

California Child and Family Services Review

Annual SIP Progress Report AUGUST 2012 - AUGUST 2013

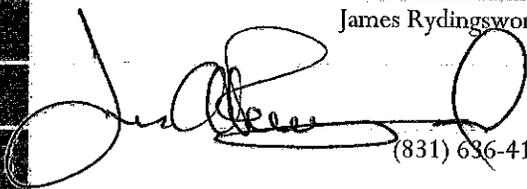


California – Child and Family Services Review Signature Sheet

For submittal of: CSA SIP Progress Report

County	San Benito County
SIP Period Dates	2008-2011
Outcome Data Period	2011-2014

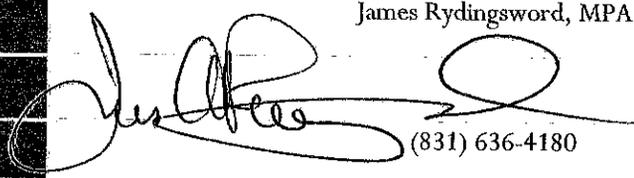
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BOS Approval Date	
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INTRODUCTION

San Benito County is located in the Coast Range Mountains of the U.S. state of California, south of San Jose. As of 2010 the population was 55,269. The County seat is Hollister, which includes nearly two-thirds of the County's population. El Camino Real passes through the County and includes one mission in San Juan Bautista.

San Benito County has a comprehensive infrastructure for providing child welfare services under the County Health and Human Services Agency. The Board of Supervisors and the community support the provision of services to the children, youth and families in our County.

Some of the County Health and Human Services Agency offices are co-located with easy access among the entire agency divisions. Under the umbrella of the agency are divisions providing Social Services, Employment Services and Health Services. However, Public Health which also encompasses Emergency Medical Services and Environmental Health is at a different location.

The Juvenile Probation Division, including Juvenile Hall falls under the umbrella of the Probation Department.

STAKEHOLDERS PARTICIPATION

The Agency has worked collaboratively with many community partners and State Partners in multiple forums, in an effort to improve outcomes. We have not held additional formal SIP Review meetings; however, we have been transparent about our areas for development and throughout the review period engaged our partners in the following efforts:

- Children's System of Care, which includes Probation, School Districts, CPS, Behavioral Health, Court Appointed Special Advocates (CASA), and Substance Abuse
- California State Adoptions: Monthly Staffing meetings to jointly assess cases, review case progress/recommendations, facilitate referrals
- Foster Youth Services Advisory Council Meeting: Bi-monthly meetings with leadership and representatives from Probation, San Benito County Office of Education, local School Districts, Chamberlain's Children Center, CASA, Gavilan College, CPS, and the Board of Supervisors
- California Welfare Director's Association/Children's Committee, network for leadership and coordinate California's Core Practice Model

- Student Attendance Review Board, consisting of Probation, School Districts, San Benito Office of Education, CPS, and the District Attorney
- Domestic Violence Task Force: Periodic meetings with leadership and representatives from the District Attorney, Hollister Police Department, San Benito County Sheriff, CPS, Probation, and Victim Witness
- Probation and CPS work very closely to implement same practices with family reunification and permanency for children and youth. Probation has a Family Preservation Officer assigned to defendants with open CPS cases. The officer and CPS worker meet and confer regularly to ensure appropriate services, case plan progress and compliance, and to avoid duplication of efforts.

The data used for the SIP was obtained from the AB 636 Quarter 4 2012. Data was extracted from the following resource:

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., & Penz, C. *Child Welfare Services Report for California*. Retrieved July 2013, from University of California at Berkeley Center for Social Services research website. URL: [http://cssr.berkeley.edu/ucb child welfare](http://cssr.berkeley.edu/ucb_child_welfare)

CURRENT PERFORMANCE TOWARDS SIP IMPROVEMENT GOALS

S.1.1 SAFETY OUTCOME: NO RECURRENCE OF MALTREATMENT

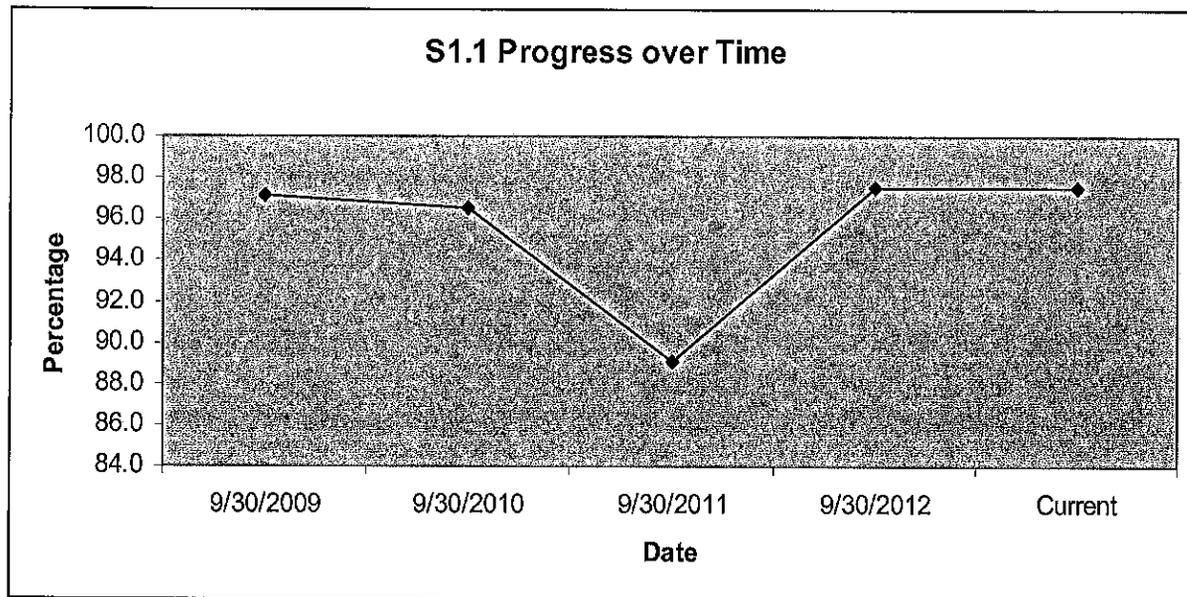
TABLE 1: S1.1 BASELINE COMPARED TO CURRENT

TIME PERIOD MEASURED	SIP BASELINE: QUARTER 4/2009	PROGRESS: QUARTER 4/2012	CURRENT: QUARTER 1/2013
PERFORMANCE	97.1%	97.5%	97.5%
FEDERAL GOAL	94.6%		

TABLE 2: S1.1 PROGRESS THROUGH QUARTER 4 2012

	From: To:	4/1/2009 9/30/2009	4/1/2010 9/30/2010	4/1/2011 9/30/2011	4/1/2012 9/30/2012
NO RECUR. OF MALTREATMENT w/IN 6 MOS. (%)		97.1	96.5	89.1	97.5
NATIONAL STANDARD (%)		94.6	94.6	94.6	94.6
MALTREATED DURING 1ST 6 MOS. OF YR. (N)		35	57	64	40
NO RECUR. OF MALTREATMENT w/IN 6 MOS. (N)		34	55	57	39
NATIONAL STANDARD (N)		34	54	61	38

GRAPH 1: S1.1 PROGRESS OVER TIME



ANALYSIS

There has been a slight improvement in this measure since the baseline in 2009, maintaining a small margin above the baseline of 94.6%. There was a dip in performance from 2010-2011, with a rebound in 2012.

Analysis of cases indicates that during the time period in which our goal was not met was primarily due to parents who relapsed into substance abuse problems. Potential barriers for maintaining sobriety included not establishing a sustainable network of support that would continue beyond the Agency and Court's involvement. Clinical services terminated upon "graduation," and the Agency did not typically engage extended community and family support networks in open discussions regarding safety and case planning.

After careful analysis the agency began to use Safety Organized Practice and case plans that include community resource elements in addition to clinical services to treat and sustain recovery from alcohol and drug abuse/addiction. Safety Organized Practice is informed by:

- Solution-focused therapy, based on the work of Insoo Kim Berg, Steve de Shazer and the Brief Family Therapy Center.
- Signs of Safety, the Three Houses tool and the Safety House, based on work by Steve Edwards, Andrew Turnell, Nicki Weld, Sue Lohrbach, Sonja Parker and many other child welfare professionals.
- Structured Decision Making by the NCCD Children's Research Center.
- Group supervision and interactional supervision, based on work by Sue Lohrbach and Lawrence Shulman.

- Appreciative inquiry, based on work by David Cooperrider and Suresh Srivastva.
- Motivational interviewing, based on the work of William Miller.
- And the evolving work of hundreds of practitioners around the world to adapt and integrate evidence-based tools and approaches with best practices in the field of child welfare. (<http://humanservices.ucdavis.edu/Academy/pdf/121-171-Safety-organized-practice.pdf>)

Empirical evidence as referenced above supports developing safety networks that involve group process and accountability to total abstinence, beyond the Agency's involvement. This caused some tension between systems. Specifically, some service providers asserted that the clients' issues were resolved in clinical treatment, and additional support was not necessarily indicated or viewed as beneficial. Clients "graduated" from clinical services without a specific aftercare program. Some providers asserted that participation in voluntary support groups such as AA, NA, Celebrate Recovery, Alanon, Church or other Faith-based Fellowships, should not be mandated.

CPS workers monitoring for compliance with court-ordered abstinence encountered challenges to case plan compliance by providers reluctant to collaborate with the Agency, and insisting the community support programs should not be incorporated into the case plan for non-voluntary clients, citing the need for the client's internal motivation and an established rapport. Barriers with confidentiality issues were also encountered.

Improvements occurred with increased training, collaborative staffing meetings, and inter-agency sharing of information. Improved outcomes were also attributed to policies for obtaining releases, regularly scheduled forums for joint assessments and in addition to clinical services adding creative case-plan elements to include sustainable supports.

2F (FORMERLY 2C): SAFETY OUTCOME MEASURES- TIMELY SOCIAL WORKER VISITS WITH CHILD

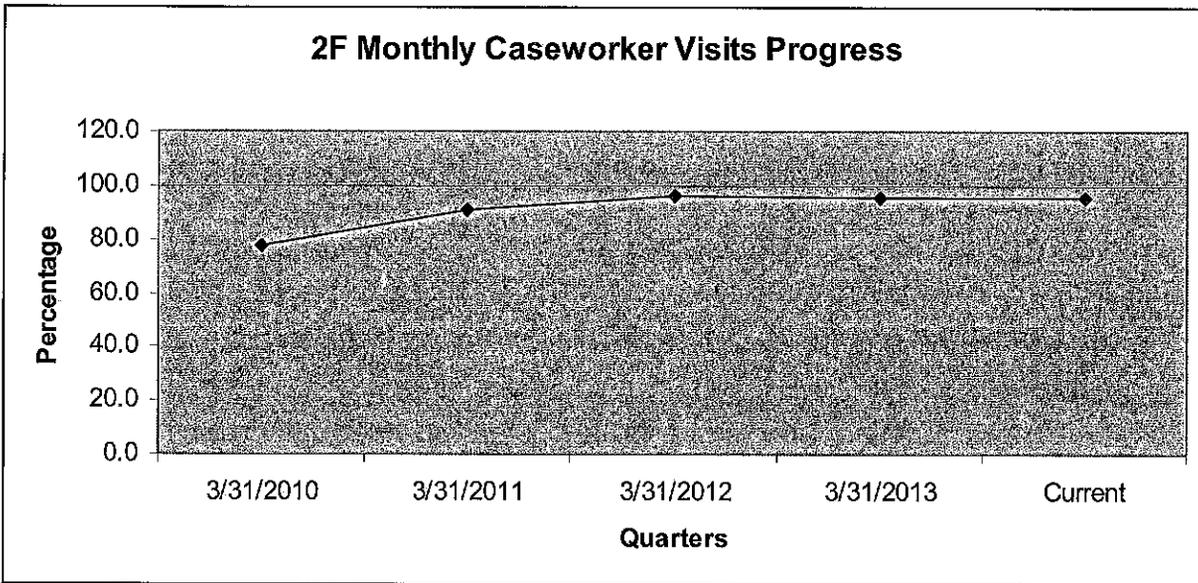
TABLE 3: 2F BASELINE COMPARED TO CURRENT

TIME PERIOD MEASURED	SIP BASELINE: QUARTER 4/2009	PROGRESS: QUARTER 4/2012	CURRENT: QUARTER 1/2013
PERFORMANCE	77.5%	96.1%	95.6%
STATE GOAL	90%		

TABLE 4: 2F BASELINE COMPARED TO CURRENT

FROM:	4/1/2009	4/1/2010	4/1/2011	4/1/2012
TO:	3/31/2010	3/31/2011	3/31/2012	3/31/2013
VISIT MONTHS (%)	77.5	90.9	96.2	95.6
MONTHS OPEN (N)	814	716	969	996
VISIT MONTHS (N)	631	651	932	952

GRAPH 2: 2F PROGRESS THROUGH QUARTER 4 2012



ANALYSIS

There has been a steady improvement in monthly caseworker visits since the baseline in 2009. Current performance of 95.6% is well above the state goal of 90%. The SIP activities appear to be effective in improving this outcome, thus resulting in improved safety to children in foster care.

C2.1: PERMANENCY MEASURE ADOPTION WITHIN 24 MONTHS (EXIT COHORT)

TABLE 6: C2.1 BASELINE COMPARED TO CURRENT

TIME PERIOD MEASURED	SIP BASELINE: QUARTER 4/2009	PROGRESS: QUARTER 4/2012	CURRENT: QUARTER 1/2013
PERFORMANCE	33.3%	33.3%	33.3%

STATE GOAL	36.6%
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TABLE 7: C2.1 BASELINE COMPARED TO CURRENT

From:	4/1/2009	4/1/2010	4/1/2011	4/1/2012
To:	3/31/2010	3/31/2011	3/31/2012	3/31/2013
Exit to adopt. < 24 mos. (%)	33.3	0.0	60.0	33.3
National Goal (%)	36.6	36.6	36.6	36.6
Exit to adopt. during yr. (n)	3	9	5	6
Exit to adopt. < 24 mos. (n)	1	0	3	2
National Goal (n)	2	4	2	3

ANALYSIS

There has not been improvement in this measure, with the exception of a bump up to 60% in 2012. As this is a small county, percentage based outcomes can radically change based on one or two children and therefore are not a valid representation of County efforts on this measure. It is difficult to obtain and maintain target percentages when working with very small numbers of cases. For example, in 2009 one of three children exited to permanency within 24 months. In order to meet the national goal two children needed to exit to permanency. As the goal was 36.6%, one of three children exiting to permanency was just short of the goal, but two children exiting would have been significantly higher than the goal. This is also evident in the high quarter where three of five children exited to permanency within 24 months. Although it was only one more child than was required to meet the target, the percentage spiked up to 60%, well above the goal. Generally, the County performs at approximately 33%, thus exiting 1/3 of its children to permanency within 24 months, but the County continues to work hard to achieve permanence for children.

C2.5: PERMANENCY MEASURE ADOPTION WITHIN 12 MONTHS (LEGALLY FREE)

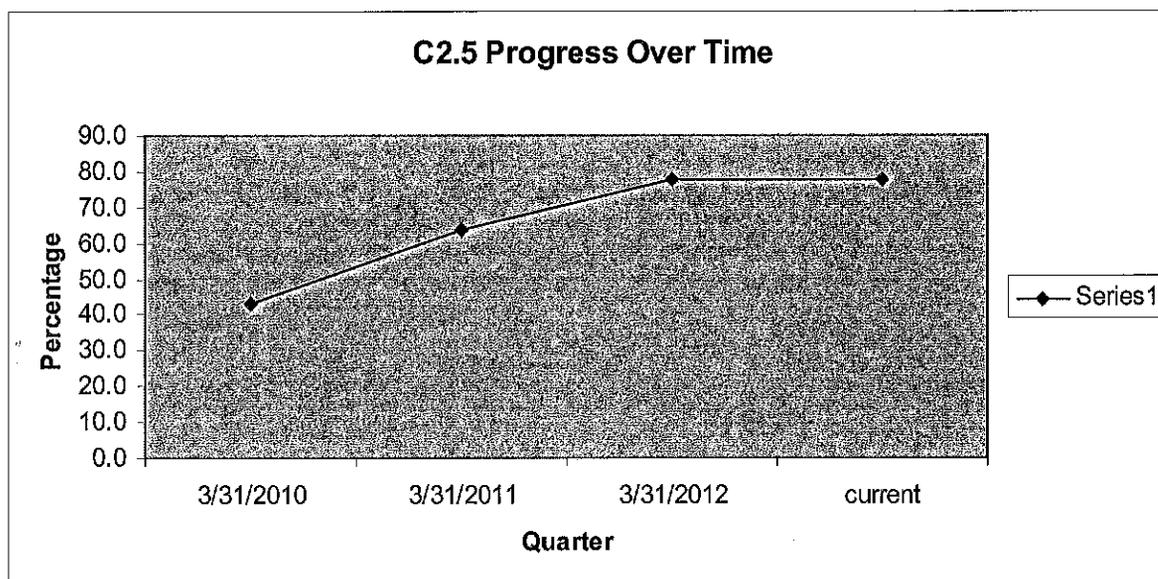
TABLE 8: C2.5 BASELINE COMPARED TO CURRENT

TIME PERIOD MEASURED	SIP BASELINE: QUARTER 4/2009	PROGRESS: QUARTER 4/2012	CURRENT: QUARTER 1/2013
PERFORMANCE	42.9%	77.8%	77.8%
STATE GOAL	53.7%		

TABLE 9: C2.5 BASELINE COMPARED TO CURRENT

	FROM:	4/1/2009	4/1/2010	4/1/2011
	To:	3/31/2010	3/31/2011	3/31/2012
EXIT TO ADOPT. < 12 MOS. (%)		42.9	63.6	77.8
NATIONAL GOAL (%)		53.7	53.7	53.7
BECAME LEGALLY FREE DURING YR. (N)		7	11	9
EXIT TO ADOPT. < 12 MOS. (N)		3	7	7
NATIONAL GOAL (N)		4	6	5

GRAPH 2: C2.5 PROGRESS THROUGH QUARTER 4 2012



ANALYSIS

There has been steady improvement in this measure, increasing by 34.9 percentage points. The County now performs well above the national goal of 53.5%. Although the numbers of children are small, the implemented strategies have been effective in ensuring that children are legally freed to exit to permanency in a timely fashion.

**C4.1 PERMANENCY MEASURE PLACEMENT STABILITY OUTCOME: PLACEMENT STABILITY
(8 DAYS TO 12 MONTHS IN CARE)**

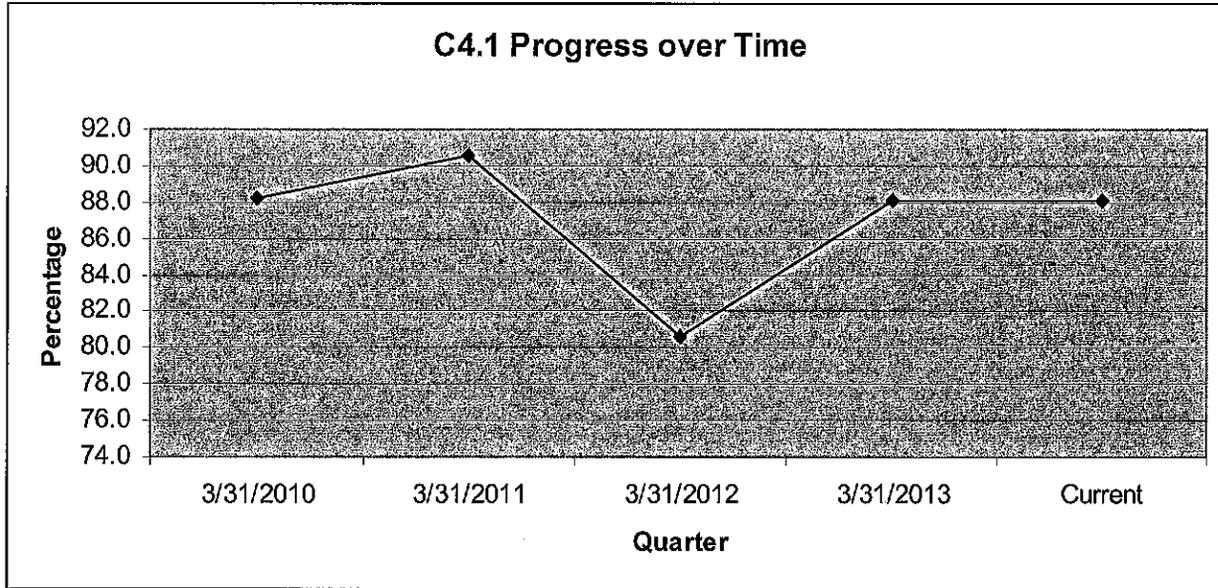
TABLE 10: C4.1 BASELINE COMPARED TO CURRENT

TIME PERIOD MEASURED	SIP BASELINE: QUARTER 4/2009	PROGRESS: QUARTER 4/2012	CURRENT: QUARTER 1/2013
PERFORMANCE	88.2%	88.1%	88.1%
STATE GOAL	86.0%		

TABLE 11: C4.1 BASELINE COMPARED TO CURRENT

	FROM: 4/1/2009	4/1/2010	4/1/2011	4/1/2012
	TO: 3/31/2010	3/31/2011	3/31/2012	3/31/2013
TWO OR FEWER PLACEMENTS (%)	88.2	90.5	80.6	88.1
NATIONAL GOAL (%)	86.0	86.0	86.0	86.0
IN CARE DURING YR. (8 DAYS-12 MOS.) (N)	51	63	98	67
TWO OR FEWER PLACEMENTS (N)	45	57	79	59
NATIONAL GOAL (N)	44	55	85	58

GRAPH 3: C4.1 PROGRESS OVER TIME



ANALYSIS

There has been consistent performance in this measure over time. There was a slight dip in 2012, but the County rebounded in the last two quarters. Interestingly, in that quarter there were significantly more children in care (98) during that quarter than in the other quarters. With an additional 30 children in placement above the average, resources were stretched to ensure placement stability.

During the 2012 time period the County saw an increased number of families in crisis from a wider variety of socio-economic backgrounds, having endured additional stressors as a result of the changing economy (i.e. lost employment, housing, child care, etc.). Another contributing factor was the entry of multiple large sibling sets due to sexual abuse and risk to siblings.

At this time the County had not yet implemented Safety Organized Practice, a blend of evidence-based interventions that can identify more internal family safety resources and reduce the need to remove children from the family of origin. With the implementation of Safety Organized Practice it is anticipated that the number of children entering care will remain stable and potentially decrease.

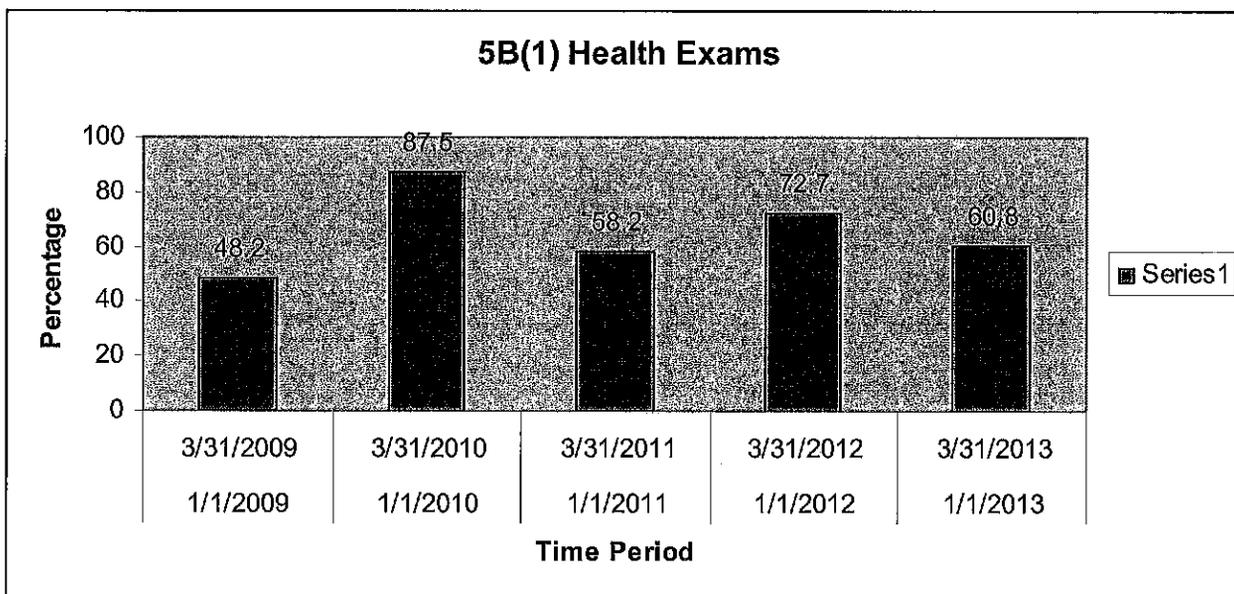
5B (1 AND 2) WELL BEING: HEALTH AND EDUCATION PASSPORTS

5B (1) HEALTH EXAMS

TABLE 12: 5B (1) BASELINE COMPARED TO CURRENT

From:	1/1/2009	1/1/2010	1/1/2011	1/1/2012	1/1/2013
To:	3/31/2009	3/31/2010	3/31/2011	3/31/2012	3/31/2013
Rate of timely health exams (%)	48.2	87.5	58.2	72.7	60.8
In care 31+ days, age 0-20 (n)	85	56	55	88	74
Timely health exams (n)	41	49	32	64	45

GRAPH 4: 5B (1) HEALTH EXAMS OVER TIME

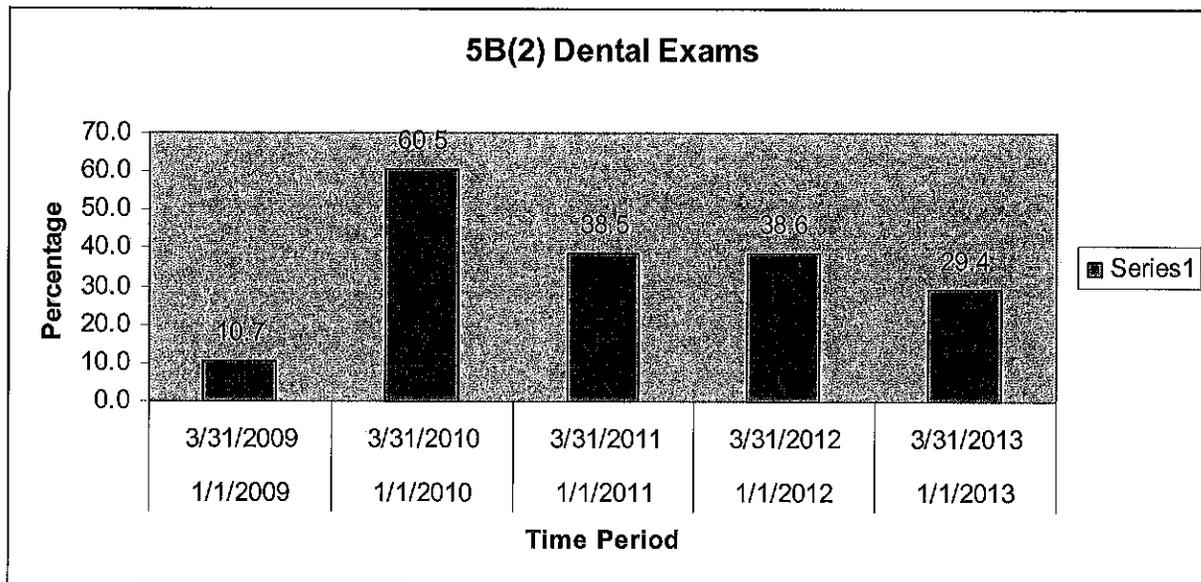


5B (2) DENTAL EXAMS

TABLE 12: 5B (2) BASELINE COMPARED TO CURRENT

From:	1/1/2009	1/1/2010	1/1/2011	1/1/2012	1/1/2013
To:	3/31/2009	3/31/2010	3/31/2011	3/31/2012	3/31/2013
Rate of timely dental exams (%)	10.7	60.5	38.5	38.6	29.4
In care 31+ days, age 3-20 (n)	75	43	39	70	51
Timely dental exams (n)	8	26	15	27	15

GRAPH 4: 5B (1) HEALTH EXAMS OVER TIME



ANALYSIS

There has improvement in both health and dental exams when comparing current performance to the SIP baseline. Health exams increased from 40.2% to 60.8%. In 2010, there was an all time high of 87.5%. Dental exams increased from 10.7% to 29.4% but you can see variability over the quarters with exams at an all time high of 60.5% in 2010.

STRATEGIES STATUS

S1.1 NO RECURRENCE OF MALTREATMENT

STRATEGY 1.1: CONTINUE TO OFFER SERVICES THROUGH THE FAMILY RESOURCE CENTER (FRC), INCLUDING PARENTING, HOME VISITATION SERVICES, AND SUPPORTIVE SERVICES.

- **Action Step #1:** Continue to offer parenting classes, home visitation services, and supportive services.

Status: Parenting classes are offered through the family resource center and have been increased to meet the demand of families going through the child welfare system.

The Probation Department also offers parent education resources. A parenting class is offered at least twice a year using the "Redirecting Children's Behaviors," a strengths-based curriculum. Classes for parents and youth are offered concurrently. The course is designed to empower parents, redefine roles, and provide guidelines on how to set limits and deal with challenging behavior.

Tutoring and a reading program are offered to Probation Youth to assist with school/homework issues.

- **Action Step #2:** Evaluate programs ongoing on a quarterly basis.

Status: Pre and Post evaluations are conducted at each parenting class, including those offered by probation, to obtain feedback on how the participants liked the class and what was learned from the class.

STRATEGY 1.2: EXPLORE THE CAPACITY OF THE FAMILY RESOURCE CENTER , CHILD ABUSE PREVENTION COUNCIL OR PROBATION LIAISON OFFICER, TO GATHER COMMUNITY RESOURCES TO BE ABLE TO BE COMPILED, AND ACT AS A CLEARING HOUSE FOR THE COUNTY.

- **Action Step #1:** Develop a list of all of the non-profit organizations in the County and what services they provide.

Status: Completed

- **Action Step #2:** This compiled list is to be housed in the Family Resource Center and used as a community resource.

Status: The resource guide is maintained at the Family Resource Center. The resource guides are also distributed by other local community agencies that include, but are not limited to clinics, probation, schools, public health, cal-WORKs, and behavioral health.

- **Action Step #3:** Update the list on an ongoing basis, at least yearly.
Status: The resource guides are updated on an annual basis, if funding is available for the update and print of the resource guides.

The Public Health department funded this particular print resource guide sponsored by the California SIDs Program, Healthy Mother's Healthy Baby's Coalition, but funding was not available for a 2012 revision.

A free updated provider list was made available on a local website resource, Community Foundation Website at www.cffsbc.org/nonprofitdirectory.php

STRATEGY 1.3: UTILIZING EXISTING RESOURCES, DISTRIBUTE INFORMATION TO THE COMMUNITY REGARDING THE PREVENTION OF CHILD ABUSE AND NEGLECT.

- **Action Step #1:** Explore the procedures needed to put informational resources into the community, review the material for accuracy, and any needed updates.

Status: Current process for the distribution of informational resources in the community include: distribution of materials through community venues/events, home visiting by both CPS and FRC workers. This process is revisited as needed due to changes in the availability of resources in the community.

Informational Resources were distributed to all local area schools, as well as San Benito Health Foundation , Hazel Hawkins Community Clinic, Women Infant and Children Program (WIC), Planned Parenthood, Compassionate Pregnancy Center, San Benito County Behavioral Health, Public Health, and the Library's Community Bulletin Board.

Agency Representatives met bi-monthly for the Child Health and Injury Prevention (CHIP) Meeting, quarterly for the Tobacco Awareness Committee. Further, the Family Resource Center provided information at annual local events including, but not limited to the Child Abuse Prevention Month and Kid's Healthy Family Fun Walk Day in April, Kids at the Park Health Fair in June, National Night Out in August, and Gavilan College Health Fair in October.

- **Action Step #2:** Put informational resources on the "county book mobile", library and any other identified locations.

Status: Resource information was placed in the local county book mobile and resource information was presented to the community in multiple forums throughout the period.

- **Action Step #3:** Distribute information to the county library and any other identified locations.

Status: FRC staff distribute information at places that include, but are not limited to the county library, local schools, local health clinics, Cal-Works office, One-Stop Office, Behavioral Health, Public Health and Youth Alliance.

STRATEGY 1.4: DEVELOP A COLLABORATION TO EXPLORE GAPS IN SERVICES AND RECOMMENDED WAYS TO BRIDGE THESE GAPS, INCLUDING: COMMUNITY EDUCATION REGARDING MANDATED REPORTING, EXCHANGE OF INFORMATION BETWEEN AGENCIES, MORE SPECIALIZED PARENTING AND TEEN CLASSES, AND SUBSTANCE ABUSE TREATMENT PROGRAMS.

- **Action Step #1:** Build on an existing collaboration, or develop a new collaboration to develop a plan to address the areas identified above.

Status: The in-house plan is for Social Work Supervisors and Deputy Director to attend collaborative meetings that include but are not limited to School Attendance Review Board, System of Care, which occur twice a month, Foster Youth Services, Child Abuse Prevention Council, Health, School Partnership law, Substance Abuse/Behavioral, Children's Inter-Agency Council, Behavioral Health Quality Leadership and Adoptions meetings which occur on a quarterly basis; These meetings help address and bridge gaps in services; through these meetings education with regards to mandated reporting and resource information/sharing is also addressed.

- **Action Step #2:** Develop a plan that includes community presentations that provide child abuse prevention, education and reporting information; increase and/or build upon service provider collaborative meetings that could help explore gaps in services and address the above needs and any other identified areas of concern; increase specialized parenting classes and substance abuse services to meet the needs of the parents/families.

Status: Presentations about child abuse prevention, education and reporting is provided through the venues as listed in action step #1 and as necessary; gaps in services and/or other areas of concerns are also addressed at these venues and meetings. Plan consisted of the meetings to be attended by Social Work Supervisor and/or Deputy Director.

- **Action Step #3:** Implement the plan.

Status: Completed. Meetings were attended by the appropriate child welfare services representative(s).

- **Action Step #4:** Monitor the effectiveness of the plan.

Status: Evaluation plan includes the following methods:

Bi-monthly Supervisor Meetings (managers and supervisors) for the purpose of:

- ✓ Review of improvement strategies and action steps completed;

- ✓ Evaluate and monitor program effectiveness;
- ✓ Review feedback provided in supervision, client meetings, inter-agency collaborative meetings and networked with leaders of other agencies;
- ✓ The manager and supervisors utilized Ad Hoc Reports, as well as SafeMeasures

Community feedback: Managers and Supervisors have solicited input from community partners, consumers, and staff to analyze how effective the strategies have been at achieving progress and improving the outcome areas the.

Data reports: The leadership team reviewed the data reports from SafeMeasures, and the family resource center. Probation has conducted pre-tests and post-tests for the parent education programs.

STRATEGY 2.1: CONTINUE TO UTILIZE THE STRUCTURED DECISION MAKING (SDM) TOOL APPROPRIATELY.

- **Action Step #1:** Provide training on an as needed and ongoing basis on the use of SDM.

Status: All staff have either completed their SDM Training or are scheduled to attend the September module.

- **Action Step #2:** Conduct case reviews to ensure the timely and accurate completion of the SDM tool.

Status: Social Work Supervisors work closely with staff to ensure appropriate completion of SDM assessments by conducting case reviews.

ER Staff utilize the safety assessment and the SDM hotline tool for every referral. The risk assessments are used on referrals as appropriate.

During this review period, the Continuing Unit SW Supervisor completed advanced Training for Trainers to implement and monitor consistent use of SDM for her unit. She established periodicity for use of assessments. Social workers are required to complete the tools and bring to case staffing with the supervisors. Completed SDM Assessments and tools are required for all critical case decisions and to assist with determining recommendations for the case.

The SW Supervisor has received Foundations of Supervision training series and receives additional training and coaching to assist with building capacity and to assist with implementation. Through advanced training, the SW Supervisor has acquired several case review tools and will continue to develop, implement, and monitor staff accountability to appropriate application of all assessment tools.

STRATEGY 3.1: DEVELOP AND IMPLEMENT A FAMILY STRENGTH BASED PROGRAM FOR AT RISK YOUTH ATTENDING ELEMENTARY SCHOOL.

- **Action Step #1:** Meet with Community and faith based organizations and school officials to identify a process to reach "at risk" families.

Status: Probation officers certified in the "Redirecting Children's Behavior" curriculum teach parent education classes to parents of children in out-of-home placement or at risk of being removed from home. Classes run one hour, once a week for a period of six weeks. Topics include applying age appropriate consequences, responsibilities, and building a healthy family. Parents are given weekly homework assignments and readings.

Class facilitation was reduced due to staffing shortages in 2012. One other Probation Officer received training and should be certified for October 2013. Parenting classes will be scheduled immediately thereafter.

The San Benito County Probation department created a Faith Based collaborative forum led by a probation representative. The collaborative meets once a month and includes multiple faith based organizations located in San Benito County. A church member has been assigned to gather information on services offered by all members of this forum. This information will be used to create a non-profit community resource guide that will supplement the current Community services pocket booklet currently provided by the Public Health Department.

The collaborative forum meetings discontinued in 2012 due to staffing issues. However, the inter-faith collaborative is still utilized for support of clients and use of facilities; for example, Hillside Christian Fellowship and First Presbyterian Church to host workshops and evidence-based programs for adult offenders, such as Thinking for a Change and The Community Review Board.

- **Action Step #2:** Develop family strengths-based extra curricula activities, including sports.

Status: In Progress. The San Benito County Probation Department has teamed up with Gold's Gym and to develop the "Youth Fit" program which is a health and fitness program for at risk youth. Youth Fit promotes healthy nutrition, physical well-being, leadership skills and an overall healthy way of living. Officers train the minors in proper use of cardio, free weights and gym equipment. Each fitness program is tailored to the needs of the minor and each minor will be required to track their progress via daily journaling.

Due to staffing shortages, Probation participation in this program was temporarily discontinued in Q3 of 2011-2012 when the assigned officer was reassigned to a different department. It is slated to resume in October 2013.

- **Action Step #3:** Develop and or expand after school tutoring programs.

Status: The San Benito County Probation Department has partnered with Hollister Youth Alliance, a community-based organization, to provide a literacy program to at-risk youth residing at or near "The Neighborhood Center." One probation representative has been assigned to work with this program. The Family and Child Survey was administered to clients served by the program. Survey data shows youth participants received 425 hours of direct services and parent participants received 211 hours of direct services. All of the youth surveyed reported improved life skills, attendance/decreased absenteeism, child-parent communication, and safer sexual health/reduces risk-taking. Eighty percent of the youth surveyed reported improved communication with family, improved positive decision-making, and an increased likelihood of graduation. All the parents survey reported their children had an increased connections to caring, trusted adult and trusting their child/children is easy.

The Paula Norton Reading Program provides one-on-one tutoring services using the Linda Mood-Bell teaching instruction tools to at risk youth ages 9-18. This program has been found to significantly improve spelling and reading scores. Grades for some youth were also found to improve. This has been measured through pre-and post-test results. This is an ongoing effort, the program is facilitated weekly.

Youth progress was informally reviewed during weekly staff meetings and further analyzed by successful completion of Probation Case Plan objectives and Probation Court Orders.

2F (FORMERLY 2C) - TIMELY SOCIAL WORKER VISITS

STRATEGY 1.1: ENSURE THAT THE FACE TO FACE CONTACT PROTOCOL AND DOCUMENTATION POLICY THAT WAS DEVELOPED IN THE LAST SIP CYCLE IS FULLY IMPLEMENTED AND MONITORED.

- **Action Step #1:** Staff will continue to implement the policy, including entering contacts within five days of the end of the month, use of safe measures to track entries and discussion with their supervisor.

Status: This is an ongoing milestone, which appears to have been well adapted by staff. Per safe measures, staff have significantly improved in the data entry of face to face contacts as specified in the policy

- **Action Step #2:** Supervisors will continue to ensure the implementation of the policy, by the use of "Safe Measures" in individual supervision.

Status: SW supervisors are utilizing Safe Measures to track caseload progress and reviewing the information in the individual supervision with the staff on a bi-weekly basis.

- **Action Step #3:** Supervisors will problem solve with staff during individual supervision and unit meetings when issues of compliance occur, including data entry assistance by volunteers and interns.

Status: This milestone continues to be an ongoing function as part of individual supervision between staff and supervisors.

STRATEGY 1. 2: EXPLORE THE USE OF TECHNOLOGY TO ASSIST SOCIAL WORKERS TO BE ABLE TO RECORD THEIR CONTACTS WHEN THEY ARE NOT IN THE OFFICE.

- **Action Step #1:** Contact other counties to gather research regarding what technology systems they have developed to help social workers record contacts when they are not in the office.

Status: Deputy Director has researched technology methods with other counties through the Regional Meeting's venue; some counties are utilizing lap tops, IPAD's and the telecommuting (using the CWS/CMS tokens) as a method to assist social workers in recording contact data when out of the office.

- **Action Step #2:** Explore possibility of funding to purchase the recommended technology solution.

Status: The Agency purchased four iPad portable computers and developed a check out system for all social workers to have access to use them in the field. The Agency also provided four portable TomTom navigation units to speed up navigation time in the field.

- **Action Step #3:** Develop a policy and provide staff training on the use of the technology.

Status: This step is in process. Initial training has been conducted for workers to write documents and load into Docs2Go. Tokens for remote access to CWS/CMS have been ordered and received. We have encountered issues with some of the tokens not working. The Deputy Director has been coordinating with the State contact to resolve these hardware issues. The policy for technology use is under development.

C2.1: PERMANENCY MEASURE ADOPTION WITHIN 24 MONTHS (EXIT COHORT)

STRATEGY 1.1: DEVELOP A MECHANISM, POLICY AND PROCEDURE, FOR FAMILY FINDING AND ENGAGEMENT.

- **Action Step #1:** Explore search engines that are able to be utilized to assist with family finding, including their cost.

Status: Completed in 2012.

San Benito County originally purchased search engine software/license agreement for Intelius which was very limited. The County purchased another subscription to Clear search engine through Thomson Reuters. Clear is only available to government offices and is used by the FBI, police departments, and other investigative agencies. It broadens search parameters to include cell numbers, SSN, DOB, relatives, credit information, utility companies, and social media. Using this tool saves 70 to 80% of the time reviewing individual records. The County continues to write letters to mandated Agencies, starting with the California Dept of Corrections to see if parent(s) or relative(s) are in custody.

- **Action Step#2:** If fiscally feasible purchase the family finding technology.

Status: Completed in 2012. The County has a Clear Investigator with Web Analytics. The improved access to parental history information and other family finding tools, the County has improved its family finding efforts.

- **Action Step #3:** Develop policy and procedures for the process of family finding, including the possibility of using a genogram and connectedness map.

Status: Completed in 2012. Training on Parent and Relative Search Techniques was provided to workers April 2011. Family finding policy and procedures were developed and implemented in late 2011. The in-house social worker training on genograms was conducted in February 2012.

Probation sends requisite family finding letter at removal or prior to disposition.

- **Action Step #4:** Evaluate the implementation of the policy and procedures.

Status: San Benito County continues to work on this milestone.

The County has seen an increase in family finding efforts and results, with increased father engagement and multiple NREFM and family placement options identified for assessment earlier in the case(s). The evaluation has been informal, primarily through individual and unit supervision, as well as reviews of data reports.

Continual reiteration of the importance of involving family members in case planning, decision-making, and concurrent planning is provided at all staffing, meetings, and trainings.

STRATEGY 1.2: IMPROVE “CONCURRENT PLANNING” ACROSS THE CONTINUUM OF ENGAGEMENT WITH THE FAMILY, FROM THE BEGINNING OF THE CASE AND THROUGH POSSIBLE ADOPTION.

- **Action Step #1:** A concurrent planning work group will be formed to review the current process and develop a plan for enhancing and standardizing the process of concurrent planning. This plan will include policy and practice recommendations, training needed and outcome measures.

Status: The Deputy Director and SW Supervisors met and coordinated a training for concurrent planning with the staff; further, SW supervisors implemented a form that is in the Immediate Response (IR)-Out of home Placement packet that explains concurrent planning and further gathers information about relatives and other potential caregivers for the child that include next of kin.

The County collaborated with Bay Area Academy to conduct Multiple Pathways to Permanence, a two-day training to include critical stakeholders and community partners such as Behavioral Health, Probation, Substance Abuse, CASA, County Counsel and CPS (5/5/11 & 6/29/11). Additional Permanency training and collaboration was woven throughout the period through individual supervision, inter-agency meetings, case management with families, and Safety Organized Practice training.

- **Action Step #2:** Implementation of the plan.

Status: Completed August 2011.

- **Action Step #3:** Ongoing monitoring and evaluation of implementation and policy.

Status: Concurrent planning case progress is reviewed and issues are discussed during supervisor meetings. This provides the opportunity to continuously reinforce and review the effectiveness of policies. Further, SW Supervisors review concurrent planning with SW's during weekly meetings with County Counsel, which often includes the Deputy Director.

STRATEGY 1.3: CHILD WELFARE SERVICES FAMILY MEETINGS/DECISION MAKING WILL BE EVALUATED AND FORMALIZED, INCLUDING THE REFERRAL PROCESS, WHEN THE MEETINGS ARE TO OCCUR, AND THE DEVELOPMENT OF OUTCOME MEASURES.

- **Action Step #1:** Research current models of Family Meetings/Decision Making process used in other counties and states. Based on research, form a recommendation as to the best family meeting structure to meet County needs.

Status: San Benito County is utilizing Safety Organized Practice (SOP), which is a blend of multiple models. The County also decided to implement the Team Decision Making (TDM) and Family Group Decision Making (FGDM) models.

- **Action Step #2:** Develop implementation plan for the Family Meeting/Decision making process to enhance parent participation and leadership by inviting parents to actively participate in these meetings.

Status: The County provided extensive SOP Training and coaching to prepare staff for implementation and continues to work on full implementation for TDM and FGDM. Due to limited County resources and staffing, full implementation has been a challenge particularly in relation to TDM and FGDM.

Additional tools have also been developed and incorporated into family meetings to promote family engagement and participation including, a Case Plan Review form for monthly face-to-face contacts.

- **Action Step #3:** Implementation of the plan, including the development of policy, identification of training needs and development of a training plan for staff.

Status: As previously mentioned, the County has experienced difficulty in maintain fidelity to the TDM and FGDM model during implementation due to be under-resourced. However, the County has adopted a hybrid approach using the principles and tools of these models to involve the families in their case planning, placement decisions, concurrent planning, and recommendations to the greatest extent possible.

The County has been successful in consistently conducting structured family meetings to meet the individual family needs. The incorporation of additional tools into family meetings has promoted better family engagement and participation in safety networks and concurrent planning. In addition, case plan objectives and goals are reiterated through the completion of the Case Plan Review form with the parents during monthly face-to-face contacts.

The County is currently working with Bay Area Academy to assist us with researching models/training that fit small counties with limited resources and staff to enable us to more effectively develop policies, train staff and fully implement the County's Family Meetings/Decision Making process.

- **Action Step #4:** Ongoing monitoring of outcomes reported quarterly.

Status: San Benito County continues to work on outcomes monitoring through the use of Safe Measures to track case progress and case reviews/discussions during supervision meetings.

STRATEGY 1.4: EXPLORE THE POSSIBILITY OF COMMUNITY COLLEGES PROVIDING KINSHIP CARE TRAINING AND SUPPORT.

- **Action Step #1:** Canvass surrounding and "like" counties to understand their funding mechanisms for the community colleges to provide Kinship care training and support.

Status: It was determined that San Benito County did not have the numbers needed to support a funding mechanism for local colleges to provide kinship care training and support given that the County is relatively small compared to neighboring counties.

- **Action Step #2:** Determine the feasibility and value of having a Kinship Care Training and Support program in San Benito County.

Status: San Benito County has positive relationships with local FFA's that offer some Kinship care and trainings that are open to other families, such as AspiraNet and Kinship Center. Grant-funded REACH Adoption Services are provided for San Benito County by AspiraNet to include support group meetings, counseling services, and a lending library of resource materials. REACH stands for Resources, Education, Advocacy, Crisis Intervention, and Hope to adoptive families.

- **Action Step #3:** If it is determined to be feasible to have a Kinship Care Training and Support program in San Benito County, develop an implementation plan including policy development and staff training.

Status: Although it was not feasible for the County to use community colleges as a resource for providing Kinship Care training and support, the County was able to partner with other existing community resources to make these services available for relatives.

STRATEGY 2.0: CONTINUE TO HOLD PARTIES (I.E. ADOPTIVE PARENTS, STATE ADOPTIONS STAFF, SOCIAL WORKERS) ACCOUNTABLE FOR COMPLETION OF ADOPTION PROCESS. INCLUDING COMPLETION OF NECESSARY DOCUMENTATION, HOME STUDIES AND SUPPORT NEEDED TO COMPLETE THE PROCESS.

- **Action Step #1:** Meet monthly with CDSS Adoption's staff to discuss all cases and problem solve regarding completing the necessary documentation for home studies.

Status: Monthly meetings have been occurring with CDSS, the County's SW Supervisor and the social worker to ensure issues related to adoption are solved and addressed in a timely manner.

New staffing guidelines were implemented 10/06/2012. Referrals, monthly staffing forms and responses to staffing forms are required to be completed and signed by workers and supervising social workers for all joint consultations. Additionally:

- ✓ All bypass cases are to be staffed immediately;
- ✓ All FR review hearings are staffed 90 days in advance;

- ✓ All long-term foster care cases are to be reviewed at least 60 days before the court review;
 - ✓ Relative screening tools must be completed timely for all relatives requesting consideration of adoptive placement.
- **Action Step #2:** Continue to collaborate with the court by providing them with concise updates, so the court is aware of any delays in home studies and can make subsequent inquiries.

Status: Social Work Supervisors' review court reports to ensure all elements are appropriately reported. Further, the court is provided updates with regards to any delays in home studies. The Judge would not hesitate to subpoena involved parties in an effort to prevent delays in the process.

- **Action Step #3:** Continue to work with the caregivers to assist them in the adoption process.

Status: SW Supervisors have instructed social workers to help caregivers understand the adoption process and to assist them with the completion of paperwork. This is to help ensure the process goes smoothly and avoid time delays. Supervisors monitor this directive through meetings with CDSS and through individual supervision.

In addition the SW Supervisors reviewed Court reports and increased expectations of worker reports to include details of adoption process status and projected timelines. Adoptions Specialists provided estimated completion dates and enlisted CPS worker's' assistance with family compliance to submit home study materials.

Managers and Supervisors conducted frequent Supervisor Meetings to evaluate and monitor program effectiveness, improvement strategies and completion of action steps. Managers and Supervisors utilized Ad Hoc Reports, as well as SafeMeasures and reviewed written feedback provided in supervision, client meetings, inter-agency collaborative meetings and networked with leaders of other agencies.

The Managers and Supervisors have informally analyzed how effective the strategies have been at achieving progress by soliciting input from community partners, consumers, and staff. The social workers have interviewed clients and the supervisors have sought input from community partners. The leadership reviewed the data reports from SafeMeasures, and the family resource center. Probation has conducted pre-tests and post-tests for the parent education programs which showed positive results.

C4.1 PLACEMENT STABILITY

STRATEGY 1.1: CONTINUE TO DEVELOP AND IMPLEMENT THE EMERGENCY PLACEMENT PROTOCOL TO INCREASE NON-RELATIVE/RELATIVE EXTENDED FAMILY HOMES AND TO STABILIZE PLACEMENT EFFORTS.

(PROTOCOL PROCESS COMMENCED IN 4/10).

- **Action Step #1:** Request CDSS to provide Technical Assistance regarding how to apply exemptions to the emergency placement protocol.

Status: The County has designated a worker to complete these assessments. The worker has identified a contact resource at the state and is able to obtain quick responses to process inquiries.

To date, exemptions are not allowed for emergency placements. Current policies and procedures originally created 12/09/2008, updated 04/30/2010 and again 04/02/2012 states "Emergency Placement Approvals WILL NOT be granted for homes in which a caregiver and/or other adult in the home has any criminal or child abuse history. They will be considered for placement under the non-emergency placement procedures. "

- **Action Step #2:** Update protocol and train staff on any new aspects of the protocol that CDSS is able to assist with.

Status: San Benito County has updated and implemented an Emergency Placement Protocol; training has been provided to the staff and discussion on the protocol was held at the staff meetings.

STRATEGY 2. 1 RECRUITMENT AND RETENTION OF COUNTY FOSTER HOMES.

- **Action Step #1:** Explore fiscal aspects, doing a cost analysis to see if it is feasible to increase the rate paid to county foster homes.

Status: Budgetary constraints do not allow for San Benito County to increase rate paid to foster homes.

- **Action Step #2:** Develop a recruitment campaign, targeting San Benito County families. This could possibly include partnering with Monterey County on their marketing campaign.

Status: Foster Home recruitment has consisted of the distribution of flyers inviting local people to become foster parents. These have been distributed to local businesses and community events. Further an ad in the paper and local movie theater were part of recruitment efforts.

- **Action Step #3:** Implement and monitor the recruitment campaign.

Status: Implementation of recruitment efforts are continuous. The SW Supervisor monitored the success of such efforts by keeping a list of callers inquiring about becoming foster parents; calls were limited and only a few completed the licensing requirements. The list is kept by SW Supervisor with documentation of the outcome of

each call placed to recruit foster parents. The County receives a relatively small amount of money to sustain advertisement/recruitment activities.

- **Action Step #4:** Increase efforts to build stronger relationships and communication with FFA's to encourage more placement of San Benito children in San Benito homes and not other county children if at all possible. This could include FFA's telling CWS/Probation when they have openings.

Status: San Benito County has increased effort to communicate with local FFA's through quarterly meetings; however, it continues to be challenging to place children in our community, especially older children given that homes are limited.

5B (1 AND 2): HEALTH AND EDUCATION PASSPORTS

STRATEGY 1.1: WITH THE HELP OF CWS/CMS TECHNICAL ASSISTANCE, DEVELOP A POLICY AND PROCEDURE OF THE CORRECT COMPUTER FIELDS TO ENTER THE INFORMATION AND PROVIDE TRAINING TO STAFF, AND MONITOR THE CORRECT DATA ENTRY.

- **Action Step #1:** Contact Bay Area Regional Training Academy or CDSS for technical assistance regarding correct data entry.

Status: An agreement was made with Bay Area Academy to provide Health and Education Passport (HEP) training to staff. They have also agreed to provide continuous training/support as needed.

- **Action Step #2:** Provide policy and training to staff regarding data entry of HEP.

Status: Bay Area Academy provided HEP training to staff in November of 2011. San Benito County continues to work to ensure staff are adequately trained and to identify any additional training needs. Hotline, Emergency Response workers, and Continuing Unit workers are trained to obtain school placement information and update system as needed. Health and Education binders are provided to all placement caregivers and data is collected from schools and medical providers by foster parents and provided to SW's. Copies of all health information are provided to the Public Health Nurse (PHN), who enters the information in CWS/CMS.

The County received additional HEP training for CWS/CMS data entry in November 2012 and this has improved data entry. However, CWS/CMS is still not current for all foster youth. This has improved by providing the PHN with a token for remote access to CWS/CMS to facilitate timely entry of Health information.

- **Action Step #3:** Complete a staged "clean up" of the data, requesting that social workers update the HEP for each child at each court hearing.

Status: SW Supervisors have begun collecting data but gathering of all data has not yet been completed with regards to HEP. The plan is to have the Clerical Clerk enter data into CWS/CMS for the social workers. It is noted that although educational data might not be accurate in CWS/CMS, Health data is accurate as it is being entered by Public Health Nurse. Additionally, all data is verified for accuracy via case management strategies when reported to the court.

- **Action Step #4:** Monitor compliance with policy and ensure all data clean up has occurred through Safe Measures Data Reports.

Status: San Benito County continues to work on this milestone; currently, Safe Measures reports continue to indicate improvement is needed, specifically in the educational area of CWS/CMS.

STRATEGY 1.2: COLLABORATE WITH THE EDUCATION DEPARTMENT TO EXPLORE INFORMATION SHARING VIA RELATIONSHIP BUILDING AND AUTOMATION.

- **Action Step #1:** Set up a meeting between Child Welfare, Probation and Education to meet to discuss the possibility of utilizing the Sacramento County automation system.

Status: An MOU was entered into with Foster Youth Services (FYS) Program of Sacramento and plan to implement the use of Foster Focus Data has been developed and signed; but not yet implemented as we are still working out the final stages of getting the Data system in San Benito County.

- **Action Step #2:** If feasible, develop a plan to implement the automation system. Including training, support, and outcome measures.

Status: On August 3, 2011, key Child Welfare staff received training, instruction manuals, and completed the FYS Program Foster Focus Confidentiality Agreement and application for authorized access to data. The SW Supervisor provided social workers with forms for Education Placement updates and caseload lists for updated school information. Clerical Support staff entered updates.

FYS reportedly contracted for Foster Focus on-line service but experienced technical difficulties. The County was advised that the system did not download requisite data (i.e. which children were in out-of-home care). The FYS Liaison reported in September 2012 that the synchronization between Foster Focus and CWS/CMS was not pulling the active data, and would not provide specific field info or new UserID and passwords. After a three month follow up, it was reported that UserID/Passwords were to be provided at the next meeting.

In January 2013 examples of in-county cases were reviewed using FYS Liaison's sign-on. It was still apparent that various CWS/CMS cases were not "batching" to the Foster Focus system. FYS is to research the system criteria that "flags" cases as out of home

placement and thus eligible for FYS. The most recent follow in September 2013 revealed that FYS still did not have any UserID/Passwords to test, but they are attempting to activate. Once activated, SWs can test the system and initiate a service “ticket” if the system is still not updating. FYS still researching fields for Foster Focus synchronization with CWS/CMS.

- **Action Step #3:** After implementation, monitor the effectiveness of the system by routinely soliciting feedback from the placement officers as to the helpfulness of the program and conducting routine case plan audits to ensure information is collected.

Status: Foster Focus is subscribed but not yet accessed by Child Welfare staff due to the technical difficulties described above.

STRATEGY 1.3: PROVIDE SPECIAL EDUCATION TRAINING TO STAFF.

- **Action Step #1:** Develop a plan to train staff in IEP, 26.5 and 504 plan options and rights of children.

Status: A plan has been developed to provide Special Education Training as needed. This is an ongoing need for the agency to address in the continuing SIP efforts.

- **Action Step #2:** Train staff

Status: The San Benito County Special Education Local Plan Area (SELPA) Director, Christine Lompa, and San Benito County SELPA Director of Special Services, Dr. Lorna Gilbert, provided training about Special Education to agency staff in October 2013. An overview of the role of SELPA, governance, advisory groups, services, and local plan elements were provided. The Agency has flexibility in the training budget for specialized modules and as a result the workers have also received training on Supporting Education Rights, Foster Focus Data, and Foster Youth Services. The Agency has a multi-disciplinary County System of Care Committee (CSOC) that staffs cases with representatives from the school districts as well as other community partners. The staff have been encouraged to collaborate with the Education Rights holders, as well as school personnel, regional center, and mental health providers to help inform and assist with achieving their educational goals.

- **Direct services**

Direct services and community outreach are monitored and evaluated through multiple methods that include:

- ✓ Pre-post testing is used on a quarterly basis to evaluate knowledge building and growth in parenting classes and reading programs provided to youth.
- ✓ Client feedback through surveys and monthly contacts are used to determine satisfaction with classes and other services and progress made toward goals.

- ✓ Managers and supervisors have solicited feedback from community partners and consumers to informally analyze the effectiveness of activities, services and outreach.
 - ✓ Bi-monthly supervisor meetings are used to provide feedback regarding improvements in case plan progress and effectiveness of services provided to clients.
 - ✓ SafeMeasures and other Ad Hoc Reports are used to determine progress of case plans and tracking of outcomes.
 - ✓ Consistent updating of community resources list/materials to clients and other community members.
- **Case Management**
Evaluation of program improvements directed at aspects of Case Management from initial referral through reunification or permanency are monitored through multiple methods that include:
 - ✓ Bi-monthly supervisor meetings to ensure continuing adherence to new policies and case management tools and to identify issues or areas of improvement;
 - ✓ Individual supervision to provide feedback in case plan progress;
 - ✓ The use of case review tools to monitor staff accountability to appropriate application of all assessment tools;
 - ✓ Use of SafeMesures to track case progress at all intervals.
 - **System Improvements**
The use of new technology to improve system functions will be evaluated through:
 - ✓ Informal feedback from staff on improved efficiency of using new technology;
 - ✓ Data reports to track improvements on data entry.

Additional strategies and action steps to assist in achieving the goal(s).

There are no new strategies being added to the SIP chart/matrix.

Lessons learned from SIP process:

- Effectiveness of collaboration with partners. Collaboration with CASA, Mental Health, Probation, schools and other community partners has increased in the sharing of resources and increased efforts to improve outcomes for children.
- The feedback & assistance received from the state at quarterly outcomes meetings has proved extremely beneficial in continuing to successfully implement strategies and action steps. This continued support will be vital in successful implementation.

BARRIERS TO IMPLEMENTATION

The county is concerned that the focus on timely reunification will increase reentry rates.

The county has experience technical difficulties in the use of CWS/CMS tokens and in its partnership with FYS to provide linkage to search engines. The county is working to get these issues resolved.

OTHER SUCCESSES/PROMISING PRACTICES

San Benito County will continue to utilize Safety Organized Practice, and continue to rely on family engagement and collaborative forums to wrap services for children, youth and families. It is anticipated that the implementation of SOP will have the most impact on improved outcomes. Other counties have experienced significantly improved outcomes with SOP implementation.

The County participated in the following trainings, Risk and Safety Assessment on Trial, how SDM and Signs of Safety can withstand Courtroom Scrutiny 4/13/11, Signs of Safety Convening 11/08/11, and Intro to SOP 6/12/12. Staff development efforts included capacity-building and subsequent exclusive and customized training and coaching for implementation in San Benito County.

CPS/Probation collaboration has greatly improved at the line-worker level. Workers and officers are coordinating services with one another to increase success and minimize problems of duplicating efforts; i.e. participation in team meetings, helping with supervised visits, transportation to hearings or meetings, cross-enrollment in beneficial programs, random drug-testing. Teaming has increased in developing assessments, identifying and building on strengths, identifying and addressing concerns.

OUTCOME MEASURES NOT MEETING STATE/NATIONAL STANDARDS

Some of the obstacles, systemic issues, and environmental conditions that may be contributing to outcome decline are:

- Placement Stability: Limited local foster care resources; no emergency shelter;
- Placement Stability: Cannot make emergency placements to family members requiring exemptions, thus, may have additional placements;
- Timeliness: Conservative judicial officer; Limited discretion granted to Agency by Court; no blanket orders – judge reluctant to move forward with FR to FM with existing risk factors;
- Timeliness: Limited staff/programming to maintain fidelity to models of advanced practice interventions and clinical/interactive supervised visits, i.e. FTM;
- Limited funding/resources;
- Limited facilities to conduct service meetings/groups;

- National, State and Local economic decline

C1.1 REUNIFICATION WITHIN 12 MONTHS (EXIT) CHILD WELFARE

From:	4/1/2009	4/1/2010	4/1/2011	4/1/2012
To:	3/31/2010	3/31/2011	3/31/2012	3/31/2013
Exit to reun. < 12 mos. (%)	64.7	77.8	75.0	55.1
National Goal (%)	75.2	75.2	75.2	75.2
Exit to reun. during yr. (n)	34	27	28	49
Exit to reun. < 12 mos. (n)	22	21	21	27
National Goal (n)	26	21	22	37

C1.2 MEDIAN TIME TO REUNIFICATION

From:	4/1/2009	4/1/2010	4/1/2011	4/1/2012
To:	3/31/2010	3/31/2011	3/31/2012	3/31/2013
Median mos. latest removal to reun.	8.1	7.0	7.2	10.3
National Goal (mos.)	5.4	5.4	5.4	5.4
Exit to reun. during yr. (n)	34	27	28	49

C1.3 MEDIAN TIME TO REUNIFICATION (ENTRY)

From:	10/1/2009	10/1/2010	10/1/2011
To:	3/31/2010	3/31/2011	3/31/2012
Exit to reun. < 12 mos. (%)	42.9	50.0	37.5
National Goal (%)	48.4	48.4	48.4
First entries during 6-mo. period (n)	14	18	32
Exit to reun. < 12 mos. (n)	6	9	12
National Goal (n)	7	9	16

C4.3 PLACEMENT STABILITY (AT LEAST 24 MONTHS IN CARE)

To:	3/31/2010	3/31/2011	3/31/2012	3/31/2013
Two or fewer placements (%)	33.3	20.0	25.0	31.3
National Goal (%)	41.8	41.8	41.8	41.8
In care during yr. (at least 24 mos.) (n)	27	25	16	16
Two or fewer placements (n)	9	5	4	5
National Goal (n)	12	11	7	7

C1.2 MEDIAN TIME TO REUNIFICATION (EXIT COHORT) PROBATION

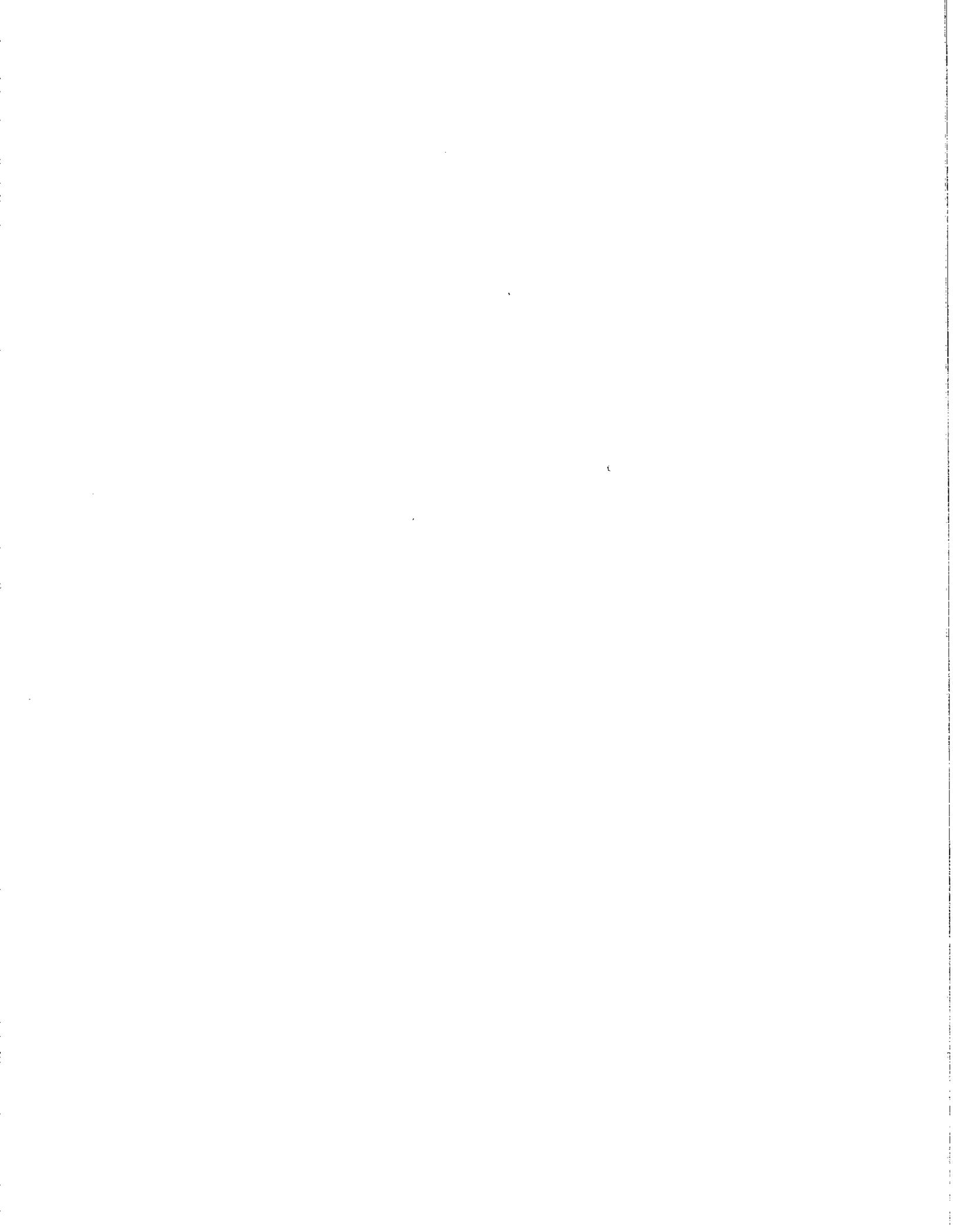
MEASURE NUMBER	MOST RECENT START DATE	MOST RECENT END DATE	MOST RECENT NUMERATOR	MOST RECENT DENOMINATOR	MOST RECENT PERFORMANCE ¹	NATIONAL STANDARD OR GOAL
C1.2	04/01/12	03/31/13	N.A.	1	10.5	5.4

State and Federally Mandated Child Welfare/Probation Initiatives

The County has participated in and implemented current federal or state initiatives. Current examples include, but are not limited to:

- Core Practice Model for the State 4/17/13 – State-wide initiative to develop Core Model to streamline Child Welfare practice language and function throughout the state
- Fostering Connections after 18 (AB12). Agency collaborating with partners to improve outcomes for transitional age youth. Educating youth, families, and providers about resources and access for NMD; implementation of new legislation. FYS Subcommittee developed 05/11 with SW Supervisor as chair. Met monthly until Q2 2012/2013, when meetings were scheduled less frequently. Committee formed to address implementation. Mission statement: The San Benito County AB12 Subcommittee's mission is to streamline communication among providers to identify and serve all eligible youth and ensure they have access to post-secondary education and independent living services to foster their independent success as adults. Policy and procedure being developed.

- **Katie A:** Department leaders met and conferred regularly about implementation. Workers Participated in Katie A. Parent Engagement Series Training 8/2/13, Targeted case management and services for at-risk children with open CPS cases, multiple placements or high mental health needs. Meeting weekly with Behavioral Health for identification and implementation. Currently five youth identified. Exploring other rural county approaches, Lake County provided presentation of creative service delivery by in-house staff, including early engagement groups and parent partner positions. Involved stakeholders including parents and foster youth. Parents interested in becoming parent partners. Jointly developed Eligibility Forms to identify eligible children.



Outcome Systemic Factor

S1-1: Safety Outcome Measure - No Recurrence of Maltreatment

This measure answers the question: Of all children who were victims of a substantiated maltreatment allegation during the 6-month period, what percent were not victims of another substantiated maltreatment allegation within the next 6 months?

County's Current Performance:

From January 1, 2009 to June 30, 2009, 92.7% of children with substantiated maltreatment within the 6-month period did not have another substantiated maltreatment allegation within the next 6 months.

Most recent start date	Most recent end date	Most recent numerator	Most recent denominator	Most recent performance	Direction?	Percent change
01/01/09	06/30/09	38	41	92.7%	Yes	10.7%

Current performance is below the Federal Standard (94.6%) as well as the statewide performance (93.2%).

Improvement Goal 1.0

Maintain the rate of No Recurrence of Maltreatment below the Federal Standard of 94.6% by providing prevention services

		Strategy Rationale			
		<input type="checkbox"/> CAPIT	<input checked="" type="checkbox"/> CBCAP	<input checked="" type="checkbox"/> PSSF	<input type="checkbox"/> N/A
Strategy 1.1		The CSA process determined that the "unmet" need of the community included parenting, home visitation and other supportive services.			
Continue to offer services through the Family Resource Center, including parenting, home visitation services, and supportive services.					
		Timeframe			
Milestone		Assigned to			
1.1.1 Continue to offer parenting classes, home visitation services, and supportive services.		Ongoing			
1.1.2 Evaluate programs ongoing on a quarterly basis.		Quarterly			
Strategy 1.2		There is no centralized area that compiles resources that can be shared with agencies and the community. As resources dwindle even more, it is essential that all resources in the community are tapped in to.			
		<input type="checkbox"/> CAPIT	<input checked="" type="checkbox"/> CBCAP	<input type="checkbox"/> PSSF	<input type="checkbox"/> N/A
Explore the capacity of the FRC, CAPC or Probation liaison officer, to gather community resources to be able to be compiled, and act as a clearing house for the county.					

	<p>1.2.1 Develop a list of all of the non-profit organizations in the county and what services they provide.</p> <p>1.2.2 This compiled list is to be housed in the Family Resource Center and used as a community resource.</p> <p>1.2.3 Update the list on an ongoing basis, at least yearly.</p>	<p>Jan - June 2012</p> <p>June 2012 and ongoing</p> <p>June 2012 and yearly thereafter</p>	<p>Assigned to</p> <p>Ana Cabrera, SW Supervisor I Yolanda Leon, Probation Supervisor</p> <p>Ana Cabrera, SW Supervisor I</p> <p>Ana Cabrera, SW Supervisor I</p>	<p>Strategy 1.3 Utilizing existing resources, distribute information to the community regarding the prevention of child abuse and neglect.</p>	
	<p>Strategy 1.3 Utilizing existing resources, distribute information to the community regarding the prevention of child abuse and neglect.</p>	<p>January - March 2011</p> <p>April 2011</p>	<p>Assigned to</p> <p>Maria C. Corona, Deputy Director Ana Cabrera, SW Supervisor I</p> <p>Ana Cabrera, SW Supervisor I</p>	<p>Strategy Rationale Materials have been developed for child abuse prevention and education. It has been difficult to distribute the materials to remote areas of the county. It was determined that the book mobile and library are a great way to connect with people who may be isolated in the community.</p>	
	<p>Milestone</p> <p>1.3.1 Explore the procedure needed to put informational resources in to the community, review the material for accuracy, and any needed updates.</p> <p>1.3.2 Put informational resources on the "county book mobile", library and any other identified locations.</p>				

	1.3.3 Distribute information to the county library and any other identified locations.	April 2011	Ana Cabrera, SW Supervisor I
Strategy 1.4	Develop a collaboration to explore gaps in services and recommended ways to bridge these gaps, including, community education regarding mandated reporting, exchange of information between agencies, more specialized parenting and teen classes, and substance abuse treatment.	<input checked="" type="checkbox"/> CAPIT <input checked="" type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	Strategy Rationale Throughout this process, some service gaps were identified in the community. Strategy 1.2 will assist us in learning what resources do exist in the county, this strategy is formed to develop a plan of what other gaps may be bridged.
Milestone	1.4.1 Build on an existing collaboration, or develop a new collaboration to develop a plan to address the areas identified above.	Jan 2011	Maria C. Corona, Deputy Director Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor Ana Cabrera, SW Supervisor
	1.4.2 Develop a plan that includes community presentations that provide child abuse prevention, education and reporting information; increase and/or build upon service provider collaborative meetings that could help explore gaps in services and address the above needs and any other identified areas of concern; increase specialized parenting classes and substance abuse services to meet the needs of the parents/families.	January 2011 - June 2012	Assigned to Maria C. Corona, Deputy Director
	1.4.3 Implement the plan	June 2011 - June 2012	Maria C. Corona, Deputy Director
	1.4.4 Monitor the effectiveness of the plan	December 2012 and ongoing	Maria C. Corona, Deputy Director

	<p>Improvement Goal 2.0 Maintain the rate of No Recurrence of Maltreatment below the Federal Standard of 94.6% strengthening safety risk and protective capacity assessments.</p>	<p>Strategy 2.1 Continue to utilize the Structured Decision Making (SDM) Tool appropriately.</p>	<table border="1"> <tr> <td data-bbox="703 1959 743 1959"><input type="checkbox"/></td> <td data-bbox="743 1959 833 1959">CAPIT</td> </tr> <tr> <td data-bbox="703 1885 743 1959"><input type="checkbox"/></td> <td data-bbox="743 1885 833 1959">CBCAP</td> </tr> <tr> <td data-bbox="703 1812 743 1959"><input type="checkbox"/></td> <td data-bbox="743 1812 833 1959">PSSF</td> </tr> <tr> <td data-bbox="703 1738 743 1959"><input type="checkbox"/></td> <td data-bbox="743 1738 833 1959">N/A</td> </tr> </table>	<input type="checkbox"/>	CAPIT	<input type="checkbox"/>	CBCAP	<input type="checkbox"/>	PSSF	<input type="checkbox"/>	N/A	<p>Strategy Rationale In the last SIP cycle emphasis was placed on ensuring that all staff were trained and were correctly using SDM. We would like to continue our focus on making standardized safety, risk and protective capacity assessments.</p>
<input type="checkbox"/>	CAPIT											
<input type="checkbox"/>	CBCAP											
<input type="checkbox"/>	PSSF											
<input type="checkbox"/>	N/A											
			<p>Timeframe</p>	<p>Assigned to</p>								
			<p>Milestone</p>									
			<p>2.1.1 Provide training on an as needed and ongoing basis on the use of SDM.</p>	<p>Ongoing</p> <p>Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor</p>								
			<p>2.1.2 Conduct case reviews to ensure the timely and accurate completion of the SDM tool.</p>	<p>At least semi-annually, commencing January 2011</p> <p>Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor</p>								

Improvement Goal 3.0	
Maintain the rate of No Recurrence of Maltreatment below the Federal Standard of 94.6% by providing a family empowerment program.	
Strategy 3.1	Strategy Rationale
Develop and implement a family strength-based program for at risk youth attending elementary school.	<input type="checkbox"/> CAPIT
	<input type="checkbox"/> CBCAP
	<input type="checkbox"/> PSSF
	<input type="checkbox"/> N/A
Milestone	Timeline
3.1.1 Meet with CBO's, community and faith based organizations and school officials to identify a process to reach "at risk" families to	Dec 2010 – on going process
3.1.2 Develop a family strength based extra curricula activities, including sports.	June 2011 – December 2011
3.1.3 Develop and or expand after school tutoring programs .	Dec 2010 – on going process
	Assigned to
	Yolanda Leon Probation Supervisor
	Probation
	Probation

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

San Benito County would benefit from additional funding to help increment services to assist families and children in the community.

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

Additional training for staff and community partners that focus the teaming and collaboration process that will help streamline services for families and children of the community.

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

Identified stakeholders from other Agencies and Community Based Organizations can assist with the development of programs and services that can help provide preventative and intervention services to families and children at risk of abuse or neglect.

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

Additional funding to increase staffing time would help increase preventative services.

Outcome/Systemic Factor

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

This measure examines of all children who required a monthly social worker visit, how many received a face to face visit?

County's Current Performance:

In December, 2009, we had a 84.8% compliance on timeliness of monthly social worker visits.

Most recent date	Most recent numerator	Most recent denominator	Most recent performance	Direction?	Percent change
December 2009	112	132	84.8%	Yes	23.4%

Current performance is below the Federal Standard (95%) as well as the statewide performance (92.3%)

Improvement Goal 1.0

Increase the timeliness of social worker visits to above the Federal Standard of 95%

Strategy 1.1

Ensure that the face-to-face contact protocol and documentation policy that was developed in the last SIP cycle is fully implemented and monitored.

Strategy Rationale

Considerable time was spent developing a policy and protocols which attempts to resolve barriers to increased compliance. This policy has been implemented and needs to be continually monitored to ensure continued implementation.

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

Milestone	Timeframe	Assigned to
<p>1.1.1 Staff will continue to implement the policy, including entering contacts within five days of the end of the month, use of safe measures to track entries and discussion with their supervisor.</p>	Ongoing	<p>Maria C. Corona, Deputy Director Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor</p>
<p>1.1.2 Supervisors will continue to ensure the implementation of the policy, by the use of "Safe Measures" in individual supervision.</p>	Ongoing	<p>Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor</p>
<p>1.1.3 Supervisors will problem solve with staff during individual supervision and unit meetings when issues of compliance occur, including data entry assistance by volunteers and interns.</p>	Ongoing	<p>Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor</p>

Strategy 1.2	Strategy Rationale			
	<input type="checkbox"/> CAPIT	<input type="checkbox"/> CBCAP	<input type="checkbox"/> PSSF	<input type="checkbox"/> N/A
Explore the use of technology to assist social workers to be able to record their contacts when they are not in the office.	Traditionally social workers have hand written their notes after the contact with the family, and subsequently enter the contact notes in to the CWS/CMS system. This strategy explores the possibility of obtaining remote access to CWS/CMS and the possibility of funding for lap tops and flash drives.			
Milestone	Assigned to			
1.2.1 Contact other counties to gather research regarding what technology systems they have developed to help social workers record contacts when they are not in the office.	June 2011			Margie Diener, Staff Services Analyst
1.2.2 Explore possibility of funding to purchase the recommended technology solution.	June 2011 - December 2012			Mark Eiserer, Fiscal Deputy Director Maria C. Corona, Deputy Director
1.2.3 Develop a policy and provide training to staff on the use of the technology.	January 2012 - March 2012			Margie Diener, Staff Services Analyst Maria C. Corona, Deputy Director
	Timeframe			

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

Due to fiscal conditions furloughs have been ordered by the County, additionally a policy is in place where vacation cannot be accrued after reaching the County's maximum hours. This has increased the number of staff on leave, and decreases the amount of time social workers and probation officers have to visit the children, youth and families and enter their contacts.

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

Ongoing training on Safe Measures.
Training on the policy and how to use the technology to enter contacts when not in the office.

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

Assistance from Management regarding systemic factors.

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

N/A

Outcome/Systemic Factor:

Permanency Measure C2.1: Adoption Within 24 months (Exit Cohort)

This measure answers the question: Of all children discharged from foster care to a finalized adoption during the year, what percent were discharged in less than 24 months from the date of the latest removal from home?

County's Current Performance:

From January 1, 2009 to December 31, 2009, 25.0% of children discharged from foster care to a finalized adoption during the year were discharged in less than 24 months from the date of the latest removal from home.

Most recent date	Most recent numerator	Most recent denominator	Most recent performance	Direction?	Percent change	Most recent date
December 2009	112	132	84.8%	Yes	23.4%	December 2009

Current performance is below the Federal Standard (86.6%) as well as the statewide performance (28.2%).

Outcome/Systemic Factor:

Permanency Measure C2.5- Adoption within 12 Months (Legally Free)

This measure answers the question: Of all children in foster care who became legally free for adoption during the year, what percent were then discharged to a finalized adoption in less than 12 months?

⇒ County's Current Performance:

From January 1, 2008 to December 31, 2009, 57.1% of all children in foster care who became legally free for adoption during the year discharge to a finalized adoption in less than 12 months.

Most recent date	Most recent numerator	Most recent denominator	Most recent performance	Direction?	Percent change	Most recent date
01/01/08	123108	5	11	45.5%	yes	20.5%

January 1, 2005, to December 31, 2008, there has been an increase from 26 % to 45.5 % of all children in foster care who became legally free for adoption during the year to discharge to a finalized adoption in less than 12 months. Current performance is below the Federal Standard (53.7%) as well as the statewide performance (58.3%).

<p>Improvement Goal 1.0</p> <p>Increase the number of all children discharged from foster care to a finalized adoption during the year from 25% to above the federal Standard 36.6% by implementing comprehensive concurrent planning with the family throughout the life of the case</p> <p>Increase the number of all children in foster care who became legally free for adoption during the year discharge to a finalized adoption in less than 12 months from 45.5% to above the federal standard of 53.7% by implementing comprehensive concurrent planning from the beginning of involvement with the family throughout the life of the case</p> <p>This improvement goal will be met by year three of the SIP</p>		<p>Strategy Rationale</p> <p>Research has shown that family finding and engagement increases placement stability and if needed identifies more adoptive placements. We currently do family finding, but it is not consistent across the agencies and no formalized policy and procedures are in place. In addition, San Benito County does not have its own Adoption Unit, therefore, this at times can hinder the process for a timely adoption.</p>	
		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	<p>Assigned to</p> <p>Maria C. Corona, Deputy Director Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor</p>
		<p>Strategy 1.1</p> <p>Develop a mechanism, policy and procedure, for family finding and engagement.</p>	<p>January 2012 - March 2012</p>
		<p>Milestone</p> <p>1.1.1 Explore search engines that are able to be utilized to assist with family finding, including their cost.</p> <p>1.1.2 If fiscally feasible purchase the family</p>	<p>Timeframe</p>

finding technology.	April 2012	Maria C. Corona, Deputy Director
1.1.3 Develop policy and procedures for the process of family finding. Including the possibility of using a genogram and connectedness map	March 2012 to May 2012	Maria C. Corona, Deputy Director
1.1.3 Train identified staff in the use of family finding technology, policies and procedures.	June 2012	Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor
1.1.4 Evaluate the implementation of the policy and procedures.	June 2012 ongoing, at least semi-annually.	Maria C. Corona, Deputy Director
Strategy 1.2 Improve "concurrent planning" across the continuum of engagement with the family, from the beginning of the case and through possible adoption.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	Strategy Rationale It was identified in the state Program Improvement Plan that concurrent planning has not been implemented consistently across California and implementation would increase timely adoptions. Concurrent planning, broadly defined to include family finding and engagement, team meetings, and an identified and frequently re-assessed concurrent plan, increases the timeliness to finalized adoption.

Milestone	Timeframe	Assigned to	January 2011 - April 2011	December 2011 and ongoing
<p>1.2.1 A concurrent planning work group will be formed to review the current process and develop a plan for enhancing and standardizing the process of concurrent planning. This plan will include policy and practice recommendations, training needed and outcome measures.</p>		<p>Maria C. Corona, Deputy Director Shyloh Sterns, SW Supervisor Tracey Belton, SW Supervisor</p>	<p>May - August 2011</p>	<p>Maria C. Corona</p>
<p>1.2.2 Implementation of the plan.</p>		<p>Maria C. Corona</p>		<p>Maria C. Corona</p>
<p>1.2.3 Ongoing monitoring and evaluation of implementation of policy.</p>			<p>December 2011 and ongoing</p>	
<p>Strategy 1.3 Child Welfare Services Family Meetings/Decision Making will be evaluated and formalized, including the referral process, when the meetings are to occur, and the development of outcome measures.</p>			<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A</p>	<p>Strategy Rationale Research finds that people who are included and asked to participate in making decisions that affect them are more likely to follow through with the plans and decisions that are made¹. Additionally, when people feel valued and respected in contributing to decisions made about them, they are more likely to have increased self-esteem, self-efficacy, and a greater sense of empowerment.</p>

¹ Maddux, J.E. (Self-Efficacy. In C.R. Snyder & S.J. Lopez (EDds.), *Handbook of positive psychology* (pp.277-287). New York: Oxford University Press.
STATE OF CALIFORNIA - HEALTH AND HUMAN SERVICES AGENCY CALIFORNIA DEPARTMENT OF SOCIAL SERVICES

Milestone	Timeframe	Assigned to	Strategy Rationale
<p>1.3.1 A literature review to ascertain current evidence based practice, and researching current models of Family Meetings/Decision Making process used in other counties and states, will be conducted to form a recommendation as to the best family meeting structure to meet our needs.</p>	<p>January 2011 – on going</p>	<p>Maria C. Corona, Deputy Director Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor</p>	
<p>1.3.2 Develop implementation plan for the Family Meeting/Decision making process to enhance parent participation and leadership by inviting parents to actively participate in these meetings.</p>	<p>June 2011- on going</p>	<p>Maria C. Corona, Deputy Director</p>	
<p>1.3.3 Implementation of the plan. Including the development of policy, identifying the training and setting up a training plan for staff.</p>	<p>June 2011 – on going</p>	<p>Maria C. Corona, Deputy Director Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor</p>	
<p>1.3.4 Ongoing monitoring of outcomes reported quarterly.</p>	<p>June 2011 – on going</p>	<p>Maria C. Corona</p>	<p>Strategy Rationale Over the last three years and continuing in this SIP cycle an emphasis has been to place children with their relatives. There is no formalized training and support for kinship providers and this lack of support affects placement stability and adoption.</p>
<p>Strategy 1.4 Explore the possibility of community colleges providing Kinship care training and support.</p>	<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A</p>		

<p>Milestone</p> <p>1.4.1 Canvass surrounding and "like" counties to understand their funding mechanisms for the community colleges to provide Kinship care training and support.</p>	<p>January 2011 - June 2011</p>	<p>Assigned to</p> <p>Mark Eiserer, Fiscal Deputy Director Maria C. Corona, Deputy Director</p>
<p>1.4.2 Determine the feasibility and value of having a Kinship Care Training and Support program in San Benito County.</p>	<p>June 2011 - December 2011</p>	<p>Maria C. Corona, Deputy Director</p>
<p>1.4.3 If it is determined to be feasible to have a Kinship Care Training and Support program in San Benito County, develop an implementation plan including policy development and staff training.</p>	<p>January 2012 and on-going</p>	<p>Maria C. Corona, Deputy Director</p>
<p>Improvement Goal 2.0 Increase the number of all children discharged from foster care to a finalized adoption during the year from 25% to above the federal Standard 36.6% by continuing to collaborate with State Adoption Services and Juvenile Court, and hold all parties accountable</p> <p>Increase the number of all children in foster care who became legally free for adoption during the year discharge to a finalized adoption in less than 12 months from 45.5% to above the federal standard of 53.7% by continuing to collaborate with State Adoption Services and Juvenile Court, and hold all parties accountable</p>		
<p>Strategy 2.0 Continue to hold parties (i.e. adoptive parents, State</p>	<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF</p>	<p>Strategy Rationale Not having and adoptions unit in San Benito County makes it</p>

<p>Adoptions Staff, Social Workers) accountable for completion of adoption process. Including completion of necessary documentation, home studies and support needed to complete the process.</p>	<input type="checkbox"/>	<p>N/A</p>	<p>challenging for San Benito County to finalize adoptions in a timely manner; in addition, recent State furloughs also contribute to delays given that State Adoptions Staff has less time to work with families to finalize adoptions.</p>			
Timeframe						
<p>2.1 Meet monthly with CDSS Adoption's staff to discuss all cases and problem solve regarding completing the necessary documentation for home studies.</p>	<p>Ongoing</p>					
<p>2.2 Continue to collaborate with the court by providing them with concise updates, so the court is aware of any delays in home studies and can make subsequent inquiries.</p>				<p>Ongoing</p>		
<p>2.3 Continue to work with the caregivers to assist them in the adoption process.</p>				<p>Ongoing</p>		
Milestone						
<p>Maria C. Corona, Deputy Director Shyloh Sterns, SW Supervisor Tracey Belton, SW Supervisor</p>						
<p>Shyloh Sterns, SW Supervisor Tracey Belton, SW Supervisor</p>						
<p>Shyloh Sterns, SW Supervisor Tracey Belton, SW Supervisor</p>						

Outcome/Systemic Factor:
Permanency Measure (4-1): Placement Stability Outcome: Placement Stability (8 Days to 12 Months In Care)
 This measure answers the question: Of all children served in foster care during a year who were in foster care for at least 8 days but less than 12 months, what percent had two or fewer placement settings?

County's Current Performance:

From January 1, 2009 to December 31, 2009, 75.4% of children in foster care during the year that had been in care for at least 8 days but less than 12 months had two or fewer placement settings.

Most recent start date	Most recent end date	Most recent numerator	Most recent denominator	Most recent performance	Direction	Percent change
01/01/09	12/31/09	49	65	75.4%	?	-2.6%

From the baseline of January 1, 2006 to December 31, 2006, the number of children who had two or fewer placement settings decreased from 78% to 75.4%. Current performance is below the Federal Standard (86.0%) as well as the statewide performance (83.6%).

Improvement Goal 1.0

The strategies developed for the adoption strategies will also assist with improving placement stability. They are Family Finding and Engagement, Team Meetings, and Concurrent planning.

For the Federal Standard to be met, if the above numbers remained constant we would need 56 out of 65 children to have two or fewer placements within a twelve month period, an increase of 11.6% from our current performance.

Improvement Goal January 2011 – December 2011 is to increase performance by 3.6%

January 2012 – December 2012 is to increase performance by an additional 4%

January 2013 – December 2013 is to increase performance by an additional 7.4%

Increase the infrastructure for placement of children within our county and with their relatives. Increase the number of county foster homes that accept children 0-17 years of age.

We currently have 5 foster homes. Our goal is to increase each year by at least one additional foster home.

2011 - 6 foster homes, 2012 - 7 foster homes, and 2013 - 8 foster homes

Milestone	Timeline	Strategy Rationale	Assigned to
<p>Strategy 1.1</p> <p>Continue to develop and implement the Emergency Placement Protocol to increase non-relative/relative extended family homes and to stabilize placement efforts. (Protocol process commenced in 4/10).</p>	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A	<p>Emergency Placement Protocol was developed so that when children are removed they are able to be placed with their relatives. However, this protocol follows the state guidelines and is considered very strict and not relative friendly. In this SIP cycle we would like to work with the state to see if we have interpreted the state guidelines correctly and if there is any flexibility.</p>	<p>Jennifer Pimental, SW II</p> <p>Maria C. Corona, Deputy Director</p> <p>Maria C. Corona, Deputy Director</p> <p>Tracey Belton, SW Supervisor</p> <p>Shyloh Sterns, SW Supervisor</p>
<p>1.1.1 Request California Department of Social Services (CDSS) to provide Technical Assistance regarding how to apply exemptions to the emergency placement protocol.</p>	<p>January 2011</p>		
<p>1.1.3 Update protocol and train staff on any new aspects of the protocol that CDSS is able to assist with.</p>	<p>March 2011 and ongoing</p>		

<p>Strategy 2.1 Recruitment and retention of county foster homes:</p>	<p>Strategy Rationale When children are placed out of county, they are seen less frequently by the agency staff and their families. Without quick intervention placements can quickly disrupt and necessitate the child needing to be moved. San Benito county has five active county licensed foster homes, but they are either foster adoptive homes or prefer small children for placement. Most of our children who are placed in county are placed in Foster Family Agencies, where we compete for those beds with surrounding counties. We need to develop a strategy to recruit and retain more county foster homes, overcoming the systemic issue that the county pays lower rates to foster homes than the Foster Family Agencies. We also need to build better relationships with the FFA's so that San Benito children are placed in our county.</p>	<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A</p>	
<p>Milestone</p>	<p>Timeframe</p> <p>2.1.1 Explore fiscal aspects, doing a cost analysis to see if it is feasible to increase the rate paid to county foster homes.</p> <p>2.1.2 Develop a recruitment campaign, targeting San Benito County families. This could possibly include partnering with Monterey County on their marketing campaign.</p> <p>2.1.3 Implement and monitor the recruitment campaign.</p>	<p>June 2011</p> <p>July 2011 – on going</p> <p>June 2011-on going</p>	<p>Assigned to</p> <p>Maria C. Corona, Deputy Director Mark Eiserer, Fiscal Deputy Director</p> <p>Ana Cabrera, SW Supervisor Maria C. Corona, Deputy Director</p> <p>Ana Cabrera, SW Supervisor</p>

<p>2.1.4 Increase efforts to build stronger relationships and communication with FFA's to encourage more placement of San Benito children in San Benito homes and not other county children if at all possible. This could include FFA's telling CWS/Probation when they have openings. This will also help increase child/parent visitation support for reunification purposes.</p>	<p>June 2011-ongoing</p>	<p>Maria C. Corona, Deputy Director Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor Ana Cabrera, SW Supervisor</p>
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Describe any additional systemic factors needing to be addressed that support the improvement plan goals.

There needs to be an increase in efforts to recruit and retain foster families in San Benito County that will take children ages 0-17 that are residents of this county.

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

Training on concurrent planning, especially for children who enter out of home placement or face placement disruption.

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

Foster Family Agencies could be a key partner in assisting with developing ideas to increase number of placements in their foster homes for children who are residents of San Benito County.

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

Additional State funding that could provide higher foster care reimbursement rates for families.

Outcome/Systemic Factor:

Health and Education Passports

County's Current Performance:

San Benito County ensures that the Health and Education needs of the children are being met. The information regarding health and education is reported to the court through court reports. However, we currently do not enter that data into the CWS/CMS so we cannot provide the qualitative documentation.

Improvement Goal 1.0 Improve the entry of information obtained regarding health and education into the CWS/CMS system

January 2011 – December 2011 to 100% data entry compliance

Strategy 1.1

With the help of CWS/CMS technical assistance, develop a policy and procedure of the correct computer fields to enter the information and provide training to staff, and monitor the correct data entry.

Strategy Rationale

The health and education needs of the children in placement are being met and are reported to the court via court reports. The data entry field that this outcome is measured by is not currently known to the agency. Once technical assistance has been received and staff trained, the information will be entered.

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

Milestone	Timeframe	Assigned to	Strategy Rationale
1.1.1 Contact Bay Area Regional Training Academy or CDSS for technical assistance regarding correct data entry.	January 2011	Margie Diener, Staff Services Analyst	
1.1.2 Provide policy and training to staff regarding data entry of HEP.	February 2011	Maria C. Corona, Deputy Director Judith Lefler, Bay Area Academy	
1.1.3 Complete a staged "clean up" of the data, requesting that social workers update the HEP for each child at each court hearing.	February 2011 to December 2011	Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor	
1.1.4 Monitor compliance with policy and ensure all data clean up has occurred through Safe Measures Data Reports.	December 2011 and ongoing	Tracey Belton, SW Supervisor Shyloh Sterns, SW Supervisor Maria C. Corona, Deputy Director	
Strategy 1.2 Collaborate with the education department to explore information sharing via relationship building and automation.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input type="checkbox"/> N/A		To improve the qualitative assistance children in placement receive with their education. The Foster Youth Services in Sacramento county have developed an automation system to share information between child welfare, probation and education. San Benito Education and Child Welfare System would like to develop a similar process.

Milestone	Timeframe	Assigned to
1.3.1 Develop a plan to train staff in IEP, 26.5 and 504 plan options and rights of children.	December 2011	Maria C. Corona, Deputy Director Yolanda Leon, Probation Supervisor
1.3.2 Train staff	January 2011- December 2011	Frank Beitz, FYS Coordinator

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

There is a need to increase collaborative efforts with Foster Youth Services and Special Education Department to ensure a clear understanding of the educational needs of children in foster care. Training regarding the importance of ensuring educational rights is also essential to ensuring appropriate educational plans are made for children in care.

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

Provide training related to children's educational rights for social workers and probation officers to have a better understanding of academic program services and requirements.

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

County Office of Education Foster Youth Services will be a key partner in developing training.

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

Additional funding to help designate a staff person for educational related matters would be ideal.