

1-29-14
Rec'd & logged
BAM



DEPARTMENT OF
HEALTH AND HUMAN SERVICES

Promoting and protecting health, well-being, self-sufficiency, and safety of all in Marin County.



Larry Meredith, Ph.D.
DIRECTOR

20 North San Pedro Road
Suite 2028
San Rafael, CA 94903
415 473 3696 T
415 473 3791 F
415 473 3344 TTY
www.marincounty.org/hhs

December 17, 2013

Marin County Board of Supervisors
3501 Civic Center Drive
San Rafael, California 94903



SUBJECT: Department of Health and Human Services, Social Services Division, requests approval of Child Welfare System Improvement Plan 2013-2018 (New).

Dear Supervisors:

RECOMMENDATION:

1. Approve the proposed 2013-2018 Marin County Child Welfare System Improvement Plan.
2. Authorize President to sign the Notice of Intent for the Child Abuse Prevention Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) programs (Attachment 6).

SUMMARY: The California System Improvement and Accountability Act and related federal legislation require that local Child Welfare Redesign efforts focus on improving outcomes for children and families served by the child welfare system. This proposed System Improvement Plan (SIP) serves as the operational agreement between the County and the State and outlines how the County will improve its system to provide better outcomes for children, youth, and families.

Marin County Children and Family Services intends to focus on eight key strategies and outcomes to improve services to children and families, and an additional two strategies focusing on improving Juvenile Probation outcomes. These improvement strategies were developed through a collaborative process involving County and community stakeholders. The Department requests that the Board adopt this next phase of the Child Welfare Redesign project. Over the course of the next five years, this (SIP) will focus on improving outcomes in the areas of timely response; re-entry into the child welfare system following reunification; reoccurrence of abuse/neglect; as well as timely reunification of probation youth in foster care.

COMMUNITY BENEFIT: The goals and the timelines of this System Improvement Plan will allow Marin County Children and Family Services and Probation to continue working towards improving the lives of the most vulnerable children in our community. County and community stakeholders will continue to focus on the provision of evidence-based, family focused services in order to strengthen local partnerships and reduce child abuse and neglect in the community.

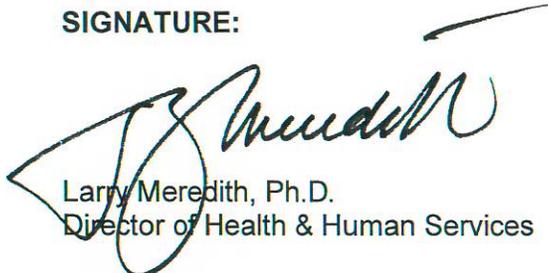
RECEIVED JAN 6 - 2014

BA-7F

FISCAL IMPACT: There is no net County cost associated with this action.

REVIEWED BY:	County Administrator	<input checked="" type="checkbox"/>	N/A	<input type="checkbox"/>
	Department of Finance	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	Human Resources	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>
	County Counsel	<input type="checkbox"/>	N/A	<input checked="" type="checkbox"/>

SIGNATURE:



Larry Meredith, Ph.D.
Director of Health & Human Services

SAP document number: Not Applicable

California - Child and Family Services Review

System Improvement Plan

DECEMBER 29, 2013 – DECEMBER 29, 2018

RECEIVED JAN 6 - 2014

COUNTY OF MARIN

County of Marin, 2013

EST. 1776
COUNTY OF MARIN

California – Child and Family Services Review Signature Sheet

For submittal of: CSA SIP Progress Report

County	Marin
SIP Period Dates	December 29, 2013 - December 29, 2018
Outcome Data Period	January 2013 Data Extract: Q3 2012

County Child Welfare Agency Director

Name	Heather Ravani
Signature*	<i>Heather Ravani</i>
Phone Number	(415) 473-7159
Mailing Address	3250 Kerner Blvd, San Rafael, CA 94901

County Chief Probation Officer

Name	Michael Daly
Signature*	<i>Michael Daly</i>
Phone Number	(415) 473-6599
Mailing Address	3501 Civic Drive, RM 259 San Rafael CA 94903

Public Agency Designated to Administer CAPIT and CBCAP

Name	Deborah Moss County Child Welfare Agency
Signature*	<i>Deborah Moss</i>
Phone Number	(415) 473-7125
Mailing Address	3250 Kerner Blvd, San Rafael, CA 94901

RECEIVED JAN 6 - 2014

Board of Supervisors (BOS) Signature

BOS Approval Date	12/17/13
Name	<i>Judy Arnold</i>

Signature*

Contact Information

Child Welfare Agency	Name	Deborah Moss
	Agency	Children and Family Services
	Phone & E-mail	(415) 473-7125 DMOSS@marincounty.org
	Mailing Address	3250 Kerner Blvd, San Rafael, CA 94901
Probation Agency	Name	Kevin Lynch
	Agency	Probation Department
	Phone & E-mail	(415) 473-6659 Klynch@marincounty.org
	Mailing Address	4 Jeanette Prandi Way San Rafael, CA, 94903
Public Agency Administering CAPIT and CBCAP (if other than Child Welfare)	Name	Deborah Moss
	Agency	Children and Family Services
	Phone & E-mail	(415) 473-7125 DMOSS@marincounty.org
	Mailing Address	3250 Kerner Blvd, San Rafael, CA 94901
CAPIT Liaison	Name	Deborah Moss
	Agency	Children and Family Services
	Phone & E-mail	(415) 473-7125 DMOSS@marincounty.org
	Mailing Address	3250 Kerner Blvd, San Rafael, CA 94901
CBCAP Liaison	Name	Deborah Moss

	Agency	Children and Family Services
	Phone & E-mail	(415) 473-7125 DMOSS@marincounty.org
	Mailing Address	3250 Kerner Blvd, San Rafael, CA 94901
PSSF Liaison	Name	Deborah Moss
	Agency	Children and Family Services
	Phone & E-mail	(415) 473-7125 DMOSS@marincounty.org

Table of Contents

INTRODUCTION.....	PAGE 6
SIP NARRATIVE.....	PAGE 8
STATE AND FEDERALLY MANDATED CHILD WELFARE/PROBATION INITIATIVES	PAGE 31
CAPIT/CBCAP/PSSF NARRATIVE	PAGE 32
ATTACHMENTS.....	PAGE 43
FIVE-YEAR SIP CHART.....	ATTACHMENT 1
CAPIT/CBCAP/PSSF PROGRAM DESCRIPTION & EVALUATION PLAN	ATTACHMENT 2
RESOLUTIONS DESIGNATING CAPC	ATTACHMENT 3
RESOLUTION DESIGNATING CCTF	ATTACHMENT 4
ROSTERS	ATTACHMENT 5
NOTICE OF INTENT.....	ATTACHMENT 6
BOARD OF SUPERVISORS' MINUTE ORDER/RESOLUTION	ATTACHMENT 7
CAPIT/CBCAP/PSSF EXPENDITURE WORKBOOK	ATTACHMENT 8
ABBREVIATIONS.....	ATTACHMENT 9

Introduction

Background – Child and Family Services Review

In 1994, amendments to the Social Security Act (SSA) authorized the U.S. Department of Health and Human Services to review state child and family service programs' conformity with the requirements in Titles IV-B and IV-E of the SSA. In response, the Federal Children's Bureau initiated the Child and Family Services Reviews (CFSR) nationwide in 2000. It marked the first time the federal government evaluated state child welfare service programs using performance-based outcome measures in contrast to solely assessing indicators of processes associated with the provision of child welfare services. California was first reviewed by the Federal Health and Human Services Agency in 2002 and began its first round of the CFSRs in the same year. Ultimately, the goal of these reviews is to help states achieve consistent improvement in child welfare service delivery and outcomes essential to the safety, permanency, and well-being of children and their families.

California Child and Family Services Review (C-CFSR)

The California Child and Family Services Review (C-CFSR), an outcomes-based review mandated by the Child Welfare System Improvement and Accountability Act (Assembly Bill 636), was passed by the state legislature in 2001. The goal of the C-CFSR is to establish and subsequently strengthen a system of accountability for child and family outcomes resulting from the array of services offered by California's Child Welfare Services (CWS). As a state-county partnership, this accountability system is an enhanced version of the federal oversight system mandated by Congress to monitor states' performance, and is comprised of multiple elements. In 2008 the Office of Child Abuse and Prevention (OCAP) was integrated into this review process, to streamline and ensure the integration of the full continuum of prevention, intervention and treatment in the review.

Quarterly Outcome and Accountability Data Reports

The California Department of Social Services (CDSS) issues quarterly data reports which include key safety, permanency and well-being outcomes for each county. These quarterly reports provide summary-level federal and state program measures that serve as the basis for the C-CFSR and are used to track performance over time. Data is used to inform and guide both the assessment and planning processes, and is used to analyze policies and procedures. This level of evaluation allows for a systematic assessment of program strengths and limitations in order to improve service delivery. Linking program processes or performance with federal and state outcomes helps staff to evaluate their progress and modify the program or practice as appropriate. Information obtained can be used by program managers to make decisions about future program goals, strategies, and options. In addition, this reporting cycle is consistent with

the notion that data analysis of this type is best viewed as a continuous process, as opposed to a one-time activity for the purpose of quality improvement.

County Self-Assessment and Peer Review

The County Self-Assessment (CSA) is a comprehensive review of each county's CWS and affords an opportunity for the quantitative analysis of child welfare data. Embedded in this process is the Peer Review (PR), formerly known as the Peer Quality Case Review (PQCR). The design of the PR is intended to provide counties with issue-specific, qualitative information gathered by outside peer experts. Information garnered through intensive case worker interviews and focus groups helps to illuminate areas of program strength, as well as those in which improvement is needed.

In April 2013, Marin County completed its PR. Though Marin Children and Family Services retains overall accountability for conducting and completing this assessment, the process also incorporates input from various child welfare constituents and reviews the full scope of child welfare and juvenile probation services provided within the county. The CSA is developed every five years by the lead agencies in coordination with their local community and prevention partners, whose fundamental responsibilities align with CWS' view of a continual system of improvement and accountability. The CSA includes a multidisciplinary needs assessment to be conducted once every five years, and requires Board of Supervisor (BOS) approval. Largely, information gathered from both the CSA and the PR serves as the foundation for the County System Improvement Plan.

System Improvement Plan

Incorporating data collected through the PR and the CSA, the final component of the C-CSFR is the System Improvement Plan (SIP). 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. The SIP is developed every five years by the lead agencies in collaboration with their local community and prevention partners. The SIP includes specific action steps, timeframes, and improvement targets and is approved by the BOS and CDSS. The plan is a commitment to specific measurable improvements in performance outcomes that the county will achieve within a defined timeframe including prevention strategies. Counties, in partnership with the state, utilize quarterly data reports to track progress. The process is a continuous cycle and the county systematically attempts to improve outcomes. The SIP is updated yearly and thus, becomes one mechanism through which counties report on progress toward meeting agreed upon improvement goals.

SIP Narrative

SIP DEVELOPMENT PROCESS

In April 2013, the System Improvement Planning process was initiated. Internal meetings were conducted with all levels of staff to review the PR and CSA findings. In addition the quarterly county data reports are consistently monitored and based on all of this information, outcomes for inclusion in the SIP were identified. The management team met to review strategies and timeframes and responsibilities were assigned. In addition, smaller groups of external stakeholders were consulted regarding specific strategies and actions in which they had indicated an interest and/or where there was a need for buy in and partnership. As part of the CSA process stakeholder meetings and focus groups were conducted exploring the full array of services for Marin County and the identification of strengths and gaps of services. A large stakeholder meeting was held on March 27, 2013 and focus groups with child welfare youth and parents, probation parents, caregivers, child welfare staff and juvenile court representatives were conducted. From this information the Child Abuse Prevention Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) service provision plan was developed. The following stakeholders were involved in the overall SIP process:

C-CFSR PLANNING TEAM

Focus Area	Name	Organization
Child Welfare	Deborah Moss	Marin County Children and Family Services
CDSS	Christina Hoerl	CDSS - Outcomes and Accountability
CDSS	Julie Cocherton	CDSS - Outcomes and Accountability
CDSS	Theresa Sanchez	CDSS - Office of Child Abuse and Prevention
Probation	Kevin Lynch	Juvenile Probation
Probation	Selina Johnson	Juvenile Probation
Consultant	Lisa Molinar	Shared Vision Consultants

CORE REPRESENTATIVES

Required Participant	Name	Organization
Child Abuse Prevention Council Representative (and Children's Trust Fund)	Cyndy Doherty	Marin County Advocates for Children
County Board of Supervisor designated agency to administer CAPIT/CBCAP/PSSF Programs	Heather Ravani	Social Services, Marin County Health & Human Services
County Alcohol and Other Drugs (AOD) Department	DJ Pierce	Mental Health & Substance Use Services Marin County H&HS
County Health Department	Margaret Kisliuk	Marin County Health & Human Services
County Mental Health	Ann Pring	Youth & Family Services, MHSUS, Marin County H&HS
Juvenile Court Representatives	Mark Wasacz	Wasacz, Hilley and Fullerton Legal Counsel for Children
Parents/Consumers	Dorothy LaFrance	Marin County parent
Resource Families	Linda Gregory	Marin County Foster Parent Association
Law Enforcement	Angel Bernal	Mill Valley Police Department
Independent Living Skills	Patty Cala	Alternative Family Services
Community Based Organization/AOD	Mark Herring	Center Point
Community Based Organization/AOD	Harriet Gaines	Center Point
Foster Family Agency/Wraparound Provider	Katherine Schwartz	Seneca Family of Agencies
PSSF Recipient	Marcus Small	Center for Restorative Practice
Juvenile Court	Mark Wasacz	Wasacz, Hillary & Fullerton LLP

Education	Sarah Gaidano	Bahia Vista Elementary
Child Welfare	Bree Marchman	Marin County Children and Family Services
Community Partner, Transitional Aged Youth	Zara Balentze	Ambassadors of Hope and Opportunity (private, non-profit)
Education	Lisa Schwartz	Marin County Office of Education

In going forward, it is recognized that it is unlikely that a significant amount of additional funding will occur. With that in mind, the following areas have been identified to be explored for inclusion in the SIP. Based on the CSA analysis of Outcomes and consultation with the CDSS the following safety, permanency and well being outcomes were selected for this SIP. Strategies were developed by reviewing all of the information, including stakeholder feedback, literature reviews, data presented and how that fits in with the unique culture of Marin County.

Child Welfare:

S1.1 No Recurrence of Maltreatment

Marin County diligently tracks the number of children that experience a recurrence of maltreatment. This outcome was selected given the inconsistent County performance on this measure and is described in the CSA in further detail (page 72 and 73). This SIP has several strategies that will potentially contribute to improving performance on this outcome including; strengthening the cohesiveness of the child welfare supervisory team; implementing a structured system of management case review for all cases where there is recurrence of maltreatment; strengthening usage of standardized assessment tools; increasing family engagement; building community awareness and response to child abuse and neglect; and reviewing and modifying the Differential Response program.

C1.4 Re-entry following Reunification

It is the goal of the County and stakeholders to prevent children from re-entering the child welfare system after reunification (page 78 of the CSA). There were many strategies discussed during the CSA process regarding how to reduce re-entry. This SIP has several that will potentially contribute to improving performance on this outcome including; strengthening the cohesiveness of the child welfare supervisory team; continuing its implementation of a structured system of team case review for all cases where reunification is recommended; strengthening compliance with standardized assessment tools; increasing family engagement; building community awareness of child abuse and neglect; and working in collaboration with Mental Health partners to increase access to mental health services.

2B Timely Response (10 day referral)

It is an expectation of the County that all staff will conduct timely investigations of allegations of child abuse and neglect and the Agency as a whole will comply with the Federal standards. A number of systemic barriers were noted in the CSA and strategies were identified to help address this largely systemic challenge including; strengthening the cohesiveness of the child welfare supervisory team assessing existing Emergency Response (ER) and the Court structure and implementing potential modifications

Probation:

C1.1 Reunification within 12 months (Exit Cohort)

The Juvenile Probation department has chosen the outcome of Reunification within 12 months, which as described on page 74-75 of the CSA has many barriers for Probation families. Two strategies were chosen by Probation to improve this outcome, including strengthening the support that parents receive through the Parent Support Program and increasing the engagement of youth in the services that Probation can provide.

The data used for the SIP was obtained from the January 2013 Data Extract: Q3 2012 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

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

PRIORITIZATION OF OUTCOME MEASURES/SYSTEMIC FACTORS AND STRATEGY RATIONALE

CDSS recommends that counties choose three to four outcomes or systemic factors for specific improvement strategies in the SIP. Outcomes not chosen for inclusion in the SIP will continue to be monitored by both our agency and the CDSS at least quarterly. If a concerning situation arises, a plan will be put in place to address that outcome.

Child Welfare

Strategy 1:

Strengthen cohesiveness of the child welfare supervisory team through:

- Identification of common vision and goals
- Consistent use Safety Organized Practice(SOP) tools as part of assessment and supervision
- Consistent use of Structured Decision Making (SDM) Assessment tools during supervision
- Provision of refresher supervisory training and coaching

JUSTIFICATION RATIONALE:

With the appointment of CFS' new Program Manager I and Program Manager II there has been a change in the composition of Marin's CFS leadership team. It is important to re-assess and build on the cohesiveness of the child welfare supervisory team to promote consistency of decision making across the Child and Family Services leadership team.

EVALUATION:

This strategy will be assessed by management's observation of Supervisors consistent use of Safe Measures to track staff compliance, and the completion of SDM assessment tools. SOP tools will monitored by ongoing self-reporting of supervisory staff and social workers.

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.

Work on this strategy will begin with a retreat to help build and strengthen the leadership team. A consultant will be needed to help plan and facilitate the day. There will also be training/coaching opportunities for supervisors on components that are identified, such as the use of SOP or SDM tools.

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

Consultant/Facilitator for the Retreat, Bay Area Academy to assist in the training as needed.

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

None needed.

Strategy 2:

Implement a structured system of management case review for all cases where there has been recurrence of maltreatment or re-entry after reunification, and continue implementation of Administrative Review Process for all cases preparing for reunification.

JUSTIFICATION RATIONALE:

Marin County has experienced a recurrence of maltreatment rate that is higher than the National Standard. A careful, more systematic review of cases where recurrence has occurred can identify potential weakness in agency policy and/or practice and help inform future practice. Similarly, the County also recently implemented an Administrative Review Process for those children identified to return home. Staff is required to bring these cases for review. A team of staff and management utilize SOP mapping techniques to help ensure a solid plan is in place to safely reunify the child. It is anticipated that more consistent reviews will ultimately lead to improved outcomes for families by reducing foster care re-entry rates.

EVALUATION:

A decrease in the recurrence rates and a decrease in the number of re-entries into foster care.

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

The establishment of a case review team for cases where there has been recurrence.

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

Training/technical assistance in the establishment of a case review process for supervisors and social workers. Increased understanding of implementation science as a tool to help managers and supervisors effectively implements practice change when needed.

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

Bay Area Academy to assist in the training as needed.

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

None needed.

Strategy 3:

Expand ongoing compliance with the use of standardized assessment tools and the use of SOP best practices throughout the child welfare continuum.

JUSTIFICATION RATIONALE:

The use of an evidence based assessment tool at consistent points in a referral or case helps to minimize bias, strengthen case assessments and ensure consistency of decision making across the agency. The integration of SOP into daily work will help to enrich and strengthen social work practice by providing child welfare staff and key partners with the best practice tools needed to build and strengthen partnerships within a family, their informal support network of friends and family, and the agency. The SOP model utilizes strategies and techniques in line with the belief that a child and his or her family are the central focus and that the partnership exists in an effort to find solutions that ensure safety, permanency and well-being for children. It assists families through:

- Focusing on effective working relationships between the family, the family's support system and the caseworker
- Establishing cooperative and honest professional relationships
- Applying critical thinking, inquiring rather than knowing, and incorporating what we know from research and evidence-based tools
- Utilizing a humble questioning approach in the agency and in the field
- Building on what is already working for families and agencies
- Providing a clear vision for the work along with aspirations for a family's abilities to improve children's safety and well-being

EVALUATION:

Utilizing Safe Measures a baseline will be established to measure compliance with SDM at key points in the case including Safety Assessments, Risk Assessments, and Risk-Reassessments. This will continue to be evaluated over time to track improvement in compliance.

Compliance review for the use of SOP tools will be conducted in supervision, at case review meetings and eventually evidenced in the language in case plans, court reports, and other child welfare documents

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

Policies regarding the use of standardized assessment tools will be reviewed and updated as needed. Policies will also be adapted to integrate the principals of SOP where appropriate. Forms, templates, and court reports will be adapted to incorporate SDM and SOP as needed.

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

Training and supervisory coaching on SOP practices and refresher training on SDM assessment tools will be necessary. The Northern Training Academy and The Bay Area Academy offer training on SOP. Refresher trainings on existing assessment tools to ensure fidelity.

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

Bay Area Academy and Northern Training Academy will assist with training as needed.

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

None needed.

Strategy 4:

Assess CWS existing ER and CT Unit Structure and make recommendations for structural or system changes to improve flow of ER assignments and improvement in response time for referrals necessitating a response within 10 days.

JUSTIFICATION RATIONALE:

In a small county staff absences or changes in referral volume can greatly impact workflow in a given unit. The existing ER/CT structure is especially vulnerable to this and unplanned staff absences and/or unanticipated increases in the number of detentions often impacts compliance on 10 day referrals. Social workers prioritize work to prepare court petitions and reports and respond to immediate referrals, and compliance with 10 day referrals decreases. Developing a structure that can better adapt to these unanticipated changes in volume will be key to improving compliance.

EVALUATION:

Tracking of response times from receipt of the referral.

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

Updated policies/practice guidelines once agreed upon structure finalized

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

Training on updated policies and procedures. Technical assistance focused on implementation science.

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

None identified.

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

None identified.

Strategy 5:

Increase family engagement through the provision of more systematic facilitated family meetings for families in the emergency response program, incorporating principles of SOP with other best practice models for family conferencing/teaming.

JUSTIFICATION RATIONALE:

According to State of California Department of Social Services' All County Information Notice I-31-12 one of the most effective and common methods identified by counties as a good practice for improvement in placement stability is facilitated family meetings. This practice has also proved effective in supporting timely reunification. Facilitated family meetings create the opportunity to develop a community and family support system at the onset of a child welfare case. They also offers the opportunity to monitor and refine a family's safety plan to help ensure that there is a realistic and workable plan in place at the time of CFS case closure.

Combining the strategies of Facilitated Family Meetings and the principles of SOP (explained in strategy 3) will enable family meeting participants to better articulate what is working in the family (strengths), identify "worries" and more openly and honestly plan for next steps in a family friendly and focused manner. The focus to engage families in such a manner will also potentially support improved outcomes in Family Reunification, Re-entry, Placement Stability and Adoptions.

Additionally, the implementation of the Katie A Core Practice Model (strategy 8) encourages family engagement through "teaming" processes which by design includes these same participants.

EVALUATION:

The frequency and purpose of Facilitated Family Meetings can be tracked using the new codes that are in CWS/CMS. Satisfaction of families can be evaluated via surveys or focus groups and overall effectiveness should impact recurrence and re-entry rates.

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

Updated policies, guidelines and procedures may be necessary to reflect the adoption of new practice models. Consider assignment of staff to organize and facilitate meetings

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

Training on family group conferencing and group meeting process for staff and community partners. Continued staff training on the principles of SOP will be necessary, as well as any other best practice models that may be incorporated into the SOP model.

We are currently working closely with the Bay Area Academy and are in the midst of extensive SOP training and coaching. SOP training will need to be adapted for courts and key community partners.

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

It will be vital to engage community partners, including parents, in understanding SOP as they are key participants in the teaming process.

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

None needed.

Strategy 6:

Build community awareness of child abuse and neglect through the provision of local child welfare data and education about the dynamics of child abuse and neglect. Work in conjunction with Marin Advocates for Children (MAC), Marin's recipient of CBCAP funds to target and strengthen collaboration with agencies across the County who serve at risk families and children, especially in the services areas of domestic violence and substance abuse treatment where there are identified service gaps/challenges. Building on this strategy is the identification of community partners that can assist families by participating in team meetings and providing needed support and services to the families.

JUSTIFICATION RATIONALE:

Engaging the community and helping them understand their role in child protection is a key ingredient to building the local supports that families need to thrive in their communities. In Marin County child abuse/neglect is not a highly visible issue so sharing current child welfare data and increasing understanding of the dynamics of child abuse and neglect are essential. Furthermore, improving partnership and collaboration with those agencies that may already be in contact with CFS families can strengthen our overall effectiveness and support of the family. This is especially true when families have co-occurring issues such as child abuse/neglect and domestic violence and or substance abuse. This collaboration between the family, community, service providers and agencies assists in the prevention of child abuse and neglect, and ongoing support to the family. This will assist in addressing barriers/service gaps identified on page 78 or the CSA.

EVALUATION:

Track the number of trainings provided in the community that offer an overview of child abuse/neglect including the specific organizations who received the training(s) and the number of participants who attended.

Analyze the outreach plan to ensure that CFS and its partner agency MAC have targeted and prioritized training for those agencies that are best suited to help reduce existing service gaps identified in the CSA.

Capture the number of times CFS staff present child welfare data and/or overview of child welfare operations to other community groups.

Track the number of cross-trainings received from and provided to partners such as AOD programs and Domestic Violence providers. It was identified in the CSA that the relationships between CFS and partner agencies could be strengthened by the provision of cross training, the creation of ongoing collaborative meeting opportunities, and meaningful participation in family meetings. A list of the community members and service providers who participate in team meetings will be kept and built upon each subsequent year.

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

No system change, but an increase in collaboration across the system.

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

Inclusion of key partners in CFS trainings

Team Meeting collaboration training

Cross system agency training

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

Collaboration with other agencies that serve children and families to increase awareness and engagement in understanding child maltreatment and potential signs of abuse. This will assist agencies in the provision of resources, improving accessibility to services, and the implementation of methods to strengthen protective factors.

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

None needed.

Strategy 7:

Determine the effectiveness of the existing Differential Response (DR) Path 1 model and make appropriate modifications.

JUSTIFICATION RATIONALE:

The use of DR is attributed to a better engagement of families in practice, identification of motivations for family change and building on family strengths. In a multi-state evaluation of DR, four states evaluated family satisfaction and engagement. It was reported that families were more satisfied with how they were treated, felt more involved in decision making, connected to the community and that their contact with CPS was beneficial. Notably one state found that in 95% of the cases that were DR, families were included in service planning compared to only 67% of traditional investigations. Social workers felt that families in DR were more cooperative and willing to engage in services than those in traditional investigations. Social workers also felt they treated the clients more respectfully in the DR approach (Child Welfare Information Gateway. (2008). *Differential responses to reports of child abuse and neglect*. Washington, DC: U.S. Department of Health and Human Services).

A review of our existing DR model will provide an opportunity to assess if the current DR Path 1 model is effective in engage families and linking them to services in the community.

EVALUATION:

Review of existing Path 1 program will help us determine the effectiveness of our current model and serve as a means to develop the baseline data needed as we move forward. With limited resources available we will need to determine if a Path 1 or Path 2 model is better suited to meet the needs of our County. In particular, we will review current Path 1 referrals to assess level of client engagement and rate of re-referral. If a new strategy is developed an evaluation component will be identified.

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

There may be potential system changes if there is a shift to Path 2 services.

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

Staff will be re-trained as needed on the utilization of the Differential Response program and tools.

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

Extensive community collaboration and education will be needed if changes are made to the existing Differential Response model.

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

None needed.

Strategy 8:

Work in collaboration with Mental Health partners to increase access and linkage to children’s mental health services through implementation of Katie A required practices. Katie A. v. Bonta is a federal class action lawsuit filed on behalf of California foster youth and children at risk of out-of-home placement. In September 2011 the Katie A. settlement agreement was reached which includes:

- Timely screening of all children with open Court Ordered and Voluntary CFS cases
- Completion of mental health assessments and connection to services
- Connection to mental health services

JUSTIFICATION RATIONALE:

In support of the foundational concepts of Katie A, research reveals that children in foster care have significantly higher mental health issues than the general population. It is estimated that up to 75% of foster children have mental health needs that rise to level of requiring treatment; however, often children do not receive assessment or treatment. The consequences of not meeting the mental health needs of children in care are lower educational attainment, an increase in placement changes and a decrease in the likelihood to reunify or achieve another form of permanency (Landsverk, J.A., Burns, B.J. Stambaugh, L.F. and Reutz, J.A.R. (2006). *Mental health for children and adolescents in foster care*. Casey Family Programs).

<http://www.casey.org/Resources/Publications/pdf/MentalHealthCareChildren.pdf>

EVALUATION:

As there are new mandates regarding implementation of the Katie A Core Practice Model, it is expected that there will be data entry requirements. It is also anticipated that CDSS will require counties to submit reports detailing the use of services to ensure counties are following the new requirements of Katie A.

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

Changes in policies and procedures regarding mental health screening, assessments, and referrals will be necessary.

Katie A does require information and data sharing among service providers. Release of Information policies and practices will need to be developed that comply with Health Insurance Portability and Accountability Act regulations and are in alignment with Katie A requirements, including making families aware of the data sharing policies.

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

Training is needed to support any new policies and practices or tools that are adopted. There will be statewide training in relation to the implementation aspects of Katie A.

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

Collaboration with mental health service providers, education, community partners and others to strengthen access to services. Identification of barriers to accessing services or resource gaps. Outreach to Matrix Parent Network and Resource Center to cross train on new Katie A procedures and encourage their participation in teaming.

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

There may need to be changes to information sharing to facilitate the most effective coordination.

Probation

Strategy 9:

Assess the effectiveness of the parent support program and make recommended modifications

JUSTIFICATION RATIONALE:

Strategy rationale:

The Marin County Probation Department only recommends removal of youth from their parents' homes in those cases in which either the child or the public's safety is determined to be at grave risk. As a result of using a high standard for recommending an intervention such as foster care, the family situation is quite dire and in need of significant assistance in order to consider reunification. This has been the primary issue that has led to higher than average lengths of time for reunification for youth in Marin County.

The Probation Department prides itself on the variety of services available to youth and families, including free access to programs such as:

- Functional Family Therapy
- Multi-Dimensional Family Therapy
- Aggression Replacement Training
- Trauma-Focused Cognitive Behavioral Therapy
- Seneca Wrap Services
- Parent Education
- Employment services, including access to job placement, job training and stipend internships
- Youth Mentoring

While these services have provided relief and assistance to many families, not all of them have been able to respond to them successfully. In order to assess why, the Probation Department has participated in several focus groups and surveyed youth and families about services. Part of this work has been done through the Department's participation in the Disproportionate Minority Contact project, which has been ongoing since 2008. This need was also evident from the most recent CSA process. It is evident from the feedback of these opportunities that Juvenile Probation Division needs to improve its efforts to engage parent and youth of some families in order to encourage them to better take advantage of these exiting services, and for the Department to consider the creation of different services to improve outcomes, such as

reduced time period before reunification for families.

One of the attempts to improve engagement has been the support group for parents of youth in residential care, which has been in operation for approximately four years. Currently Seneca Center facilitates the Parent Support groups. The purpose of this program has been to create a forum for parents undergoing the experience of having their children in foster care through the juvenile court. It has been designed to offer:

1. regular and easy access to the deputy probation officers
2. peer to peer support
3. forum for parental education opportunities

If parents are better educated about the Juvenile Probation system and supported while the youth is in placement, this may improve the length of time to reunification. Conversely, if the parents are not supported, it is much more difficult to reunify the youth as the situation is unlikely to have improved since the youth began placement. However, the effectiveness of this program has never been assessed. In order to determine whether this program is accomplishing these objectives, or whether other steps could be taken to improve parental attendance, participation and/or engagement, an assessment needs to be performed.

An Issue Brief by the Child Welfare Gateway (2011) identifies the vital role of engaging parents in the planning and utilization of services can increase successful reunification. Increasing the effectiveness of the parent support program is not only beneficial for reunification, but may also help engage youth in services if parents are engaged and invested in supporting the youths' participation in available services.

Child Welfare Information Gateway. (2011). *Family Reunification: What evidence shows*, Washington, DC: U.S. Department of Health and Human Services.

EVALUATION:

Focus groups with parents can identify the parents' perception of the effectiveness of the program. Interviews and/or surveys conducted with probation officers can reveal if they are seeing any difference in case management when parents are better supported and engaged in their child's case plan. Tracking the time to reunification can also assist in evaluating the effectiveness of the program long-term.

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

No system changes necessary.

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

Outreach and education should be provided to all parents when youth first come into contact with the system regarding the services available to support them and their child(ren). It will be important to educate and train staff regarding the importance of educating parents on the juvenile justice system and attendance at the Juvenile Probation support group to engage them in case planning and supportive services.

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

Currently Seneca Center facilitates the Parent Support groups. We will continue to work with Seneca to work on improving the program. Additionally an organization that can conduct an assessment/evaluation of the support group will be identified to assist in recommendations to modify the Parent Support group.

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

This is already in line with current policy.

Strategy 10:

Actively explore strategies to engage youth and identify best practices for implementation

JUSTIFICATION RATIONALE:

It is vital that youth access the available services that will support their transition back into their home and community. These services are designed to provide them with the skills necessary to make a successful transition back into their homes and community, and potentially reduce recidivism. National research confirms that youth who do not receive targeted services for education, employment and life skills have difficulty reintegrating back into their home, school and community (Nellis, A. and Wayman, R.H. (2009). *Back on Track: Supporting Youth Reentry From Out-of-Home Placement to the Community*. Washington, D.C.: Juvenile Justice and Delinquency Prevention Taskforce, Youth Reentry Task Force).

Research consistently shows that foster youth are less likely to complete high school and more likely to be unemployed and homeless compared to their peers (Courtney, et. al., 2004). Access to supportive services that promote educational attainment, employment and life skills can improve long-term outcomes for youth.

Courtney, M.E., Terao, S., Bost, N. 2004. *Midwest Evaluation of the Adult Functioning of Former Foster Youth: Conditions of Youth Preparing to Leave State Care*. Chapin Hall Center for Children at the University of Chicago.

Marin County has numerous services for probation youth. What needs to be improved is engaging youth to access those services. This strategy is to identify and implement best practices for youth engagement. Youth being part of the plan and decision making and accessing those goals and advising regarding policy decisions.

EVALUATION:

ILP services can be tracked in CWS/CMS. This can be used to determine if there is an increase in the number of probation youth accessing services. Surveys can be used to determine if youth experience barriers in accessing services and if the services address their needs. Focus groups can also be utilized with youth to determine the youth's perspective regarding the efforts made to engage them and for developing recommendations for improvement in that area.

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

No system changes are needed.

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

Training will be necessary for Probation Officers; the extent of the training will depend on

which youth engagement program is chosen. Outreach to youth and families will be necessary to explain the new program and engage youth in participating.

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

Partners from youth empowerment and advocacy programs will be utilized to help inform the program that if feasible will be developed in Marin County.

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

No changes are necessary for implementation.

PRIORITIZATION OF DIRECT SERVICE NEEDS

Stakeholders representing the entire continuum of services from prevention services to treatment and follow up, participated in the PR/CSA/SIP planning process and assisted in identifying strategies to be included in this plan. Our focus is to improve multiple areas of practice, in order to continue working towards improving the lives of the most vulnerable children in our community. County and community stakeholders will continue to focus on the provision of evidence-based, family focused services in order to strengthen local partnerships and reduce child abuse and neglect in the community. The use of CAPIT/CBCAP/PSSF and Children's Trust Fund money helps us to do that.

The top five strengths in serving the community of Marin in meeting prioritized needs are:

1. Teaming and collaboration among service providers in child welfare;
2. Excellent social workers;
3. Willingness to self –reflect and an openness to change without defensiveness to meet the needs of the community;
4. Probation actively works to keep youth out of placement;
5. Structured Decision Making (SDM) and Safety Organized Practice (SOP) (page 5).

The top five barriers for serving the community of Marin are:

1. Lack of multi-cultural service options in the community;
2. Lack of Dual-diagnosis services to meet the needs of people with mental health and substance abuse issues;
3. Access to services is difficult due to transportation challenges ;
4. Cost of living, affordable housing, and hidden poverty;
5. Lack of local foster care (for all ages) and homeless services for youth for both child welfare and probation. (page 5)

Given the increased complexity of the issues facing many of the families currently involved in the child welfare system and the implementation of Katie A., a continual examination of the

County's use of CAPIT/CBCAP/PSSF and Children's Trust Fund allocations will be made to ensure that funding priorities support those strategies that are currently successful as well any new service needs and strategies that are emerging. For example in the CSA it was identified that children under the age of 5 have the highest rate of substantiated allegations, children ages 6-10 are re-entering into CWS and domestic violence is a prevailing issue. The strategies of community data sharing and education, DR, and Case Reviews will pay particular attention to this population. Moreover, we are also concerned about the role that substance abuse and domestic violence play in our re-entry and will be strengthening our collaboration with these partners to ensure that we utilize their expertise when assessing and planning for reunification. In determining which services are the best fit for the population we are addressing, we examine current evidence-based/evidence informed programs. Naturally some may need to be altered to fit the client's needs. For example, the current wrap models being utilized by the Center for Restorative Practice is an adaptation of the more traditional home based wrap model. It links families with local providers and it has proven to be effective in preventing placements here in Marin. The fact that we are a small county enables us to actually track individual client outcomes. Given our current priority to address challenges with re-entry we intend to be more strategic and link more families who are preparing for reunification with this program and track the effectiveness of this intervention with those families.

The County's partnership with the current CAPIT/CBCAP/PSSF providers dates back many years and the strategies that have been funded have contributed to Marin's ability to safely maintain children with their families.

State and Federally Mandated Child Welfare/Probation Initiatives

Marin County has been actively involved in working on the following initiatives:

CFS, Probation, Cal Fresh and California Work Opportunity and Responsibility to kids (CalWORKs), as well as our contracted Independent Living program provider, work in collaboration to provide services to our transitional age youth. CFS maintains close partnerships with the other agencies in Health and Human Services to provide seamless services to at risk families in Marin. Though not an official Linkages county, Marin has an active system to share information and case planning for those families involved with both CalWORKs and CFS. Marin CFS also collaborates closely with Mental Health and Substance Abuse Services which has proven to be helpful as we move forward to implement Katie A.

Marin CFS and Juvenile Probation have supported the State CFSR Program Improvement Plan by working on the following strategies:

- Expanding the use of participatory case planning strategies through Ice Breaker meetings (CFS) and using group process for transitioning children from placement within 90 days of planned discharge (Juvenile Probation).
- Sustaining and enhancing permanency across the life of the case by working with group home programs to shorten the length of stay and increase family involvement (Juvenile Probation) and increasing family finding efforts throughout placement (CFS).
- Enhancing and expanding caregiver recruitment, retention training and support efforts by developing relative caregiver support through Seneca Services, developing procedures to facilitate the emergency relative approval process and increasing use of wraparound services for children in care with foster parents or relative caregivers (CFS).
- Expanding options and creating flexibility of services and supports to meet the needs of children and families by implementing Wraparound services for high need youth in care and partnering with Marin Advocates for Children to provide Family Strengthening courses to Marin Families (CFS).
- Strengthening the implementation of the statewide safety assessment system by providing advanced training to supervisors and staff on Structured Decision Making (CFS).

CAPIT/CBCAP/PSSF Narrative

The CAPIT/CBCAP/PSSF Plan contains the core requirements of the CAPIT/CBCAP/PSSF five-year plan. The plan addresses how prevention activities are coordinated and how services will be provided during the five year SIP period of December 29, 2013 through December 29, 2018. The funded programs emphasize comprehensive, integrated, collaborative community-based responses to child abuse prevention, intervention and treatment service needs. Marin County will submit the mandated CAPIT/CBCAP/PSSF report annually. Changes to any program or activities that are funded by CAPIT/CBCAP/ PSSF funds will be discussed with OCAP in order to get necessary approvals in advance, and will be subsequently reported during the annual reporting period. New expenditure workbooks and program descriptions will be submitted as necessary.

MARIN ADVOCATES FOR CHILDREN/CAPC

MAC is the leading non-profit agency for prevention of child abuse in the County of Marin and has been the independent voice for victims of child abuse and neglect for over 15 years. MAC members participated in the recent PR and CSA that was completed in early 2013.

Marin Advocates for Children Steering Committee		
Child Abuse Prevention Council Representative (and Children's Trust Fund)	Cyndy Doherty	Marin County Advocates for Children
County Board of Supervisor designated agency to administer CAPIT/CBCAP/PSSF Programs	Heather Ravani	Social Services, Marin County Health & Human Services
County Alcohol and Other Drugs (AOD) Department	DJ Pierce	Mental Health & Substance Use Services Marin County H&HS
County Health Department	Margaret Kisliuk	Marin County Health & Human Services
County Mental Health	Ann Pring	Youth & Family Services, MHSUS, Marin County H&HS

Juvenile Court Representatives	Mark Wasacz	Wasacz, Hilley and Fullerton Legal Counsel for Children
Parents/Consumers	Dorothy LaFrance	
Resource Families	Linda Gregory	Marin County Foster Parent Association
Community Partner, Transitional Aged Youth	Zara Balentze	Ambassadors of Hope and Opportunity (private, non- profit)
Law Enforcement	Angel Bernal	Mill Valley Police Department
Independent Living Skills	Patty Cala	Alternative Family Services
Prevention (CAPC)	Cyndy Doherty	Marin Advocate for Children
Community Based Organization/AOD	Mark Hering	Center Point
Community Based Organization/AOD	Harriet Gaines	Center Point
Foster Family Agency/Wraparound Provider	Katherine Schwartz	Seneca Family of Agencies

Population Served

The Marin Advocates for Children (MAC) and its arm the Child Abuse Prevention Council (CAPC) serve as the coordinating council for agencies, organizations and community members who work in the field of child abuse prevention and provide an array of training in the area of child abuse and neglect across the County. The CAPC membership includes over 200 representatives. MAC leverages CBCAP and CCTF funds to provide an array of preventative, educational services including trainings such as the “Impact of Witnessing Family and School Violence on Children” offered to both child welfare professionals and families. Over the past fiscal year MAC provided twelve trainings, serving over 275 attendees. In addition CAPC offers mandated reported trainings throughout the County in both English and Spanish. Also under MAC’s umbrella is Marin’s Court Appointed Special Advocates (CASA) program.

PSSF Collaborative

For the purposes of planning for the use of PSSF as well as other OCAP funds, our local planning body was the stakeholder group that participated in the CSA and the development of the SIP and is listed on page eight and nine of this report. As has been noted elsewhere, this group included representation from all key community partners, including all the primary agencies in Marin County that are involved in coordinated prevention activities.

Children's Trust Fund Commission, Board, or Council

MAC is designated by the Board of Supervisors as the local Child Abuse Prevention Council and the coordinating agency for the Marin County Children's Trust fund. Please see the above roster (page 32 and 33) for membership.

Parent Consumers

Parent Consumers are included in a variety of roles within CFS. The intent over the next five years is that parents will continue to play an important role in the planning, and evaluation of services. In addition, it is anticipated that parent partners will have an increasing role as the County moves forward with plans to implement family team meetings and Katie A.

Parents and youth actively shared their input during the recent CSA process. Focus groups and individual family interviews were conducted in both English and Spanish. This important client feedback will help shape future program planning.

Parent partners are already an integral part of the County's wrap around programs. In addition, staff routinely link families with parent partners to help facilitate their linkage to supportive services in the community. Children's Mental Health also employs parent partners and over the next year they will likely assume a more active role as they work to ensure that the mental health needs of children in child welfare are prioritized.

Recruitment of parent partners remains a priority as parental involvement is a key component of current best practice.

The Designated Public Agency

The Marin County Board of Supervisors designated Health & Human Services as the Public Agency responsible for the Administration of the CAPIT/CBCAP/PSSF plan. The BOS will re-confirm its designation of Health and Human Services as the public agency responsible for the

oversight of the CAPIT/CBCAP/PSSF funds in conjunction with its approval of the County's new SIP.

The Role of the CAPIT/CBCAP/PSSF Liaison

The Children and Family Services Program Manager II serves as the primary liaison for the CAPIT/CBCAP/PSSF funds. The Manager will ensure that funds are allocated through a Request For Proposal (RFP) process and that selected grantees meet the program and fiscal requirements associated with the specific funding source. The Program Manager may assign day-to-day contract oversight/monitoring and support to supervisory staff as a means to promote increased coordination and collaboration. The County Liaison/ Program Manager II will be available to provide technical assistance to both staff and grantees as needed.

The County Liaison/Program Manager II will work to ensure that the current services address gaps in the service array that may contribute to child abuse and neglect and/or compliment those goals outlined in the SIP.

Fiscal Narrative

The CAPIT program funding has been realigned to the County in the Protective Services subaccount and is the federal match for CBCAP. However, both the CBCAP and PSSF programs are federally funded and, as such, subject to the annual federal budget process. In Marin all programs operate on the state fiscal year time line of July 1st to June 30th. Provider contract amounts are linked to the specific allocations and monthly invoices are monitored by both program and fiscal staff to ensure adherence to contract terms and provisions.

CAPIT, PSSF & CBCAP funding is leveraged at both the county and provider level to maximize services for clients. For example, county funds are utilized to augment PSSF dollars to enhance service provision to clients. Contract agencies leverage CAPIT funds with a minimum of 10% county general fund and/or private foundation dollars to expand services to clients served through their programs.

Local Agencies- Request for Proposal

Marin County CFS values the partnerships it has formed with local community based organizations and is committed to working with its partners to help address priority needs for high risk families in our community. Over the next fiscal year one of our key strategies centers

on increasing service capacity in areas of need such as, domestic violence or substance abuse treatment, that were identified during our recent CSA process. As such, in preparation for the next RFP process the County will evaluate existing funding priorities and services to ensure that they are focused on current need.

CAPIT Funds

Marin County allocates CAPIT funds to support our work with Novato Human Needs and Canal Alliance. Both agencies provide an array of culturally sensitive, including bilingual supportive services to families and children. Novato Human Needs provides in-home supportive services to families and children where children are at risk of removal due to abuse or neglect. Canal Alliance provides center based prevention services for at risk families and children. As noted earlier, both leverage other funding sources and partnerships to provide a wide array of services including food pantries, rental assistance, employment services, immigration support, and support groups for domestic violence victims.

CBCAP Funds

Marin allocates CBCAP funds to help increase the community's engagement in child protection and strengthen their understanding of the dynamics of child abuse and neglect. It is our belief that community engagement in this field of work requires constant nurturing and multiple opportunities for learning. Marin Advocates for Children serves as the primary organizing body, offering a variety of training and networking opportunities to those organizations most likely to come into contact with at-risk families and children.

Peer Review

There is not a specific peer review process for the services funded through CBCAP although information gathered from our recent CSA will be utilized to help guide the selection of training topics. With regard to the RFP process, we have historically regarded this as a sole source contract as there are currently no other agencies within Marin County providing comparable services.

PSSF Funds

Marin County allocates PSSF Family Preservation, Family Support and Time Limited Family Reunification money to support one of our wraparound programs, which help maximize parent engagement, collaboration and access to resources. The Youth Pilot Project (YPP), initially

funded through AB 174, is now supported by a combination of PSSF and County dollars. This program is typically offered to families receiving family maintenance services and serves as a tool to prevent out of home placement but it is also available to children in foster care or adoptive placements to help prevent placement in a higher level of care. Involvement with the program is completely voluntary. Services are provided on site at the Agency rather than in the home, so families must commit to attending the meetings. Families begin with an orientation where the facilitator assists them to select their team. The case manager or referent is always part of the team. Parents often select relatives or friends, along with school personnel and staff who have assisted them to be part of their team. The regular meetings consist of facilitated family group conferencing. At each meeting the families strengths and needs are discussed; families identify what they need help with and the goods and services they believe will help them. The group discusses the needs and each person in the group takes some responsibility for helping the family. The family may be linked with a community parent partner, a mentor, therapist, public health nurse or tutor. The costs of the services are covered through the program. Many other services can be provided as well. YPP is also available to families and children served by the juvenile probation system. As we move forward increased emphasis will be placed on linking families who are about to reunify with their children to this program as a means to help the family establish the safety network that is needed to ensure child safety and help prevent re-entry. This program is readily available and has minimal, if any, wait list. It has been highly successful in keeping Marin County children at home whenever possible. A minimum of 20% of the PSSF allocation will be spent in each of the required PSSF service components.

Service Array

Marin County social workers work closely with families to help them identify the supports and services that are needed to help mitigate the issues and risk that brought them to the attention of the Department. Our goal is to enable children to remain safely in their homes whenever possible and when that is not an option, to help parents access the services that they need to successfully reunify with their children. Services are provided by both public agencies and local community-based organizations. There is extensive collaboration between agencies to ensure that the goal of maintaining children safely in their homes is met whenever possible. Marin County utilizes a combination of County, State and Federal dollars to provide and purchase services for children and families as needed.

Prevention Based Services

Novato Human Needs' (NHN) Amigos de Familia (funded by CAPIT) provides case management, direct services and referrals to families in need in Novato and the surrounding community. In addition to home visiting, NHN blends a variety of funding streams to help clients overcome their crises and move toward self-sufficiency through the provision of a variety of local services

including a weekly food pantry and employment services. Families referred by Marin CFS often continue with NHH without further agency intervention.

Canal Alliance, a non-profit in the canal area of San Rafael, braids the funding they receive from CAPIT with other resources to provide prevention services including case management and referrals to services for at-risk families. The agency's ongoing support along with services such as parenting classes, domestic violence support groups, batterers' treatment programs, housing and employment support, and immigration services.

Alternative Family Services' Independent Living Program and Transitional Housing Placement-Plus Provider, provide supportive services to youth preparing to emancipate from the foster care system. Services include: basic independent living skills, educational support and advocacy, employment services, housing and linkage to other services as needed.

Apple Family Services provides parenting support and education, one on one coaching for parents served by Regional Centers, and counseling/therapy services for teens, adults, families, couples and children.

Bay Area Community Resource provides drug and alcohol use assessment, referral and treatment to adults and youth in Marin. In addition, they provide tutoring and counseling in many schools in San Rafael.

Prevention Education Including Outreach Activities

Novato Human Needs and Canal Alliance both offer an array of culturally sensitive site based services in both Spanish and English. They each offer weekly food pantries and serve over 200 families at each agency. Both agencies utilize the pantry as an opportunity to engage families in other prevention based activities.

The Center for Domestic Peace provides support to families experiencing domestic violence and offers counseling, shelter and batterers' treatment. Shelter services are an essential safety net providing safety and housing to women and their children.

MAC is the leading non-profit agency for the prevention of child abuse in the community. The CASA program advocates for the best interests of children who are dependents of the Marin Juvenile Court, helping to ensure they have a chance to live in a safe and permanent home. The CAPC program helps prevent child abuse through community education and training, and promotes policies and services that help support families and children.

Marin Family Connections is a resource for families and providers who are concerned about a child's health, development, behavior, and/or learning ability. This organization collaborates with schools, the local regional center and Matrix Parent Network and Resource Center, to assist parents of children with learning disabilities. Marin Family Connections also assesses

needs and makes referrals for services to health practitioners; they have regular meetings with the community allowing collaboration of several organizations serving families.

The Marin County Office of Education serves homeless youth. Marin CFS maintains a collaborative relationship with those doing this work.

Homeward Bound & Ritter Center offer homeless services for individuals and families. These services are coupled with case management, mental health support services and other resources focusing on helping the family identify and maintain stable affordable housing.

Community-Based Organizations

Canal Alliance is a comprehensive community resource center that develops self-sufficiency and leadership in Marin's low-income immigrant populations through access to health and social services, youth development, economic security, and citizenship. Services include academic and leadership training for youth and family empowerment through case management, domestic violence support groups, English as a Second Language classes, small business training, technology training, immigration legal services and emergency food distribution. Canal Alliance addresses each family's full range of needs.

Center for Domestic Peace is Marin's provider of services to families that are experiencing domestic violence. They offer 24 hour services, including shelter, education and groups for families.

Center for Restorative Practice (CFRP) is dedicated to restorative, team-based and collaborative responses to family problems. Their "Family Network®" model of family group decision-making has been the centerpiece of Marin County's "Youth Pilot Project" since its inception. The goals of CFRP have been to reduce Marin County's overall out-of-home placement rates and help families succeed in reducing the "risk factors" that brought the minor or family to the attention of child welfare, juvenile justice, mental health and special education systems.

Seneca Center is Marin County's provider of its second wraparound program. Seneca uses savings from the wrap program to provide trauma based therapy to children, kinship search and assistance to relative caregivers among other services. This service array is guided by a counsel including CFS, Mental Health and Probation.

Family Service Agency of Marin provides individual and group counseling services including Parent Child Interactive Therapy to at-risk families in Marin County on a sliding scale. They also accept Medi-Cal.

APPLE Family Center Provides many family oriented services including parenting support and education, one on one coaching for parents served by Regional Centers, and Psychotherapy Services for teens, adults, families, couples and children.

Alternative Family Services is the provider for Marin County's Independent Living Skills and Transitional Housing Placement - Plus placement services.

Homeward Bound provides transitional housing and supportive services to both individuals and families.

Ritter Center provides supportive housing, case management, and mental health services to individuals and families.

Salvation Army provides after school activities to low income families as well as a weekly food pantry for those in need.

Reunification Services

Marin County CFS provides a full array of reunification services beginning with a case plan that the social worker creates in close collaboration with the parents. Services identified in the case plan are either delivered by the agencies identified above or directly by the social worker. When a family is being provided with reunification services, the children are also receiving concurrent planning services. These services are provided by an assigned adoption worker as well as staff from Seneca Center who do case mining and interviewing to find a family who might provide a home or permanent connection.

Marin also offers the SB 163 wraparound program. This program focuses on children/youth that are currently served by the courts. The entrance criteria are that the child/youth must be at-risk of a higher level placement. Marin's provider for this program is Seneca Center. Seneca provides in-home team meetings to engage the parents and help them talk about their needs and what will help them. Like YPP, meetings include parents, social workers, probation officers, school personnel, therapists, friends and family. Seneca staff provides the services the family needs and offer a 24 hour response team to respond to emergencies. Services range from in home parenting education to trauma based therapy.

Marin collaborates with Drug and Alcohol treatment providers on a regular basis, including: Centerpoint, The Vine Detox center,(all private treatment programs) and Bay Area Community Resources (evaluation and referral for drug alcohol problems), Mental Health and Substance Use Services providers, private therapists, and CalWORKs staff. CFS has a list of local psychologists that are used for completing psychological evaluations for children and parents, and uses in house Mental Health Practitioners to complete early evaluations.

Adoption Services

Marin County CFS provides adoptive services. The adoption workers are assigned to all reunification cases after the detention hearing. They provide concurrent planning, search for adoptive homes and counsel families who wish to adopt. After adoption is ordered as the plan, the adoption workers carry a case until the adoption is finalized. Once the adoption is finalized and the case dismissed, services are limited to the provision of Adoptions Assistance Program

funding unless the family experiences deeper need. An adoption case can be given more active services at any time that is necessary. PSSF funds support both pre and post adoptive families linkage to services needed such as counseling and/or tutoring.

Kinship Care Services

Seneca Center provides services to kin caregivers including caregiver education and mentoring, family activities and individualized coaching. CFS workers provide Kinship Guardianship Assistance Payment Program funding services to families who have met the criteria for the program.

Independent Living Skills

Independent Living Program (ILP) services are provided through a contract with Alternative Family Services, a local community based organization. The program serves youth 16 to 21. Two ILP coordinators provide individual support services, as well as ongoing workshops, classes, and team building activities.

Permanency Planning Services

Services for youth are provided in Marin County by CFS ongoing social workers. Workers continually assess the possibility of greater permanency for youth in consultation with adoption workers as well as continuing to assess the possibility of a return to the parent. They search for kin and lifelong connections and make sure that the youth is being served by Alternative Family Services, the organization that provides Independent Living Skills in Marin.

Programs and Services That Address the Populations at Greatest Risk of Maltreatment

Marin's high-risk families are served by most of the community organizations listed above. Novato Human Needs works with families in Novato and surrounding communities. Canal Alliance works primarily with families in San Rafael. Marin City Health & Wellness Center works with at-risk families in the southern part of Marin County. In addition, CFS also supports a collaborate project with Marin City schools to assist at-risk families in Marin City. All of these agencies attempt to provide services in a culturally sensitive manner, providing staff that is culturally similar to the population they serve.

Culturally Appropriate Services Available in the County to Meet the Needs of Ethnic and/or Minority Populations

See Above. In addition, CFS currently works in close collaboration with Martin Luther King Academy in Marin City, and has out stationed a bachelor's level social worker to help link families who have children who are struggling in school with needed resources. The social worker was raised in Marin City and is sensitive to the needs of the African American families living in this small close knit community.

Programs that Target Hard-to-serve Populations, such as Older Children, Foster Youth with Non-dependent Children, GLBTQ Youth, Sex Offenders, and/or Children with Special Needs

Due to the diversity of these populations, social workers and probation officers will work with current service providers to provide tailored services to meet the child/youth's needs.

Services Available to Children and/or Caregivers with Physical, Mental or Other Disabilities

Golden Gate Regional Services provides services for adults and children with developmental disabilities. Parent partners are provided to parents with developmental disabilities through Apple Family Works. Marin Center for Independent Living provides services to assist those with access or mobility issues to maintain optimal independence.

Services Available for Native American Children

There are no specific services for this population, but at-risk Native American families are able to access any of the services in their community of residence.

Services Available for Children with Disabilities and their Families

- Early Start (Regional Center)
- Easter Seals
- Family Service Agency
- Buckalew (Transitional Age Youth)
- Public Health Nurse-CA Children's Services (works with Probation and CFS)

CAPIT/CBCAP/PSSF SERVICES AND EXPENDITURE SUMMARY (WORKSHEETS)

Please see Attachment 8 which contains an embedded file.

MARIN COUNTY SYSTEM IMPROVEMENT PLAN

Attachments

Attachment 1: 5 – YEAR SIP CHART

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

National Standard: 94.6%

Current Performance: According to the Quarterly Data Report (Quarter 4, 2012), of the 126 children who had substantiated referrals, 108 had no recurrence of maltreatment. This is an 85.7% rate of no recurrence.

Target Improvement Goal: Marin County will improve its performance on this measure from 85.7% to 95%, resulting in 12 more children not experiencing a recurrence of maltreatment.

Priority Outcome Measure or Systemic Factor: C1.4 Re-entry following Reunification

National Standard: 9.9%

Current Performance: According to the Quarterly Data Report (Quarter 4, 2012), of the 32 children who were discharged from foster care to reunification, 8 re-entered within 12 months from their earliest discharge. This is a 25.0% rate of re-entry within 12 months.

Target Improvement Goal: Marin County will improve performance on this measure from 25% to 10%, resulting in 3 less child reentering within 12 months.

Priority Outcome Measure or Systemic Factor: 2B Timely Response (10 day response)

National Standard: N/A

State Goal: 90%

Current Performance: Below is the trend over the past six years.

Quarter	JAN2008-MAR2008	JAN2009-MAR2009	JAN2010-MAR2010	JAN2011-MAR2011	JAN2012-MAR2012
Timely Response	88.5 %	82.3 %	90 %	94.4 %	88.6 %
	81 %				

Target Improvement Goal: Marin County will improve its performance on this measure by maintaining a 90% or greater rate each month.

5 – Year SIP Chart Child Welfare

PLEASE NOTE THAT IN THE FOLLOWING MATRIX THAT THE DATE LISTED IS THE DATE THAT IS LISTED IS THE COMPLETION DATE AND IF IT IS ONGOING THAT IS FURTHER IDENTIFIED.

Strategy 1: Strengthen cohesiveness of child welfare supervisory team.	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): <i>S1.1-Recurrence of Maltreatment</i> <i>C1.4-Re-entry following Reunification</i> <i>2B- Timely Response (10 day response compliance)</i>
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Bring together supervisory and management team to identify common vision and goals. Utilize SIP to inform development of strategic plan.	January 2014 - March 2014	Program Manager II
B. Utilize Leadership meetings as an opportunity to promote increased use of SOP tools and consistent use of SDM tools as part of data review, case assessment and supervision with staff.	April 2014 and monthly thereafter	Program Managers
C. Implement strategies identified in the plan with supervisors and staff.	June 2014	Program Managers
D. Assess and Evaluate the implementation strategies as part of bi-monthly Leadership Team meetings and track and monitor the increased use of SDM and SOP Tools	August 2014 and monthly thereafter	Program Managers
D. Provide supervisor coaching and training.	June 2014 and ongoing	Training Supervisor, Bay Area Academy, Consultant

structured system of management case review for all cases where there is recurrence or reentry and continue implementation of the Administrative Review Process for all cases preparing for reunification.

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

Applicable Outcome Measure(s) and/or Systemic Factor(s):
S1.1-Recurrence of Maltreatment
C1.4-Re-entry following Reunification

Action Steps:	Timeframe:	Person Responsible:
A. Establish a Management Review Team.	January 2014	Program Manager
B. Develop management review policy and protocol and review with staff.	January 2014-February 2014	Program Manager
C. Implement management review process.	March 2014	Program manager and assigned lead
D. Continue Administrative case reviews.	January 2014-ongoing	Lead worker and Program Manager
E. Track outcomes of reunification cases reviewed at the Administration Review to see if process is reducing re-entry.	June 2014 and quarterly thereafter	Lead worker and Program Manager
F. Document lessons learned from both Administrative reviews and Management reviews	June 2014 and quarterly thereafter	Program Manager
G. Review lessons learned from the Management Case Reviews of Recurrence of maltreatment referrals with Leadership Team and identify policies and/or practice changes that are needed	January 2015	Program Manager
H. Document policy/practice change and distribute to staff. Provide training as needed.	June 2015	Program Manager
I. Evaluate if the changes have	January 2017	Program Manager

compliance with the use of standardized assessment tools and use of SOP best practices throughout the child welfare continuum.	<input type="checkbox"/> CBCAP	Applicable Outcome Measure(s) and/or Systemic Factor(s): <i>S1.1-Recurrence of Maltreatment</i> <i>C1.4-Re-entry following Reunification</i>
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	

Action Steps:	Timeframe:	Person Responsible:
A. Review and re-issue policy regarding use of standardized assessment tools.	January 2014 - March 2014	Program Manager and SDM Lead
B. Gather baseline compliance numbers and goals	March 2014	Program Manager and SDM Lead
B. Provide support to staff and necessary refresher training to staff to ensure compliance with the use of standardized tools.	April - May 2014	SDM Staff Lead in conjunction with Training Supervisor and Unit Supervisors
C. Provide regular updates to management regarding the compliance levels.	June 2014 and quarterly thereafter	Program Managers
D. Train staff on utilization of SOP tools to develop effective safety plans that reflect what parents need to maintain the safety of their children in their homes.	June 2014 and on an as needed basis	Training Supervisor, SOP Lead, Bay Area Academy
E. Conduct random reviews to determine that SOP language is incorporated beginning at intake and throughout case (in Case Plans, Court Reports, and other CWS documents.)	June 2016 - December 2016	Training Supervisor, SOP Lead, Bay Area Academy
F. Provide additional training to staff on any gaps	February 2017 and ongoing	Training Supervisor, SOP Lead, Bay Area Academy

Strategy 4: Assess existing ER/Court structure and make recommendations for changes to improve flow of ER assignments.	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): <i>2B Timely Response (10 day referral)</i>
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Assess existing ER/Court structure, explore how other counties with similar demographics are structured, and identify recommendations for change.	Jan 2014 – September 2014	ER & Ongoing Supervisor
B. Once recommendations are made a small scale pilot will occur using the proposed new ER/court structure.	September 2014 - June 2015	ER & Ongoing Supervisor
C. After the pilot reconvene work group to make recommendations for modification and expansion of the pilot structure.	June 2015 - December 2015	ER & Ongoing Supervisor
C. Implement large scale changes.	January 2016 - June 2016	ER & Ongoing Supervisor
D. Assess functionality of new structure and review and track impact on ER compliance with 10 day referrals	June 2016 and ongoing	Supervisors & Managers

Strategy 5: Increase family engagement through the provision of more systematic facilitated family meetings incorporating principles of Safety Organized Practice with other best practice models for family conferencing/teaming.

- CAPIT
- CBCAP
- PSSF
- N/A

Applicable Outcome Measure(s) and/or Systemic Factor(s):
S1.1-Recurrence of Maltreatment
C1.4-Re-entry following Reunification

Action Steps:	Timeframe:	Person Responsible:
<p>A. Research and review existing family meeting models such as Team Decision Making and Family Group Conferencing and determine model best suited to meet the County's needs.</p>	<p>January 2014 – June 2014</p>	<p>Training Supervisor and Leadership Team</p>
<p>B. Adapt model to incorporate SOP principles.</p>	<p>July 2014-January 2015</p>	<p>Manager and Training Supervisor</p>
<p>C. Develop written policy for use of family meetings.</p>	<p>January 2015-June 2015</p>	<p>Manager and Training Supervisor</p>
<p>D. Train staff and community partners in the family meeting model, providing coaching as needed.</p>	<p>June 2015 – September 2015 and ongoing</p>	<p>Training Supervisor and staff lead</p>
<p>E. Identify staff to pilot family meeting model.</p>	<p>September 2015 - November 2015</p>	<p>Training Supervisor and staff lead</p>
<p>E. Conduct a pilot of family meetings</p>	<p>November 2015- January 2016</p>	<p>Staff and Community members</p>
<p>F. Gather lessons learned from pilot and make needed modifications, implement across the agency.</p>	<p>January 2016 - December 2016</p>	<p>CFS Leadership Team, Staff and Community members</p>
<p>F. Evaluate effectiveness of meetings by tracking participation of family and community members and</p>	<p>December 2016 and quarterly thereafter</p>	<p>CFS staff TBD</p>

Strategy 6: Build community awareness of child abuse and neglect through the provision of local child welfare data and mandated reporter training, especially in the services areas of domestic violence and substance abuse treatment where there are identified service gaps/challenges. Strengthen collaboration with the Court and key agencies across the County who serve at risk families and children.	<input type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): <i>S1.1 No Recurrence of Maltreatment</i> <i>C1.4-Re-entry following Reunification</i>
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Identify and reach out to key child and family serving agencies, including Alcohol and Other Drugs and Domestic Violence and initiate dialogue and promote opportunities for increased collaboration and coordination, including participation in team meetings and cross training.	February 2014	Program Manager II
B. Establish regular collaborative meetings with the Court and key agencies to provide a venue for data sharing, problem resolution, increased engagement, coordination, and agency cross training.	March 2014 - June 2014 monthly June 2014 quarterly ongoing	Program Managers
C. Evaluate whether action plan was effective in increasing services and/or collaboration with key partners and resulted in improvement in outcomes.	January 2015 and quarterly ongoing	Program Manager II

Strategy 7: Review and evaluate the Differential Response model currently in practice to determine effectiveness and make modifications as determined appropriate.	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): <i>S1.1 No Recurrence of Maltreatment</i>
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Analyze current Differential Response model and its effectiveness in preventing recurrence of maltreatment.	June 2015 - December 2015	Program Manager and Supervisor
B. Identify areas that require modification and develop plan of correction. Determine next steps.	January 2016 - March 2016	Program Manager and Supervisor
C. Implement changes as identified in B.	April 2016 - June 2016	Program Manager, Supervisor, Staff
D. Evaluate the program by reviewing its effectiveness in preventing recurrence of maltreatment	June 2017 - June 2018	Program Manager

Strategy 8: Work in collaboration with Mental Health partners to increase access and linkage to children’s mental health services through implementation of Katie A required practices: <ul style="list-style-type: none"> • Timely screening and of all children with open CFS cases (VFM,FM,RR) • Completion of mental health assessments and connection to services • Connection to mental health services 	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): <i>C1.4 Re-entry following Reunification</i>
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Develop collaborative forum with mental health partners to increase access and linkage to children’s mental health.	January 2014	Program Manager and Children’s Mental Health
B. Implement collaborative forum and utilize forum to develop protocols and policies for staff in each agency, CFS and Mental Health to implement Katie A. required practices.	January 2014 - June 2014	Program Manager and Children Mental Health
C. Cross train staff regarding policies and protocols.	May 2014 - December 2014	Program Manager and Children’s Mental Health Staff, Training Supervisor
D. Implement policies and protocols that serve children in need of mental health services.	January 2015	Program Manager and Children’s Mental Health
E. Through collaborative forum, monitor process and modify as needed.	January - June 2015	Program Manager, Children’s Mental Health and collaborative forum partners
F. Track number of children served and outcomes of children receiving required mental health services.	January 2016 and yearly there after	Program Manager

5 – Year SIP Chart Probation

Priority Outcome Measure or Systemic Factor: C1.1 - Reunification within 12 months) Exit Cohort

Of all children discharged from foster care to reunification during the year who had been in foster care for 8 days or longer, what percent were reunified in less than 12 months from the date of the latest removal from the home?

National Standard: 75.2%

Current Performance: According to the Quarterly Data Report (Quarter 4.2012), of the 11 children who were discharged from foster care to reunification 7/1/12 to 6/30/13, 3 were reunified within 12 months from their latest removal. This is a 27.3% rate of reunification within 12 months.

Target Improvement Goal: Marin County Juvenile Probation will improve performance on this measure from 27.3% to 75.2%, resulting in 6 more children reunifying.

Strategy 9: There is an existing parent support group that meets monthly. This strategy is designed to enhance the success of this program.	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): C1.1 Reunification within 12 months
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Identify an organization to assist in the assessment, including recommendations for modifications to the Parent Support Group.	December 2013- January 2014	Juvenile Division Director
B. Organization to conduct interviews with Probation Officers, facilitators of the group, and families to determine what is working and what isn't.	January 2014 - March 2014	Juvenile Division Director
C. Develop a plan to modify the parent support group based on the feedback.	March 2014 - June 2014	Juvenile Division Director
D. Implement the plan.	July - December 2014	Placement Supervisor
E. Conduct interviews with Probation Officers, facilitators of the group, and families to determine if changes have been successful.	January 2016	Juvenile Division Director
F. Make modifications as necessary	March 2016 and ongoing	Placement Supervisor

Strategy 10: Explore and implement strategies to engage youth	<input checked="" type="checkbox"/> CAPIT	Applicable Outcome Measure(s) and/or Systemic Factor(s): C1.1 Reunification within 12 months
	<input type="checkbox"/> CBCAP	
	<input type="checkbox"/> PSSF	
	<input checked="" type="checkbox"/> N/A	
Action Steps:	Timeframe:	Person Responsible:
A. Visit programs such as V.O.I.C.E.S and CHALK to identify the program that could best meet the needs of Marin County.	June 2014 - September 2014	Juvenile Division Director
B. Develop a plan to implement a youth engagement program that is realistic within budgetary and staffing constraints.	September 2014 - January 2015	Juvenile Division Director
C. Develop training for staff and community partners to assist in the implementation of the plan.	February 2015	Juvenile Division Director
D. Implement the plan.	March 2015	Placement Supervisor
E. Evaluate the effectiveness of the plan by way of surveys and focus groups.	March 2016 and ongoing	Placement Supervisor

Attachment 2: CAPIT/CBCAP/PSSF Program and Evaluation Description

Program Description	Program Name	<p>Youth Pilot Project (YPP)</p> <p>CAPIT/CBCAP/PSSF Expenditure Workbook Line # 1</p>
	Service Provider	Center for Restorative Practice
	Program Description	<p>The Youth Pilot Project (YPP) serves as a tool to prevent out of home placement. It is a voluntary program offered to families receiving family maintenance services and to children in foster care or adoptive placements to help prevent placement in a higher level of care. The program is also available to families and children served by juvenile probation system.</p> <p>Services are provided on site at the Agency rather than in the home, so families must commit to attending the meetings. Families begin with an orientation where the facilitator assists them to select their support team. Parents often select, as a part of their team, relatives or friends, along with school personnel and staff who have already assisted them. The case manager or referent is always included on the team.</p> <p>The regular meetings utilize a facilitated family group conferencing model. At each meeting the families' strengths and needs are discussed; families identify what they need help with and the resources and services they believe will help them. The group discusses the needs and each person in the group takes some responsibility for helping the family. The family may be linked with a community parent partner, a mentor, therapist, public health nurse or tutor. The cost of these services is covered as part of the program and other services can be provided as well.</p> <p>As we move forward, an increased emphasis will be placed on linking families who are preparing to reunify with their children to this program as a means to help the family establish the safety network that is needed to help prevent re-entry.</p>

<p>OCAP Funding Source(s)</p>	<p>This program is supported by a combination of PSSF and County dollars:</p> <p>PSSF Family Preservation: Parent education, parent support, case management, home visiting</p> <p>PSSF Family Support: Parent education, parent support, case management, home visiting</p> <p>PSSF Time-Limited Family Reunification: Parent education, parent support, case management, home visiting specifically targeting families approaching reunification and/or families just reunified</p>
<p>Identified Priority Need Outlined in CSA</p>	<p>One of the top five strengths in serving the community of Marin as identified in the County Self-Assessment (CSA) is "Teaming and collaboration" (page 5). The Youth Pilot Project helps satisfy this priority need. Our CSA noted that the provision of mental health services via wraparound has contributed to strengthening the outcome of no recurrence of maltreatment (page 73).</p>
<p>Target Population</p>	<p>Families with children in the child welfare or probation systems who are at risk of imminent removal of their child(ren).</p> <p>Families in the child welfare system who are preparing for or just recently reunified with their children.</p> <p>Adoptive or relative families who need services to prevent the disruption of an established permanent plan.</p>
<p>Target Geographic Area</p>	<p>County-wide</p>
<p>Timeline</p>	<p>July 2013-June 2015</p> <p>This is an existing program. Over the 2013/2014 fiscal year we will be re-evaluating this program model, identified target population and outcomes to ensure that it aligns with the community and department's needs.</p> <p>It is anticipated that a new RFP will be issued in either year two or year three of the sip timeline.</p>

Evaluation	Program Outcome(s)	<p>Intended outcomes are:</p> <ul style="list-style-type: none"> ▪ Family has an identified support network by developing a safety plan, so that the family can practice the safety plan while we are partnering with them. This provides a very solid safety plan As evidenced by participation of their network, ▪ Family is engaged in services as evidenced by regular attendance; ▪ Family enlists support network and utilizes skills learned in times of high stress or crisis; ▪ Children remain safely in their homes; ▪ Decreased involvement with CFS or Probation as evidenced by reduced rates of recurrence and re-entry.
	Quality Assurance (QA) Methods/Tracking Tools	<p>The Center For Restorative Practice utilizes several methods to measure the effectiveness of the YPP program.</p> <p>One method includes taking detailed notes at each meeting which includes the mutually agreed upon “signs of success.” These are reviewed at subsequent meeting as a means to assess progress. This enables the agency to determine if the family is able to utilize support networks during times of high stress and to help the family make adjustments as needed. In addition, the child welfare case manager is present at each meeting to help facilitate further coordination and accountability.</p> <p>At a county level, the program will be evaluated by tracking cases to measure recurrence of maltreatment, level of placement, or re-entry CWS/CMS to see if there is recurrence of re-entry.</p> <p>As we begin a closer reevaluation of this program, it will be important to convene our collaborative WRAP partners to discuss how best to align this program with the County WRAP program. The WRAP partners include: mental health, child welfare, school representatives, and the local child abuse prevention council and parent partner representatives.</p>
	Client Satisfaction	<p>The program design allows for continuous client feedback as part of the Family Group Conferencing model. Both parents and children are routinely encouraged to share their feedback as part of the process. This continuous feedback enables facilitators to incorporate client feedback on a flow basis, creating a sense of empowerment and ultimately increasing client engagement.</p>

Program Name	Marin Adoption Support Program
Service Provider	Seneca Family of Agencies CAPIT/CBCAP/PSSF Expenditure Workbook Line # 2
Program Description	Marin's adoption support program will provide services and support to help remove barriers to adoption or provide support when needed to help adoptive families meet the unusual and extraordinary needs of adoptive children that cannot be met through the Adoption Assistance Program or other adoption related funding sources. Seneca will hold regular adoption support groups and provide case management to local adoptive families when needed. For families who do not live in Marin, Seneca will assist families with accessing services in their local communities.
OCAP Funding Source(s)	PSSF-Adoption Promotion & Support- pre/post adoptive parent support, case management, specifically targeting adoptive families.
Identified Priority Need Outlined in CSA	Access to services remains a service priority in Marin County and this is especially important for per and post adoptive families who may be challenged to identify the appropriate resources and support that they need. Case management and support can help facilitate the adoption process and is an essential service to help prevent disruption.
Target Population	Pre-adoptive families who may need assistance with removing barriers to adoption and post adoption support to help families stabilize their family functioning.
Target Geographic Area	Case management services will be provided to families in or near Marin County. Phone support and assistance will be provided to families living outside Marin, including those living out of state.

Timeline	January 2014-January 2019
Program Outcome(s)	<ul style="list-style-type: none"> • Expedite adoptions by removing barriers for adoptive families • Reduce number of youth going into group homes • Reduce AAP Wrap referrals • Increased services to post adopt families
Quality Assurance (QA) Methods/Tracking Tools	CFS will develop a database to track the number of families we refer to Seneca. Seneca will develop a database to track the number of families served per month, the presenting issues as well as outcomes for each family served, and provide CFS with service termination summary for those requiring case management services.
Client Satisfaction	Seneca will develop and administer a client satisfaction survey upon termination of services.

Program Description	Program Name	<p>Amigos de Familia Program</p> <p>CAPIT/CBCAP/PSSF Expenditure Workbook Line # 3</p>
	Service Provider	Novato Human Needs
	Program Description	<p>The Novato Human Needs (NHN) Amigos de Familia Program provides culturally sensitive, including bilingual, home based case management services and support to high risk families who have been referred to Children and Family Services due to child abuse or neglect, but don't have an open child welfare services case. Services are provided to families residing in Novato and neighboring communities.</p> <p>In addition to home visiting, NHN is able to access a variety of funding streams to help clients overcome their crises and move toward self-sufficiency through the provision of and/or linkage to a variety of local services, such as: a weekly food pantry and employment services.</p> <p>Families referred by Marin CFS often continue with NHN Center without further agency intervention. The Center offers additional services as well.</p>
	OCAP Funding Source(s)	<p>CAPIT funding: Case Management, Parent Education, Parent Support, Transportation, Home Visiting, Concrete Supports (food pantry), Adult Education (employment skills development)</p> <p>Novato Human Needs also leverages private dollars</p>
	Identified Priority Need Outlined in CSA	<p>This program addresses three of the top five barriers for serving the community of Marin as identified in the CSA: lack of multi-cultural service options in the community, access to services (including transportation) and the high cost of living in Marin Co. (affordable housing, poverty) (page 5).</p> <p>Our CSA showed the need to strengthen collaboration with agencies serving mono and bi-lingual families (page 11). In 2010, Hispanic births made up 29% of the overall live births. Additionally, the overall youth population is made up of 22% Hispanic children. Spanish is the main non-English language spoken in Marin at 11.7%.</p> <p>Adequate public transportation is an issue, not only for accessing</p>

		<p>services but for meeting the basic needs of families.</p> <p>Our CSA identified poverty as a stressor on many families. According to the US Census 27% of Marin families live in poverty, with 12% of children living in concentrated poverty (page 16). There was a significant increase in the use of food stamps which increased from 2% in 2009 to 24% in 2011 (page 21).</p> <p>Our CSA discussed that when families live in an impoverished neighborhood, there can be a lack of quality and affordable child care and pre-schools, lack of food programs, and lack of after school programs.</p> <p>The Amigos de Familia Program provides services that are identified priority needs from the CSA.</p>
	Target Population	Families referred by Marin CFS who do not have an open CWS case.
	Target Geographic Area	Novato and neighboring communities throughout Marin County (West Marin excluded due to geographical barriers)
	Timeline	January 2014-December 2018
Evaluation	Program Outcome(s)	<p>Intended outcomes are:</p> <ul style="list-style-type: none"> ▪ Families remain engaged in the Program and link with other services NHN offers ▪ Families are linked to services in the Community ▪ No recurrence of maltreatment as tracked through our database CWS/CMS
	Quality Assurance (QA) Methods/Tracking Tools	<p>The following methods will be used:</p> <ul style="list-style-type: none"> ▪ Quarterly site visits with NHN to review case documentation and contract compliance ▪ Linkage to relevant training ▪ Tracking of client participation levels ▪ Review of monthly invoices <p>Quarterly meetings with the agency provide an opportunity to identify and discuss any challenges they may experience in meeting their contract requirements. If issues exist, these meetings provide the opportunity to have open dialogue about how to resolve the issues and</p>

		develop a plan if necessary.
	Client Satisfaction	<p>Client satisfaction is measured in two ways:</p> <ul style="list-style-type: none">▪ Clients' continued participation in the program (as it is voluntary)▪ Satisfaction surveys that are administered at the end of the program. <p>Satisfaction Surveys will be used to determine the level of clients' engagement with the program as well as their satisfaction with the program.</p>

Program Description	Program Name	<p>Case Management, Family Counseling, Parent Education, Parent Support, Domestic Violence Services, Advocacy (Immigration Services)</p> <p>CAPIT/CBCAP/PSSF Expenditure Workbook Line # 4</p>
	Service Provider	Canal Alliance
	Program Description	<p>Canal Alliance, a community based organization in the Canal area of San Rafael, leverages the small amount of funding it receives from CAPIT with other resources to provide an array of culturally sensitive prevention and early intervention based services including case management and referral to at- risk families. The organization has a strong presence in the community and serves as a resource hub for families, offering services such as: parenting classes, domestic violence support groups, batterers' treatment programs, housing and employment support, immigration services, and the operation of a weekly food pantry.</p>
	OCAP Funding Source(s)	<p>CAPIT funding, \$20,000 per year, is leveraged with County General Funds plus private foundation dollars. Activities to be provided include: Case Management, Family Counseling, Parent Education, Parent Support, Domestic Violence Services, Advocacy (Immigration Services)</p>
	Identified Priority Need Outlined in CSA	<p>This program addresses three of the top five barriers for serving the community of Marin as identified in the CSA: lack of multi-cultural service options in the community, access to services (including transportation) and Marin's high cost of living (lack of affordable housing, hidden poverty) (page 5).</p> <p>Our CSA showed the need to strengthen collaboration with agencies serving mono and bi-lingual families (page 11). In 2010, Hispanic births made up 29% of the overall live births. Additionally, overall youth population is made up of 22% Hispanic children. Spanish is the main non-English language spoken in Marin at 11.7%.</p> <p>Adequate public transportation is an issue, not only for accessing services but for meeting the basic needs of families</p> <p>Our CSA identified poverty as a stressor for many families. According to</p>

		<p>the US Census 27% of Marin families live in poverty, with 12% of children living in concentrated poverty (page 16). There was a significant increase in the use of food stamps which increased from 2% in 2009 to 24% in 2011 (page 21).</p> <p>Our CSA discussed that when families live in an impoverished neighborhood, there can be a lack of quality and affordable child care and pre-schools, lack of food programs, and lack of after school programs.</p> <p>The Canal Alliance Program provides services that are identified priority needs from the CSA.</p>
	Target Population	This program targets low income immigrant families at risk of CFS involvement and families already involved with CFS seeking supportive services.
	Target Geographic Area	San Rafael
	Timeline	January 2014-January 2019
Evaluation	Program Outcome(s)	<p>Intended outcomes are:</p> <ul style="list-style-type: none"> ▪ Monolingual families are linked with culturally sensitive case management services; ▪ Isolated At Risk monolingual Families, experiencing multiple stressors are able to access services in their community (measured by service utilization); ▪ Reduction in recurrence and re-entry rates for this population (long-term outcome) as tracked through our database CWS/CMS.
	Quality Assurance (QA) Methods/Tracking Tools	<p>The following methods will be used:</p> <ul style="list-style-type: none"> ▪ Quarterly site visits with random case file review ▪ Track family participation levels in specific programs offered on site ▪ Satisfaction surveys <p>Quarterly meetings with the agency provide an opportunity to identify and discuss any challenges they may experience in meeting their</p>

		contract requirements. If issues exist, these meetings provide the opportunity to have open dialogue about how to resolve the issues and develop a plan if necessary.
	Client Satisfaction	<p>Client satisfaction surveys will be conducted annually.</p> <p>Feedback from client surveys will be used as a tool to identify program areas that need improvement and to determine if the appropriate services are being provided.</p>
Program Description	Program Name	<p>Network Development/Capacity Building CAPIT/CBCAP/PSSF Expenditure Workbook Line # 5</p>
	Service Provider	Marin Advocates for Children (MAC) (Child Abuse Prevention Council)
	Program Description	<p>Marin Advocates for Children (MAC) and its arm, the Child Abuse Prevention Council (CAPC) serves as the independent voice for victims of child abuse and neglect, and the leading non-profit agency for the prevention of child abuse in the community.</p> <p>CAPC offers a series of community based workshops that are available to both community providers and families. Workshops focus on a variety of topics that increase caregivers and providers understanding of the impact of child abuse, family violence, and child trauma. Other workshop topics include understanding the special education process and issues/ resources for the homeless population. All workshops aim at ensuring that community providers have the tools to better support at-risk families and children.</p> <p>In addition, when CAPC provides mandated reporter training (funded through County dollars) throughout the County. The trainings are typically complemented by an overview of the dynamics of child abuse and neglect that helps to increase the attendees understanding of their role in helping to prevent child abuse and neglect, as well as, promote policies and services that help support families and children.</p> <p>MAC also oversees the Court Appointed Special Advocates (CASA) program which advocates for the best interests of children who are dependents of the Marin Juvenile Court, helping to ensure they live in a safe and permanent home.</p>

<p>OCAP Funding Source(s)</p>	<p>CBCAP funds & Children's Trust Fund dollars are leveraged with County dollars and private donations. CBCAP funded activities focus on Network Development/Capacity Building. C-CTF: activities include Mandated Reporter Training, CASA</p>
<p>Identified Priority Need Outlined in CSA</p>	<p>The priority need was identified as a continued community based support for families. This program addresses the need for continued education for the community regarding the identification, prevention and when necessary how to refer to the child welfare system. This information is taught to community service providers and educators who often see the children on a daily basis, providing them with the necessary knowledge to assist families.</p> <p>This program addresses two of the top five barriers for serving the community of Marin as identified in the CSA: lack of multi-cultural service options in the community (trainings are provided in English or Spanish) , ability to access services (local providers are trained increasing their capacity to better serve families locally in the communities where they live).</p> <p>Our CSA showed the need to strengthen collaboration with agencies serving mono and bi-lingual families (page 11). In 2010, Hispanic births made up 29% of the overall live births. Additionally, overall youth population is made up of 22% Hispanic children. Spanish is the main non-English language spoken in Marin at 11.7%.</p> <p>Public transportation is an issue, not only for accessing services but for meeting the basic needs of families.</p> <p>Our CSA identified poverty as a stressor on many families. According to the US Census 27% of Marin families live in poverty, with 12% of children living in concentrated poverty (page 16). There was a significant increase in the use of food stamps which increased from 2% in 2009 to 24% in 2011 (page 21).</p> <p>Our CSA discussed that when families live in an impoverished neighborhood, there can be a lack of quality and affordable child care and pre-schools, lack of food programs, and lack of after school programs.</p> <p>Foster youth identified in the CSA that all children and youth should have a CASA appointed. They identified that CASA's were very supportive and listen to them regarding many things including whether they think that their parents are ready to reunify with them (page 86).</p>

	Target Population	<p>Community-based organizations serving at-risk families and children.</p> <p>Center-based and home-based child care and pre-school providers.</p>
	Target Geographic Area	County-wide
	Timeline	January 2014-January 2019
Evaluation	Program Outcome(s)	<p>Intended outcomes are:</p> <ul style="list-style-type: none"> ▪ Local agencies and organizations have a better understanding of the dynamics of child abuse and neglect and their role in prevention and early intervention as measured by survey results ▪ Local agencies have an improved understanding of CFS' role and how they can partner with us as measured by survey results
	Quality Assurance (QA) Methods/Tracking Tools	<p>The following methods will be used:</p> <ul style="list-style-type: none"> ▪ Planning meetings to strategize about where outreach is needed, and potential training topics; ▪ Quarterly site visits that include review of attendance sheets; ▪ Pre and post-tests; ▪ Increase in Council membership and participation. <p>Quarterly meetings with the agency provide an opportunity to identify and discuss any challenges they may experience in meeting their contract requirements. If issues exist, these meetings provide the opportunity to have open dialogue about how to resolve the issues and develop a plan if necessary.</p>
	Client Satisfaction	Informally, an Increase in Council membership and participation will be used to identify if agencies are satisfied with the trainings and workshops offered.

		<p>Satisfaction surveys will be used to formally evaluate client satisfaction. The results of the surveys will be used to evaluate the effectiveness and topic relevance of the workshops and trainings offered. These results will inform planning meetings for future workshops and trainings.</p>
--	--	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Program Name	Parent Strengthening Program
Service Provider	Marin Advocates for Children CAPIT/CBCAP/PSSF Expenditure Workbook Line # 5
Program Description	MAC oversees the Parent Strengthening Program, an evidence based child abuse/neglect prevention model based on the five protective factors. Classes are offered in coordination with the Perinatal Services Network, reaching providers and parents early. MAC coordinates the program, working with the Perinatal Network to identify training topics and guest speakers.
OCAP Funding Source(s)	CAPIT funding, Parent Education and Support
Identified Priority Need Outlined in CSA	<p>This program addresses two of the top barriers for serving the community of Marin, the lack of multi-cultural service options in the community to support families and a parent's access to services.</p> <p>The priority need focuses on building community based supports for families. This program addresses the need for continued education for the community regarding the early intervention and prevention of child abuse and neglect. This information is taught to community service providers, perinatal providers, and early childhood educators who have the opportunity to meet and or work with parents and see infants/children in on a routine basis, providing them with the necessary knowledge and tools to assist families.</p> <p>Our CSA showed the need to strengthen collaboration with agencies serving mono and bi-lingual families (page 11). In 2010, Hispanic births made up 29% of the overall live births. Additionally, overall youth population is made up of 22% Hispanic children. Spanish is the main non-English language spoken in Marin at 11.7%.</p>
Target Population	This program targets low income families at risk of CFS involvement, the service providers who work with them and the community at large.
Target Geographic Area	County wide with emphasis in San Rafael, where there is a high concentration of Hispanic immigrant families and a steady increase in the rate of Hispanic

	births.
Timeline	January 2014-January 2019
Program Outcome(s)	<p>Intended outcomes are:</p> <ul style="list-style-type: none"> ▪ Providers are trained to recognize children who may be at risk of abuse or neglect ▪ Monolingual families are linked with culturally sensitive case management services
Quality Assurance (QA) Methods/Tracking Tools	<p>The following methods will be used:</p> <ul style="list-style-type: none"> ▪ Track family participation levels in specific activities/programs offered on site ▪ Satisfaction surveys <p>Quarterly meetings with the agency provide an opportunity to identify and discuss any challenges they may experience in meeting their contract requirements. If issues exist, these meetings provide the opportunity to have open dialogue about how to resolve the issues and develop a plan if necessary.</p>
Client Satisfaction	<p>Client satisfaction surveys will be conducted annually.</p> <p>Feedback from client surveys will be used as a tool to identify program areas that need improvement and to determine if the appropriate services are being provided.</p>



Attachment 3: RESOLUTIONS DESIGNATING CAPC

Attachment 4: RESOLUTION DESIGNATING CCTF

Attachment 5: Rosters

C-CFSR PLANNING TEAM

Focus Area	Name	Organization
Child Welfare	Deborah Moss	Marin County Children and Family Services
CDSS	Christina Hoerl	CDSS - Outcomes and Accountability
CDSS	Julie Cocherton	CDSS - Outcomes and Accountability
CDSS	Theresa Sanchez	CDSS - Office of Child Abuse and Prevention
Probation	Kevin Lynch	Juvenile Probation
Probation	Selina Johnson	Juvenile Probation
Consultant	Lisa Molinar	Shared Vision Consultants

CORE REPRESENTATIVES

Required Participant	Name	Organization
Child Abuse Prevention Council Representative (and Children's Trust Fund)	Cyndy Doherty	Marin County Advocates for Children
County Board of Supervisor designated agency to administer CAPIT/CBCAP/PSSF Programs	Heather Ravani	Social Services, Marin County Health & Human Services
County Alcohol and Other Drugs (AOD) Department	DJ Pierce	Mental Health & Substance Use Services Marin County H&HS
County Health Department	Margaret Kisliuk	Marin County Health & Human Services
County Mental Health	Ann Pring	Youth & Family Services, MHSUS, Marin County H&HS

Juvenile Court Representatives	Mark Wasacz	Wasacz, Hilley and Fullerton Legal Counsel for Children
Parents/Consumers	Dorothy LaFrance	Marin County parent
Resource Families	Linda Gregory	Marin County Foster Parent Association
Law Enforcement	Angel Bernal	Mill Valley Police Department
Independent Living Skills	Patty Cala	Alternative Family Services
Community Based Organization/AOD	Mark Herring	Center Point
Community Based Organization/AOD	Harriet Gaines	Center Point
Foster Family Agency/Wraparound Provider	Katherine Schwartz	Seneca Family of Agencies
PSSF Recipient	Marcus Small	Center for Restorative Practice
Juvenile Court	Mark Wasacz	Wasacz, Hillary & Fullerton LLP
Education	Sarah Gaidano	Bahia Vista Elementary
Child Welfare	Bree Marchman	Marin County Children and Family Services
Community Partner, Transitional Aged Youth	Zara Balentze	Ambassadors of Hope and Opportunity (private, non-profit)
Education	Lisa Schwartz	Marin County Office of Education

11/17/21
TUESDAY

11/17/21

Attachment 6: Notice of Intent (NOI)

STATE OF CALIFORNIA – HEALTH AND HUMAN SERVICES AGENCY CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

BOS NOTICE OF INTENT

THIS FORM SERVES AS NOTIFICATION OF THE COUNTY'S INTENT TO MEET ASSURANCES FOR THE CAPIT/CBCAP/PSSF PROGRAMS.

CAPIT/CBCAP/PSSF PROGRAM FUNDING ASSURANCES FOR MARIN COUNTY

PERIOD OF PLAN 12/29/13 THROUGH 2/29/18

DESIGNATION OF ADMINISTRATION OF FUNDS

The County Board of Supervisors designates **Marin County Child and Family Services** as the public agency to administer CAPIT and CBCAP.

W&I Code Section 16602 (b) requires that the local Welfare Department administer the PSSF funds. The County Board of Supervisors designates **Marin County Child and Family Services** as the local welfare department to administer PSSF.

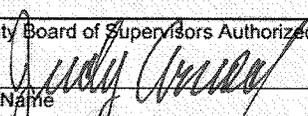
FUNDING ASSURANCES

The undersigned assures that the Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF) funds will be used as outlined in state and federal statute¹:

- Funding will be used to supplement, but not supplant, existing child welfare services;
- Funds will be expended by the county in a manner that will maximize eligibility for federal financial participation;
- The designated public agency to administer the CAPIT/CBCAP/PSSF funds will provide to the OCAP all information necessary to meet federal reporting mandates;
- Approval will be obtained from the California Department of Social Services (CDSS), Office of Child Abuse Prevention (OCAP) prior to modifying the service provision plan for CAPIT, CBCAP and/or PSSF funds to avoid any potential disallowances;
- Compliance with federal requirements to ensure that anyone who has or will be awarded funds has not been excluded from receiving Federal contracts, certain subcontracts, certain Federal financial and nonfinancial assistance or benefits as specified at <http://www.epls.gov/>.

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

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

County Board of Supervisors Authorized Signature		Date	12/17/13
Print Name	Judy Arnold	Title	PRESIDENT

¹ Fact Sheets for the CAPIT, CBCAP and PSSF Programs outlining state and federal requirements can be found at: <http://www.dss.ca.gov/hwnet/ga/cfswcb/PG2287.htm>

Attachment 7: BOARD OF SUPERVISORS' MINUTE ORDER/RESOLUTION

Attachment 8: CAPIT/CBCAP/PSSF EXPENDITURE WORKBOOK

CAPIT/CBCAP/PSSF Expenditure Workbook
Proposed Expenditures
Worksheet 1

(1) DATE SUBMITTED: 11/26/13
 (4) COUNTY: Marin

(2) DATES FOR THIS WORKBOOK: 12/29/13 thru 12/29/18
 (5) PERIOD OF SIP: 12/29/13 thru 12/29/18

(6) YEARS: 1-5

(3) DATE APPROVED BY OCAP: Internal Use Only

(7) ALLOCATION (Use the latest Fiscal or All County Information Notice for Allocation):

CAPIT: \$ 78,025

CBCAP: \$19,332

PSSF: \$115,797

No.	Program Name	Applies to CBCAP Programs Only	Name of Service Provider	Service Provider is Unknown, Date Revised Worksheet to be Submitted to OCAP	CAPIT		CBCAP		PSSF						OTHER SOURCES	NAME OF OTHER	TOTAL
					Dollar amount to be spent on CAPIT Programs	CAPIT is used for Administration	Dollar amount to be spent on CBCAP Programs	CBCAP is used for Administration	Dollar amount to be spent on Family Preservation	Dollar amount to be spent on Family Support	Dollar amount to be spent on Time-Limited Reunification	Dollar amount to be spent on Adoption Promotion & Support	Dollar amount of PSSF allocation to be spent on PSSF activities (Sum of columns G1-G4)	PSSF is used for Administration			
A	B	C	D1	D2	E1	E2	F1	F2	G1	G2	G3	G4	G5	G6	H1	H2	I
1	Youth Pilot Project		Center for Restorative Justice		\$0		\$0		\$34,739	\$34,739	\$23,159	\$0	\$92,637	\$23,160	County Dollars	\$115,797	
2	Marin Adoption Support Program		Seneca family of Agencies		\$0		\$0		\$0	\$0	\$0	\$23,159	\$23,159	\$0		\$23,159	
3	Amigos de Familia		Novato Human Needs		\$58,025		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$58,025	
4	Case Management, Family Counseling, Parent Ed, DV Services, Advocacy		Canal Alliance		\$20,000		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$20,000	
5	Network Development/Capacity Building	Network Development	Marin Advocates for Children		\$0		\$19,332		\$0	\$0	\$0	\$0	\$0	\$0	County Dollars & Trust Fund	\$50,000	
6	Parent Strengthening Program (See Line 5, funds are blended)	Direct Service	Marin Advocates for Children		\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
7					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
8					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
9					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
10					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
11					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
12					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
13					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
14					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
15					\$0		\$0		\$0	\$0	\$0	\$0	\$0	\$0		\$0	
Totals					\$78,025		\$19,332		\$34,739	\$34,739	\$23,159	\$23,159	\$115,796	\$53,828		\$266,981	
									30%	30%	20%	20%	100%				

Attachment 9: Abbreviations

AOD	Alcohol and Other Drugs
BOS.	Board Of Supervisors
CalWORKS	California Work Opportunity & Responsibility to Kids
C-CFSR	California Child and Family Services Review
CFRP	Center for Restorative Practice
CFS	Children and Family Services
CDSS	California Department of Social Services
CMS	Case Management Review
CAPC	Child Abuse Prevention Council
CAPIT	Child Abuse Prevention Intervention & Treatment
CFSR	Child and Family Services Review
CWS.	Child Welfare Services
CBCAP	Community Based Child Abuse Prevention
CCTF	County Children's Trust Fund
CSA	County Self Assessment
CT	Court
CASA	Court Appointed Special Advocates
DR	Differential Responses
FM	Family Maintenance
ILP	Independent Living Program
MAC	Modern Advocate for Children
NHN	Novato Human Needs

OCAP	Office of Child Abuse and Prevention
PR	Peer Review
PQCR	Program Quality Case Review
PSSF	Promoting Safe and Stable Families
QA	Quality Assurance
RFP	Request for Proposal
SOP	Safety Organized Practice
SSA	Social Security Act
SDM	Structure Decision Making
SIP	System Improvement Plan
VFM	Voluntary Family Maintenance
YPP	Youth Pilot Project