangers of co-sleeping, water safety, car safety, etc.).

Throughout FY 2012-2017, DR Case Managers will utilize the North Carolina Family Assessment Scale-General (NCFAS-G) to assess family needs and gauge improvements in family functioning. The NCFAS-G tool will be used at intake, every 90 days, and at the time of case closure. NCFAS-G assessment ratings form the basis of each case plan. DR staff conducts home visits, monitor child safety and well-being, and provide services in compliance with established policies and procedures.

The California Evidence-Based Clearinghouse for Child Welfare gives the NCFAS its highest rating for assessment tools with demonstrated reliability and validity. Client satisfaction surveys will also be administered when a family has received services for 6 months and/or exits the program.

KCNC, through a contract with the KCDHS, sub-contracts with local community-based organizations (providers are listed above) to provide Differential Response services for families at-risk of experiencing child abuse and neglect. KCNC provides fiscal oversight, monitors quality of services provided, ensures compliance with established policies and procedures captures and analyzes service activity and outcome data, and provides evaluation services. PSSF funds are blended with CWSOIP and F5K funds so that DR services can be available to at-risk families countywide. PSSF funded case management, transportation, information and referral and home visitation service data is carefully tracked, monitored quarterly, and reported to the KCDHS.

In partnership with KCDHS, annual reports regarding DR service activities and outcomes are submitted to the KCNC Governing Board, Kern County Board of Supervisors, California Department of Social

Services and are available to the public. KCNC does not use CCTF, First 5 Kern, or PSSF funds for administrative activities.

### **Parent Education that Includes Case Management and Counseling Services:**

**Service Provider:** Haven Counseling Center

**Funding:** CAPIT and PSSF Family Preservation and Support. The KCDHS contracts with the KCNC for prevention education and network development services, and to provide oversight, monitoring, and evaluation of direct services related to CAPIT/PSSF/Children's Trust funds. KCNC sub-contracts with community-based organizations through a competitive Request for Proposal process and selected providers are then approved by the Kern County Board of Supervisors. KCNC does not use CCTF, CAPIT or PSSF funds for administrative activities.

Services provided include: parenting education and support; case management; information and referral; and, counseling services for families who have experienced or are at-risk of experiencing child abuse or neglect.

Approved by the Kern County Department of Human Services and Juvenile Court, parent education services will use practical as opposed to theoretical approaches, utilize research-based best practices, and fulfill all California Welfare and Institutions Code requirements. Parents may participate on either a voluntary or court-ordered bases. The majority of the families who receive these services will have had at least one substantiated child abuse referral, and most children will be in out-of-home care. The following are the base curriculums that are utilized:

- **New Beginnings** – Parents (court ordered or voluntary) learn more about controlling anger, getting kids to behave, talking with your children about problems, and how to provide a safe and loving home.
- **Take Care** – Examines the signs and effects of the five major areas of child neglect. Using a small group setting, parents learn to recognize and correct life situations leading to neglect.
- **Parent Project** – Parents learn to effectively parent teens ages 13 to 16 who have challenging or out-of-control behaviors such as truancy, drug use or defiance.
- **Lighthouse Groups** – This court ordered parent education/training group meets the California Penal Code requirement of one year counseling services specifically for individuals charged with Penal Code 273/child endangerment/willful cruelty to a child.
- **Family Matters** – This court ordered, 26 week program, focuses on a variety of issues including child neglect, family violence, failure to protect (abuse awareness, health and safety issues), and recovery from family breakdowns.
- **Anger Management** – This group allows parents to recognize and accept personal responsibility for uncontrolled anger. Parents learn to recognize personal triggers, resist old impulses, and resolve anger in a healthy manner. The parent-child focus of this class also presents skills parents can use to help their children with anger.

To ensure that parent education services meet the needs of all families, the above curriculums are modified and special sessions are scheduled for families with special needs (e.g. deaf, mentally ill,

developmental disabled, Spanish speaking, substance abuse, etc.). Pre and post tests are utilized to measure increases in knowledge among participants. Surveys are utilized to measure client satisfaction.

Since families typically have multiple needs, all families are assessed prior to enrollment. Case management, information and referral, and brief, goal oriented individual/family counseling services are provided for families that have multiple needs. The North Carolina Family Assessment Scale-G will be utilized throughout FY 2012-2017 to assess family needs and gauge improvements in family functioning among families that receive case management services. Surveys will measure client satisfaction.

KCNC, through a contract with the KCDHS, sub-contracts with a local community-based organization (Haven Counseling Center) to provide parent education, case management, and counseling services for families who have experienced or are at-risk of experiencing child abuse and neglect. KCNC provides fiscal oversight, monitors quality of services provided, ensures compliance with established policies and procedures captures and analyzes service activity and outcome data, and provides evaluation services. CAPIT and PSSF funded case management, information and referral, counseling, and home visitation service data is carefully tracked, monitored quarterly by KCNC, and reported to the KCDHS.

In partnership with KCDHS, annual reports regarding these service activities and outcomes are submitted to the KCNC Governing Board, Kern County Board of Supervisors, California Department of Social Services and are available to the public. KCNC does not use CAPIT or PSSF funds for administrative activities.

### **Time Limited Family Reunification Services (Time Flies!):**

**Service Provider:** Haven Counseling Center

**Funding:** PSSF Time Limited Family Reunification (TLFR). The KCDHS contracts with the KCNC for prevention education and network development services, and to provide oversight, monitoring, and evaluation of direct services related to CAPIT/PSSF/Children's Trust funds. KCNC sub-contracts with community-based organizations through a competitive Request for Proposal process and selected providers are then approved by the Kern County Board of Supervisors. KCNC does not use CCTF, CAPIT or PSSF funds for administrative activities.

Case Management, guided parent/child visitation activities, counseling, and support group services will be provided to families whose children are in out-of-home placement due to abuse or neglect, and they have been court ordered to receive Family Reunification services. Time Flies! services are provided at a home that is rented by Haven Counseling Center and centrally located at 315 H Street. This home serves as a unique learning lab for families. There is a yard for outside play during guided, supervised parent-child visits; a kitchen where families learn to prepare healthy meals and snacks; and, a living area that is conducive to relaxed therapeutic group meetings as well as parent-child visits that are conducted indoors. Guided visitation services include a Visitation Coach who helps parents plan their upcoming visits to ensure that: age-appropriate activities, games, etc. are planned, parents are comfortable practicing the new skills they are learning in their parenting classes, and healthy snacks/meals are prepared. At the conclusion of each visit, the coach talks with the parents about aspects that went really well, commending the parent's use of new skills, and aspects that can be improved during the next visit. A scale designed to measure parent/child interactions during visits is

utilized at the conclusion of visits as a tool to measure progress. Support group services are also available for Time Flies! families that will be reunifying soon or have already successfully reunified.

These distinctive approaches to service delivery are invaluable for families and key to program success. Additionally, Time Flies! is able to provide emergency funds to families who need beds, work clothes, rent deposits, etc. so that they can meet basic needs. To assist families with transitioning from out-of-home care to reunification, Time Flies! support group services are available for families who have successfully reunified.

Time Flies! Case Managers will utilize the North Carolina Family Assessment Scale-General and Reunification (NCFAS-G+R) throughout FY 2012-2017 to assess family needs and gauge improvements in family functioning, including readiness for reunification. The California Evidence-Based Clearinghouse for Child Welfare gives the NCFAS its highest rating for assessment tools with demonstrated reliability and validity. The number/percentage of children and families that successfully reunify will be tracked, and surveys will be used to measure client satisfaction.

KCNC, through a contract with the KCDHS, sub-contracts with a community-based organization (Haven Counseling Center) to provide PSSF TLFR services. KCNC provides fiscal oversight, monitors quality of services provided, ensures compliance with established policies and procedures captures and analyzes service activity and outcome data, and provides evaluation services. PSSF funded case management, counseling, support group, and guided parent/child visitation service data is carefully tracked, monitored quarterly, and reported to the KCDHS.

In partnership with KCDHS, annual reports regarding these service activities and outcomes are submitted to the KCNC Governing Board, Kern County Board of Supervisors, California Department of Social Services and are available to the public. KCNC does not use PSSF funds for administrative activities.

### **Adoptions Promotion and Support Services:**

#### **A. Service Provider:** Kern Bridges Youth Homes Incorporated

**Funding:** PSSF Adoption and Promotion and Support Services. The KCDHS contracts with Kern Bridges Youth Homes, via a competitive RFP process, to provide the select PSSF Adoption Promotion and Support Services described below. The KCDHS provides oversight, monitoring and evaluates data related to this contract.

The following are among the adoption promotion and support services that will be provided for Kern County Adoptive Families by Kern Bridges Youth Homes Incorporated:

- Pre and Post Services:
  - Assessment and Screening services for adoptive families
  - A hot line for information and referral services to adoptive families
  - Crisis intervention and support – 24 hour hot line
  - Mental health crisis intervention services by a clinician or MSW who is familiar with adoption related issues using the brief therapy model

- Training/support group for each of these: adoptive parents, adopted teens and families in waiting

Post Adoptive Services: A newsletter highlighting information about support groups, training, adoption events, media and lending library, suggested reading and other adoption related activities.

Client satisfaction surveys will be administered when a family has ended services or exits the program.

**B. Service Provider:** Kern County Department of Human Services

**Funding:** PSSF Adoption and Promotion and Support Services

The following are the adoption promotion and support services that will be provided for Kern County Adoptive Families by the Kern County Department of Human Services:

- Post Adoptive Services: Support, case management and linkage to services to families who are requesting reassessment of AAP and age-related increase.
- Pre-Adoptive Services: Adoption Promotion activities including Heart Gallery Program and National Adoption Day.

Additionally, a Kern County Department of Human Services Social Worker will serve as a liaison between DHS and the Post Adoption Services Program. The post adoption services will provide a variety of services available to families including addressing specific questions that only a DHS SSW can address, and will also monitor the quality of the above support services provided by Kern Bridges through observation of support groups and random quality assurance phone calls of families served by the contractor. A client satisfaction survey will be administered annually during the month of May to families who received services from January through March.

**Attachment 3**

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2012 Governing Board**

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## Attachment 5

### Original 22 CWLA Recommendations

- 1 The Kern County Board of Supervisors should commit to an expectation of an action plan developed by the KCDHS to address the recommendations from the CWLA review, including a timeline for follow through on elements of the plan, a review process, and estimated costs to address the adopted recommendations. This plan should include appointment of an external advisory committee to review the action plan and progress on a quarterly basis.
- 2 Re-examine KCDHS policy, assessment, and services to chronic neglect families including:
  - ✓ Staff training related to the assessment of chronic neglect.
  - ✓ Expectations regarding compliance with policy
  - ✓ Service array related to child and family need, including available services or development of services with community providers.
- 3 Examine current levels of staff expertise in engagement skills. A review and improvement of practice related to family engagement in decision processes, e.g., family group decision-making would be included in this recommendation.
- 4 Resolve issues of continuity of mental health services for children who move from one foster home/relative placement to a different mental health catchment area.
- 5 Re-examine case practice issues related to assessment and case planning for children and families.
- 6 Re-examine current practice related to referral to voluntary family maintenance services of serious risk and chronic referral families.
- 7 Examine utilization practices related to the Structured Decision Making Model, and resolve issues of its use as a tool to guide critical thinking and services.
- 8 Clarify standards for safety assessment related to both the physical and psychological safety of children in relative/foster care.
- 9 Improve recruitment and supports to relative and foster families in order to increase the number of siblings who are placed with each other. Furthermore, improve the visitation practices for siblings who are not placed with each other.
- 10 Examine needs of relative caregivers and develop training and support services as needed.
- 11 Examine the feasibility of inter-county contracts for services for families who live in remote areas of Kern County, and are closer to resources in another county.
- 12 Develop and communicate a clear statement of agency mission and values internally in the two Bureaus and externally to community partners.
- 13 Re-examine clarify and update policies as indicated by the review.
- 14 Conduct a workload study.
- 15 Clarify roles and responsibilities at all staff levels.
- 16 Examine current accountability and disciplinary policies and practices and develop clear and explicit performance standards and procedures for addressing poor performance and incentives for rewarding good performance.
- 17 Develop a long-term strategy for raising the level of the workforce in the two Bureaus including reducing workforce turnover.
- 18 Review the agency strategy regarding integration of evidence-based practice into the development of policy and practice.
- 19 Develop clear policies and procedures for chain-of-command issues identified in the system review.
- 20 Establish benchmarks for each program and unit area as a basis for managing to outcomes in the organization.
- 21 Address the salary issue.
- 22 Develop marketing plan to improve image of the agency in the community and with the media.