

***Contra Costa County  
Children & Family Services  
A Bureau of the  
Employment & Human Services Department***

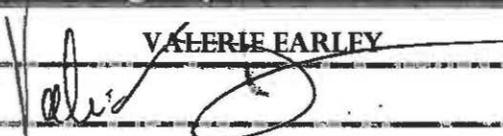
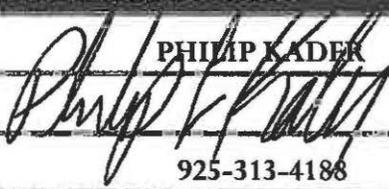
**System Improvement Plan  
March 2010 – December 2014**

**Annual Progress Report, January 2014**

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# California – Child and Family Services Review Signature Sheet

*SIP ANNUAL PROGRESS REPORT—January 2014*

County	CONTRA COSTA COUNTY
CSA Period Dates	July 2010 -- August 2015
SIP Period Plan Dates	October 2010 -- January 2016
Outcome Data Period	July 2007 -- June 2008
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BOS Approval Date	
Name	
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\*Signatures must be in blue ink

**RECEIVED MAR 11 2014**

Mail the original Signature Sheet to:

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

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# I. INTRODUCTION

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This annual update report documents progress and performance from Dec 2012 thru December 2013 for the Systems Improvement Plan of Contra Costa County Children & Family Services. This update is from the System Improvement Plan which covers March 2010 thru December 2014. The Systems Improvement Plan was originally slated as a tri-annual plan, however in May 2012; CDSS revised the schedule and extended all existing plans to five years. In 2015, Contra Costa will begin focusing on another Peer Quality Review and Self-Assessment Process and will write a new Systems Improvement Plan to begin January 2016.

In preparation for this annual Systems Improvement Plan review, Contra Costa has taken a careful look at action and success thus far in selected Strategies and Action Steps to continue to guide our focus for the next year.

This review has taken into account changes that have occurred in the last year. Changes in policy, practice, state and local initiatives and projects, staffing, etc. all influence focus, performance, outcomes measurement and the significance of specific strategies and goals: A strategy set at the beginning of a five year period may feel completed at the end of year one only to resurface as policy is revised thus changing requirements; new models which promise best practice and/or performance improvement may be adopted that require changing direction or shifting focus; updates to methods of measuring data may impact outcomes; performance change of either improvement or decline in one area may impact performance in another areas; and staffing variables may require priority attention on basic service needs such as safety thus reducing time spent developing strategies that improve not only performance but well-being and consumer satisfaction of families and children.

All of these fluctuating conditions are in play in Contra Costa Children & Family Services: Policies for extended foster care for non-minor dependents have been developed and implemented; a review of all cases to assess and address Mental Health needs based on the Katie A initiative is under way; changes in policies for placement in Group Homes now require case review and high level approval; methodology for measurement of compliance with Timely Visits to Children has been changed; a new practice approach, Safety Organized Practice, provides a new approach for assessing and discussing intervention, family safety and case planning provides new tools for reviewing cases; engaging children and families and efforts to stabilize staffing levels all impact the energy and focus for Systems Improvement Plan strategies.

To support counties in addressing changes in environment and responding to performance improvement and decline during the five year SIP period, the state now allows counties to review and modify and/or add strategies.

A careful review of selected measures and strategies has occurred in Contra Costa. Based on that review we continue to focus on the 2 measures and one systemic factor originally selected.

**Performance Measure 2F (formerly 4C) Timely Social Worker Visits with Child  
Performance Measure C3.1 Exits to Permanency (24 Months in Care)  
Systemic Factor Racial Disparity - Entries of African American Children to Foster Care**

The strategic plan set in 2010 continues to support the effort toward improvement in these areas. The strategies where progress has been made but ongoing efforts are required to sustain correction have been marked as Completed and Ongoing. Those strategies determined to be most effective have been identified and a To Do plan has been created to guide the work within these strategies which will impact outcomes for children and families.

### **Summary on Action Steps Selected for Current SIP Period**

Contra Costa has seen significant improvement in Measure 2F (formerly 2C), Timely Social Worker Visits with Child but more work remains to assure quality visits. For the second selected measure, C3.1, Exits to Permanency following 27 Months in Foster Care and Disparity in Entries of African American Children to Foster Care, performance improvement is still needed. This report will document performance in the three selected areas.

The goal is to improve performance as measured in the outcome. If strategies have not impacted performance, Contra Costa seeks to explore the following:

- Why have the strategies not been successful? Are there different approaches that would improve performance?
- Are there issues such as economy or political pressures that impact performance improvement?
- Are there limitations in the measurement itself or can performance be measured in another way to document successes such as looking at alternative data, improvement to family well-being or engagement or improved consumer (family) satisfaction.

Below is a summary of what this report will present for the selected measures.

Timely Social Worker Visits – Early on in the SIP period, facing very poor performance in this measure (78.7%) and knowing the significance of timely and consistent contact with families and children, Contra Costa addressed the issue of **Timely Social Worker Visits** with vigor. Measurement of this outcome in last year’s report documented immediate response by staff with improvement to 90% or above as early as October 2010.

With the change in how performance is measured (previously the measurement was for the prior quarter, now this measure has start and end dates for a rolling year), the poor performance at the beginning of the SIP period was not resolved until October 2011. However, since that time Contra Costa has generally sustained visits at or above 90% which is the target set for compliance. What is also clear with this measure is the decrement in our ability to maintain above the 90% has dropped over the last year. Though success has been achieved and sustained, Contra Costa continues to work on quality of contacts..

Exits to Permanency Following 24 Months in Care – Contra Costa has not improved performance in measure C3.1, Exits to Permanency (24 Months in Care), in fact the chart tracking performance shows a decline in performance. This report documents that the number of children in long term foster care has declined significantly with the declining population in general of children in care. Also impacting this measure is the implementation of AB12, Extended Foster Care that gives an incentive for youth to stay in Foster Care so they can take advantage of the financial benefits. Contra Costa continues to pursue the strategies of case reviews and focus on permanency to determine the best plan for every child in long term foster care

Racial Disparity in Entry of African American Children to Care – Contra Costa also continues to focus its attention on racial disparity in entries to foster care and strategies defined for this effort require ongoing work.

Section III of this report provides more detail about performance in these areas. Section IV provides a table that discusses progress in each strategy and action step as well as defining the To Do plan that will focus efforts over the next year.

## **Focus on Outcomes and Accountability**

As documented in the previous annual Systems Improvement Plan report, Contra Costa continues a strong commitment to data evaluation and outcomes driven policy and procedures and has fully integrated data evaluation into policy discussions and strategic planning. Continual focus on outcomes and statistics supports systems improvement efforts. It is hard to remember how decisions were made without the availability of data and analysis that is now a way of doing business here. This section demonstrates the integration of data analysis and the outcomes driven approach in Contra Costa. This focus on performance improvement as well as staff committed to safety, permanence and well-being of children provide an environment of continual practice review and adjustment to best meet the needs of the families and children we serve.

Contra Costa has a manager position whose specific assignment is to respond to data requests, proactively evaluate performance, identify trends and training needs, support implementation of new policy by identifying target populations and tracking implementation, and providing reports to indicate policies that are impacting or have potential to impact performance. This manager is part of the Administrative Team and attends administrative review and strategic planning meetings.

Having a manager dedicated to data analysis so closely aligned with the day to day operations of Child Welfare Services allows for quick and knowledgeable response to issues. This manager also provides support to a wide variety of committees and groups as well as sharing information with community and agency partners regarding Child Welfare statistics in Contra Costa.

In addition to the overlay of data into day to day operations and decisions, the Children's Services Administrative Team has a standing monthly agenda item to analyze and discuss workload as well as compliance in areas of referral response and child visits. Other areas of performance improvement are added as needed to further improve performance in areas of permanence. For these discussions managers are responsible for bringing in Safe Measures reports for respective districts; these reports are also reviewed by the manager with the supervisor and by the supervisor with line staff. Thus the focus on data is driven down to the lowest level.

Social Work staff is also encouraged to utilize the Safe Measures system for managing and monitoring their work. This includes attention to the compliance measures, targeting specific policy issues, and evaluating personal performance in outcomes.

To support a continual review and focus on performance improvement in federal and state measures and to track progress on SIP strategies and activities, the Project Management Team (PMT) agreed last year to spend one meeting each quarter reviewing the Quarterly Outcomes Measurement report and one meeting reviewing progress on SIP strategies and action as well as keeping a focus on other projects, grants, strategies and efforts.

## **Structure that Supports Performance Improvement**

Contra Costa continues its commitment to support SIP efforts and best practice, including collaboration with agency partners, staff involvement in planning and implementing projects, and listening to the voice of parents and youth.

Listening to the consumers of Child Welfare Services in Contra Costa is accomplished in a variety of ways. Parent Partners are advocates for and the voice of the parents receiving Child Welfare Services.

Youth participate in a variety of forums whenever possible. Connection to community, non-profit agencies, and faith based organizations and other agency partners through district Community Meetings also allow Contra Costa to be in tune with the activities in the community that impact decision making. Additionally we're committed to Quality Assurance and Improvement is also evident in various committees and structures that focus on performance.

Children's Services Administrative Team (CSAT) meetings occur weekly and include the Director and all managers. This is the policy making body that receives input from all the other various committees, tracks changes impacting Child Welfare Services at federal, state and county levels and provides direction to staff and other committees.

The Project Management Team (PMT) meeting was formed during the last Systems Improvement Plan period (2008 to 2010) to manage all of the strategies for that plan as well as various other grants, projects, and pilot activities. Prior to the formation of this team, a project manager worked on a task with little consideration of the other projects that were occurring. The mode of operation resulted in a resource challenge as managers working in similar or dissimilar areas of focus needed the same resources. It became evident that some of the activities overlapped, some were at cross purposes, and some were duplicative efforts for staff. This committee monitors performance and provides a forum for tracking the planning and progress for SIP strategies and other project activities. It serves to alleviate scheduling conflicts that impact staff and to maximize the use of various resources.

Children's Bureau Leadership Team (CLT) is a monthly meeting hosted by the Director of Children & Family Services that invites all managers, supervisors, analysts, and trainers for information sharing, mini-trainings, information gathering and feedback, and peer support.

Program Committee includes supervisors and line staff. This committee recommends policy reviews and revisions, proposes procedures and procedural changes, and advises the Administrative Team of trends and training needs.

Case Reviews have become a standard method of gleaning information from specific case actions to targeted reviews of randomly selected cases. These reviews provide valuable insight on the impact of case actions and trends on focused topics. These reviews occur at PMT, at CLT, at CSAT, in operational divisions, and in meetings scheduled to specifically address outcomes for a high risk case, such as the administrative team meeting, Case Review. For the past year, the focus of this committee has been looking at incorporating tools and strategies in the Safety Organized Practice model into the case review process. Each meeting a specific case is still assessed and discussed but the discussion is more focused on family behavior that identifies strengths, past danger and potential harm and supports planning for safety of children and permanency. In addition, in 2013, Contra Costa embarked on a new project to target cases of children in long term foster care in district reviews. More work will be done in this area next year.

Other Case Review Meetings exist at operational district level that address case reviews at specific points or for specific placement types, for example, disposition, placement with kin, placement in group homes, etc. A focus for the next year will be to evaluate these reviews and consolidate into a more efficient, concise review process.

Learning Community Environment is an approach to support staff awareness and engagement in strategies, models, projects, etc., by supporting a forum for open discussion by Social Workers and supervisors with a focus on permanency issues. This forum was established under the federal grant for Comprehensive Family Assessments and is currently being used to support the Safety Organized Practice model.

## II. CONTRA COSTA'S CURRENT PERFORMANCE

The following table documents Contra Costa's current performance on our Systems Improvement Plan. The table discusses success and challenges in each of these measures. Data for this review is taken from the most recent quarterly county outcomes report, CWS Outcomes System Summary for Contra Costa, October 2013. Charts display the performance track from Jan 2009 since this was the current data when the Peer Quality Case Review and County Self-Assessment and selection of measures for the Systems Improvement Plan began. Data for the baseline month (Jan 2004) is given but considered to not be a good point of comparison when analyzing current performance.

**SIP Table 1: Performance in Selected Measures**

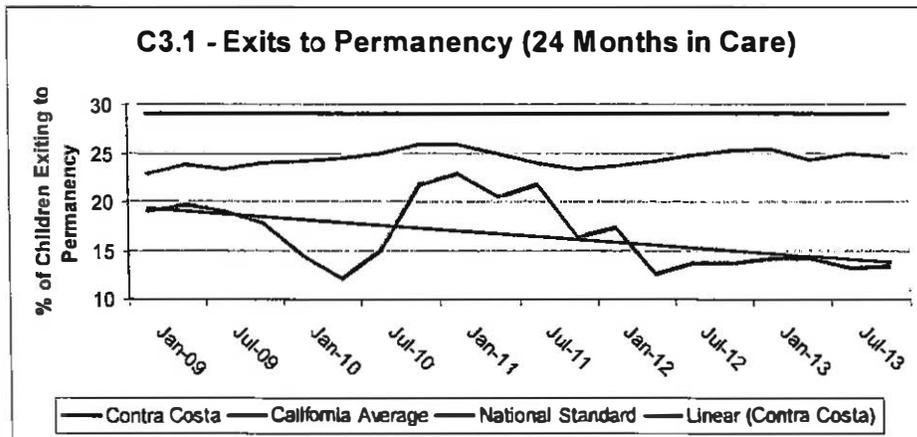
<b>Measure</b>	<b>2C Timely Social Worker Visits with Child</b>
<b>Methodology</b>	<p>This measure reports the percent of months with in-person contacts in which the contact occurred in the residence of the child or youth. The denominator is the number of children in care who had at least one in-person contact during the month and the numerator is the number of children where at least one of that month's in-person contacts was in the placement facility. The time period for the measure is a rolling year that ends in the last month of the prior quarterly report period.</p> <p>This report considers each month separately, but summarizes this data for a 12-month period. For each month in the 12-month period three numbers are determined for children in care:</p> <ol style="list-style-type: none"> <li>1. The number of children in care who were required to have an in-person contact, i.e., who were in an open placement episode for the full calendar month;</li> <li>2. The number and percent of children in Group 1 who had at least one in-person contact during the month; and</li> <li>3. The number and percent of children in Group 2 where at least one of that month's in-person contacts was in the placement facility.</li> </ol> <p>This is new methodology. Previously, the measure reported compliance for each of the three months in the prior quarter.</p>
<b>National Standard</b>	Timeliness of Social Work Contacts is not a national measure and therefore a National Standard is not set.
<b>Target</b>	"Though Contra Costa ultimately seeks to have 100% compliance in Social Worker

<b>Improvement Goal (as stated in the 2010 SIP)</b>	<p>contacts, the goal set for this Improvement Plan period is a sustained 90% or greater compliance for the final year of the SIP. We expect to see gradual improvement during the first 2 years of the SIP.”</p>																																												
<b>Current Performance</b>	<p>Baseline Performance (Quarter #1, Jan 2004): 56.7%  Performance When SIP work began (Quarter #23, Jan 2009): 79.8%  Current Quarter Performance (Quarter #41, Oct 2013): 90.1%</p> <p>As noted above, the methodology for this measure was changed so that performance is now a percent of months during the previous year not just compliance for previous quarter.</p> <p>Performance from all quarters since the last annual SIP report is:</p> <p>October 2012: 93.1%  January 2013: 92.5%  April 2013: 91.4%  July 2013: 91.0%  October 2013: 90.1%</p> <p>This performance does meet the Target Improvement goal as stated in the 2010 Systems Improvement Plan. It's important to note that at the time the SIP was written, performance was at 78.7%, thus the performance improvement is significant.</p>																																												
<b>Performance Track</b>	<div data-bbox="440 1094 1369 1528" data-label="Figure"> <p style="text-align: center;"><b>2F - Timely Monthly Caseworker Visits</b></p> <table border="1"> <caption>Approximate data from the chart</caption> <thead> <tr> <th>Date</th> <th>Contra Costa (%)</th> <th>California Average (%)</th> <th>Compliance Target (%)</th> </tr> </thead> <tbody> <tr><td>Jan-09</td><td>78.7</td><td>82</td><td>90</td></tr> <tr><td>Jul-09</td><td>80</td><td>84</td><td>90</td></tr> <tr><td>Jan-10</td><td>78</td><td>86</td><td>90</td></tr> <tr><td>Jul-10</td><td>76</td><td>88</td><td>90</td></tr> <tr><td>Jan-11</td><td>88</td><td>90</td><td>90</td></tr> <tr><td>Jul-11</td><td>93</td><td>94</td><td>90</td></tr> <tr><td>Jan-12</td><td>93</td><td>94</td><td>90</td></tr> <tr><td>Jul-12</td><td>93</td><td>94</td><td>90</td></tr> <tr><td>Jan-13</td><td>93</td><td>94</td><td>90</td></tr> <tr><td>Jul-13</td><td>90.1</td><td>94</td><td>90</td></tr> </tbody> </table> </div> <p>The above chart displays performance since Jan 2009 to current.</p> <p>Based on the current methodology for this measure, performance has been stable above 90% since November 2011 (under prior methodology, performance was stable over 90% since January 2011).</p>	Date	Contra Costa (%)	California Average (%)	Compliance Target (%)	Jan-09	78.7	82	90	Jul-09	80	84	90	Jan-10	78	86	90	Jul-10	76	88	90	Jan-11	88	90	90	Jul-11	93	94	90	Jan-12	93	94	90	Jul-12	93	94	90	Jan-13	93	94	90	Jul-13	90.1	94	90
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	<p>Performance in this outcome at the time the Systems Improvement Plan was implemented was 78.7% (September 2009 sampling). This was an all-time low for Contra Costa.</p> <p>Though Contra Costa has met the goal and is meeting the state target of 90%, it is noted that the compliance target will increase to 95% in 2015 and that will then include AWOL and ICPC children. Contra Costa will continue to focus on performance in this measure toward the 95% target.</p> <p>In addition, Contra Costa is now focusing on quality of visits and staff recognition for compliance.</p>
<p><b>Successes</b></p>	<p>with an impassioned speech from a Division Manager at a meeting of the Children's Services Leadership Team that recognized the importance of these monthly contacts. With this a concerted effort in tracking and accountability in this area began.</p> <p>Continued success in this outcome can be attributed to staff commitment to good social work practice and dedication to the safety of children in their caseloads. Additionally, ongoing monitoring by supervisors, managers and the administrative team as a whole ensures accountability in this area.</p> <p>Safe Measures as the tool for monitoring compliance can also be credited with Contra Costa's success because of the ease in use, the wide spread availability, and the immediacy of the data.</p> <p>In addition, there is a recognition component in the SIP strategy for good performance in this area that may be a motivator for some staff, though most staff is self-motivated because they acknowledge the importance of this activity.</p> <p>Use of Safe Measures, accountability, and recognition are all components in the SIP strategies. Further work remains to be done in assessing and improving the quality of contacts.</p>
<p><b>Challenges, Obstacles and Barriers</b></p>	<p>Contra Costa also continues to look for ways to support staff in organizing visits to children placed outside the County to minimize travel time and costs. Geographical assignment has had some success in this area but caseload balancing is also a factor so geographical assignment is not always successful. Additionally the bureau is looking at ways to place more children who are not placed with family within the county.</p>

	<p>Despite the best efforts of the staff to increase contacts to 95% staffing levels are impacting staff's ability to comply with maintaining timely visits. The chart is showing a visible decline in performance in this measure and we can attribute that decline to when the workload becomes high due to excessive vacancies. These vacancies result in staff taking on the added cases of those who have retired, resigned, or who are on Leaves of Absence. The bureau had a four year layoff list in the social worker classification which expired on December 31, 2012. The bureau had expected to have a new social work list and to be able to hire all of the vacancies which had accumulated during 2012 and 2013. Unfortunately the hiring list did not produce new staff until October 2013. By the time this occurred the bureau had already accumulated a 20% vacancy rate in the case management classification and were not able to higher for all of the vacancies. As of January 2014 the bureau continues to struggle filling vacant positions however we anticipate the ability to fully staff vacancies for the coming year.</p>
<b>Measure</b>	<b>C3.1 Exits to Permanency after 24 months in Care</b>
<b>Methodology</b>	Percent of children discharged to a permanent home by the last day of the reporting period year prior to turning 18 who had been in foster care for 24 months or longer. Denominator is all children in foster care for 24 continuous months as of the first day of the reporting period year. Numerator includes children with a placement episode termination date that occurred by the last day of the reporting year and before the child's 18th birthday and a termination reason of reunification with parents or primary caretakers, discharge to guardianship, or discharge to adoption.
<b>National Standard</b>	29.1%
<b>Target Improvement Goal (as stated in the 2010 SIP)</b>	"Increase the percentage of youth reaching permanency by 5% the first year and 10% the following years. At the end of year 3, performance would be 18.1%."
<b>Current Performance</b>	<p>Baseline Performance (Quarter #1, Jan 2004): 15.4%  Performance when SIP work began (Quarter #23, Jan 2009): 19.0%  Current Quarter Performance (Quarter #41, Oct 2013) : 13.4%</p> <p>Contra Costa's performance when the SIP goal was written was 14.2%; the October 2012 quarter report shows current performance at 13.4%. This continues to be below the National Standard of 29.1% and the state average for the current quarter of 24.6%.</p>

**Performance Track**



The above chart displays performance since Jan 2009 to current. A trend line has been added that shows performance decline since the beginning of the SIP period.

Contra Costa's performance dipped in quarter ending April 16 with a performance of 12.1% and peaked from October 2010 to July 2011 (Oct 2010 21.7%, Jan 2011 22.8%, Apr 2011 20.5%, Jul 2011 21.7%). Recent lowest performance was in April 2012 with 12.5%.

Contra Costa looked at the number of kids in care 24 months or longer over the period from June 2007 through June 2013 in 2 different ways to measure work being done in this area:

There were 533 kids in this category, in June 2013; there were 232 kids in care, that's a decrease of 301 kids.

During this same period, kids exiting care categorized by reason were:

- Reunified: 129
- Adoption: 274
- Guardianship: 83
- Non Permanency (incarcerated, hospitalized, emancipated): 345

While work continues to improve the percent performance as measured in C3.1, the data does indicate efforts have supported permanency for many children.

At the last Project Management Team meeting in December 2013, there was discussion to determine if there was still commitment to the existing strategies and to ask what factors were impeding performance improvement in this measure. Based on that discussion Contra Costa feels case reviews of children in long term foster care continue to be necessary and effective. Efforts to make these reviews more efficient and impactful were discussed including:

	<ul style="list-style-type: none"> <li>▪ Assessing all meeting occurring with a case review focus and streamlining so staff aren't duplicating efforts in multiple meetings.</li> <li>▪ Add more structure and specifics as well as tracking of cases to a reorganized Case Review forum. Assure support staff and partners that can support permanency attend these meetings to provide information and share in the decision making.</li> <li>▪ Provide support for workers in making critical decisions by providing tools for assessment and resources to assist in carrying out plans identified.</li> <li>▪ Provide training in a variety of areas to support staff in identifying options, determining approaches and solutions toward permanency, having conversations about permanency with children and youth, parents, relatives, and resource home providers, and addressing barriers to permanency.</li> </ul> <p>Three factors that impact success in this strategy were identified:</p> <ul style="list-style-type: none"> <li>▪ Extended Foster Care for Non-Minor Dependents provides incentives for youth to stay in care and not move to permanency and will negatively impact performance.</li> <li>▪ New policy requiring high level review of placement in Group Homes will support efforts in identifying and moving to lowest level of care and toward permanency; many children in Group Homes fit the category of Long Term Foster Care.</li> <li>▪ Review of cases to address Mental Health needs and wrap services to support children in care (Katie A Initiative) will support permanency.</li> </ul>
<p><b>Successes</b></p>	<p>Though more work remains, Contra Costa has begun moving to a more inclusive case review process for children in long term care as their next steps in their commitment to continue in this strategic effort.</p> <p>We have also been working with consultants from Bay Area Academy and Casey Family Programs to further enhance the agencies focus on permanency. With the support of the Bay Area Academy the management team has been trained and coached on the use of Safety Organized Practice tools and techniques when discussing cases with supervisors and staff. This practice has been seen as a way to also address the issues with youth in long term care where permanency had not previously been attained.</p> <p>Other areas addressed in the Systems Improvement Plan have had great success from the perspective of staff training and positivity, family engagement and satisfaction, and well-being of families. These include:</p> <ul style="list-style-type: none"> <li>▪ A shift in agency and county culture in the way we work with fathers and families of fathers. Staffs is more conscious of father's inclusion in case planning, are considering fathers and families of fathers as options for placement, and are more aware of engaging fathers in children's lives. Contra Costa has one father Parent Partner who has been a champion for fathers and has made himself available to support staff in conversations with fathers.</li> </ul>

	<ul style="list-style-type: none"> <li>▪ A second Father Parent Partner/Community Specialist has just been hired.</li> <li>▪ The Parent Partners have also made inroads in collaborations with detention facilities that have enabled orientation and training sessions and have furthered conservations for incarcerated parents of children served by Children &amp; Family Services.</li> <li>▪ Enhancement in Family Finding and Relative Notification activities are supporting permanent connections and identification of relatives as potential permanent homes.</li> <li>▪ Transition Planning for Youth provides an arena for youth and important people in their lives to gather and discuss transition. Though the goal of Measure C3.1 is to move children/youth to permanency before they emancipate out of the system, the reality is that there are youth still in care when they emancipate (many are now continuing work with Children &amp; Family Services as Non-Minor Dependents). It is therefore still important to support this population as they move to adulthood.</li> </ul>
<b>Challenges, Obstacles and Barriers</b>	Staffing shortages have been a factor in this measure over the past several years. The children who tend to remain in care often have higher needs which require the time and attention of social workers have lower cases to focus on those special needs. When vacancy levels rise, the pressure on remaining staff do not allow them the time they need to help find and support the special needs of these youth which would result in increased permanency . We look forward to further improving the collaborative relationships we have with our mental health and probation partners to improve this measure for the children we serve. Additionally as stated above we anticipate filling the vacant budgeted positions to help reduce the number of families served by social workers.
<b>Measure</b>	<b>Disparity, Entries of African American Children to Foster Care</b>
<b>National Standard</b>	A National Standard has not been set to track Disproportionality/Disparity.
<b>Target Improvement Goal as stated in the 2010 SIP</b>	Performance when the SIP was created was 11.4/1000 children removed; goal at end of 3-year SIP is 10/1000."
<b>Current Performance</b>	Baseline Performance (2004): 7.5 Children per 1,000 Performance When SIP work began (2009): 5.2 Children per 1,000 Current Performance (2012): 6.0 Children per 1,000

	<p>Since the beginning of the SIP period, the 2011 Census shifted population counts thus impacting incidence rate calculations. Reports for disparity/disproportionality are calculated annually. The intent of this SIP goal was to reduce the disparity of African American children entering care.</p>																														
<p><b>Performance Track</b></p>	<p>The following chart displays the number of African American children per 1,000 children in Contra Costa entering foster care. As displayed there has been a general decline since 2000. There was a slight decline at the beginning of the SIP period with the lowest rate in 2010. The current trend is again down for 2012. Data for 2013 is not yet available.</p> <div data-bbox="389 630 1380 1113" style="border: 1px solid black; padding: 10px;"> <p style="text-align: center;"><b>Incidence Rates for Entries of African American Children to Foster Care</b></p> <table border="1" style="margin-top: 10px;"> <caption>Estimated Incidence Rates from Chart</caption> <thead> <tr> <th>Year</th> <th>Incidence Rate (per 1,000)</th> </tr> </thead> <tbody> <tr><td>2000</td><td>8.0</td></tr> <tr><td>2001</td><td>8.8</td></tr> <tr><td>2002</td><td>8.8</td></tr> <tr><td>2003</td><td>8.5</td></tr> <tr><td>2004</td><td>8.0</td></tr> <tr><td>2005</td><td>7.5</td></tr> <tr><td>2006</td><td>6.5</td></tr> <tr><td>2007</td><td>8.0</td></tr> <tr><td>2008</td><td>7.0</td></tr> <tr><td>2009</td><td>6.8</td></tr> <tr><td>2010</td><td>5.2</td></tr> <tr><td>2011</td><td>5.0</td></tr> <tr><td>2012</td><td>6.5</td></tr> <tr><td>2013</td><td>6.0</td></tr> </tbody> </table> </div>	Year	Incidence Rate (per 1,000)	2000	8.0	2001	8.8	2002	8.8	2003	8.5	2004	8.0	2005	7.5	2006	6.5	2007	8.0	2008	7.0	2009	6.8	2010	5.2	2011	5.0	2012	6.5	2013	6.0
Year	Incidence Rate (per 1,000)																														
2000	8.0																														
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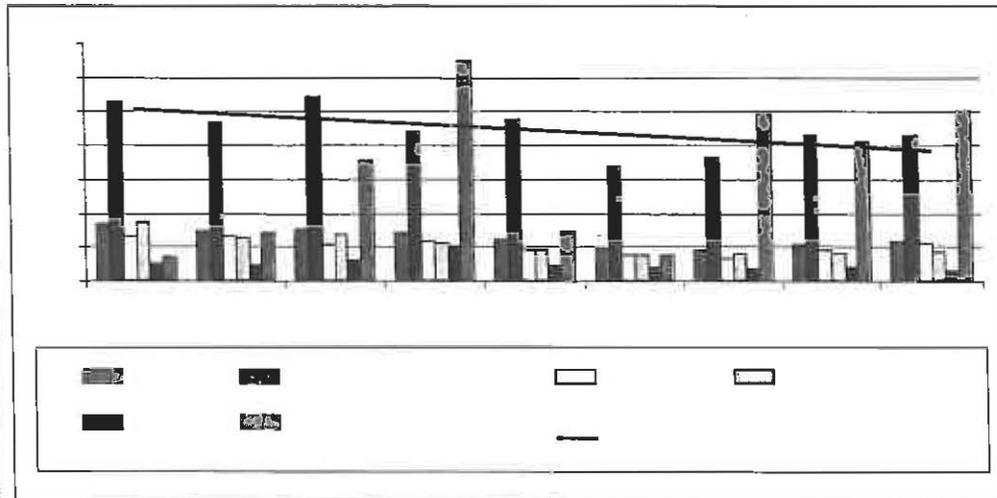
**Performance Improvement**

The disparity of African American children entering care and in care continues, in Contra Costa, the State and in National reports as well. There are two primary strategy tracks for improving disparity in entry of African American children in Foster Care in Contra Costa: One is continual training in cultural awareness, humility, and personal biases. The other is Team Decision Making meetings specifically targeted at children entering care in targeted zip codes in the county. This strategy requires additional work to assure the TDM's are being held. Contra Costa has implemented Safety Organized Practice and some of the strategies in that model are being implemented in the Team Decision Making meetings to improve the case review and assessment process.

In addition to these two strategies that were identified to address the disparity, efforts in other measures for the SIP requires review of cases of children in long term foster care, in Group Homes, and in need of Mental Health intervention. Contra Costa anticipates that these case reviews will alert staff to resources available in the county to support children remaining in their homes thus also impacting the number of children removed.

The chart below compares rates (incidence per 1,000 children) for all ethnicities. A review of the data for this chart shows comparative decline in the trend line for African American children entering care since baseline CFSR in 2004 however they began to increase for 2011 and 2012.

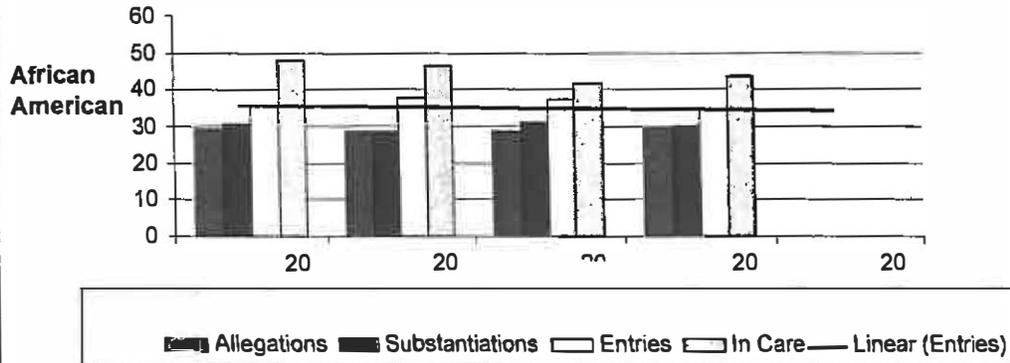
**Disparity - Entries to Foster Care in Contra Costa**



The following chart compared allegations, substantiations, entries and children in care for African American children in Contra Costa to determine if entries are decreasing. The trend line shows a very slight decrease in the percent of children entering foster care that African American since the beginning of the SIP planning period in 2009. While the overall number of African American children entering care is declining they

continue to come into care at a higher rate than other ethnicities.

**Percent of Children that are African American  
Contra Costa Allegations, Substantiations, Entries and In Care**



**Successes**

Though outcomes have not been impacted in the last two years, there has been a significant impact since the baseline years. Contra Costa has focused on disparity and disproportionality for many years. Though an aggressive improvement goal for a difficult problem was set at the beginning of the SIP period, Contra Costa does not anticipate that issues will be resolved quickly. Work will continue beyond the end of the SIP period.

**Challenges, Obstacles and Barriers**

Staff continues to experience challenges in timely Team Decision Making meetings. Obstacles discussed include scheduling difficulties, impact of court timelines and need for immediacy in action thus limiting the window for efficacy of meetings. This is also an area impacted by staffing as the bureau was required to reduce the number of full time TDM facilitators in order to ensure case management needs were covered. When the Bureau is able to fill all the vacancies we will again look at increasing the number of fulltime facilitators. Contra Costa plans to focus on these issues in the next year.

### III. STATUS OF STRATEGIES AND ACTION STEPS

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This section of the Systems Improvement Plan annual report provides detailed information on strategies and activities. Presented is the tracking matrix that is used to document activities and is reviewed each quarter in the Project Management Team meeting. This section also includes a forward look at the strategic plan for 2015 to focus on those areas. Only minor changes have been made to the plan for this year and these changes are to clarify policy. The changes are indicated by strike through of old language and rewriting of new. The changes are:

- Measure C3.1, Exits to Permanency (24 months in Care)  
Strategy 2C Family Finding and Notification  
Correct language to agree with policy so that *all* relatives are notified not at least one.  
“Identify ~~at least one~~ all relatives and send Notification of Relative information.”
- Systemic Factor, Disparity in Entries to Foster Care  
Strategy 3C TDM’s for Children Entering Foster Care  
Policy was changed previously that African American children under age 12 would receive a TDM; wording in the SIP is now being updated to reflect that change.  
“African American children ~~ages 5~~ aged 12 and under and under will receive a TDM prior to entering care or within 7 days of being in care.”

#### Assessing Progress on SIP Strategies and Activities

As stated in the Introduction of this report, most of the strategies and activity established in this SIP represent ongoing activities and focus. It is difficult to call an action step finally “*completed*” because there is always more that can be done and ongoing monitoring is usually required to assure efforts continue. The Project Management Team will continue to review these to assure work really is Ongoing but the focus for the next year will be on activities with a status of In Progress (meaning, the activity has not yet reached a point of completion). For every activity that is marked as In Progress a To Do list has been added to succinctly identify what action is now necessary. The chart below provides an overview of the number of strategies for each measure and how many have a status of completed/ongoing and those with in progress/to do.

Counts for Strategies and Action Steps Completed and in Progress are:

Measure, Strategies and Action Steps	Action Steps	Completed and Ongoing	In Progress with To Do
<b>2C Timely Social Worker Visits with Child</b>	<b>12</b>	<b>10</b>	<b>2</b>
1A Use of Safe Measures to Manage Visits	2	2	
1B Manage Travel While Increasing Compliance	3	3	
1C Policy for Contacts, Waivers, Exceptions	3	3	
<b>C3.1 Exits to Permanency</b>	<b>25</b>	<b>15</b>	<b>10</b>
2A Family Engagement for Permanency	4	1	3
2B Individualized, Culturally Competent Services	3	2	1
2D Concurrent Planning	3		3
2E Father Engagement	4	3	1
2F Transition Planning for Youth	3	3	0
2G Recruitment of Families	2	1	1
<b>Systemic Factor Disparity</b>	<b>13</b>	<b>9</b>	<b>4</b>
3A Cultural Competence in Family Engagement	3	3	0
3B Cultural Competency Oversight	4	4	0
3D Family Satisfaction	2	2	0
<b>Total</b>	<b>50</b>	<b>34</b>	<b>16</b>

## Tracking Ongoing Efforts

The following table provides detailed information regarding progress in each Activity. This table is a working document and is reviewed quarterly at the Project Management Team meeting to assure continued attention on Strategies and Activities. During these discussions, progress is discussed, new activity documented, needed resources identified and schedules set for next steps. This review also determines when an Action Step has been completed and/or is now addressed as ongoing maintenance; these activities are shaded to facilitate the review process of those activities still actively being addressed.

### SIP Table 2: Tracking Activities

<b>Performance Measure 2C Timely Social Worker Visits with Child</b>			
<b>Strategy 1A Use of Safe Measures to Manage Visits</b>			
Enhance use of Safe Measures by staff to manage visits; provide ongoing training to staff and supervisors.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 2 Action Steps, both Completed and Ongoing.
Action Steps		Staff Responsible Timeframe	Status Progress on Action:
A	Assess ongoing use of Safe Measures by SW's and Supervisors.	R&E Mgr Yrs 1-5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Safe Measures Usage Reports routinely monitored.</li> <li>▪ SM Reports recommended for full usage:               <ul style="list-style-type: none"> <li>○ Court Reports by Due Date</li> <li>○ Case Plans Due/Overdue</li> <li>○ Caseload management reports to plan coverage for vacancies</li> <li>○ Assigning/tracking out of county placements and scheduling contacts for out of county placements</li> </ul> </li> <li>▪ Policy completed for timely entry of contacts.</li> <li>▪ Staff Survey identified barriers to timely compliance of contacts and entry of contacts. Administrative Team reviewed survey results and continues to address staffing and support issues.</li> </ul>

			<ul style="list-style-type: none"> <li>Request for more SM Exception Reports that identify cases/families that require action.</li> <li>Policy implemented to assure supervisors review Safe Measures Compliance Reports with Social Workers at monthly sup/staff conferences.</li> <li>Continue to assess for compliance with contacts, number of contacts by primary SW, and percent of contacts completed in the home.</li> </ul>
B	Retrain all staff in the use of Safe Measures to ensure they have a full understanding of the way the tool can assist in managing their caseload.	Staff Dev Mgr Yrs 1-5	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>Safe Measures Training offered and completed and continues to be included in various forums: <ul style="list-style-type: none"> <li>In districts training sessions</li> <li>At Unit Meetings</li> <li>One on One training</li> <li>Included in Time Management Training</li> <li>Component of New Worker Training</li> </ul> </li> <li>Current trainer: Bay Area Academy; training customized to meet Contra Costa needs</li> <li>Time Management Training completed; use of Safe Measures Incorporated in all training plans as appropriate to reinforce usage.</li> </ul>
<b>Strategy 1B Manage Travel while Increasing Contact Compliance</b>			
	Continue Geographical assignment of cases and/or explore ways of reducing travel while increasing contact compliance.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Status of Strategy</b></p> 3 Action Steps, all Completed & Ongoing.
	<b>Action Steps</b>	<b>Staff Responsible</b> <b>Timeframe</b>	<b>Status</b> <b>Progress on Action:</b>
A	Provide caseload data with location of families/children to staff.	R&E Mgr SW Supervisors Yrs 1-3	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>Safe Measures reports utilized to determine location of families/children for planning contacts.</li> </ul>

			<ul style="list-style-type: none"> <li>Supervisors utilize information re: geographic assignments in assigning cases (either geo location, school district, area of district, etc.) when workload balancing permits.</li> <li>Use of SM reports to plan contacts included in Time Management Trainings.</li> </ul>
B	Assess ability to manage visits for out of county placements which ensures assigned primary worker completes 75% 11 out of 12 visits.	Ops Mgrs SW Supervisors Yr 1	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>Evaluated worker completed visits for out of county placements to assure assigned worker completed 75% visits.</li> <li>Monitor for compliance to change in requirements: 11 out of 12 visits completed by assigned primary worker.</li> </ul>
C	Monitor/refine geographic assignment considering workflow and different needs based on geographic area and strategy (i.e. TDM, DR, etc).	Ops Mgr Supervisors Yrs 1 -5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>Ongoing discussions and efforts evaluate location of cases in caseloads in efforts to consolidate visits to limit travel time.</li> <li>Safe Measures provides a report to track placement by geographic area to support scheduling of contacts and visits.</li> </ul>
<b>Strategy 1C Policy for Contacts, Waivers, Exceptions</b>			
	Train Staff to policy changes regarding face to face contacts and waivers/exceptions and implement changes	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 3 Action Steps, all Completed & Ongoing.
	<b>Action Steps</b>	<b>Staff Responsible</b> <b>Timeframe</b>	<b>Status</b> <b>Progress on Action:</b>
A	Assess training needs for social worker contacts.	Staff Dev Mgr Yr 1	<b>Completed</b> Assessment completed.
B	Develop and train staff on regulations & policies related to timely SW contacts.	Staff Dev Mgr Program Analyst Yr 1	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>Train Contacts policy including changes to use of waivers/exceptions (completed in 2008).</li> <li>Publish policy on FFA contacts (completed)</li> <li>Follow-up training on contacts policy completed in 2010.</li> <li>Ongoing evaluation of compliance with</li> </ul>

			face to face contacts requirements and elimination of waivers continue.
C	Provide visit exception report for mgrs and sups.	R & E Mgr Yrs 1-3	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Exception reports on cases with waivers/exceptions were provided during implementation to assure transition to monthly visits.</li> <li>▪ Evaluation of cases still reflecting waivers and exceptions completed in December 2013 (review showed 6 cases with exceptions to monthly visits. These cases are being reviewed).</li> </ul>
<b>Strategy 1D Quality Assurance for Contacts</b>			
Develop Quality Assurance program for timeliness and quality of contacts and develop a recognition program for staff and supervisors demonstrating excellence in performance.		<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 4 Action Steps, 2 Completed & Ongoing, 2 have remaining tasks. Work continues to plan and implement action for improved quality of contact content, complete documentation of contacts including narratives, supervisor's quality assurance reviews and staff recognition for compliance.
<b>Action Steps</b>		<b>Staff Responsible</b> <b>Timeframe</b>	<b>Status</b> <b>Progress on Action</b>
A	Recognize staff for compliance in timeliness of contacts (moved from Action under Strategy 1A)	Director Yr 1	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Letter of recognition for compliance in timely contacts over a 6 month period issued from Director periodically.</li> <li>▪ SW recognized at Staff Appreciation functions.</li> <li>▪ Social Workers who regularly use Safe Measures acknowledged in letter from Director.</li> </ul>
B	Evaluate quality of contacts.	Admin Team Project Mgmt Team Yrs 3-5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ In 2012, random cases selected for review of contacts by Project Management Team; members reported on findings at meeting. Findings indicated need for improvement in following areas: many contacts used rote language in narrative that did not give specifics of contact or status; some contacts have data entered to meet compliance but Narrative is either blank or indicates "Contact notes to be added".</li> </ul>

		<ul style="list-style-type: none"> <li>Discussion at December 2013 PMT indicates there is still a need for better documentation in contact narrative.</li> </ul>
C	<p>Develop strategies for supervisors to monitor and increase quality of SW visits.</p>	<p>Admin Team Project Mgmt Team Children's Leadership Team Yr 3</p> <p><b>In Progress</b></p> <ul style="list-style-type: none"> <li>Plan how to assess quality of contacts; develop a three pronged approach to QA: timeliness, content, documentation.</li> <li>Discussions on requirements for recording contacts occurred have occurred at Children's Leadership Team (CLT) meetings.</li> <li>Desk guide for contacts discussion guidelines has been updated with criteria for contacts with parents, foster care providers, and non-minor dependents/extended foster care. Updated policy on Recording Contacts has been published.</li> <li>Policy published that Social Workers submit Delivered Service log to Supervisors with Court Reports and Case Plans (contacts from previous hearing or last supervisor's review of contacts to current); supervisors to assess and address quality of contacts content and documentation. Discussion at December 2013 PMT that this may not be fully implemented.</li> <li>Address contact content and quality with staff training on family engagement and reflective listening.</li> <li>Other ideas being discussed, such as random reviews for content and supervisors and managers to accompany Social Workers on one visit during a review period to assess worker skills</li> <li>Discussion to be referred to Children's Leadership Team meeting for all supervisors' participation in planning.</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>Create a Quality Assurance plan for Contacts that not only looks at timely contacts but also quality of content and documentation.</li> </ul>

D Determine criteria for ongoing staff recognition that incorporates timeliness, quality of visits, and acknowledges appropriate staff performance.	Admin Team Yr 3	<b>To Do</b> <ul style="list-style-type: none"> <li>Formalize a recognition plan that takes into account all of the above.</li> </ul>
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**Performance Measure C3.1 Exits to Permanency (24 Months in Care)**

**Strategy 2A Family Engagement for Permanency**

Enhance family and caregiver engagement activities to support reunification and facilitate discussions about permanency options should reunification not be effective.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 4 Action Steps, 2 Completed and Ongoing. 2 have components that are completed; work in progress continues and tasks are identified tasks that remain to be completed.
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Action Steps	Staff Responsible Timeframe	Status Progress on Action
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A Develop staff training/education focusing on permanency options and conversations about permanency with parents and caregivers.	Admin Team Staff Dev Mgr Yrs 1-5	<b>In Progress</b> <ul style="list-style-type: none"> <li>Supervisors continue to reinforce permanency and family engagement in unit meetings and case conferences.</li> <li>Permanency is a standing agenda item on Administrative Team Meetings where managers share efforts, successes, and statistics on permanency.</li> <li>Focus on Permanency and Concurrent Planning reinforced in Permanency Review Team Meetings.</li> <li>Motivational Interviewing training completed to support family engagement; ongoing mentoring available.</li> <li>Permanency options guide being revised; guide identifies permanency options and discussion regarding each option.</li> <li>Discussions continue on preparing parents/relatives caregivers for permanency should reunification fail. This includes family finding, informing parents and confidentiality.</li> </ul>
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		<ul style="list-style-type: none"> <li>▪ Safety Organized Practice initiated including use of language and practices to build trusting relationships with families, use of behavior language to understand concerns (harm and danger), what's working well (supporting strengths, and safety), complicating factors, and next steps for case planning.</li> <li>▪ Safety Mapping introduced as a method of presenting and reviewing family and intervention issues.</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>▪ Provide a training symposium on Permanency including but not limited to the following:</li> <li>▪ Permanency options including looking at personal biases regarding permanent solutions and approaching plans with an attitude of success (this segment can also address Group Home placements);</li> <li>▪ Current Planning: how to measure and track concurrent planning.</li> <li>▪ Family Finding and permanency conversations: How to approach permanency with children, parents and relatives, informing parents of agency's responsibility for family finding, confidentiality (what can be shared with relatives, alleged fathers, parents);</li> <li>▪ Recording permanency efforts in CWS/CMS and court reports.</li> <li>▪ Continue Safety Organized Practice: Training and discussions shifting the agency culture to identifying behaviors and avoiding generalizations, focusing on reason for intervention and safety, and working from a solution oriented perspective, tools for presenting cases for review.</li> </ul>
<p>Permanency and provide support and guidance in addressing.</p>	<p>Yrs 3-5</p>	<p><b>In Progress</b></p> <ul style="list-style-type: none"> <li>▪ Discussions with Project Management Team and with district staff have identified potential barriers to permanency and facilitated discussions about addressing barriers.</li> </ul>

	<ul style="list-style-type: none"> <li>▪ Focused Case Reviews to address children in long term foster care look at potential and identified barriers to permanence and present an opportunity to renew efforts for permanence by revisiting options previously rejected (including reunification), looking at new opportunities, and reconsidering reasons/barriers to permanent solutions.</li> <li>▪ Opportunities to support staff in approaching placement and permanency options for children in care more than 24 months and for children/youth in Group Homes objectively without biases of what won't work are being explored (Focus on current actions taken to move toward permanency without considering the end result. These include teamed decision making, focused case reviews, and Safety Mapping</li> <li>▪ Case Reviews to assess disrupted Adoptions and Guardianship cases and children's reentry to care inform of support needs for permanent families.</li> <li>▪ With reviews now mandated for children/youth in Group Homes, staff is encouraged to be aware of personal responses regarding permanence for children requiring higher level of support.</li> <li>▪ Safety Organized Practice presents tools to assess families from a solution focused view with the focus on family behaviors.</li> <li>▪ With implementation of AB12, there are incentives for youth to being in care at emancipation. Staff support needed on how to have conversations with youth that focus on the value permanency vs. staying in foster care.</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>▪ Develop forum to discuss barriers/potential barriers to Permanency and support a teamed/shared decision making approach to propose and support solutions.</li> </ul>
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C	<p>Increase use of team meetings to enhance permanency (Persistent Insistence on Permanence)</p>	<p>Admin Team Project Mgmt Team Yrs 2-5</p>	<p><b>In Progress</b></p> <ul style="list-style-type: none"> <li>▪ Case Reviews in district offices focus on long term foster care cases; in addition to addressing specific issues for case being reviewed, this sustains staff focus on permanence and identifies strategies to overcome barriers and biases that may impact other children the overall focus on permanence</li> <li>▪ Move to a shared/team decision making focus.</li> <li>▪ Commitment made to consistently pursue permanence.</li> <li>▪ Models being assessed to determine best practice.</li> <li>▪ Conversations at CSAT and PMT to identify target population.</li> <li>▪ Continue Safety Mapping training to provide tools and approaches to presenting cases from an objective, safety focused, and solution oriented approach.</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>▪ Evaluate all case review meetings; reorganize structure to eliminate overlap, increase efficiency, and sustain focus on permanence.</li> <li>▪ Continue focused case reviews to seek permanence for children who are in long term foster care and to prevent other children from settling into long term care, and to move to lower levels care whenever appropriate. This includes review of children in Group Homes.</li> <li>▪ Continue Safety Organized Practice: Training and discussions shifting the agency culture to identifying behaviors and avoiding generalizations, focusing on reason for intervention and safety, and working from a solution oriented perspective, tools for presenting cases for review.</li> </ul>
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<p>D Implement visitation policy including transition from supervised to unsupervised for family visits.</p>	<p>Director Admin Analyst Yr 2</p>	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>▪ Policy developed by Visitation Work Group for step-down of supervised visits; policy published. The use of the visitation step-down model will be evaluated over the next year to determine the effectiveness of the policy and practice.</li> <li>▪ Training/presentation discussed options for supervision of visits.</li> <li>▪ Discussion with supervisors reinforced visitation planning.</li> <li>▪ Supervisors assess visitation and guide SW to assure visitation sufficiently addressed.</li> <li>▪ Continue to assess effectiveness/transfer of learning: Has the step down model of visitation been implemented?</li> <li>▪ Review visits to assess effectiveness of strategy.</li> <li>▪ Comply with court orders on individual cases that specify visitation.</li> </ul>
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**Strategy 2B Individualized, Culturally Competent Services**

<p>improve individualized, culturally competent reunification services with multi-agency case coordination.</p>	<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p><b>Status of Strategy</b> 3 Action Step, 2 Completed and Ongoing; Action Step B documents work completed and ongoing and also identifies To Do tasks for increased use of Wrap Services Katie A. Project.</p>
<p><i>Action Steps</i></p>	<p><i>Staff Responsible Timeframe</i></p>	<p><i>Status Progress on Action</i></p>
<p>A Continue Linkages; develop partnerships for streamlining services for families preparing to reunify.</p>	<p>East County Div Mgr</p>	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>▪ Contra Costa's Linkages project that coordinates case planning for Work Force Services and Children's Services continues work in the East County District Office; a joint case plan has been addressed.</li> </ul>
<p>B Increase use of wrap around services</p>	<p>Trans/Perm Div Mgr Yrs 3-5</p>	<p><b>In Progress</b></p> <ul style="list-style-type: none"> <li>▪ Cross agency and cross bureau workgroups review, coordinate and implement wrap strategies</li> <li>▪ Div Mgr and staff participated in statewide Wrap Conference.</li> </ul>

			<ul style="list-style-type: none"> <li>▪ Katie A. Project: CFS and Mental Health assess cases and coordinate wrapped Mental Health services.</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>▪ Continue case reviews for existing and new case to comply with Katie A requirements for Mental Health needs assessment and wrapped services.</li> </ul>
C	Continue work on cultural awareness through use of Parent Partners.	Comm Engag Sup Yrs 1-3	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>▪ Parent Partners continue work as fully integrated team members of Child Welfare Services advocating for parents and providing parents' voice and perspective in policy and planning.</li> </ul>
<b>Strategy 2C Family Finding and Relative Notification</b>			
	Identify <del>at least one</del> all relatives and send Notification of Relative information.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Status of Strategy</b></p> <p>3 Action Steps, 2 Completed and Ongoing. Action Step C identifies To Do tasks remaining for year 2015.</p>
	<b>Action Steps</b>	<b>Staff Responsible Timeframe</b>	<b>Status Progress on Action</b>
A	Develop and train staff team responsible for family finding activities.	Intake Svc Mgr Yr 2	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>▪ Parent Partners assist in gathering background information for family finding.</li> <li>▪ Information provided to parents by Parent Partner include advocacy for identification of relatives.</li> <li>▪ Orientations to incarcerated parents by Parent Partners and Children Services staff address issue of identifying and locating relatives.</li> <li>▪ Family Finding Staff participate in various Case Review meetings to support staff in Family Finding activities.</li> </ul>

			<ul style="list-style-type: none"> <li>▪ Social Workers know family finding is required as a front end activity but not all continue family finding as an ongoing effort until reunification fails. Relative Notification process is documented in policy. Training will remind staff of Family Finding procedures and their responsibilities.</li> </ul>
B	Maintain contract with internet database search engine to search for relatives and absent parents.	Intake Serv Mgr Yrs 1-3	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>▪ Lexus Nexus search engine used in family finding efforts; contract continued.</li> <li>▪ Due Diligence clerical staff continue to use database.</li> <li>▪ Train more staff to search for relatives.</li> </ul>
C	Train staff on how to have permanency discussions with located families.	Intake Servc Mgr Yrs 2-3	<p><b>In Progress</b></p> <ul style="list-style-type: none"> <li>▪ Relatives identified for concurrent planning are referred to Relative Approval staff for home assessment AND to assigned SW for assessing relatives for placement readiness. Update Relative Notification process to address Family Finding activities and responsibilities.</li> <li>▪ Relative Approval staff discusses and document concurrent planning and permanency with relatives during the home approval process.</li> <li>▪ Training has been offered to Social Workers conversations with families about permanence but was not well attended. Include conversations in planned Permanency training.</li> <li>▪ Letter to relatives following completion of home assessment is misleading (Neely addressing this issue).</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>▪ Update Relative Notification policy to include Family Finding activities.</li> <li>▪ Continue to work with Casey Family Programs to enhance the permanency for youth in care.</li> </ul>

<b>Strategy 2D Concurrent Planning</b>		
Develop strategies and practice expertise in early and continuous Concurrent Planning.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 3 Action Steps in Strategy 2 D. All have To Do activities for final year of SIP period, 2015.
Action Step	Staff Responsible Timeframe	Status Progress on Action
A. Maintain continuous focus on permanency & concurrent planning process (see also Strategy 2A, Activity C: Persistent Insistent on Permanence Project)	Admin Team Yrs 3-5	<b>In Progress</b> <ul style="list-style-type: none"> <li>▪ Evaluate regional user guide for Concurrent Planning presented to Project Management Team. Review document for strategies to support early and continuous Concurrent Planning.</li> <li>▪ There is concern that Concurrent Planning is sometimes not addressed until reunification fails. Training planned for Permanency will include Concurrent Planning options and conversations.</li> <li>▪ Assess to determine supervisor's focus on Concurrent Planning during the monthly worker/sup conference.</li> <li>▪ PP Reviews are current forum to discuss concurrent planning, however, staff self-refer cases so not all cases are assessed for permanency. Process for referrals, tracking, follow-up, etc. needs to be reviewed. Note: Structure for all review meetings will be evaluated.</li> <li>▪ Post Permanency Workgroup: A workgroup to be formed and training planned to support families following permanency (was this workgroup formed?)</li> <li>▪ There is a need to focus on concurrent planning for older youth not just babies.</li> </ul> <b>To Do</b> <ul style="list-style-type: none"> <li>▪ In collaboration with Casey Family Programs provide a training symposium on Permanency including Permanency Options, conversations about permanency and concurrent planning including the role of the courts and legal representatives.</li> </ul>

		<ul style="list-style-type: none"> <li>Research &amp; Evaluation Manager to provide analysis of children/youth in long term foster care to use for permanency planning, case reviews, and recruitment.</li> </ul>
in concurrent planning and address issues.	Yrs 1-5	<p><b>In Progress</b></p> <ul style="list-style-type: none"> <li>Barrier to Permanency have been identified (relative care providers hesitant to move to more permanent options, youth resistance, worker resistance to disrupt stable long term foster care, AB 12 issues). Plan strategies to address these barriers.</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>Provide a training symposium on Permanency including barriers to Permanency.</li> <li>Develop forum to discuss barriers/potential barriers to Permanency and support a teamed/shared decision making approach to propose and support solutions.</li> </ul>
concurrent planning and Permanency Outcomes.	Yrs 3-5	<p><b>To Do</b></p> <ul style="list-style-type: none"> <li>Evaluate Case Plans to assess Concurrent Planning and determine how to measure and track concurrent planning.</li> </ul>
<b>Strategy 2E Father Engagement</b>		
Engage fathers and extended families of fathers.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<p><b>Status of Strategy</b></p> <p>4 Action Steps in Strategy 2E. 3 have a status of Completed and Ongoing. Action Step C requires an evaluation of father engagement, placement, and contacts. Some of this evaluation was successfully completed under Contra Costa's federal Grant (Comprehensive Family Engagement for Positive Outcomes). Further evaluation needed to assess success of this strategy.</p>

Action Step	Staff Responsible Timeframe	Status Progress on Action
A Develop and implement fatherhood initiative survey.	R&E Mgr Yr 1	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Staff re-surveyed on father engagement in 2013. Survey results indicate dramatic shifts in Social Worker commitment to fathers and families of fathers in case planning and permanency decisions.</li> <li>▪ Father Focus Groups were completed to gather information from fathers on their experience with CWS.</li> </ul>
B Plan strategies and train staff to engagement of fathers and families of fathers.	Comm Engage Sup Yrs 1-2	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Ongoing focus on father engagement supports staff renewed engagement and inclusion of fathers and families of fathers in cases and case planning.</li> <li>▪ Father Engagement strategies and focus supported by Parent Partners.</li> <li>▪ Father Fact's bulletin issued by Parent Partners to staff with resources and suggestions for father engagement and inclusion.</li> <li>▪ Tool Kit for Fathers developed by Parent Partners give fathers information on legal status of fathers, rights, resources, and suggestions for parenting.</li> <li>▪ Incarcerated Parents project provides orientation to Children's Services to incarcerated father and mother groups.</li> <li>▪ In partnership with other bureaus in the agency, Parent Partner and Children and Family Services Bureau staff participated in a grant project entitled The Fatherhood Initiative to support father inclusion and coordinated parenting.</li> </ul>
of father relationships in CWS/CMS to evaluate effectiveness of strategy.	Yrs 3-5	<b>To Do</b> <ul style="list-style-type: none"> <li>▪ Evaluate statistics to determine improvement in numbers of fathers as caregivers and number of father contacts.</li> </ul>
D Provide education/training to Bench and Bar on Father involvement (ongoing efforts, action just added)	Director Comm Engage Sup Yrs 2-5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Information provided to Bench on non-custodial fathers in the legal environment (published book by American Bar Association)</li> </ul>

		<ul style="list-style-type: none"> <li>Discussions with Bench occur regularly in Judge's Meetings addressing various concerns and issues including about concurrent planning and permanency.</li> <li>Continue conversations with Bench to address concerns on father engagement.</li> </ul>
<b>Strategy 2F Transition Planning for Youth</b>		
Provide transition planning meetings for youth including assessment of educational needs.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 3 Action Steps under Strategy 2F, all with Status of Completed and Ongoing.
<b>Action Step</b>	<b>Staff Responsible</b> <b>Timeframe</b>	<b>Status</b> <b>Progress on Action</b>
A Develop coordinated data exchange to sups and staff regarding youth age 17 or older.	Intake Servc Mgr Yr 1	<b>Completed</b> <ul style="list-style-type: none"> <li>Data reports sent to Division Managers regarding transitioning youth (Safe Measures report also available).</li> </ul>
B Hold transition planning meeting with youth within 6 months of emancipation.	Dist Ops Mgrs Yr 2	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>Youth Transition Meeting policy completed and published.</li> <li>Meetings being held.</li> </ul>
C Utilize CWS/CMS to track accurate educational outcomes for youth.	Intake Servc Mgr Yrs 1-3	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>Youth Transition Meeting and NYTD (National Youth Transition Database) policy published; staff advised of policy and procedures for recording ILP services. Working with state to refine the data match and data exception report.</li> <li>CWS/CMS HEP passport provides education tracking notebooks. Continue to promote entry of significant education information in HEP including information such as graduation, obtaining GED, school transfers.</li> <li>Information regarding education status is recorded to court reports.</li> </ul>

<b>Strategy 2G Recruitment of Families</b>		
Increase recruitment of families that can offer permanence.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 2 Action Steps under this Strategy. Status for Planning for Recruitment is Complete and Ongoing. Evaluation of children/youth in care for 24 months and longer is planned.
Action Step	Staff Responsible Timeframe	Status Progress on Action
A Complete a demographic profile and data analysis for children currently in care for 24 months or longer to support recruitment planning.	R&E Mgr Resource Srvc Mgr Yrs 3-5	<b>To Do</b> <ul style="list-style-type: none"> <li>▪ Research &amp; Evaluation Manager to provide analysis of children/youth in long term foster care to use for permanency planning, case reviews, and recruitment.</li> </ul>
Plan to increase use of community partners and regional offices in recruiting families to offer permanence.	Resource Srvc Mgr Yrs 3-5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Foster Parent Recruitment Orientation sessions held in communities.</li> <li>▪ Permanency and concurrent planning issues are shared at Community meetings.</li> <li>▪ Recruitment efforts focus on finding families for children not finding children for families.</li> <li>▪ Foster Family Recruiter (Social Worker position) filled to enhance focus on recruitment.</li> <li>▪ Recruiter will focus on relatives as well as non-related families.</li> <li>▪ Pride Training for Foster Care Providers includes training for relatives. Coordination with Kinship Centers continues with intent to deliver training at Centers.</li> <li>▪ There are concerns that adoptive and foster families are not always realistic when identifying issues with children/youth. Some reported problems are typical age related behaviors and attitudes. Recruiter staff, licensing staff and Adoptions staff will continue to work with resource families to prepare them for potential issues. Kinship Centers engaged to support families during time of potential disruption.</li> </ul>

		<ul style="list-style-type: none"> <li>There is suggestion that realistic expectations be addressed at 3 points: Pride Training, Initial Placement and Home Studies.</li> </ul>
<b>Strategy 2H Incarcerated Parents</b>		
Engage incarcerated parents to support case planning and permanency.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 3 Action Steps under this Strategy, all Completed and Ongoing.
<b>Action Steps</b>	<b>Staff Responsible</b> <b>Timeframe</b>	<b>Status</b> <b>Progress on Action</b>
A Establish working relationship with detention facilities to facilitate engagement of incarcerated parents	Comm: Engage Sup Yrs 1-2	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>Conversations with Incarcerated Parents project completed (and ongoing) by Judi Knittel and Parent Partners including Orientation (in prisons) to Incarcerated Parents and collaboration with Detention Facilities for engagement of incarcerated parents. Ongoing work includes researching the Impact of children visiting incarcerated parents and preparing staff for engagement of incarcerated parents.</li> </ul>
B Provide training and support for incarcerated parents.	Comm Engage Sup Yrs 2-3	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>Orientation to Children Services provided at some of the detention facilities.</li> <li>Training specific to fathers of children receiving services from CFS provided.</li> </ul>
C Support staff communication with incarcerated parents.	Comm: Engage Sup Yrs 3-5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>Parent Partners continue to support Social Workers in communicating with incarcerated parents and provide information regarding forums for communication with incarcerated parents for inclusion in case planning.</li> </ul>
<b>Systemic Factor Disparity, Entries of African American Children to Foster Care</b>		
<b>Strategy 3A Cultural Competent Engagement</b>		
Continue to support staff in culturally and ethnically competent Family Engagement.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF	<b>Status of Strategy</b> 3 Action Steps under Strategy 3A. Status for all is marked Completed and Ongoing.

	<input checked="" type="checkbox"/> N/A	The continued focus on engagement and permanency will contribute to continued improvement in all of these activities.
<b>Action Steps</b>	<b>Staff Responsible Timeframe</b>	<b>Status Progress on Action</b>
A Provide ongoing training for cultural knowledge and competence in communication and engagement of families, peers, and community partners including family culture not just ethnicity/race.	Staff Dev Mgr Yrs 1-5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Training sessions addressing Cultural Competency are included in Standard Competency Training plan.</li> <li>▪ Additional training that promotes cultural knowledge, impacts competency, and reduces biases continues to be offered.</li> <li>▪ Difficult Dialogues training completed (Bay Area Academy)</li> <li>▪ Racial Sobriety training in progress to further support open conversations.</li> <li>▪ Ongoing attention to biases and evaluation of racial disparity and disproportionality provide direction for training needs.</li> <li>▪ Case Review meetings support engagement of and communication with families and providers and serve as informal training as successes and challenges in case management are shared.</li> <li>▪ Training and Learning Community/mentoring support for Safety Organized Practice provide tools and techniques for staff to utilize in engaging families. Questions asked regarding the family during the case mapping process identify Ethnicity and culture of the family are identified in the case mapping process and family strengths and risks, challenges and complicating factors specific to the family's behaviors are identified; generalizations and subjective, judgmental conversation is deterred.</li> </ul>
B Explore non-traditional resources and services relevant to case plan goals and support families in attaining goals in a manner that best matches the cultural values of the family.	Admin Team Dist Ops Mgrs Yrs 1-5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ With budget cuts in 2008 and reduction of funds available to pay for parent services, policy &amp; staff discussions addressed need for parent involvement in case planning &amp; more use of non-traditional resources .</li> <li>▪ Individualized case planning and family</li> </ul>

			<p>engagement has been promoted in various arenas such as Case Reviews, CLT, district meetings</p> <ul style="list-style-type: none"> <li>▪ There is a need to continue focus on family engagement and inclusion in case planning with attention to non-traditional community resources that may not have been considered in the past that align with families' culture and values and also meet agency requirements to support families in meeting goals. As the Case Review process is expanded and case management and permanency strategies are re-evaluated, this will support staff in considering approaches not yet attempted.</li> <li>▪ Evaluation of family readiness for reunification needs to focus on behavior change, not on completion of goals in case plan.</li> <li>▪ Coordinate with CAPFO activities.</li> <li>▪ Focus staff on individualized case plans (non-cookie cutter approach), use of non-traditional providers and training, and family involvement and engagement in case planning.</li> <li>▪ Evaluate draft Staff/Provider communication form drafted at CLT to support communication with non-traditional providers.</li> </ul>
C	<p>Develop conversation guides for supervisors to lead staff in discussions of disproportionality at all unit and review meetings every other month.</p>	<p>Admin Team Yrs 2-3</p>	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>▪ Direction given to managers and supervisors to include discussions in unit and review meetings on disproportionality, identifying successful engagement and new resources that support families and are aligned with their culture.</li> <li>▪ Awareness of personal biases in all areas including race, ethnicity, and culture is necessary to shift culture and improve practice to meet specific needs of families. This is an ongoing effort though it is marked as completed and ongoing.</li> </ul>

<b>Strategy 3B Cultural Competency Oversight</b>		
Provide a forum for discussion cultural and ethnic issues. Raise disproportionality and disparity awareness of staff, community and agency partners, legal entities, and community members.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b>
<b>Action Step</b>	<b>Staff Responsible Timeframe</b>	<b>Status Progress on Action</b>
A Reconvene the Cultural Competency Oversight Committee	Dist Ops Mgrs Staff Dev Mgr Yrs 2-5	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ In July 2013 the Cultural Competency Committee, now called Cultural Humility, was reconvened after several years of not meeting (due to staffing and budget issues that have been the Bureau's focus). The reformation brings renewed commitment to focus, awareness of biases and improvements in practice towards reducing disparity between ethnic and cultural groups.</li> <li>▪ Ongoing efforts of this committee include and are not limited to assessing the Bureaus' current cultural competence, raising awareness of personal bias, supporting culturally competent individualized assessments and decisions for families, and identifying training and professional issues of staff in areas of cultural humility.</li> </ul>
B Address issues of personal bias and support staff in strength based language in written case documentation.	Admin Team Staff Dev Mgr Yr 2	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Words Mean Things training was originally given to staff in 2008. New Worker training continues to contain a segment to support language in reports and documentation that is behavioral, specific, and strength-based.</li> <li>▪ Anecdotal info indicates some improvement in non-biased language in reports/documentation and increased awareness of staff of cultural issues and personal biases.</li> </ul>

		<ul style="list-style-type: none"> <li>Continue to evaluate, address inconsistencies, and provide training to raise awareness. Note that Safety Organized Practice also presents tools to keep staff focused on behaviors and to avoid generalizations and judgments.</li> <li>Plan ongoing case reviews with a specific focus to assess language used by staff to identify training needs.</li> </ul>	
C	Present information to mandated reporters to enhance awareness of how bias may impact families reported within their own organizations.	R&E Mgr Yrs 1-5	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>Presentation to Contra Costa County Hospital and Regional Centers addressed consideration of a universal screening plan and awareness of disparity in reports to Children Services.</li> <li>Mandated Reporter training to providers (specifically Kaiser and schools) addressed issues reportable activities (penal code) vs. conditions that are judged to be abuse.</li> <li>Presentations made to small groups of providers to raise awareness of bias and disparity. Grant from Packard Foundation has been renewed to support additional data dissemination to resource and foster home providers and the community. This will include data on families served by CWS based on ethnicity (along with other factors) and well as measuring performance in general and by ethnicity.</li> </ul>
D	Present regular data reports to staff on topics of disproportionality.	R & E Mgr Yrs 1-5	<p><b>Completed and Ongoing</b></p> <ul style="list-style-type: none"> <li>Some articles and data that address disproportionality and disparity are posted to intranet web site; it has been suggested that when info is posted, a STARS memo be issued with a link to the intranet website. These efforts will continue.</li> <li>There is an ongoing need to review results previous surveys, resurvey staff to evaluate culture changes, issue new survey and conduct focus groups, and provide outcomes data that will assess performance improvement and raise awareness of need for continual efforts to reduce disparity/disproportionality.</li> </ul>

E	Re-establish regular training which addresses staff personal biases related to poverty vs. neglect and standards for adequate care of children.	Staff Dev Mgr Yrs 1-5	<b>Completed and Ongoing</b> Training on poverty bias completed. Efforts continue to identify and offer training related to this issue.
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**Strategy 3C Team Decision Making Meetings for African American Children Entering Care**

African American children <del>ages 5</del> aged 12 and under and under will receive a TDM prior to entering care or within 7 days of being in care.	<input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A	<b>Status of Strategy</b> 4 Action Steps under this strategy; 1 has been given a Status of Completed and Ongoing, 3 are indicated with status of In Progress. This component of the SIP is a focus for the next year, 2015.
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<b>Action Step</b>	<b>Staff Responsible</b> <b>Timeframe</b>	<b>Status</b> <b>Progress on Action</b>
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A	Continue TDM's for African American children <del>under age 5</del> aged 12 and under who are at risk of removal or immediately following removal.	Intake Srvc Mgr Dist Ops Mgrs	<b>In Progress</b> <ul style="list-style-type: none"> <li>▪ Capacity for TDM's addressed: Back-Up TDM Facilitators trained for capacity; Back-up's regularly scheduled for TDM's</li> <li>▪ NOTE: Target population changed to include cases that include African American children aged 12 and under who are at risk of or immediately following removal.</li> <li>▪ Target groups that limited TDM's based on zip code of family residence were set many years ago during Casey Foundation Family to Family grant support. The intent was that resources were limited and therefore only children from zip codes with the largest population of CFS referrals would be offered TDM's. There is a need to review this decision.</li> <li>▪ TDM meetings reviewed and modified to addressing issues of safety and risk, incorporate SOP and Family Team Meeting concepts).</li> </ul> <b>To Do</b> <ul style="list-style-type: none"> <li>▪ Evaluate and address TDM issues including compliance with TDM policy for target population and addressing barriers to completing TDM's.</li> <li>▪ Increase the number of TDM facilitators to ensure capacity for meetings.</li> </ul>
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<p>B Review compliance with children eligible for TDM vs. those served.</p>	<p>R &amp; E Manager Yr 4</p>	<p><b>In Progress</b></p> <ul style="list-style-type: none"> <li>In the past data comparisons between CWS/CMS and the ETO TDM Database could match populations to evaluate compliance. There are now issues with updates to TDM database so method of evaluating compliance needs to be explored.</li> <li>Past statistical analysis indicated only 50% of target population receives TDM's; reevaluate to determine compliance with policy.</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>Evaluate and address TDM issues including compliance with TDM policy for target population and addressing barriers to completing TDM's.</li> </ul>
<p>held and address issues.</p>	<p>Intake Srvc Mgr Yr 4</p>	<p><b>In Progress</b></p> <ul style="list-style-type: none"> <li>Revisit previous discussion re: reasons TDM's are not held.</li> <li>Analyze issues that are barriers to compliance.</li> <li>Address/resolve issues and refocus on compliance.</li> </ul> <p><b>To Do</b></p> <ul style="list-style-type: none"> <li>Evaluate and address TDM issues including compliance with TDM policy for target population and addressing barriers to completing TDM's.</li> </ul>
<p>for African American children who have been removed.</p>	<p>Dist Ops Mgrs Yr 4</p>	<p><b>To Do</b></p> <ul style="list-style-type: none"> <li>Plan and implement case review for assessing African American children who have been removed</li> </ul>
<p><b>Strategy 3D. Family Satisfaction</b></p>		
<p>Utilize feedback from consumers (parents and youth) to assist in improving culturally informed services</p>	<p><input type="checkbox"/> CAPIT <input type="checkbox"/> CBCAP <input type="checkbox"/> PSSF <input checked="" type="checkbox"/> N/A</p>	<p><b>Status of Strategy</b> 2 Action Steps for Strategy 3D. Both have status of Completed and Ongoing</p>
<p>Action Steps</p>	<p>Staff Responsible Timeframe</p>	<p>Status Progress on Action</p>

A	Develop feedback mechanism from parents and youth who have been in our system.	Director Resource Srvc Mgr Yr 1	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Existing feedback policies provide information regarding satisfaction: Foster Parents evaluation of placement services and Consumer Satisfaction Survey cards in office lobbies.</li> </ul>
B	Analyze consumer information and look for ways to improve service delivery and service gaps.	Director Resource Srvc Mgr Yr 1	<b>Completed and Ongoing</b> <ul style="list-style-type: none"> <li>▪ Information from Foster Parent/Social Worker survey cards are currently reviewed by 1 Manager. There is an ongoing need to continue to plan how this information is received and reviewed and how this information can help direct policy.</li> <li>▪ Consumer Satisfaction Survey cards available in district offices that are related to Child Welfare Services are reviewed by the Director. This information is shared with managers when needed.</li> <li>▪ Complaints from families, providers and the public received via phone call are tracked by the Director and discussed at CSAT when there are policy and/or performance issues to be address.</li> <li>▪ Various other review and focus groups gather information related to special grants and project. Information for these are generally reported in Project Status Reports (for example, the evaluation of the Father Survey and Re-Survey was a product of the CAPFO, Comprehensive Family Assessments federal grant and results were published in the final report. Other surveys include: Family Engagement Surveys, Father Engagement Survey, Self-Assessment Discussions, PQCR;s, Focus Groups by Bay Area Academy and determine if practice or policy changes are indicated.</li> </ul>

## Focus for 2014

The following are action items taken from the Tracking Matrix and will be the focus for year 2014. Please note that many of these overlap and the strategic plan that will come from the Project Management Team will combine or separate projects as needed.

### Measure 2C. Timely Social Worker Visits with Child

1. Create a Quality Assurance plan for Contacts that not only looks at timely contacts but also quality of content and documentation.
2. Formalize a recognition plan that takes into account all of the above.

### Measure C3.1. Exits to Permanency (24 Months)

1. Evaluate all case review meetings; reorganize structure to eliminate overlap, increase efficiency, and sustain focus on permanence.
2. Provide a training symposium on Permanency including but not limited to the following:
  - Permanency options including looking at personal biases regarding permanent solutions and approaching plans with an attitude of success (this segment can also address Group Home placements);
  - Concurrent Planning: Concurrent Planning done concurrently; how to measure and track concurrent planning.
  - Family Finding and permanency conversations: How to approach permanency with children, parents and relatives, informing parents of agency's responsibility for family finding, confidentiality (what can be shared with relatives, alleged fathers, parents);
  - Recording permanency efforts in CWS/CMS and court reports.
3. Continue Safety Organized Practice: Training and discussions shifting the agency culture to identifying behaviors and avoiding generalizations, focusing on reason for intervention and safety, and working from a solution oriented perspective, tools for presenting cases for review.
4. Develop forum to discuss barriers/potential barriers to Permanency and support a teamed/shared decision making approach to propose and support solutions.
5. Continue Safety Organized Practice: Training and discussions shifting the agency culture to identifying behaviors and avoiding generalizations, focusing on reason for intervention and safety, and working from a solution oriented perspective, tools for presenting cases for review.
6. Continue case reviews for existing and new case to comply with Katie A requirements for Mental Health needs assessment and wrapped services.

7. Update Relative Notification policy to include Family Finding activities.
8. In collaboration with Casey Family Programs provide a training symposium on Permanency including Permanency Options, conversations about permanency and concurrent planning including the role of the courts and legal representatives.
9. From a data perspective, the following will occur to support strategic improvement of performance:
  - Evaluate Case Plans to assess Concurrent Planning and determine how to measure and track concurrent planning.
  - Evaluate statistics to determine improvement in numbers of fathers as caregivers and number of father contacts.
  - Provide analysis of children/youth in long term foster care to use for permanency planning, case reviews, and recruitment.
  - The use of the visitation step-down model will be evaluated to determine the effectiveness of the policy and practice.

Systemic Factor, Disparity, Entries of African American Children to Foster Care

1. Evaluate and address TDM issues including compliance with TDM policy for target population and addressing barriers to completing TDM's.
2. Increase the number of TDM facilitators to ensure capacity for meetings
3. Plan and implement case review for assessing African American children who have been removed.

## IV. BARRIERS TO FUTURE STRATEGIES

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### Sustaining Staffing Levels

Children & Family Services Bureau continues to face delays in filling vacant and new positions. These positions include Social Workers, Social Work Assistants, Analyst Supervisors and Managers

### **Modification**

Hire of additional staffing throughout the year will enhance service to families  
 Train the new staff to ensure they have the ability to provide intensive services to families.

Assign staff to non-case carrying positions to ensure the resources needed are supported, i.e. TDM, Facilitators, Relative Approval Staff, etc.

Focus on New State Initiatives and Policy

With recent implementation of Extended Foster Care for Non-Minor Dependents (AB12), new efforts for case reviews under Katie A Initiative and new requirements for review of Group Home placements, project development activities have been focused on these areas. Though these support current SIP strategies and progress in these areas will enhance permanency and impact outcomes, still significant staff efforts (both in planning, directing activities as well as line staff who participate by bringing forward cases for review) impact ability to plan and focus in other areas.

V.

**V. OTHER SUCCESSES & PROMISING PRACTICES**

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The following documents successes and promising practices. Many of these projects listed below are incorporated into the SIP strategies or enhance SIP activities so are mentioned in the SIP Tracking Matrix.

Implementation of Safety Organized Practice – Implemented as a volunteer project, Safety Organized Practice principles and tools are offered to Social Workers and Social Worker Supervisors. The model approaches families receiving Child Welfare Services from the perspective of strengths and establishing safety plans to keep children safe while addressing issues of harm and danger to children. A method for reviewing and discussing cases focusing on family behaviors and stepping away from judgments and generalizations is presented. Staffs participating are energized with the new approach; the management team in Contra Costa actively participates in this project by tracking staff progress and practicing techniques in the monthly management team meeting that reviews cases.

Resource Home Recruitment and Foster Family Mentoring – Recruitment efforts in Contra Costa are focused to support not only recruitment of Licensed Foster homes but also relative, guardianship, and adoptive homes for placement. A recruiter has recently been hired to focus more efforts on permanent placements for children. This will support efforts for moving children in long term foster care to permanency. The Resource Division also provides mentoring for licensed foster home providers. Coordinated by one of Contra Costa's long standing Foster Parent, the purpose is to improve quality foster care and to support retention of foster parents through the use of Mentoring.

Family Finding: Contra Costa has a small team of Family Finding staff to support efforts. Searches are completed based on referrals from Social Workers but the Family Finding staff also attends Permanent Placement Case Review meetings to proactively support staff in identifying and finding families. Work is under way to hold Orientation sessions for identified relatives to discuss available resources and permanency alternatives for children at Kinship

Resource Centers. The Kinship Resource Centers will also be receiving lists of new relative placements so they can do outreach to relatives. The Family Finding team is working on a handbook that will provide list of resources and information on Court activities.

Father Engagement – One of the components of the federal grant, Comprehensive Family Assessments, and also a SIP strategy, efforts to engage fathers more actively in case plans and to consider fathers and families of fathers in permanency options has been very successful in Contra Costa. With the conclusion and final evaluation of Contra Costa's five year federal grant, Comprehensive Assessments to Improve Child Welfare Outcomes, staff were surveyed to assess father awareness and engagement activities and organizational changes regarding inclusion of fathers in the case planning process. Staff was initially surveyed in 2010 and over the life of grant received training, tools to engage fathers, support from father Parent Partners, and ongoing emphasis of father's place in lives of children. The post Father Engagement Survey at the end of the grant period documented that 74% of staff believed it was difficult to engage fathers in interviews and case planning in 2010 and only 22% held that belief in 2013. Based on information from surveys, staff report that the "court and legal system" and "bias against fathers" continue to be barriers for full inclusion and engagement.

Work with Incarcerated Parents – Initiated by the Parent Partner program and their strong focus on Father Inclusion, Contra Costa has developed a definitive collaborative approach to informing incarcerated fathers/mothers of their rights even while incarcerated. The program includes monthly training sessions, Navigating the Child Welfare System and Incarcerated Fathers' training sessions on legal status of father and understanding the legal system. The program also supports inclusion of the voice of these parents in planning for their children by connecting incarcerated parents with their Social Workers, training Social Workers how to navigate the prison system for more inclusion in planning, designating point people in both CFS and the jail to facilitate communication between the two systems, and even paving the way for Team Decision Making meetings in jails as well as facilitating family visits. These advances are exciting innovations that are motivating those staff involved to recognize the needs of this incarcerated population. At a recent California Parent Leadership Conference, Contra Costa presented information on this program. The conference session drew approximately 100 participants. This has definitely peaked the interest of other California state and county agencies particularly in light of new California legislation (AB109) that may lead to early release of many prisoners.

Case Reviews for Permanency– Contra Costa's progress towards a case review process continued throughout 2013 with more success in the beginning of year. The Project Team Meeting is committed to this process and this item is on the To Do list for focus for 2014. Because of the many review meetings established in Contra Costa energy was diffused to other case reviews. During 2014 Contra Costa will consolidate some of the review meetings and add more structure, feedback and resources to support more and richer conversations

about permanency for specific cases. The focus will be in many areas: Children in long term care, children in or moving toward Group Home placement, African American children entering care (to assess and redirect disparity in number of African American children entering and in care).

## VI. MEASURES NOT MEETING STANDARDS

The following measures did not meet the State/National standards. Some of these measures have seen a decline in the last year performance while others are improving. Contra Costa will be watching performance in these measures to intervene with whatever resources can be made available for performance to improve.

	State/National Goal	As of December 2012	Dec 2013 OR 12 Months from prior measure	Improving YES/NO
S1.1 No Recurrence Of Maltreatment	94.6%	93.2%	94.4%	NO
C1 Reunification Composite	110.2	114.88	105.23	NO
C1.1 Median Time To Reunification (Exit Cohort)	Months 5.4	8.5	9.7	NO
C1.3 Reunification Within 12 Months (Entry Cohort)	48.4%	36.5%	37.1%	YES
C1.4 Reentry Following Reunification (Exit Cohort)	9.9%	11.6%	14%	NO
C2.3 Adoption Within 12 Months (17 Mo In Care)	22.7%	11.1%	15.3%	YES
C3.1 Exits To Permanency (24 Mo In Care)	29.1%	13%	14.6%	YES
C4.3 Placement Stability (At Least 24 Months In Care)	41%	31.6%	36.8%	YES
4B Least Restrictive (Point in Time: Group Home	6.6%	12.5%	10.1%	YES

Contra Costa has not yet resolved issues with the current SIP component, Measure C3.1 Exits to Permanency (24 Months in Care) and has planned its focus for 2014 to continue work in this area so will not be adding any new measures to the Systems Improvement Plan. This does not mean that performance in the measures listed below is not being monitored and corrective action being undertaken:

### S1.1 No Recurrence of Maltreatment

The trend line for Contra Costa's performance in this measure shows a slow continuous decline. Though performance has fluctuated it has generally been above state average (which is improving) but has now dropped below the state average.

### C1.2 Median Time to Reunification (Exit Cohort)

This is an area where Contra Costa is not likely to attain the national standard of 75% or 5.4 months. This is a measure which requires the courts and other stakeholder's agreement. Given the conservative nature of our county this will be a long term process and have a current rate of 62.3% or median months of 6.1 is seen as great progress from the same time of in 2010 of 52%.

### C1.3 Reunification within 12 Months (Entry Cohort)

Contra Costa performance (based on trend line) is slightly better than state average but still lower than the National Standard with occasional quarters exceeding the National Standard. The overall trend line is slightly down, however; last year the trend line was slightly up. Note that in Entry Cohorts both California and Contra Costa demonstrate a better performance (closer to National Standard) in recent years than Exit Cohorts indicating performance for children entering care is better than performance when children in care for longer than 12 months are included in the evaluation.

### C1.4 Reentry Following Reunification

Performance in this measure has not been stable. A review of the chart shows that at the beginning of the SIP period, Contra Costa's performance was near the National Standard and below the state average. Contra Costa performed better than the state average from January 2013 to July 2013 and indeed dropped below the National Standard for July and October 2012 quarters. Since October 2012, however, Contra Costa has seen a sharp decline in performance (an increase in percent of children reentering care following reunification. The methodology for this measure calculates percent of children reentering care after being successfully reunified with parents/guardians within 12 months). To put this into perspective, the least number of children reentering care occurred in October 2012 quarter, the number children reentering care was 22 (performance measurement was 8.5%). In the current quarter, October 2013, 42 children reentered care (performance measurement was 13.2%). This is an increase of 20 children. Contra Costa will continue to explore reasons why the performance has declined and work to change the direction of this measure.

### C3.1 Exits to Permanency (24 Months in Care)

A measure selected for this SIP period, Contra Costa continues to watch performance and strategize for improvement.

### C4.3 Placement Stability (At Least 24 Months in Care)

As stated above, efforts to move from Group Homes toward lower levels of care and/or homes that could offer permanency, a positive effort, may negatively impact performance in this measure. Still, Contra Costa consistently performs below state average and National Standard in this measure so performance will be monitored.

#### 4B Least Restrictive (Point in Time: Group Home)

There is no standard for this measure however the state wide average is 6.6% Contra Costa's performance is stable, however the number of youth in this category higher than the state average. The county has been consistent in this measure due to a lack of emergency foster homes that are willing to accept children with special needs and teens. The county has recently added back a foster home recruiter which will work to enhance the counties pool of available homes. Contra Costa has also implemented a new approval policy for all youth under the age of 13 needing the director approval for placement in this level care.

### **Performance Challenges**

Though performance may vary from quarter to quarter, the following table compares performance in January 2012 to the current quarter October 2013 and counts measures with performance improvement and decline; for reference, the number of measures with improvement and decline reported in the last SIP Annual Report is also reported:

We are concerned about the increased number of measures with decline in performance from last year and believe the following are factors have shifted performance both positively and negatively since the beginning of this SIP period:

- Extended Foster Care impacts youth's willingness to leave Child Welfare Services for permanency since there is a financial incentive to be in care at 18. We have seen nearly 100 % of youth 17 and older remain in care.
- Families now entering Child Welfare Services have more complex issues requiring more resource and support services.
- Increased visits by social workers in the Foster Home is a positive requirement that provides an opportunity for Social Workers to gather more significant information about the child(ren) but requires more time to complete monthly contacts than previously when children could be visited in schools or in offices.
- Elimination of visit waivers and exemptions is again a positive policy change that supports case work but does increase workload by requiring more monthly visits per caseload than previously.
- Placement resources have diminished for a variety of reasons:
  - There have been delays in hiring Foster Home Recruiters since 2008 because staffing priorities required the agency to focus on case carrying staffing.
  - Because of the financial impact to non-profit organizations, many shelters previously available to support children with greater needs have closed. While the goal is to find family homes for children, more time is spent in searching for best placements for children.
  - Changes in requirements for Group Home placements is presenting opportunities for teamed approach in locating appropriate homes and

wrapping services to support these placements but this definitely requires more Social Worker time and consideration to address these issues.

- Lack of regional center treatment.
- As placement resources decrease, more children are placed out of county, thus visits to children require more Social Worker time and is impacting families ability to visit with their children. Addressing this concern has been on Contra Costa's SIP strategies and work continues to support Social Workers in scheduling visits for most efficiency and assisting families with the supports to visit their children.
- Increased court demands specific to Contra Costa Bench impact Social Work. These include:
  - Courts are requiring increased memos and not allowing social work staff to be on standby which results in excessive time waiting in court rooms.
  - Court orders mandate increased supervised visitation in district offices that can only be supervised by Social Workers.
- Lack of visitation resources (Visitation centers not enough and not what we need when court orders in CFS office)
- Lack of transportation supports for family visits
- Inability to adequate and timely hiring of staff in areas other than Social Worker negatively impact the Social Worker's job:
  - Clerical support is understaffed and with the high turnover in clerks, there is always a learning curve.
  - Inability to update policies and implement and train to new policies

## VII. MEASURES EXCEEDING STATE/NATIONAL STANDARDS

In 2013's Systems Improvement Plan Annual report Contra Costa met or exceeded the National Standard in 11 measures. This report also reflects that Contra Costa is exceeding 11 measures. The National Standard was just set for the 2 measures under 2F this year; Contra Costa exceeds the National Standard in both these measures.

	Measure	Exceeds National Standard	
S2.1	No Maltreatment In Foster Care	✓	✓
C1	Reunification Composite	✓	
C1.4	Reentry Following Reunification (Exit Cohort)	✓	
C2	Adoption Composite	✓	✓
C2.1	Adoption Within 24 Months (Exit Cohort)	✓	✓
C2.2	Median Time To Adoption (Exit Cohort)	✓	✓
C2.5	Adoption Within 12 Months (Legally Free)	✓	✓
C3.2	Exits To Permanency (Legally Free At Exit)	✓	✓
C4	Placement Stability Composite	✓	✓
C4.1	Placement Stability (8 Days To 12 Mo In Care)	✓	✓
C4.2	Placement Stability (12 To 24 Mo In Care)	✓	✓
2F	Timely SW Visits with Child	NA	✓
2F	Timely SW Visits with Child in Residence	NA	✓

Contra Costa's excels in performance in the following areas:

**C2 Adoption Composite and Adoption measures:** Performance exceeds both the National Standard and the state average in the Composite, Adoptions within 24 months and median time to adoption (exit cohort). Contra Costa performs below standard in Adoptions within 12 months for children in Care 17 months or longer; the lower performance in this measure is not a surprise when considering that Contra Costa continues to struggle with improvement in measure C3.1, exits to permanency for children in care 24 months or longer. This is a focus for this current SIP period and goals for improvement have been discussed previously. Improvement in measure C3.1 should also improve performance in this Adoption component. The policy established by the county is to not legally free children until a permanent home is found and therefore the measures that look at legally free children likely impact this measure.

**C4.1 Placement Stability up to 24 Months in Care:** Contra Costa's performance in the Placement Stability Composite and two Placement Stability measures (Children in Care 8 days to 12 Months and Children in Care 12 to 24 months exceed both the National Standard and state average).

Again, Contra Costa is challenged by the Placement Stability measure for children in care at least 24 months. As we work to improve performance in Concurrent Planning and Permanency for children in care longer than 24 months, Placement Stability for this population may continue to be negatively impacted as children are moved to lower levels of placement homes or to homes promising permanence.

2B Timely Response for Referrals: A National Standard is not set for these 2 measures but Contra Costa has consistently exceeded the state average for Timely Response for referrals requiring an immediate response. Performance for timely response for referrals requiring a 10 day response runs close to the state average and has exceeded it in several of the quarters since the beginning of the SIP period but is currently below the state average. This measure is one where performance is most directly impacted by staffing levels: when there is diminished staffing in the agency all programs are affected. , efforts are made to assure timeliness for immediate referrals and response to 10 days are therefore more impacted.

2F Timely Monthly Caseworker Visits: Though currently below the state average, Contra Costa considers performance in this measure a success. This is one of the SIP measures and performance has been previously discussed.

4A Siblings Placed Together: In the previous SIP period, Contra Costa worked on the Siblings Placed Together measures. A supervisor led workgroup raised awareness of the importance of sibling groups and Contra Costa worked on correcting data to identify siblings in the data base. During this period efforts were made to assure sibling visitation and to move siblings when feasible so they were placed together. Though not a SIP focus, Contra Costa continues to work toward permanency solutions for all siblings; to support that effort, sibling cases were transferred so that all siblings had a common worker even if they weren't placed together. Though still below state averages, Contra Costa has seen continuous improvement in performance in the two Siblings Placed Together measures.

4B Least Restrictive Placements, Entries. Contra Costa exceeds the state average for both entry placements with relatives (the goal is to place with relatives) and entry placements in Group Homes (the goal is to not place in Group Homes or shelter). Contra Costa has focused on placement with relatives and as discussed previously is seeking to further support Social Workers in locating relatives both for placement and permanence by the recent filling of a long standing vacant position of Resource Home Finder and increased family finder staff. Contra Costa also continues to work with Kinship Centers as a training center and a source for resources and support for relatives.

## IX. PROBATION PLACEMENT INITIATIVES

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The following information documents the Contra Costa County Probation Department's current performance with Measure 2F: Timely Monthly Caseworker Visits\*. Data for this review is taken from quarterly county outcomes report, CWS Outcomes System Summary for Contra Costa County - 9.25.13: Report publication: OCT2013. Data extract: Q2 2013. Agency: Probation. Reports for the probation agency type are not available for years prior to 2012, since CWS/CMS was not structured to collect client contact data for probation supervised children.

**Priority Outcome Measure or Systemic Factor:** 2F: Timely Monthly Caseworker Visits\*

**National Standard:** 90.0%

**Current Performance:** 32.7% (Rel. to nat'l std/goal)

**Target Improvement Goal (inputted data into CWS/CMS):** 100%. Probation visits the children we have in placement every month, which is documented on monthly contact logs with the Placement Supervisor. Our improvement performance is not with conducting monthly visits, it is with documenting our visits in CWS/CMS.

The Probation Department is making monthly visits with all of our placement children. Monthly visits are always the number one priority for the Placement Unit. The Probation Foster Care Placement Monthly Caseload Statistical Reports (FC23), which we submit to CDSS, documents our monthly visits totals and shows we are completing all of our monthly visits. However, we understand that the Current Performance number of visits inputted into CWS/CMS, as indicated in the report, needs improvement.

The Probation Department has had some significant factors contributing to our weak performance with data entry into CWS/CMS. The Placement Unit has had periodic staffing shortages since 2011 with Clerical staff, Deputy Probation Officers (DPOs), Placement Supervisors, and Placement Managers. One clerk is assigned to the placement unit and when the position was vacant for approximately 4 months we fell behind with our data entry. Once we were able to hire a clerk, she had to be trained in the CWS/CMS system, and is still learning. When we were "short" DPOs, the existing DPOs had to conduct the additional monthly visits, which left less time for data entry. We also had staff turnover within the Placement Unit and have had to train them in CWS/CMS.

The Probation Department is taking steps to improve our CWS/CMS data entry, and in turn improve our outcomes in the reports. We have conducted additional trainings through UC Davis for our DPOs and Clerk, and will continue to do so. We are fortunate to have a Clerical Supervisor with previous experience with CWS/CMS who has been able to assist and train the current Placement Clerk. Probation is also looking at having a second clerk assist the current Placement Clerk for a few hours a week with CWS/CMS. We currently have a fully staffed Placement Unit and will be adding another DPO position. The new DPO will be dedicated to working with our youth who now fall under Assembly Bill 12: California Fostering Connections Act. This should help create smaller caseload numbers for our existing DPOs and improve their ability to input their data into CWS/CMS.

## X. REVIEW OF STATE AND FEDERALY MANDATED CHILD WELFARE/PROBATION INITIATIVES

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Contra Costa's has activity participated in the following federal and state initiatives.

Katie A. v Bonta Lawsuit – Contra Costa continues to work with Mental Health in assessing Mental Health needs of all children defined in the Katie A. policy instructions. Weekly case review meetings are held with CFS and Mental Health to discuss children's needs. During these reviews the level and need of Mental Health and wrap services are discussed and planned. Contra Costa has hired a consultant to assist in implementation process to support ongoing cultural shift that both agencies must make to successfully serve our families. Focus Groups have been held with both Children Services and Mental Health staff to understand the needs of both departments and to define roles and responsibilities to enhance our collaboration and to determine the best process for addressing the needs of children and families we serve. The collaboration efforts continue to evolve as work progresses. Contra Costa is also a part of the Bay Area Learning Collaborative where Contra Costa staff is able to discuss policy with staff in neighboring counties and share successes, challenges, and strategies.

Extended Foster Care (AB12) - With the anticipation of passage of AB 12 a workgroup was formed in Contra Costa. This group is made up of social work staff, supervisors, managers and community providers. The group developed the policies and procedures and is now working on a desk guide to for help with case planning with NMD, This group has continued to meet for more than three years on a monthly basis. Like other counties we continue to see most youth choosing to stay in care and opt into the AB12 services. We are also starting to see that some of these young adults are very transient and while they agree to the requirements of the program they are very inconsistent in meeting the requirements.

Realignment – The Budget Act of 2011 included a change in the funding for child welfare was administered.

## Contra Costa's Contribution to PIP Strategies

As documented in last year's Annual Report, primary strategies for the California Performance Improvement Plan are listed below followed with Contra Costa efforts that support the county's improvement thus attributing to the state's overall improvement.

- **Expand use of participatory case planning strategies**

The following strategies under Measure C3.1 Exits to Permanency (24 Months in Care) support this PIP focus:

- Strategy 2A supports ongoing reunification and discussions about reunification with parents.
- Strategy 2E engages fathers in case planning;
- Strategy 2F supports transition planning for youth including assessment of educational needs;
- Strategy 2H documents Contra Costa inclusion of incarcerated parents in case planning.
- Strategy 3D under the Systemic Factor of Disparity promotes Team Decision Making Meetings for African American children thus providing more intensive evaluation of risk issues for these children.

- **Sustain and enhance permanency efforts across the life of the case**

The focus of this PIP initiative is broad and many of the strategies in Contra Costa's as well as performance in measures not included in the SIP promote the statewide effort. The following Contra Costa's strategies under Measure C3.1 Exits to Permanency (24 Months in Care) directly support the effort toward permanence:

- Strategy 2A Family Engagement for Permanency,
- Strategy 2C Family Finding and Relative Notification,
- Strategy 2D Concurrent Planning,
- Strategy 2E Father Engagement,
- Strategy 2G Recruitment of Families.
- Strategy 2D directly support sustained permanency efforts across the life of the case; the action called for is maintaining continuous focus on permanency and Concurrent Planning, identifying challenges and delays in Concurrent Planning, and measuring performance in Concurrent Planning to determine effective Concurrent Planning strategies. Contra Costa's performance in 3 of the Adoption Measures in Contra Costa exceeds the National Standard.

**Enhance and expand caregiver recruitment, retention, training, and support efforts**

Under Measure C3.1 Exits to Permanency, Contra Costa has 2 strategies directly related to caregiver recruitment and retention.

- Strategy 2C Family Finding and Relative Notification
- Strategy 2G Recruitment of Families that can offer permanent homes for children.

• **Expand opportunities and create flexibility for services and supports to meet needs of children and families**

Contra Costa: The following strategies under measure C3.1 Exits to Permanency in Contra Costa's SIP support this PIP effort:

- Strategy 2B has activities to increase wrap services and raise cultural awareness through use of Parent Partners;
- Strategy 2F provides transition meetings for youth that also serve to identify resources for youth and non-minor dependents. Under Systemic Factor, Disparity/Disproportionality
- Strategy 3A plans for support for staff in culturally and ethnically competent Family Engagement including training for cultural knowledge and awareness and use of non-traditional resources and services relevant to case plan goals that support families in addressing case plan goals in a manner that best matches the cultural values of the family.

• **Sustain and expand staff/supervisor training**

Contra Costa Children and Family Services has two Staff Development Specialists responsible for planning, coordinating , and giving ongoing training to staff and supervisors in all areas of Child Welfare Services. Over the past several years, Contra Costa supported staff choosing to learn and use Motivational Interviewing skills. During the last year Contra Costa introduced the Safety Organized Practice model. Two teams of volunteers are currently going through 11 modules of training including Interviewing for Safety and Danger, Solution Focused Inquiry, and Safety Mapping and Planning. For both Motivational Interviewing and Safety Organized Practice, there are opportunities for ongoing training, support and coaching to re-enforce learning.

• **Strengthen implementation of the statewide safety needs assessment system**

Contra Costa dramatically improved performance in Timely Social Worker visits during the first 2 years of its Systems Improvement Plan. As stated in PIP documentation, evidence of increased visits with social workers directly relates to more positive outcomes for children. Contra Costa continues to plan for and implement quality visits that include ongoing evaluation of family strengths and addressing family needs. This supports. Contra Costa continues to use the Comprehensive Assessment Tool (CAT) as the standardized risk assessment system.