

# California - Child and Family Services Review

## County Self-Assessment



## California – Child and Family Services Review Signature Sheet

For submittal of: CSA  SIP  Progress Report

County	Lake
SIP Period Dates	June 2015-June 2020
Outcome Data Period	January 2011-March 2015

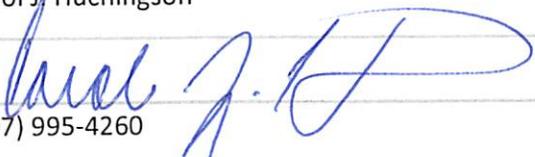
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## Introduction

The County Self Assessment (CSA) is one of the three components required by the California Department of Social Services (CDSS) as part of the California Child and Family Services Review (C-CFSR). With the other two components, Peer Review and System Improvement Plan, the C-CFSR provides a comprehensive review of the juvenile dependency and probation systems.

CDSS Office of Child Abuse Prevention (OCAP) requirements have been integrated into the CSA since 2008/2009. This fulfills the requirement for a needs assessment which justifies in the System Improvement Plan (SIP) the use of funds from Child Abuse Prevention, Intervention and Treatment (CAPIT), Community Based Child Abuse Prevention (CBCAP), and Promoting Safe and Stable Families (PSSF). CAPIT/CBCAP/PSSF funds provide targeted service throughout the continuum of care, from prevention and early intervention through treatment and aftercare.

The Lake County Department of Social Services (LCDSS) Child Welfare Services (CWS) and Probation Department were the two lead agencies for this CSA. CDSS Children's Services Outcomes and Accountability Bureau (CSOAB) consultant, Barbara Ricciuti-Colombo, and the Office of Child Abuse Prevention (OCAP) consultant, Irma Muñoz, provided guidance to CWS and Probation staff, through an in person meeting on January 30, 2015, and several phone conferences during the planning process. The Northern Training Academy, operated by the University of California, Davis (UCD), was contracted to manage the Peer Review and CSA. UCD staff members Jessica Iford and Lisa Tadlock were instrumental in the planning, researching, conducting, and summarizing of the Peer Review and CSA events and processes.

Information for the CSA was gathered through the Peer Review; focus groups of parents, foster parents, youth in foster care, probation officers, social workers, and social worker supervisors; and a stakeholder meeting. All were facilitated by Jessica Iford of UCD using tools provided by CDSS. Participants engaged in lively discussion and provided much insight and input into County needs and strengths and CWS and Probation systems.

## C-CFSR Planning Team & Core Representatives

### A. C-CFSR TEAM

The C-CFSR Team, which met regularly to drive the C-CFSR process, includes the following:

Kathy Maes	Deputy Director, LCDSS
Terri Rivera	Chief Deputy Probation Officer, Lake County Probation
Patti Powell	Program Manager, LCDSS
Kim Costa	Program Manager, LCDSS
Melinda Lahr	Social Worker Supervisor, LCDSS
Leila Haddad	Supervising Analyst, LCDSS
Irma Castro	Systems Support Analyst, LCDSS
Kelli Page	Staff Services Analyst, LCDSS
Wendy Mondfrans	Deputy Probation Officer, Lake County Probation
Marcie Cadora	Staff Services Analyst, Probation
Barbara Ricciuti-Colombo	CDSS, CSOAB Social Services Consultant III
Irma Muñoz	CDSS, OCAP Social Services Consultant III
Jessica Iford	Research Analyst, UC Davis
Lisa Tadlock	Public Education Specialist, UC Davis

### B. CORE REPRESENTATIVES

A list of Core representatives who participated in the CSA is attached as Exhibit A. Special acknowledgement is due to Joan Reynolds, Director of Lake County Office of Education-Healthy Start, and chair of the Lake County Children’s Council, the local Child Abuse Prevention Council (CAPC). Her assistance notifying and reminding members of the Children’s Council and other community partners of the CSA Stakeholder Meeting was invaluable.

### C. THE CSA PLANNING PROCESS

The C-CFSR team identified the Peer Review as the first step in the C-CFSR, followed by a Stakeholders Meeting, with additional focus groups targeted to obtain necessary information from all participants relevant to the CSA.

The Peer Review was held in Lake County from February 10 through 12, 2015. Six CWS and two Probation cases were reviewed by CWS peers from Lassen, Mariposa, Placer, and San Benito Counties, and Probation peers from Nevada and Calaveras Counties. The focus area for CWS was measure C1.3, Reunification within 12 months (Entry cohort), while Probation’s was C3.1, Exits to Permanency.

A CSA stakeholders meeting occurred on March 4, 2015, attended by CWS and Probation staff and several community partners, including tribal members. Facilitated by Jessica Iford of UCD, the meeting was well attended and participants engaged in lively discussion.

Focus groups included social workers, probation officers, social worker supervisors, parents, foster parents, and youth in or formerly in foster care. Jessica Iford also facilitated these.

It should be noted, tools provided by CDSS (such as interview questions) were used for the Peer Review, CSA Stakeholders Meeting, and focus groups.

#### **D. PARTICIPATION OF CORE REPRESENTATIVES**

As Exhibit A demonstrates, a large number of community partners from a wide array of agencies participated in the CSA with staff from Lake County CWS and Probation. Community partners, most of whom are also members of the local child abuse prevention council (CAPC), included representatives from tribes, Lake County Public Health, Lake County Behavioral Health, Lake County Office of Education, Lake Family Resource Center, Redwood Community Services, North Coast Opportunities/Rural Communities Childcare, various Lake County school districts, Redwood Coast Regional Center, Easter Seals Disability Services, and LCDSS CalWORKs and Employment Services staff. As well, parents, foster parents, and youth participated in focus groups.

Community partners who were invited but did not attend include Court Appointed Special Advocates (CASA), County Counsel and attorneys representing clients involved in the Juvenile Dependency or Probation systems, and law enforcement.

#### **E. STAKEHOLDER FEEDBACK**

Lake County CWS and Probation solicited stakeholder feedback for the CSA through the aforementioned Stakeholder Meeting and through focus groups with social worker supervisors, social workers, juvenile probation officers, parents, foster parents, and youth in foster care. Following are summaries of the information gleaned from the stakeholder meeting and the focus groups.

The stakeholders listed in Exhibit A met on March 4, 2015, to discuss demographics, regional needs and resources, and individual areas of focus related to outcomes for children and families. A summary of their findings is presented throughout the content of the assessment.

Lake County conducted six focus groups in order to obtain important feedback regarding key participants' experiences and knowledge of county performance and needs. Focus groups were facilitated by UC Davis, which also provided note takers. Focus groups were held during the week of the Peer Review at the LCDSS Family Center, with the exception of the Social Worker, Probation Officer, and Social Worker Supervisor groups, which were held at the Peer Review site. Food was provided for all focus group participants.

Focus groups included:

- Child Welfare Supervisors; three participants, February 10, 2015.
- Social Workers; eight participants, February 11, 2015
- Youth (ages 12-18); nine participants, February 11, 2015
- Probation officer and supervisors; three participants, February 12, 2015
- Biological Parents; 11 participants, March 2, 2015
- Foster parents and Relative Caregivers; four participants, March 3, 2015

Feedback from stakeholders has been collated by themes and is included throughout the report in appropriate sections.

# Demographic Profile

## A. GENERAL COUNTY DEMOGRAPHICS

### GENERAL POPULATION

GENERAL POPULATION			
	2000	2010	2013
<b>California</b>	<b>33,871,648</b>	<b>37,253,956</b>	<b>37,659,181</b>
<b>Lake County</b>	<b>58,309</b>	<b>64,665</b>	<b>64,260</b>
Clearlake	13,142	15,250	15,127
Clearlake Oaks	2,402	2,359	1,456
Clearlake Riviera	No Data	3,090	2,801
Cobb	1,638	1,778	1,454
Hidden Valley	3,777	5,579	5,410
Kelseyville	2,928	3,353	3,568
Lakeport	7,699	8,067	7,827
Lower Lake	1,755	1,294	1,451
Lucerne	2,870	3,067	3,117
Middletown	1,020	1,323	1,040
Nice	2,509	2,731	2,430
Soda Bay	No Data	1,016	1,336
Spring Valley	No Data	845	1,203
Upper Lake	989	1,052	613
Remainder	17,580	13,861	15,427

Sources: U.S. Census Bureau, 2000 Census; U.S. Census Bureau, 2010 Census; U.S. Census Bureau, 2013 American Community Survey Estimate: <http://www.census.gov/en.html>

Lake County, located approximately 100 miles north of San Francisco, 100 miles west of Sacramento, and 70 miles inland from the Pacific coast, is very rural. The County contains two incorporated cities: Clearlake is the largest and Lakeport is the county seat. Only 0.17% of California's total population resides in Lake County. County population growth of 10.2% since the 2000 census figures is 1% less than California's 11.2%.

## POPULATION BY AGE

LAKE COUNTY POPULATION, BY AGE		
	Number	Percent
<b>Total population</b>	<b>64,260</b>	<b>100%</b>
<b>Under 5 years</b>	3,543	5.5%
<b>5 to 9 years</b>	3,468	5.4%
<b>10 to 14 years</b>	3,820	5.9%
<b>15 to 19 years</b>	4,147	6.5%
<b>20 to 24 years</b>	3,330	5.2%
<b>25 to 34 years</b>	6,714	10.4%
<b>35 to 44 years</b>	7,031	10.9%
<b>45 to 54 years</b>	9,573	14.9%
<b>55 to 59 years</b>	5,374	8.4%
<b>60 to 64 years</b>	5,487	8.5%
<b>65 to 74 years</b>	6,874	10.7%
<b>75 to 84 years</b>	3,235	5.0%
<b>85 years and over</b>	1,664	2.6%
<b>Median age (years)</b>	45.1	-

Source: U.S. Census Bureau, 2013 American Community Survey Estimate: <http://www.census.gov/en.html>

Young people aged 0 to 19 years comprise 23.3% of Lake County's population. The senior population, aged 65 years and older, comprises 18.3%, compared to 12.5% in California.

## POPULATION BY RACE/ETHNICITY

LAKE COUNTY POPULATION, BY RACE		
Race	Number	Percent
<b>White</b>	52,877	82.3%
<b>Black or African American</b>	1,557	2.4%
<b>American Indian and Alaska Native</b>	2,241	3.5%
<b>Asian</b>	798	1.2%
<b>Native Hawaiian and Other Pacific Islander</b>	174	0.3%
<b>Other</b>	6,613	10.3%
<b>Hispanic or Latino (of any race)</b>	11,323	17.6%
<b>Not Hispanic or Latino</b>	52,937	82.4%

Source: U.S. Census Bureau, 2013 American Community Survey Estimate: <http://www.census.gov/en.html>

The Hispanic or Latino population of Lake County is approximately half of California's 38.4%, while the local Native American population is double California's 1.7%.

## POPULATION BY LANGUAGE SPOKEN

LANGUAGES SPOKEN AT HOME		
	Number	Percent
<b>Population 5 years and over</b>	60,717	-
<b>Speak only English</b>	52,095	85.8%
<b>Spanish or Spanish Creole</b>	7,355	12.1%
<b>Other Indo-European languages</b>	670	1.1%
<b>Asian and Pacific Island languages</b>	483	0.8%
<b>Other languages</b>	114	0.2%

Source: U.S. Census Bureau, 2013 American Community Survey Estimate: <http://www.census.gov/en.html>

The California Department of Education (CDE) at <http://www.ed-data.org/county/Lake> reports that English learners comprised 1079 of the 9016 students enrolled in Lake county schools, which is nearly 12% of the student population.

## MEDIAN INCOME

INCOME (IN 2013 INFLATION-ADJUSTED DOLLARS)		
	Lake County	California
<b>Total households</b>	26,505	12,542,460
<b>Less than \$10,000</b>	2,346	714,855
<b>\$10,000 to \$14,999</b>	2,567	646,495
<b>\$15,000 to \$24,999</b>	4,509	1,201,822
<b>\$25,000 to \$34,999</b>	3,436	1,137,796
<b>\$35,000 to \$49,999</b>	3,642	1,541,102
<b>\$50,000 to \$74,999</b>	4,207	2,122,567
<b>\$75,000 to \$99,999</b>	2,339	1,551,514
<b>\$100,000 to \$149,999</b>	2,380	1,870,135
<b>\$150,000 to \$199,999</b>	617	848,259
<b>\$200,000 or more</b>	462	907,915
<b>Median household income</b>	\$36,548	\$61,094
<b>Percent of persons below poverty level</b>	25.0%	15.9%

Source: U.S. Census Bureau, 2013 American Community Survey Estimate: <http://www.census.gov/en.html>

## UNEMPLOYMENT DATA

EMPLOYMENT STATUS		
	Lake County	California
<b>Population 16 years and over</b>	52,502	29,516,595
<b>In labor force</b>	27,242	18,946,244

<b>Civilian labor force</b>	27,206	18,804,519
<b>Employed</b>	22,718	16,635,854
<b>Unemployed</b>	4,488	2,168,665
<b>Armed Forces</b>	36	141,725
<b>Not in labor force</b>	25,260	10,570,351
<b>Percent Unemployed</b>	16.5%	11.5%

Source: U.S. Census Bureau, 2013 American Community Survey Estimate:

A little over half (51.9%) of Lake County residents aged 16 years and older are in the labor force. 65% of the people employed in Lake County were private wage and salary workers; 22% were federal, state, or local government workers; and 13% were self-employed in their own (not incorporated) business. The website for the U.S. Bureau of Labor statistics ([http://www.bls.gov/cps/cps\\_htgm.htm](http://www.bls.gov/cps/cps_htgm.htm)) reports Lake County's unemployment rate for March 2015 was 7.8%, while California as a whole was 6.5%.

### AVERAGE HOUSING COSTS

<b>HOUSING COST</b>		
	<b>Lake County</b>	<b>California</b>
<b>Median value of owner-occupied units</b>	\$183,600	\$366,400
<b>Median monthly rent</b>	\$900	\$1,224

Source: U.S. Census Bureau, 2013 American Community Survey Estimate

The median value of owner occupied units in the County is half that of California as a whole, while median rent for the County is 74% of California's rate. In addition, at \$900 median monthly cost of rent and median income of \$36,548, renters in Lake County are paying about 30% of their income for housing. This compares to 24% for renters statewide.

### HOMELESSNESS DATA

<b>HOMELESS POPULATION</b>		
	<b>Lake County</b>	<b>California</b>
<b>2013 homeless count</b>	188 <sup>1</sup>	136,826 <sup>2</sup>

Sources: <sup>1</sup>Lake County News report dated January 31, 2013, written by Elizabeth Larson;

<sup>2</sup>The U.S. Department of Housing and Urban Development Office of Community Planning and Development 2013 Annual Homeless Assessment Report to Congress

The 188 people counted as homeless in Lake County in 2013 represent 0.29% of the total population count of 64,260. The Lake County Office of Education reports, "966 children received McKinney-Vento Act homeless services in school year 2013/2014, which represents 10.7% of the 9,016 children in school, pre-school through 12<sup>th</sup> grade. Lake County's McKinney-Vento eligible population is the fourth largest per capita in California."

The McKinney-Vento Homeless Education Assistance Act provides federal funding to states for the purpose of supporting district programs that serve homeless students. The definition of homelessness for McKinney-Vento Act services eligibility is broad.<sup>i</sup>

**FEDERALLY RECOGNIZED TRIBES IN LAKE COUNTY**

<b>FEDERALLY RECOGNIZED TRIBES WITHIN LAKE COUNTY</b>
Big Valley Band of Pomo Indians
Elem Indian Colony of Pomo Indians
Habematolel Pomo of Upper Lake
Koi Nation of Northern California
Middletown Rancheria of Pomo Indians
Robinson Rancheria (Pomo)
Scotts Valley Band of Pomo Indians

Source: U.S. Department of the Interior, Federal Registry of Indian Entities Recognized and Eligible To Receive Services from the United States Bureau of Indian Affairs, dated January 14, 2015: <https://federalregister.gov/a/2015-00509>

Of a total of 108 federally recognized tribes in California, seven are in Lake County. Native Americans constitute a significant portion of Lake County’s population at 3.5%.

**GENERAL COUNTY DEMOGRAPHICS ANALYSIS**

**Rural County Characteristics**

Lake County is very rural, situated approximately 100 miles from any major city hub and has 1,256 square miles of land mass and 73 square miles of water mass (5.5%). Lake County’s population density is approximately 49 people per square mile. Due to Lake County’s surrounding steep terrain, Lake County is the only one of California's 58 counties to have never been served by a railroad line. Due to the rural and secluded location, most Lake County residents do not have the ability to seek services or support from organizations or agencies from bordering counties, instead having to rely solely on the services within the county. Lake County has only two incorporated cities, and many of the other twelve unincorporated cities have little to no services due to their isolation. Very few transportation programs are available in Lake County. Stakeholders report that transportation poses challenges throughout the county for foster families, as well as biological families, in accessing services, traveling to and from visitation, etc. This puts a strain on families’ time and resources, as well as added stress on children who spend extended time traveling to appointments.

**Low Income Population**

With 18.3% of residents over the age of 65, the county has nearly 1.5 times the proportion of older residents than California as a whole. The anticipated significant growth in this age group will put a larger burden on the health care system and local economy, which may not have sufficient community services or tax base to support it. The income of the majority of Lake County households is significantly less than California as a whole. For example, 8.9% of Lake

County households fall in the “less than \$10,000” category, while the figure for California is 5.2%. Similarly, in the category “\$200,000 or more”, only 1.7% of Lake County households qualify compared to 7.2% for California. 30.0% of Lake County households’ incomes are in the \$15,000 to \$34,999 range and 29.6% are in the \$35,000 to \$74,999 range. Lake County’s medium household income is almost half that of California’s at \$36,548, with 25.0% of persons below poverty level. Based on 2008 self-sufficiency standards, 4 in 10 Lake County households lacked enough income to cover “bare bones” living expenses. One-third of the population was reported to be “food insecure.” In the 2013/2014 school year, 72.7% of students received free or reduced price meals.<sup>ii</sup>

Poverty is widespread throughout the County. In the southern area of the County, Middletown has 29.9% of the population and 21.2% of families below the poverty line. In Clearlake, the largest city in the County, 28.6% of the population and 23.5% of families are below the poverty line. Upper Lake, in the northern part of the County, and Nice, on the east side of the Lake, are comparably high. The figures for Lakeport, the County seat, are better, where 12.4% of the population and 13.5% of families fall below the poverty line.<sup>iii</sup>

Stakeholders identified that the county is facing one of the highest unemployment rates in the state, with a depressed economy. The county’s lack of financial prosperity leads to limited access to local services. Many of the needed services for families are not offered in the county, requiring clients to travel longer distances to meet their service needs. Additionally, this often requires that the county help fund these outside services with its limited budget. Due to the limited economy and challenges in supporting families, many parents are struggling between the choice to work or to be involved in their child’s school, extra-curricular and other community resources. This has an impact on the quality of life for families and their ability to access resources that may help them engage in prevention strategies in less formal settings.

### **Lack of Affordable Housing**

Lake County’s median home cost is half that of California’s and median monthly rent is 26.0% lower than California as a whole. The cost of purchasing a home in Lake County is much lower than in California, which attracts many retirees. Data from the U.S. Census for housing costs and availability in Lake County do not capture the struggle for many families to find adequate, affordable housing. CWS’s Differential Response partners repeatedly cite lack of affordable housing as a challenge for the families they serve. The LCDSS Housing Coordinator reports on the Section 8 Housing Choice Voucher Program, a rental assistance program for very low income households. Lake County has a total of 224 Section 8 housing vouchers. The Section 8 waiting list was last open in January 2014, accepting 100 applicants, 39 of whom remain on the waiting list.

### **Homelessness**

Lake County had a 0.26% homeless rate in 2013 and 10.7% of all school aged children were receiving McKinney-Vento homeless services. Therefore, although the 2013 homeless count is

less than 1% of the total Lake County population, the impact of homelessness on children, and by implication on families, in the County is very significant. Housing assistance is available through the Lake County Housing Commission which offers housing programs through a variety of services with funding from the Federal Community Development Block Grant (CDBG), HOME Program, Housing & Urban Development (HUD), and Lake County Redevelopment Agency.

## B. CHILD MALTREATMENT INDICATORS

### NEWBORNS WITH LOW BIRTH WEIGHT

<b>NEWBORNS WITH LOW BIRTH WEIGHT 2008-2010 (NUMBER &amp; PROPORTION)</b>				
	<b>Lake County total of low birth weight births</b>	<b>Lake County percentage of all live births</b>	<b>California total of low birth weight births</b>	<b>California percentage of all live births</b>
2008	39	5.5%	37,663	6.8%
2009	40	5.5%	35,835	6.8%
2010	46	6.4%	34,692	6.8%

Source: State of California, Department of Public Health, Birth Records,  
<http://www.cdph.ca.gov/data/statistics/Documents/VSC-2010-0220.pdf>

Lake County percentage of babies born with low birth weight has remained lower than the state, but increased between 2008 and 2010 while the state remained steady.

### CHILDREN BORN TO TEEN PARENTS

<b>CHILDREN BORN TO TEEN MOTHERS (AGES 15-19) 2008-2010 (NUMBER &amp; PROPORTION)</b>				
	<b>Lake County total of live births to teen mothers</b>	<b>Lake County percentage of all live births</b>	<b>California total of live births to teen mothers</b>	<b>California percentage of all live births</b>
2008	102	14.5%	51,704	9.4%
2009	89	12.3%	47,811	9.1%
2010	87	12.1%	43,127	8.5%

Source: State of California, Department of Public Health, Birth Records,  
<http://www.cdph.ca.gov/data/statistics/Documents/VSC-2010-0221.pdf>

Lake County's teen mother birth average for the three years 2008-2010 is 1.44 times that of California's average.

### FAMILY STRUCTURE (single parent homes, grandparent homes, etc.)

<b>FAMILY STRUCTURE</b>				
	<b>Lake County</b>		<b>California</b>	
<b>HOUSEHOLDS BY TYPE</b>	<b>Total</b>	<b>Percentage</b>	<b>Total</b>	<b>Percentage</b>

<b>Total households</b>	<b>26,505</b>	<b>-</b>	<b>12,542,460</b>	<b>-</b>
<b>Family households (families)</b>	16,540	62.4%	8,603,822	68.6%
With own children under 18 years	6,332	23.9%	4,105,841	32.7%
Married-couple family	11,482	43.3%	6,168,251	49.2%
With own children under 18 years	3,532	13.3%	2,866,494	22.9%
Male householder, no wife present, family	1,644	6.2%	742,821	5.9%
With own children under 18 years	996	3.8%	341,332	2.7%
Female householder, no husband present, family	3,414	12.9%	1,692,750	13.5%
With own children under 18 years	1,804	6.8%	898,015	7.2%
<b>Nonfamily households</b>	9,965	37.6%	3,938,638	31.4%
Householder living alone	7,793	29.4%	3,040,221	24.2%
65 years and over	3,197	12.1%	1,067,111	8.5%
<b>Number of grandparents living with own grandchildren under 18 years</b>	1,471	-	1,104,161	-
Responsible for grandchildren	684	46.5%	301,746	27.3%
<b>Households with one or more people under 18 years</b>	7,385	27.9%	4,613,728	36.8%
<b>Households with one or more people 65 years and over</b>	8,216	31.0%	3,128,350	24.9%
<b>Average household size</b>	2.38	-	2.94	-
<b>Average family size</b>	2.89	-	3.53	-

Source: U.S. Census Bureau, 2013 American Community Survey Estimate <http://www.census.gov/en.html>

Like California, Lake County households encompass a wide variety of family structures. Single parent households (male and female) with children under 18 years in Lake County are about the same percentage of population as the state, 10.6% compared with 9.9%, respectively. However, Lake County's percentage of grandparents responsible for grandchildren is 1.7 times that of California.

## HOUSING COSTS AND AVAILABILITY

HOUSING COSTS AND AVAILABILITY				
	Lake County		California	
Housing Occupancy	Total	Percentage	Total	Percentage
Total housing units	35,508	-	13,726,869	-
Occupied housing units	26,505	74.6%	12,542,460	91.4%
Vacant housing units	9,003	25.4%	1,184,409	8.6%
Homeowner vacancy rate	4.3	-	1.8	-
Rental vacancy rate	7.3	-	4.9	-
<b>Housing Tenure</b>				
Occupied housing units	26,505	-	12,542,460	-
Owner-occupied	16,616	62.7%	6,939,104	55.3%
Renter-occupied	9,889	37.3%	5,603,356	44.7%
<b>Median value of owner-occupied units</b>	\$183,600	-	\$366,400	-
<b>Median monthly rent</b>	\$900	-	\$1,224	-
<b>Mortgage Status</b>				

Owner-occupied units	16,616		6,939,104	
Housing units with a mortgage	10,170	61.2%	5,162,067	74.4%
Housing units without a mortgage	6,446	38.8%	1,777,037	25.6%

Source: U.S. Census Bureau, 2013 American Community Survey Estimate: <http://www.census.gov/en.html>

## SUBSTANCE ABUSE

SUBSTANCE ABUSE						
	Lake County Rate per 100,000			California Rate per 100,000		
	2006	2007	2008	2006	2007	2008
<b>Community-Level Alcohol and Drug-Related Indicators</b>						
Rate of arrests for drug-related offenses, ages 10-69	1,276.66	902.47	972.45	1,040.85	997.25	910.20
Rate of alcohol-involved motor vehicle accident fatalities	7.76	13.80	<b>4.55</b>	4.27	3.94	3.54
Rate of alcohol and drug use hospitalizations	307.11	361.97	No Data	201.00	205.44	No Data
Rate (per 1,000) of admissions to alcohol and other drug treatment, ages 10-69	1,189.65	1,092.06	1,078.14	599.12	602.30	591.63
Rate of deaths due to alcohol and drug use	52.71	48.21	No Data	21.27	21.46	No Data

Source: State of California, Department of Alcohol and Drug Programs, Indicators of Alcohol and Other Drug Risk and Consequences for CA Counties [http://cojac.ca.gov/Prevention/pdf/indicators\\_2010/Lake.pdf](http://cojac.ca.gov/Prevention/pdf/indicators_2010/Lake.pdf)

## MENTAL HEALTH

MENTAL HEALTH		
	Lake County Population 65,279	
	Number of Cases	Percent of Population
<b>Broad Definition Need – All Ages</b>	9,708	14.87%
<b>Severe Mental Illness Need – All Ages</b>	4,008	6.14%
Youth Age 0-17 (population 14,257)	1,124	7.88%
Adult 18+ (population 51,022)	2,884	5.65%

Source: California Department of Health Care Services, California Mental Health Prevalence Estimates (based on 2010 population data). <http://www.dhcs.ca.gov/provgovpart/Documents/CaliforniaPrevalenceEstimates.pdf>

## CHILD FATALITIES AND NEAR FATALITIES

CHILD FATALITIES (AGES 0-19 YEARS)				
	Lake County		California	
	2012	2013	2012	2013
Unintentional	2	1	575	638
Self-Inflicted/Suicide	0	4	148	178
Assault/Homicide	0	1	340	291
Other*	0	0	31	39
<b>Total</b>	<b>2</b>	<b>6</b>	<b>1,094</b>	<b>1,146</b>

\*Legal international war, undetermined intent, and late effects Source: California Department of Public Health, Epicenter Injury Data <http://epicenter.cdph.ca.gov/ReportMenus/DataSummaries.aspx>

## CHILDREN WITH DISABILITIES

SPECIAL EDUCATION ENROLLMENT, BY DISABILITY						
	2011 9,239 Students		2012 9,145 Students		2013 9,016 Students	
	Count	Percent	Count	Percent	Count	Percent
Intellectual Disability	0	-	12	0.1%	13	0.1%
Hard of Hearing	0	-	0	-	0	-
Deaf	0	-	0	-	0	-
Speech or Language Impairment	181	2.0%	211	2.3%	247	2.7%
Visual Impairment	0	-	0	-	0	-
Emotional Disturbance	11	0.1%	0	-	0	-
Orthopedic Impairment	0	-	0	-	0	-
Other Health Impairment	25	0.3%	25	0.3%	59	0.7%
Specific Learning Disability	525	5.7%	482	5.3%	472	5.2%
Deaf - Blindness	0	-	0	-	0	-
Multiple Disability	0	-	0	-	0	-
Autism	0	-	0	-	0	-
Traumatic Brain Injury	0	-	0	-	0	-

Source: California Department of Education, Educational Demographics Unit, DataQuest Reporting Tool <http://dq.cde.ca.gov/dataquest/dataquest.asp>

## DOMESTIC VIOLENCE

DOMESTIC VIOLENCE-RELATED CALLS TO LAW ENFORCEMENT FOR ASSISTANCE						
	Lake County			California		
	2011	2012	2013	2011	2012	2013
<b>TOTAL CALLS</b>	640	634	641	158,548	157,634	151,325
No Weapon Involved	513	512	514	96,615	94,085	89,121
Weapon Involved	127	122	127	61,933	63,549	62,204
Firearm	2	0	2	975	804	754
Knife or Cutting Instrument	8	6	9	3,061	3,009	2,901
Other Dangerous Weapon	15	18	25	9,014	9,303	9,090
Personal Weapon*	102	98	91	48,879	50,433	49,459
Not Reported	0	0	0	4	0	0

\*Hands, feet, etc.

Source: State of California Department of Justice, Office of the Attorney General

<https://oag.ca.gov/crime/cjsc/stats/domestic-violence>

Lake Family Resource Center is the provider of domestic violence services in Lake County, operating the County's domestic violence hot line and shelter, among many other family services. They provided the following data from their records:

LAKE FAMILY RESOURCE CENTER – DOMESTIC VIOLENCE SERVICES		
	2013	2014
Hotline Calls	425	399
Adults in Shelter	55	68
Children in Shelter	70	42
Outreach	113	58

## EMERGENCY ROOM VISITS FOR CHILD VICTIMS OF AVOIDABLE INJURIES

2013 EMERGENCY ROOM VISITS FOR CHILDREN (AGES 0-19 YEARS) (NON-FATAL INJURY)								
Age	All unintentional injuries		All self-inflicted injuries		All assault injuries		Other – undetermined intent	
	Lake Co.	California	Lake Co.	California	Lake Co.	California	Lake Co.	California
< 1	41	26,284	0	3	0	104	0	95
1-4	451	199,429	0	31	0	457	0	504

<b>5-9</b>	409	165,393	0	70	2	987	0	253
<b>10-14</b>	520	175,449	11	2,805	9	3,869	2	452
<b>15-19</b>	596	187,419	18	7,305	43	14,209	8	1,441
<b>Total</b>	<b>2,017</b>	<b>753,974</b>	<b>29</b>	<b>10,214</b>	<b>54</b>	<b>19,626</b>	<b>10</b>	<b>2,745</b>

Source: Source: California Department of Public Health, EpiCenter Injury Data

<http://epicenter.cdph.ca.gov/ReportMenus/DataSummaries.aspx>

## **CHILD MALTREATMENT INDICATORS ANALYSIS**

### **Substance Abuse**

Lake County has an extremely high rate of admissions to alcohol and other drug treatment for ages 10 to 69, nearly double (1.8%) than that of California. Lake County's death rates exceed the state rate or HP 2010 objectives substantially for unintentional injuries (4 times the HP objective), chronic lower respiratory disease and chronic liver disease and cirrhosis. Primarily attributed to excessive alcohol consumption, liver disease and cirrhosis was the ninth leading cause of death in California and the eighth in Lake County for the 2006-2008 three year period.<sup>iv</sup> The county's age-adjusted death rate, 22 (unstable) per 100,000, was over seven times higher than the HP 2010 objective for the nation, which is 3 per 100,000.<sup>v</sup>

The data confirms what stakeholders report, that many families struggle with a culture of poverty and generational substance abuse and mental health issues. This creates barriers for parents to be successful in reunification by limiting their natural supports, as they often lack appropriate family who can either take placement of a child or be a resource for the family.

### **Suicide**

While the numbers of child fatalities are low for Lake County, the increase in suicides in 2013 is alarming. To address this issue, Lake County has partnered with Marin Family Service Agency, which has contracted with the California Mental Health Services Authority (CalMHSA) for three years to expand their Suicide Prevention Hotline program to serve five additional North Bay counties including Lake. CalMHSA's goal is to reduce suicide by 5% in California by 2014.<sup>vi</sup>

### **Infant Deaths**

Additionally, the Lake County Public Health Director of Nursing reports that for the period October 2013 through September 2014, Lake County experienced three infant deaths, two Hispanic/Latino and one white. All involved co-sleeping with adult(s). Public Health has increased its outreach efforts to provide safe sleeping instructions to families with newborns and to distribute Snuggle Nests<sup>®</sup>, a device to protect infants co-sleeping with adults.

### **Children with Special Needs**

In 2012, 268 Lake County children and youth aged 1-21 years were active enrollees of California Children's Services, a state program for children with certain diseases or health problems,

requiring health care services of a type or amount beyond that required by children generally. Their ongoing health problems -- physical, behavioral, or developmental -- can affect their ability to function and participate in activities important to their education and social participation. Because of the higher care-giving burdens of families of children with special needs, families tend to experience more difficulties in the areas of employment, child care, and parental stress than families of other children. By definition, children with special health care needs require more health care services than other children. More than four in five children with special health care needs do not receive one or more basic aspects of quality health care, in California and nationally.\*<sup>vii</sup>

### **Domestic Violence**

Dating and domestic violence occurs across all incomes, races, cultures, sexual orientations, and educational levels. However, a number of factors put individuals and families at greater risk such as substance use, seeing or being the victim of violence as a child, and experiencing stressful life events such as financial hardships or unemployment. In 2013, there were 641 total calls relating to domestic violence in Lake County, of which 19.8% involved a weapon. According to the most recent information from the Lake Family Resource Center, in 2013 they received 425 calls and 125 individuals (56% of whom were children) entered the domestic violence shelter. The negative effects of domestic violence often extend beyond the direct victim. For example, children who witness domestic violence, even if they are not targets of the violence, tend to exhibit the same emotional, behavioral, and academic problems as abused children.

## **C. CHILD WELFARE AND PROBATION POPULATION**

### **CHILD WELFARE SERVICES POPULATION**

#### **Maltreatment Allegations, Substantiations, and Entries**

<b>Children with Child Maltreatment Allegations, Substantiations, and Entries</b>									
<b>January 1, 2014 – December 31, 2014</b>									
<b>Age Group</b>	<b>Total Child Population</b>	<b>Children with Allegations</b>	<b>Incidence per 1,000 Children</b>	<b>Children with Substantiations</b>	<b>Incidence per 1,000 Children</b>	<b>% of Allegations</b>	<b>Children with Entries</b>	<b>Incidence per 1,000 Children</b>	<b>% of Substantiations</b>
<b>&lt;1</b>	701	144	205.4	14	20.0	9.7	9	12.8	64.3
<b>1-2</b>	1,429	133	93.1	12	8.4	9.0	6	4.2	50.0
<b>3-5</b>	2,136	203	95.0	14	6.6	6.9	7	3.3	50.0
<b>6-10</b>	3,708	343	92.5	25	6.7	7.3	15	4.0	60.0
<b>11-15</b>	3,683	268	72.8	16	4.3	6.0	8	2.2	50.0
<b>16-17</b>	1,543	83	53.8	1	0.6	1.2	1	0.6	100.0
<b>Total</b>	13,200	1,174	88.9	82	6.2	7.0	46	3.5	56.1

Rates are based on unduplicated counts of children--at state and county level--with allegations, substantiations, and entering care during the time period. Data Source: CWS/CMS 2014 Quarter 4 Extract.

Population Data Source: 2014 - CA Dept. of Finance: 2010-2060 - Pop. Projections by Race/Ethnicity, Detailed Age, & Gender.

Program version: 2.00 Database version: 67B48253

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). *CCWIP reports*. Retrieved 4/21/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

<b>Number of children with allegations stratified by age and ethnicity</b>							
<b>January 1, 2014 – December 31, 2014</b>							
<b>Age Group</b>	<b>Ethnic Group</b>						<b>Total</b>
	<b>Black</b>	<b>White</b>	<b>Latino</b>	<b>Asian/Pacific Islander</b>	<b>Native American</b>	<b>Missing</b>	
<b>Under 1</b>	5	89	13	.	14	23	144
<b>1-2</b>	5	83	11	2	11	21	133
<b>3-5</b>	7	119	39	.	17	21	203
<b>6-10</b>	16	201	46	4	28	48	343
<b>11-15</b>	12	176	38	1	11	30	268
<b>16-17</b>	4	58	13	.	5	3	83
<b>Total</b>	49	726	160	7	86	146	1,174

A child is counted only once, in category of highest severity. Data Source: CWS/CMS 2014 Quarter 4 Extract

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). *CCWIP reports*. Retrieved 4/17/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

### **Children with Substantiated Allegations Stratified by Age and Ethnicity**

<b>Number of children with substantiated allegations by age</b>	
<b>January 1, 2014 – December 31, 2014</b>	
<b>Age Group</b>	<b>Count</b>
<b>Under 1</b>	14
<b>1-2</b>	12
<b>3-5</b>	14
<b>6-10</b>	25
<b>11-15</b>	16
<b>16-17</b>	1
<b>Total</b>	82

<b>Number of children with substantiated allegations by ethnicity</b> January 1, 2014 – December 31, 2014	
<b>Ethnic Group</b>	<b>Count</b>
<b>Black</b>	5
<b>White</b>	50
<b>Latino</b>	6
<b>Asian/Pacific Islander</b>	0
<b>Native American</b>	16
<b>Multi-Race</b>	0
<b>Missing</b>	5
<b>Total</b>	82

For both tables above, rates are based on unduplicated counts of children--at state and county level--with allegations, substantiations, and entering care during the time period. Data Source: CWS/CMS 2014 Quarter 4 Extract.

Population Data Source: 2000-2009 - CA Dept. of Finance: 2000-2010 - Estimates of Race/Hispanics Population with Age & Gender Detail. 2010-2014 - CA Dept. of Finance: 2010-2060 - Pop. Projections by Race/Ethnicity, Detailed Age, & Gender.

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). CCWIP reports. Retrieved 4/20/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

### Children with Allegations by Type

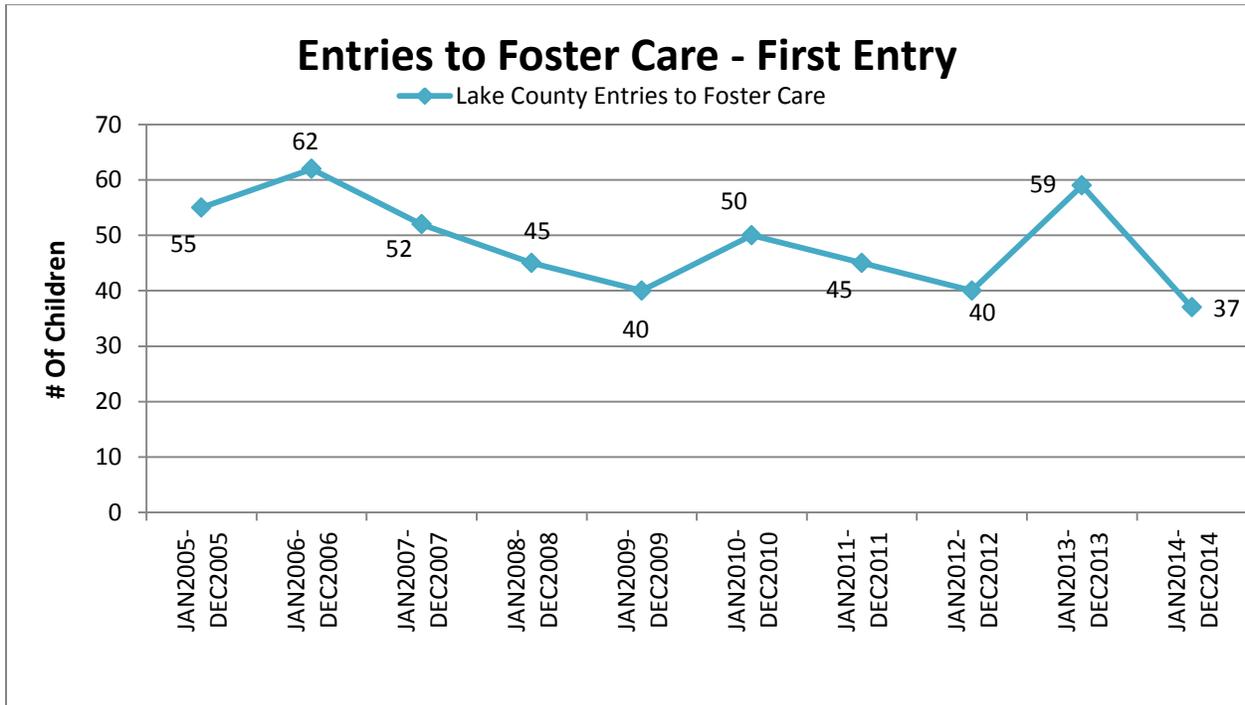
<b>Number of children with allegations by type of allegation</b> January 1, 2014 – December 31, 2014							
<b>Allegation Type</b>	<b>Age Group</b>						<b>Total</b>
	<b>Under 1</b>	<b>1-2</b>	<b>3-5</b>	<b>6-10</b>	<b>11-15</b>	<b>16-17</b>	
<b>Sexual Abuse</b>	.	1	15	20	22	7	65
<b>Physical Abuse</b>	2	7	20	54	49	17	149
<b>Severe Neglect</b>	1	.	1	.	1	.	3
<b>General Neglect</b>	130	113	138	223	157	39	800
<b>Exploitation</b>	.	.	.	.	.	.	.
<b>Emotional Abuse</b>	6	7	8	22	22	6	71
<b>Caretaker Absence/Incapacity</b>	5	2	7	11	9	8	42
<b>At Risk, Sibling Abused</b>	.	3	14	13	8	6	44
<b>Substantial Risk</b>	.	.	.	.	.	.	.
<b>Total</b>	144	133	203	343	268	83	1,174

A child is counted only once, in category of highest severity. Data Source: CWS/CMS 2014 Quarter 4 Extract.

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). CCWIP reports. Retrieved 4/20/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

## Children with First Entries Stratified by Age and Ethnicity

### Entries to Foster Care – First Entry (8 days or more)

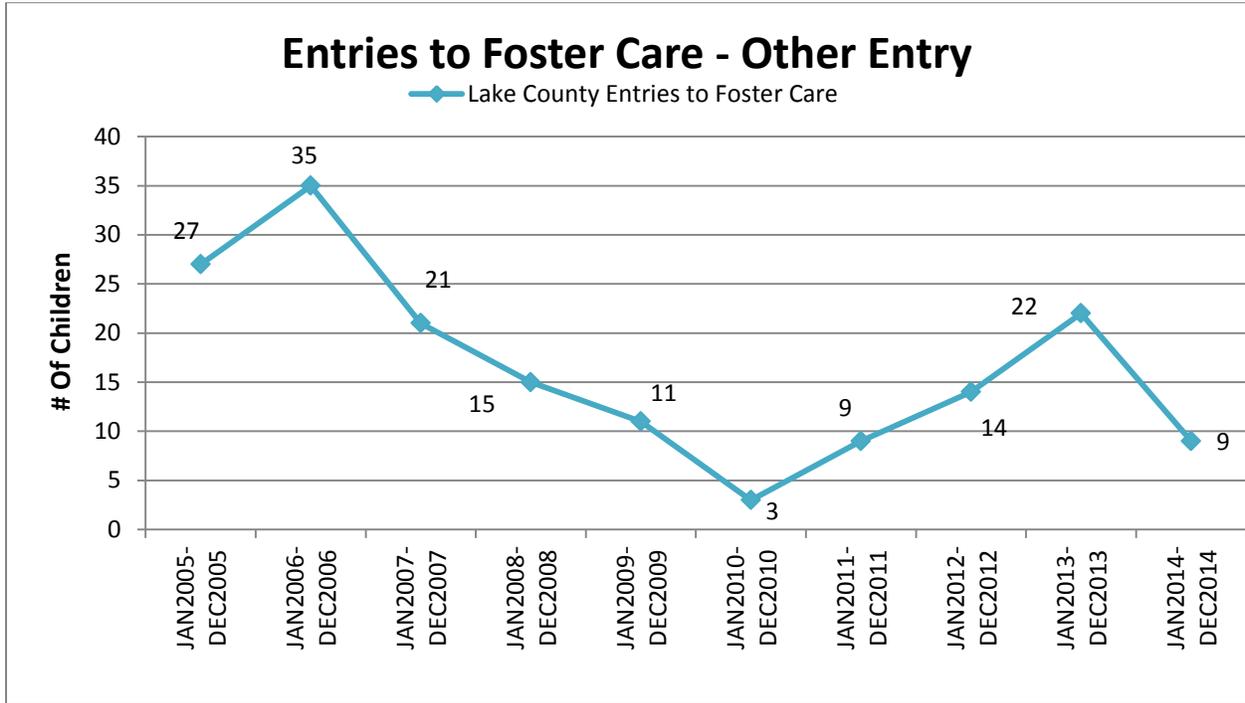


Number of children with first entries stratified by age and ethnicity							
Selected Subset: Episode Count: First Entry / Selected Subset: Number of Days in Care: 8 days or more							
January 1, 2014 – December 31, 2014							
Age Group	Ethnic Group						Total
	Black	White	Latino	Asian/Pacific Islander	Native American	Missing	
<1 mo	.	1	1	.	.	.	2
1-11 mo	.	3	1	.	1	.	5
1-2 yr	.	4	.	.	1	.	5
3-5 yr	1	5	.	.	.	.	6
6-10 yr	1	7	.	.	3	.	11
11-15 yr	1	5	.	.	1	.	7
16-17 yr	.	1	.	.	.	.	1
18-20 yr	.	.	.	.	.	.	.
<b>Total</b>	<b>3</b>	<b>26</b>	<b>2</b>	<b>.</b>	<b>6</b>	<b>.</b>	<b>37</b>

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). CCWIP reports. Retrieved 4/20/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

## Children with Subsequent Entries Stratified by Age and Ethnicity

### Entries to Foster Care – Other Entry



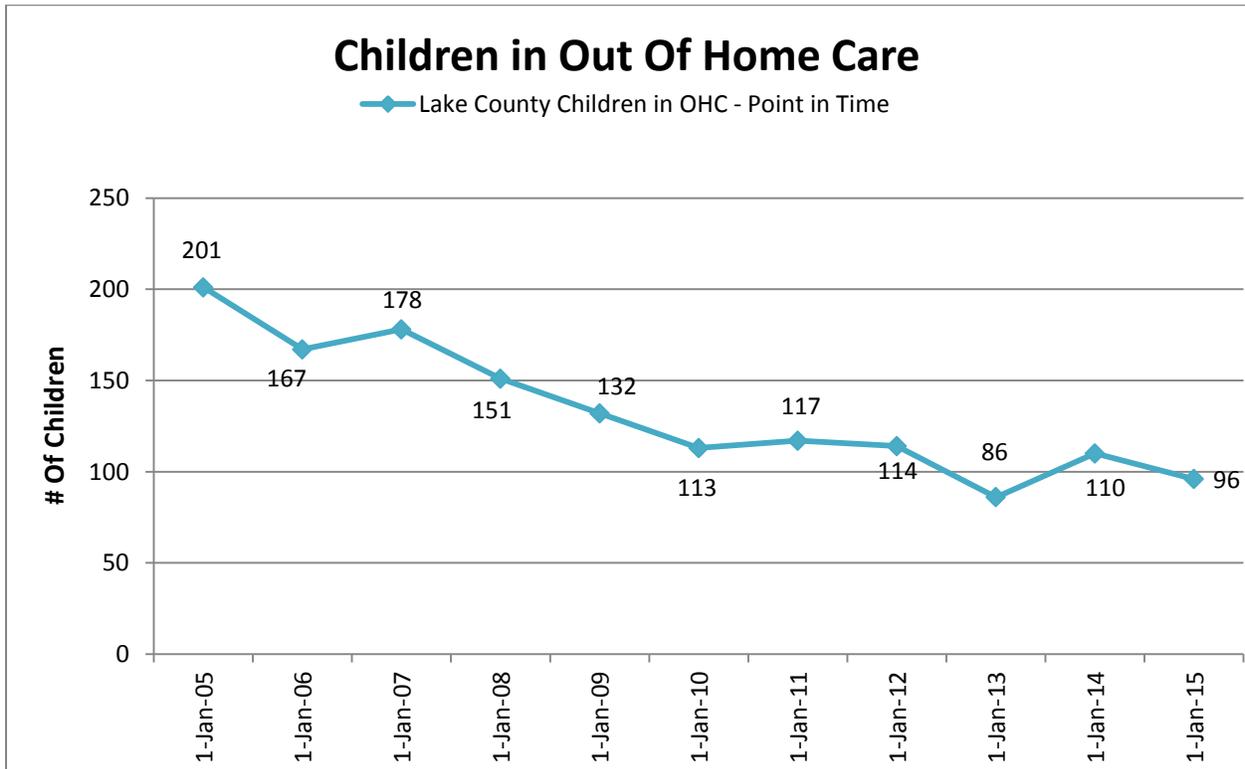
## Children in Care Stratified by Age and Ethnicity

Number of children in care stratified by age and ethnicity January 1, 2015							
Age Group	Ethnic Group						Total
	Black	White	Latino	Asian/Pacific Islander	Native American	Missing	
Under 1	.	3	1	.	.	1	5
1-2	.	11	1	.	2	.	14
3-5	.	12	2	.	.	.	14
6-10	2	22	5	.	10	.	39
11-15	2	14	9	.	4	.	29
16-17	2	10	3	.	1	.	16
18-20	.	5	4	.	.	.	9
Missing	.	.	.	.	.	.	.
<b>Total</b>	<b>6</b>	<b>77</b>	<b>25</b>	<b>.</b>	<b>17</b>	<b>1</b>	<b>126</b>

Data Source: CWS/CMS 2014 Quarter 4 Extract. Program version: 2.00 Database version: 67ABCA50

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). *CCWIP reports*. Retrieved 4/20/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

## Children in Out Of Home Care Over Time 2005-2015



## Children in Care by Service Component

Children in care with open cases by service component January 1, 2015								
Service Component Type	Age Group							Total
	Under 1	1-2	3-5	6-10	11-15	16-17	18-20	
Emergency Response	5	1	2	4	2	.	.	14
No Placement FM	2	2	1	2	3	.	.	10
Post-Placement FM	.	2	4	7	5	3	.	21
Family Reunification	2	7	2	7	2	3	.	23
Permanent Placement	1	8	12	28	26	13	2	90
Supportive Transition	.	.	.	.	.	.	8	8
Missing	.	.	.	.	.	.	.	.
<b>Total</b>	<b>10</b>	<b>20</b>	<b>21</b>	<b>48</b>	<b>38</b>	<b>19</b>	<b>10</b>	<b>166</b>

Data Source: CWS/CMS 2014 Quarter 4 Extract. Program version: 2.00 Database version: 67ACAB76

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). *CCWIP reports*. Retrieved 4/20/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: <[http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)>

## Children in Care with Tribal Affiliations or ICWA Eligible

Number of children in care with tribal affiliations/number of ICWA eligible children January 1, 2015								
Placement Status	Age Group							Total
	Under 1	1-2	3-5	6-10	11-15	16-17	18-20	
Relatives	.	2	.	4	2	.	1	9
Non Relatives, Indian SCPs	.	.	.	5	.	.	.	5
Non Relatives, Non-Indian SCPs	.	.	.	.	1	.	.	1
Non Relatives, SCP Ethnic Missing	.	.	.	.	1	.	.	1
Group Homes	.	.	.	.	.	1	.	1
Other	.	.	.	.	.	.	.	.
Missing	.	.	.	.	.	.	.	.
<b>Total</b>	.	2	.	9	4	1	1	17

Data Source: CWS/CMS 2014 Quarter 4 Extract. Program version: 2.00 Database version: 67B62989

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). *CCWIP reports*. Retrieved 4/20/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

### Child Welfare Population Analysis

Child abuse and neglect is found in families across all social spectrums. Many factors contribute to abuse, such as parental substance abuse, financial stress, mental health issues, and poverty. In Lake County, a total of 1,174 children (88.9 per 1,000) were reported for investigation of suspected abuse and/or neglect in 2014. This rate per 1,000 is substantially higher than the rate for California which was 54.6 per 1,000. Despite the higher rate of reports, Lake County had fewer substantiations, with 82 children (6.2 per 1,000), lower than California's 8.7 per 1,000. Lake County was equal to California with 3.5 per 1,000 children entering foster care in 2014.

In Lake County, the largest percentage of allegations in 2014 was due to general neglect (68.1%), followed by physical abuse (12.7%), emotional abuse (6.1%), sexual abuse (5.5%), at risk sibling abused (3.7%), caretaker absence/incapacity (3.6%), and severe neglect (.25%).

In 2014, CWS detained 53 children from 32 families. A review of the petitions filed in those cases reveals that of those 32 families, 19 (59%) had issues of substance abuse at the time of detention. Six of the families had mental health issues initially noted at the time of detention, though later in the case, mental health issues may have become identified as a factor after screening and referral to mental health services.

In the last 10 years, Lake County has implemented multiple programs to provide preventative services to families. Lake County has adopted and integrated Safety Organized Practice (SOP) with emergency Family Team Meetings, SOP safety planning with families, SOP staffing for high

risk families, early intervention programs for children, and Differential Response: Family Positive Results and Outcomes (PRO). In this data set, Lake County saw the highest rate of new entries in 2006; as of 2014, Lake County had decreased that entry rate by 52.6%. Like California, Lake County saw an increase of children entering care in 2013. In 2013, Lake County had an influx of large sibling groups entering care. A case review revealed that 10 families accounted for over half of all 81 children who entered care in 2013 (49.4%). In 2014, again a decrease in the number of children entering care occurred, 14.8% less than in 2012.

## PROBATION POPULATION

FIRST ENTRIES TO FOSTER CARE – PROBATION							
January 1, 2014 to December 31, 2014							
Age Group	Ethnic Group						Total
	Black	White	Latino	Asian/Pacific Islander	Native American	Missing	
0-10 yr	.	.	.	.	.	.	.
11-15 yr	2	1	1	.	.	.	4
16-17 yr	1	6	.	.	.	.	7
18-20 yr	.	.	.	.	.	.	.
<b>Total</b>	<b>3</b>	<b>7</b>	<b>1</b>	<b>.</b>	<b>.</b>	<b>.</b>	<b>11</b>

Data Source: CWS/CMS 2014 Quarter 4 Extract. Program version: 2013.12.09 Database version: 67AA162F

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). *CCWIP reports*. Retrieved 5/5/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

RE-ENTRIES TO FOSTER CARE – PROBATION							
January 1, 2014 to December 31, 2014							
Age Group	Ethnic Group						Total
	Black	White	Latino	Asian/Pacific Islander	Native American	Missing	
0-10 yr	.	.	.	.	.	.	.
11-15 yr	.	.	.	.	.	.	.
16-17 yr	.	1	.	.	.	.	1
18-20 yr	.	.	.	.	.	.	.
<b>Total</b>	<b>.</b>	<b>1</b>	<b>.</b>	<b>.</b>	<b>.</b>	<b>.</b>	<b>1</b>

Data Source: CWS/CMS 2014 Quarter 4 Extract. Program version: 2013.12.09 Database version: 67AA162F

Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). *CCWIP reports*. Retrieved 5/5/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

PROBATION CHILDREN IN FOSTER CARE, BY AGE					
Point In Time					
Age Group	1-Jan-10	1-Jan-11	1-Jan-12	1-Jan-13	1-Jan-14
0-10	.	.	.	.	.

<b>11-15</b>	13	8	5	5	4
<b>16-17</b>	8	9	13	10	6
<b>18-20</b>	.	4	5	9	9
<b>Missing</b>	.	.	.	.	.
<b>Total</b>	21	21	23	24	19

Data Source: CWS/CMS 2014 Quarter 4 Extract. Program version: 2.00 Database version: 67ABCA50  
Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). CCWIP reports. Retrieved 5/5/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)

<b>PROBATION CHILDREN IN FOSTER CARE, BY RACE/ETHNICITY</b>					
<b>Point In Time</b>					
	<b>1-Jan-10</b>	<b>1-Jan-11</b>	<b>1-Jan-12</b>	<b>1-Jan-13</b>	<b>1-Jan-14</b>
<b>Black</b>	1	1	.	.	.
<b>White</b>	13	13	13	14	12
<b>Latino</b>	5	5	6	5	3
<b>Asian/Pacific Islander</b>	.	.	.	.	.
<b>Native American</b>	1	1	3	3	2
<b>Missing</b>	1	1	1	2	2
<b>Total</b>	21	21	23	24	19

Data Source: CWS/CMS 2014 Quarter 4 Extract. Program version: 2.00 Database version: 67ABCA50  
Citation: Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). CCWIP reports. Retrieved 5/5/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: <[http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)>

### **Probation Population Analysis**

Currently, Lake County Probation has 109 youth on formal probation. Of those youth, 14 (approximately 13%) are in out-of-home placement.

Of the youth currently in placement, nine are in Family Reunification and five are in Permanency. One has a local tribal affiliation. Their ages range from 13-21 years old. In almost each case, the youth have significant instances of substance abuse. The families have high rates of issues of inadequate housing or homelessness, unemployment, substance abuse, criminality, and mental health problems. Probation has been seeing a greater number of families who do not want their children to return home because of the minor’s out-of-control behaviors. Some minors who are currently placed have expressed a desire to remain in out-of-home placement in order to obtain AB-12 funding, which has had the effect of defeating the goal of returning the minors to their homes.

When looking at the current Probation population in out-of-home placement by race – Black (10%), and Native American (12.8%) – it appears that the Black and Native American probation population are over-represented. Two cases involving Black youth resulted from failing adoptions and two other cases are from one family. With the Native American youth, three of the minors are from the same family.

Probation consistently works with local Indian Child Welfare Act (ICWA) representatives to build effective case plans for those Native American youth who have been found to be at imminent risk of out-of-home placement. Despite a close working relationship with ICWA workers, it appears there is little intervention. Probation worked with the youth who are Black: of the two who were failing adoption, one youth returned to his biological parents' home and the other received wraparound services prior to being placed. However, the first youth quickly reverted to delinquent behavior and was subsequently placed in a suitable group home because of escalating criminal behavior. The second youth was unsuccessful in the wraparound program. Generally, it is uncommon for Native American and Black youth to be disproportionately overrepresented in the Probation population.

The placement population this year increased significantly from last year, when of 145 youth on formal probation, seven (approximately 5%) were in placement. The difference, however, is deceiving when one considers the criminality level of the youth being placed, the child welfare history of the minor, and the services that were offered to the youth and family prior to placement. The table below indicates issues leading to placement.

**Probation Placement Population**

Minor	03/31/14-03/31/15 – Minors’ Issues Leading to Placement								
	Age/ Sex	CWS History	Sub. Abuse	Mental Health	Gang Ties	Sex Off.	Inadequate Housing	Failing Adopt.	Beyond Control
1	15/M		X		X				
2	15/M		X		X				
3	18/M			X		X			
4	18/F	X	X				X		
5	16/F	X	X				X		
6	13/M					X			
7	16/M		X					X	X
8	17/F		X						X
9	17/M	X	X				X	X	
10	17/M		X						X
11	17/F		X		X				
12	14/M					X			
13	17/M	X	X				X		X
14	17/F	X					X		

Probation is now seeing the minors and families to whom Probation provided the needed services, and who have now exhausted all available resources. As a result, out-of-home placement was required in order to achieve the required goal. Youth who commit sex offenses are placed immediately after adjudication as Lake County does not have any resources for sex offenders.

**Probation Placement Population: 03/31/14-03/31/15**

Minor	Services Offered								
	654/ 725/ DEJ	Sub Abuse Coun.	Mental Health Couns.	Ranch/ Camp	Family/ Friend Finding	Prob. Family Pro	At-Risk Super.	Wrap Around	Drug Court
1	X	X			X		X		X
2	X	X	X				X		X
3									
4	X	X	X				X		
5	X	X	X			X			
6									
7	X	X	X		X		X		
8	X	X	X				X		
9	X	X			X	X	X		
10	X	X	X	X	X	X	X		
11	X								
12									
13	X	X	X		X	X	X	X	X
14	X	X	X		X		X	X	X

Note: No services were offered to minors #3, 6, and 12 because they were placed immediately after disposition due to their offenses.

Over the past three years, Probation began using a tiered strategy with a greater emphasis on keeping the minors in the community with all available services, so placement numbers have decreased dramatically.

As mentioned previously, Lake County Probation’s prevention strategy begins with the first criminal referral to Probation. The steps are:

- Screen out process for all criminal referrals
  - Summarily dismiss (referral does not met criteria for further processing)
  - Refer to informal hearing which may result in
    - Reprimand and dismiss (low level, first time offenders)
    - 654 W&I informal contract – automatic referral to Probation Family PRO program (similar to CWS’s differential response)
    - Refer to District Attorney for formal proceedings
- First Formal petitions
  - Depending on severity of the crime, most new dispositions will receive a recommendation of 725 W&I (6 month formal probation without wardship, which results in sealing of the youth’s records when the minor is successful)
  - Some dispositions will recommend 790 W&I (Deferred Entry of Judgment – one year of formal probation, which result in dismissal of the petition and sealing of the youths records upon successful completion)

- Referrals to appropriate services
- Subsequent petitions
  - Placed on the intensive supervision caseload which may include:
    - Increased drug testing
    - Increased probation contact
      - Home & school visits
      - Personal & home searches
    - Referral to:
      - Juvenile Drug Court
      - Behavioral Health – individual counseling or mental health evaluation
      - Substance abuse counseling
      - Family counseling
      - Parenting classes
  - Assessment and referral to Wraparound Program
  - Assessment of family for family finding

# Public Agency Characteristics

## **A. POLITICAL JURISDICTIONS**

### **LAKE COUNTY BOARD OF SUPERVISORS**

The County has an elected Board of Supervisors (BOS), five members in all. The Board oversees LCDSS, and other County departments which impact CWS operations, including County Counsel, which provides CWS legal representation, and the Human Resources Department, which, in conjunction with Merit System Services, oversees hiring for LCDSS. The LCDSS Director reports to the BOS, and the Deputy Director over the CWS division reports to the LCDSS Director. The BOS oversees overall operations of all county departments and has fiscal and budgetary authority over all; any changes in number of staff and any contracts in excess of \$10,000 require approval by the Board.

### **LAKE COUNTY PROBATION**

The Probation Department, managed by the Chief Probation Officer, is overseen by the Lake County Superior Court.

### **FEDERALLY RECOGNIZED TRIBES IN LAKE COUNTY**

Seven federally recognized tribes, all Pomo, are located in Lake County: Big Valley Band of Pomo Indians, Elem Indian Colony, Habematolel Pomo of Upper Lake Rancheria, Koi Nation of Northern California, Middletown Rancheria, Robinson Rancheria, and Scotts Valley Band of Pomo Indians. CWS, Probation, and tribal representatives meet regularly to facilitate communication and exchange information. The Lake County Tribal Health Consortium, Inter-tribal Council, and the tribes themselves are resources for and provide services to Native American children and families.

### **SCHOOL DISTRICTS**

The Lake County Office of Education works closely with CWS and serves as a liaison to the seven school districts within the County. LCOE provides leadership and support to schools and communities by planning, coordinating, facilitating, and delivering services and educational programs. CWS, LCOE, and the school districts collaborate in a number of ways:

- Individual Education Plans (IEPs): CWS works closely with the schools regarding IEPs.
- Investigations: CWS works cooperatively with individual schools when investigating child abuse referrals and interviewing children at school sites.
- AB490: in order to ensure educational rights and stability for children in foster care, LCDSS and LCOE contracted for the Foster Care Liaison position, co-located in the CWS office one day per week.

- Differential Response: services to families with school aged children is contracted to LCOE – Healthy Start.
- Child Abuse Prevention Council (CAPC): the CAPC, known as the Children’s Council in Lake County, is managed by LCOE – Healthy Start. In addition to funding child abuse prevention services and promoting awareness, the Children’s Council serves as the County Children’s Trust Fund Commission, and with CWS manages the annual Community Based Child Abuse Prevention (CBCAP) funds.
- Mandated Reporter training is provided to schools by CWS upon request.

## **LAW ENFORCEMENT AGENCIES**

Law enforcement is provided by the Sheriff’s Department in the unincorporated areas of the county. Highway Patrol has a station located in Kelseyville, approximately 7 miles from the Superior Court in Lakeport. Each of the County’s two incorporated cities has its own police force: Lakeport Police Department and Clearlake Police Department. Law enforcement officers accompany CWS social workers whenever children are detained. Probation maintains good working relationships with local law enforcement agencies.

## **LAKE COUNTY PUBLIC HEALTH**

Lake County Public Health provides a Public Health Nurse to ensure that the health care needs of children in foster care are met. The Public Health Nurse is co-located in the CWS office to facilitate collaboration with social workers.

## **B. COUNTY CHILD WELFARE AND PROBATION INFRASTRUCTURE**

### **CHILD WELFARE SERVICES**

Lake County Child Welfare Services (CWS) is a division of the Lake County Department of Social Services (LCDSS). The CWS management team consists of a Deputy Director, who reports to the LCDSS Director, and two Program Managers who report to the Deputy Director and who supervise the CWS units. CWS added a second program manager position in November 2013, intending to have one manager oversee programs and one to oversee operations. Unfortunately, due to ongoing vacancies in supervisor positions both managers have had to be flexible to cover a variety of management and supervisor responsibilities. CWS Social Workers are divided among five units, each with its own supervisor: Emergency Response (ER), Family Maintenance/Family Reunification (FM/FR), Permanency Planning (PP), Adoptions, and Special Programs (SP). Support staff includes analysts and office assistants. An organization chart is attached as Exhibit B.

### **Emergency Response (ER)**

The ER unit is responsible for screening and investigating all reports of child abuse and neglect. ER social workers average an assignment of 8 to 10 investigations per month and receive an average of one court case per month. ER social workers have responsibility for writing their petitions and jurisdictional reports. At the detention hearing the case is given a secondary

assignment to the identified FR/FM social worker. The ER and FR/FM social workers coordinate case management of the case until the completion of the jurisdictional hearing. The FR/FM worker is responsible for the completion of the dispositional report. By having the FR/FM social workers write the dispositional reports, they are able to complete the family assessment and develop the case plan with the family. This process allows for early engagement by the FR/FM social workers. In October 2014 the ER unit implemented the RED Team (Review, Evaluate and Direct) framework as a group decision-making strategy to assess and respond to reports of child abuse and neglect.

### **Family Maintenance/Family Reunification (FM/FR)**

The FM/FR unit provides case management services for FM/FR cases from disposition to termination of FR/FM services. When children are reunified all FR cases are transferred to FM for a minimum of 6 months and routinely for 12 months. Families remain with the same social worker when transferred to FM. All social workers in the unit will have families who may be receiving Wraparound or Dependency Drug Court services. This ensures that as families move in and out of these programs their relationship with their social worker is not interrupted. FR/FM social worker caseloads vary depending on vacancies and experience. New social workers assigned to the unit initially do not have a caseload; they provide support services and assist more experienced workers. Later they are assigned a small caseload (5 to 7 children) that grows with their experience. With that said, the average caseloads for the FR/FM unit have been as high as 28 but currently average 17. The FR/FM unit also has a Placement Social Worker who is responsible for a variety of tasks that include assisting social workers with locating foster homes and group homes, assessing relative and NREFM homes, and coordinating placement eligibility paperwork. In addition, this social worker is the ICWA liaison and is responsible for completing ICWA noticing and ICWA compliance reports.

### **Permanency Planning**

The PP unit receives cases after the termination of FR services. One social worker is responsible for all group home placements, acts as the Independent Living Program (ILP) Coordinator, and carries PP cases with youth receiving ILP services. Another social worker is assigned cases after services are terminated, and until adoption is ordered and the child is placed with prospective adoptive parents. At this point the adoption social workers are given primary assignment for all case management responsibilities. This social worker writes the CWS .26 report which if the case is going adoption or guardianship is a very brief report, with the bulk of the report completed by the adoption worker in the adoption assessment, attached to the .26 report. This social worker also carries the non-minor dependent (NMD) cases and post .26 PP cases. Social workers in the PP unit carry an average of 18 cases each. The supervisor has secondary responsibility for courtesy supervision of 13 Interstate Compact for Placement of Children (ICPC) cases as well as supervision of office assistant staff. The PP unit also has responsibility for the non-related legal guardianship (NRLG) caseload of 31 children.

## **Adoptions**

Lake County implemented its adoptions program on July 1, 2012. The adoptions unit functions as the county adoption agency and is responsible for all aspects of adoption planning. Responsibilities include assessing children and families for adoption, facilitating birth parents rights to participate in adoption planning (including relinquishment), identifying concurrent planning placements for court dependents, completing relative and NREFM assessments as well as guardianship assessments, supervising adoptive placements, finalizing adoptions, providing post-adoption services, and managing the Adoption Assistance Program caseload. The adoption unit currently has three full-time social workers. Caseloads for the unit average about 25 children total. Adoption workers generally have secondary assignment for cases until adoption is ordered and the child is placed with prospective adoptive parents, at which point the adoption social workers are given primary assignment for all case management responsibilities. Finding a qualified adoption supervisor has been a challenge, and a program manager with experience in adoptions currently supervises the unit.

## **Continuous Quality Improvement (CQI) and Special Programs**

A Social Worker Supervisor, independent of any of the units, is assigned to conduct continuous quality improvement (CQI) and federal case reviews. She is assisted by an analyst and supervised by a program manager. Both have attended and continue to participate in federal case review training.

The Special Programs unit provides a variety of services that include Katie A. coordination, CANS screening and referral, Nurturing Parenting® program classes; facilitation of parent engagement and empowerment groups; coordination and facilitation of family team meetings (FTMs) and treatment FTMs; supervision of family visitation; and Mental Health and AODS screening and referral for parents. This unit was developed to address service needs that could not be found in the community. This began with the need to provide appropriate parenting classes to meet the needs of CWS parents and has grown to support activities related to the Safety Organized Practice model, Katie A. Core Practice Model, and the need for enhanced family visitation.

## **Support Staff**

The Analyst unit and Office Assistants (OA) support staff in various ways, such as researching and writing policies and procedures, filing court documents, managing noticing for court hearings, entering health and education data in CMS, providing help desk services, and performing many clerical tasks.

## **Staff Numbers, Vacancies, Education, and Salaries**

CWS allocated positions include:

- (2) Program Managers
- (6) Social Worker Supervisors

- (24) Social Workers
- (2) Extra-help Social Workers
- (1) Staff Services Analyst Supervisor
- (2) Staff Services Analysts
- (1) Systems Analyst
- (4) Office Assistants
- (1) Public Health Nurse
- (1) Secretary

Of the six social worker supervisor positions, two have MSWs through Title IV-E. Two have bachelor degrees (psychology and theology), and two positions are vacant. Those positions were previously held by staff with MSWs through Title IV-E. Both Program Managers have MSW degrees. The Deputy Director has a M.S. in Counseling.

Of 20 currently employed social workers (18 full time and 2 extra help), three hold Bachelor of Social Work degrees, eight others hold Bachelor degrees in fields such as sociology, child development, criminal justice, and psychology. Nine of the 20 social workers have MSW degrees. One social worker is currently in the MSW Title IV-E program and four social workers graduated from the Title IV-E program this year. Approximately ten years ago Lake County had a large number of social work staff with no college degree. Lake County made a commitment at that time to increase the education level of CWS social workers and no longer hire staff without at least a BA. Today only one social worker without a degree remains.

While CWS is proud of the strides made in increasing the professionalism of the staff by setting education standards, the department has also suffered from long term vacancies because very few qualified applicants apply for open positions. Continuous open recruitments remain for all classifications of social worker and supervisor. It is not unusual to have no MSW applicants appear for hiring interviews. Many Social Worker I applicants do not have degrees and therefore are not considered.

Currently CWS has 2 Social Worker Supervisor vacancies, one in the Adoptions unit (vacant for five months) and one in the FR/FM unit (recently vacant). Another supervisor will be retiring in June 2015. There are currently six social worker vacancies and two office assistant vacancies. Social worker vacancies are spread across all programs. In fiscal year 2013/14 CWS had an 8% turnover in social workers and in fiscal year 2014/15, a 26% turnover. Currently 7 of 18 (39%) full time social workers have a year or less of CWS experience.

Social worker hourly salaries start at \$16.74 for a SW-I and range up to \$27.27 for a SW-IV, which requires an MSW degree. Social Worker Supervisor salaries range from \$23.56 to \$31.57 per hour. Program Managers are salaried, earning between \$5,212.08 and \$6,335.33 monthly. Lake is among the poorest paid counties in the state. Employees have not received a COLA since 2007 and health insurance costs have increased yearly. Salaries, plus the remoteness of

location, make it difficult to recruit applicants. Lake has included in the 2015/16 budget proposal a contract with Merit Systems Services to increase and improve recruitment activities.

## **PROBATION**

The Probation Department, managed by the Chief Probation Officer, is overseen by the Lake County Superior Court and consists of four divisions: Adult, Juvenile, Juvenile Home, and Welfare Fraud Investigation. The Lake County Probation Organizational Chart is attached as Exhibit C.

Probation uses the PACT risk assessment to assign cases to Probation Officers based on the minor's risk to reoffend. Those minors with a low risk to reoffend are placed on a banked caseload, with minimal services, in accordance with Evidence Based Practices (EBP). If those minors commit a new crime, they are evaluated by staffing and/or a Family Team Conference and they may move to a higher level of supervision.

Those minors who are assessed at moderate, moderate-high, and high risk to reoffend are placed on a caseload and are supervised at the level commensurate with their risk. In every case, a detailed case plan is completed by the supervising probation officer, along with the minor and his parent. In the case of a Native American child, the Indian Child Welfare Act (ICWA) representative is invited to assist in the case planning.

Lake County Probation, Juvenile Division, has six Deputy Probation Officer (DPO) positions and a Senior Deputy Probation Officer (SDPO). One of the DPO positions is currently not filled. The goal of the Department is that all officers are trained in supervising a placement caseload.

In Juvenile Division, the SDPO has five years of experience in Juvenile Probation, with four years as a placement officer. She oversees the daily tasks of six DPO's, one probation aide, and two legal secretaries. Her education level is a Juris Doctorate and she has attended the following training: PC 832 – Search and Arrest; Fitness Hearings; Juvenile Law Update; Probation Core; Positive Achievement Change Tool (PACT) Risk Assessment; Probation Placement Course; Title IV-E requirements; CWS/CMS User; Motivational Interviewing; Quality Data for Juvenile Probation; Determining Title IV-E Eligibility; Innovative Case Plans; and Creating Title IV-E Compliant Case Plans.

The placement caseload is split between two DPO's. One officer has 3.5 years of experience in Juvenile Probation (locally) and two years of adult supervision in another state. The other officer has less than two years of juvenile probation experience; however, he has two years' experience working in a group home for juvenile sex offenders. These same officers also supervise youth who are assessed to be a high risk to re-offend and/or at-risk for placement, with an overall average caseload size of 22 juveniles. Both of the DPO's have bachelor degrees (one is in criminal justice and the other is in sociology with an emphasis in law in society and general psychology). The officers completed formal training in: PC 832 – Search and Arrest; Probation Core; Positive Achievement Change Tool (PACT) Risk Assessment; Probation Placement Course; Determining Title IV-E Eligibility; and CWS/CMS User.

Probation has one DPO to supervise the moderate risk to re-offend and those minors supervised pursuant to Welfare and Institutions Code (WIC) §725 and §654. He has a Bachelor's Degree in Religious Studies. He was recently promoted from a Senior Juvenile Corrections Officer with five years of experience in corrections; however, he has not yet had any formal training as a Probation Officer.

A School Resource Officer supervises a caseload of not more than 10 juveniles who live in his school district area. He has a Bachelor's Degree in Criminal Justice. He has attended the following formal training: PC 832 – Search and Arrest; Probation Core; Positive Achievement Change Tool (PACT) Risk Assessment; Probation Placement Course; Determining Title IV-E Eligibility; CWS/CMS User; and Force and Weaponry.

Finally, one DPO supervises the WIC §654 caseload of no more than ten juveniles. She is also the Juvenile Drug Court and Informal Hearings Officer. She has an Associate's Degree in Administration of Justice. She was recently promoted from a Juvenile Correctional Officer to a DPO. She had nine years' experience as a Juvenile Correctional Officer.

CWS/CMS data is entered monthly by the officer or a Probation Aide.

Currently one DPO position is open; however, when the Division becomes fully staffed, all placement cases will be assigned to one officer who will focus on placement. This officer will be a more seasoned officer with knowledge and training in placement. The goal of the Department is that all officers are to be trained in supervising a placement caseload. Probation's rationale is two-fold: (1) it will allow all officers the ability to understand the complexity of Title-IV-E requirements; and (2) it will enhance problem solving when conferring with CWS and the Wraparound partner, Redwood Community Services (RCS).

A challenge for the Department has been retaining officers. Nearby counties offer significantly higher pay and better benefits for the same position. As a result, once an officer is trained by the Department, other counties see the officer as a highly desirable prospect because of the high cost to train an officer. With the high turnover, caseloads are higher while new employees are sought and trained. Because the pay in Lake County is considerably lower than nearby counties, Probation is unsuccessful in recruiting from other agencies. Hourly wages range from \$17.58 to \$25.36 for a DPO and for the Senior DPO, \$22.44 to \$27.27.

### **C. FINANCIAL/MATERIAL RESOURCES**

The county's CWS budget is funded by both federal and state allocations, including but not limited to Title IV-E, Title XIX, and CWS Outcome and Improvement Project (CWSOIP). In addition, CBCAP funds, CAPIT funds, Children's Trust Funds, and PSSF funds are leveraged to increase available services.

- Beginning with state fiscal year 2014/2015, Lake County opted into the Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project. This project will allow CWS and Probation to test child welfare interventions designed to decrease reliance of foster

care without reducing funding. This will allow for savings to be reinvested in non-foster care prevention and intervention services.

- CWS leverages CalWORKs funding to provide Linkages services to Child Welfare families.
- Several programs blend multiple funding streams in order to provide a unified service. These include the following:

The Nurturing Parenting® Program is funded through several funding sources including: CAPIT, First 5 Lake, Child Welfare, CalWORKs, and Lake County Tribal Health.

Family PRO, Differential Response Program is funded through a blending of California CWSOIP, PSSF, CalWORKs, and Child Welfare funds.

Lake County Office of Education matches Title IVE funds for the Foster Care Liaison position

Dependency Drug Court funding is shared by Child Welfare, Behavioral Health/AODS, and the courts.

CBCAP and County Children's Trust Fund monies provided to the Children's Council are spent in part on prevention direct services, which are subcontracted and braided with other funding sources, such as First 5 Lake.

## **D. CHILD WELFARE/PROBATION OPERATED SERVICES**

### **JUVENILE HALL**

The Lake County Probation Department operates a Juvenile Hall that currently can house as many as 28 minors. At the current time, ten are in custody. Minors awaiting placement are assessed for their needs and a case plan is developed, they attend school, and they have access to a mental health therapist. If the youth have an IEP, a special education teacher is available. The average stay in juvenile hall is 30 days; however, some juveniles have been committed for up to a year in juvenile hall, with regular review hearings. Juvenile Hall had minimal available services in the past several years, but new services, such as Behavioral Health and substance abuse sessions are currently being sought.

### **COUNTY OPERATED SHELTER**

The County does not operate a shelter. Social Workers find emergency placements as needed, usually through either of two locally operated foster family agencies (FFAs) or FFAs in neighboring counties. One social worker serves as a placement specialist and assists staff with locating suitable placements. From 2005 to 2014 Lake had a contract with Redwood Community Services (RCS) for five emergency placement beds. RCS struggled to find homes willing to be available to provide emergency placements and were never able to provide all five beds. In 2014 the contract expired and was not renewed as no homes were available to

provide the service. CWS social workers routinely need to make emergency placements out of county because local beds are not available. Probation placement youth are detained in Juvenile Hall pending a suitable placement.

### **LICENSING OF FOSTER HOMES**

Licensing of foster family homes is conducted by the California Department of Social Services - Community Care Licensing office in Chico. As many families find this process and travel to and from Chico cumbersome, they choose to obtain licensing through a local FFA. On January 1, 2015, 38.9% of children (49 individuals) were in placement in local FFAs compared to 1.6% (2 individuals) in state licensed homes<sup>viii</sup>.

### **COUNTY ADOPTIONS**

CWS operates an in-house Adoptions unit, formed in July 2012, which is also responsible for concurrent planning. By instituting concurrent planning at the outset of a case, children achieve permanency in a timelier manner in cases where family reunification is not possible.

### **E. OTHER COUNTY PROGRAMS**

#### **CalWORKs**

The CalWORKs Program provides cash assistance and Welfare-to-Work (WTW) services to families whose income is not adequate to meet their family's basic needs. Employment Services (ES) is a division of LCDSS and provides WTW activities. In Lake County, CWS has a strong collaborative partnership with ES through the Linkages program. This partnership has allowed for greater flexibility of CalWORKs funding to provide services such residential treatment, rent and utilities, counseling services, and other supportive services to CWS families. An ES social worker position is assigned as a liaison to work with CWS social workers. This social worker participates in case planning through attendance at Family Team Meetings and through the integration of Welfare-to-Work contracts into the CWS Case plans. ES and CWS coordinate case management efforts and meet together monthly to monitor their casework activities. A CalWORKs eligibility worker is assigned to ES and works with CWS families to assess potential eligibility for benefits and assist with expediting applications. One goal of these coordinated services is to ensure CalWORKs eligible families who exit the Child Welfare System stay connected with their Employment Services social worker so ongoing support and aftercare services can be provided.

#### **PUBLIC HEALTH**

A contract with Lake County Public Health provides for the co-location of a Public Health Nurse (PHN) at the CWS office. The PHN's role is to gather medical records from providers, monitor the dental and health care needs of dependent children, oversee the processing of JV220s, and document medical information in the CWS/CMS Health and Education Passport. The PHN is available to consult with social workers, make home visits with social workers to assess high risk

medical needs of children, and participate in family team meetings as appropriate. Additionally, the PHN completes Ages and Stages (ASQ) developmental screening of children ages 0 to 5.

The Probation Department works with a Public Health nurse who enters all health data for minors in placement into the CWS/CMS data base. They enter the health and education passports (HEP) and monitor the JV-220's on minors who are in placements.

### **ALCOHOL AND DRUG TREATMENT**

Alcohol and Other Drug Services (AODS) is a division of Lake County Behavioral Health. CWS and AODS have a long-standing, collaborative partnership. Through participation in the Regional Partnership Grant from 2007 to 2010, CWS and AODS developed a system to expedite the screening and referral of parents to AODS services, integrated the use of trauma informed treatment services, and developed a collaborative case management process. Weekly contact is maintained between social workers and AODS counselors, and counselors routinely attend FTMs. Monthly meetings are held with agency leadership to monitor the quality of services, address concerns, and develop programs. They have co-administered the Dependency Drug Court since 2007 utilizing existing funding sources.

### **MENTAL HEALTH**

Lake County Behavioral Health (LCBH) provides mental health services in Lake County. CWS enjoys a strong working relationship with LCBH management, supervisors, and staff. All children who are removed from care are screened by a specially trained CWS social worker using the Child and Adolescent Needs and Strengths (CANS) tool and referred to LCBH for assessment and treatment. Social workers coordinate closely with therapists on shared cases, with the opportunity for weekly scheduled contact. In addition, LCBH and CWS collaborate to provide Katie A. services to all children who meet the subclass requirements. Child and Family Team meetings are facilitated by a specialized CWS social worker, with participation by the CWS social worker, the therapist, the family, foster family, other service providers, and informal support people. CWS meets monthly with BH staff to collaborate on Katie A. implementation and services and weekly for case management.

LCBH contracts with Redwood Community Services for additional children's mental health services and they are part of the Katie A. collaborative team. In addition, they are the Wraparound provider for Lake County.

CWS has also developed a screening and referral process with LCBH for referring parents to adult mental health services. Through this process access to services for parents with serious mental illness has been improved. This process also accesses mental health services for parents eligible to receive behavioral health services through the CalWORKs behavioral health contract.

Probation also works with LCBH to determine if a mental health diagnosis exists whenever a juvenile is being considered for out-of-home placement in a group home level 12 or above.

## EDUCATION

CWS contracts with the Lake County Office of Education (LCOE) for enhanced Foster Youth Services (FYS). A FYS liaison is assigned to the work in the CWS office one day a week to ensure facilitation of services between CWS and the schools. The FYS liaison coordinates education information and services with CWS social workers to include: providing education-related information to CWS to assist in delivering services to foster youth; identifying and linking foster youth to mentoring, tutoring, vocational training, transitioning and emancipation services; facilitating communication between foster parents, teachers and other education service providers; and facilitating timely Individual Education Plans.

## State and Federally Mandated Child Welfare/Probation Initiatives

### TITLE IV-E CALIFORNIA WELL-BEING PROJECT

Beginning with state fiscal year 2014/2015, Lake County opted to participate in the Title IV-E Child Welfare Waiver Demonstration Capped Allocation Project, now titled the Title IV-E California Well-being Project. The objective of the waiver project is to test child welfare interventions designed to decrease the reliance on foster care for children and to shorten the time children have open child welfare cases, without reducing funding when those efforts are successful. This allows those savings to be further invested in child welfare for the betterment of children, youth and families. The State's demonstration will focus on accomplishing the following goal(s):

- Improve the array of services and supports available to children and families involved in the child welfare and juvenile probation systems;
- Engage families through a more individualized casework approach that emphasizes family involvement;
- Increase child safety without an over-reliance on out-of-home care;
- Improve permanency outcomes and timelines;
- Improve child and family well-being; and
- Decrease recidivism and delinquency for youth on probation.

The target population will include Title IV-E eligible and non-IV-E eligible children and youth aged 0–17, inclusive, who are currently in out-of-home placement or who are at risk of entering or re-entering foster care. The State will conduct an evaluation of the waiver demonstration to test the hypothesis that the use of Title IVE funds to provide alternative services in the areas of prevention and family centered practice, as appropriate, will result in improved safety, permanency, and well-being outcomes for children. The evaluation will consist of three components: A process evaluation, an outcome evaluation, and a cost analysis. The project will

focus on two components:

- Prevention: Wraparound for probation youth exhibiting delinquency risk factors that put them at risk of entering foster care
- Family Centered Practice: Safety Organized Practice to further implement and enhance the Core Practice Model for child welfare.

### **SAFETY ORGANIZED PRACTICE (SOP)**

In January 2010, Lake County became part of the first cohort of California counties to begin implementation of Safety Organized Practice as a model for child welfare practice. Through participation in the IV-E Waiver California Well-Being Project this model will continue to be developed, expanded and evaluated in Lake County. CWS works closely with the Northern Training Academy to provide ongoing SOP training and coaching.

Specific elements of SOP include family engagement and assessment, behaviorally based case planning, transition planning, ongoing monitoring, and case plan adaptation as appropriate. Specific services to be implemented as part of SOP include Safety Mapping/Networks, effective safety planning at foster care entry and exit, capturing the Children’s Voice, solution-focused interviewing, motivational interviewing, and case teaming.

### **WRAPAROUND**

The Wraparound model will involve a family-centered, strengths-based, needs-driven planning process for creating individualized services and supports for the youth and family. Specific elements of the Wraparound model will include case teaming, family and youth engagement, individualized strength-based case planning, and transition planning.

### **FAMILY WRAPAROUND**

In addition to the project wide interventions above, CWS has added a second intervention called **Family Wraparound**. This program will be used to prevent out of home placement and to provide after care services to families who are reunifying, with the goal of shortening time to reunification and to prevent reentry. This program will differ from the existing Wraparound program by having more flexibility to focus on the needs of the “family” to prevent entry or reentry to foster care rather than focus on the “identified child” to prevent or step down from group home placement.

In addition to the program evaluation to be conducted by the State, CWS has contracted with an evaluator to complete a local evaluation of the project and to assist CWS and Probation with meeting the conditions of the State evaluation.

### **EXTENDED FOSTER CARE / AB12**

Lake County began providing Extended Foster Care services in January of 2012. The goal of extended foster care is to assist foster youth in maintaining a safety net of support while experiencing independence in a secure and supervised living environment. The extended time

as a non-minor dependent (NMD) can assist the youth in becoming better prepared for successful transition into adulthood and self-sufficiency through education and employment training. In Lake County, many foster youth are choosing to remain in foster care to receive extended supportive services. Since the implementation of extended foster care, 20 youth have emancipated. Of that 20, 15 youth (at least one time) have opted into the program. AB12 services are also offered to youth in the Non Related Legal Guardian caseload and four have opted into the program. Currently seven youth in Lake County are receiving these services.

### **KATIE A./CALIFORNIA’S CORE PRACTICE MODEL**

To meet the goals of the Katie A. lawsuit strategic plan and address the issue of inadequate mental health services for foster youth, CWS has worked with Lake County Behavioral Health to enhance interagency processes to screen, assess, and treat foster children/youth in need of mental health services. Lake County has continued to have a high level of leadership involvement and oversight in the broader Child Welfare/Behavioral Health partnership, including the Katie A. planning and implementation process. The Katie A. leadership group (including deputy directors, managers and supervisors) meets monthly to oversee all aspects of Katie A. implementation. In addition, supervisor sub-groups meet to review screening, referral and tracking processes for Katie A. Behavioral Health administrative staff have been working to fine-tune data and billing procedures. Child Welfare and Behavioral Health staff have established a process (including Excel data base) for cross-checking all referral and service activities. Administrative structures in and between both agencies remain strong.

## Board of Supervisors (BOS) Designated Commission, Board of Bodies

### **THE BOS-DESIGNATED PUBLIC AGENCY**

The Lake County Department of Social Services (LCDSS) is the BOS-designated public agency to administer CAPIT, CBCAP, and PSSF funds. Staff in the Child Welfare Services division of LCDSS, monitors CAPIT/CBCAP/PSSF subcontractors, and ensures program and fiscal compliance. In collaboration with the subcontractors, CWS staff collects data, evaluates programs and outcomes, and completes and submits annual reports for all programs funded by CAPIT, CBCAP, and PSSF.

### **A. CHILD ABUSE PREVENTION COUNCIL (CAPC)**

The local CAPC, called the Lake County Children’s Council, is administered by the Lake County Office of Education (LCOE) – Healthy Start program. It is an independent organization within county government. Established in 1992, the Lake County Children’s Council provides education and training to schools, parent groups, community organizations and professional groups about

the prevention of child abuse and neglect, both inside and outside of the home. The Council also educates the public and policymakers about child abuse, develops policy and best practices regarding child abuse prevention activities, works to improve the coordination of countywide child abuse prevention services, and builds capacity and collaboration among agencies serving children and families.

## **B. COUNTY CHILDREN’S TRUST FUND COMMISSION, BOARD OR COUNCIL**

The Lake County Children’s Council, described above, serves as the County Children’s Trust Fund commission. With guidance from LCDSS to ensure compliance with CBCAP funding restrictions, the Children’s Council decides on projects to fund including some direct services, collaboration and capacity building, and child abuse awareness activities. The direct service providers are all members of the Children’s Council and they report at quarterly meetings on activities and progress with their programs funded by the Children’s Council. They also provide written reports formatted to conform to the annual CAPIT/CBCAP/PSSF report to the Liaison on numbers served, services provided, etc. Information regarding the programs, services, and funding is available at the Children’s Council meetings and on its website.

## **C. PSSF COLLABORATIVE**

LCDSS serves as the PSSF collaborative. Ideas for use of PSSF funds are discussed among a team of LCDSS staff comprised of CWS Deputy Director, CWS Program Managers, and the CAPIT/CBCAP/PSSF Liaison, who make recommendations to the LCDSS Director. The CAPIT/CBCAP/PSSF Liaison manages any contracts governing PSSF funds, all of which require final approval by the Board of Supervisors.

# Systemic Factors

## **A. MANAGEMENT INFORMATION SYSTEMS**

### **CHILD WELFARE**

CWS utilizes a variety of hardware and software to manage and assess the provision of child welfare services. The Information Systems Division of the Lake County Department of Social Services (DSS) provides on-site and remote support for these resources.

There is one on-site System Support Analyst (SSA) who functions as the CWS/CMS Help Desk and provides routine training and support for end users. She attends monthly Northern Region User Group (NRUG) meetings in Redding to insure staff are up to date on current and upcoming aspects of CWS/CMS. Because travel time is extensive for this 1-2 hour meeting, she often tries

to participate by telephone. Unfortunately, the outgoing reception from the NRUG site is poor which compromises CWS's ability to benefit when participating by telephone.

In the fall of 2014, CWS added an on-site IS System Analyst to address ongoing IS needs for CWS/CMS computers and supportive hardware. Having an analyst on site reduces the response time for user issues considerably because the IS division is located at the main DSS site, approximately 24 miles away.

The on-site IS analyst participates in monthly Technical Advisory Committee (TAC) meetings in Sacramento. Prior to having a dedicated IS analyst CWS participation in TAC was inconsistent. Given the travel distance to and from the meeting site, telephone participation is preferable to attending in person. No concerns have been raised for telephone reception for TAC meetings.

CWS's primary case management / assessment tools are the statewide Child Welfare Services/Case Management System (CWS/CMS), Structured Decision Making (SDM), and Safe Measures. Social Workers and Supervisors are trained to utilize SDM and Safe Measures on a regular basis to insure consistent assessments, monitor case work compliance, and plan tasks. Each social worker, supervisor, and program manager has their own desktop computer with confidential log on credentials for CWS/CMS, SDM and Safe Measures.

Improvements to CWS/CMS bandwidth and user speed are appreciated. As a dedicated county, the State provides support for planned and unplanned interruptions to service. The CWS IS team continues to work with the State to replace and upgrade CWS/CMS computers on a 5 year rotation as warranties expire.

As a result of CWS/CMS's increase in memory capacity CWS was able to begin scanning Court approved Finding and Orders and Court Minutes into the court section of CWS/CMS. This practice insures against the loss of hard copies and simplifies case reviews.

CWS is just beginning to take advantage of the opportunity to import county specific fillable version of commonly used JV docs that are not included in CWS/CMS. This practice offers many benefits over the current practice of maintaining JV-forms in a shared drive on workers' desk tops that have to be typed for each child in a case and imported or scanned into CWS/CMS. This practice will also offset delays in the availability of revised forms. By example, state adoption forms that were revised for mandated use beginning 01/01/2015 are not scheduled for access in CWS/CMS until 06/01/2015.

The CWS Help Desk analyst routinely accesses the CDSS Data Quality Portal that became available in the fall of 2014 for CWS/CCMS and Business Objects (BO) news and training information. Her response to this resource has been positive thus far.

Untimely data entries for social worker contact and investigation narratives are an ongoing concern. To promote workers' capacity for compliance in these areas, CWS implemented a number of strategies. CWS/CMS was installed in six laptops that are available for off-site use; an additional 10 Server Based Computing (SBC) tokens were requested and received so all social

workers can access CWS/CMS on a laptop when working out of county; iPhones were paired with county vehicles so workers can dictate contact narratives and take photos that they email to their desk top computer for printing or dropping into CWS/CMS; and a light weight CWS/CMS stylus tablet was piloted by the ER unit for in-house RED Team meetings to access CWS/CMS history when assessing referrals. CWS anticipates expanding the use of tablets to facilitate electronic SOP engagement tools with children (e.g., 3-Houses and Safety House), and Safety Plans with families that can be signed and printed in the field. The stylus tablet is a natural progression of the use of a portable white board and printer that interfaces with a laptop for family meetings at a client's home or a partner agency site.

Prior to the use of portable white boards, CWS installed electronic white boards with a lap top and flat-screen television in multiple conference rooms to facilitate SOP Mapping during group supervision case consultations and Family Team Meetings (FTM). Information on the white board can be saved and maintained in the lap top, printed from the lap top, and/or scanned to a worker's desktop and dropped into CWS/CMS.

The CWS System Support Analyst runs a number of monthly CWS/CMS, Business Objects and Safe Measures reports for distribution to the CWS management team. The reports provide generic and case specific data that is critical to the administrative oversight of compliance with federal and state outcomes and progress toward identified objectives.

The System Support Analyst also provides the CWS management team with quarterly reports from the Berkeley and Chapin Hall data sites. These reports are instrumental in the preparation of semiannual Division Reports for LCDSS, SIP reviews, and the County Sell Assessment (CSA) process. Having access to such detail over time helps identify subtle practice changes that yield a significant improvement. Because the data shows Lake County performance in comparison to other jurisdictions, it provides an opportunity to reach out to counties that do well in a given area and learn from their ideas and advice.

## **B. CASE REVIEW SYSTEM**

### **COURT STRUCTURE**

All routine 300 W&I Code Dependency and 600 W&I Code Delinquency matters are heard by the same Judge. Having a single judge for both calendars is a benefit for children and families who cross between jurisdictions.

Dependency cases are heard once a week for 3.5 hours on Monday afternoons. Detention hearings are heard on the Monday afternoon calendar or Tuesday through Friday mornings at 8:15 as needed. Permanency Planning W&I 366.26 hearings are heard Wednesday mornings while contested matters are referred to the long-cause trial calendar for hearing by an alternate judge.

In August 2012, the long standing Juvenile Court Commissioner, who presided over Juvenile Court and had extensive prior experience as a judge in another county, was reassigned. The

new Judge had no prior juvenile court experience, which was a challenge for everyone involved. To his credit, the newly assigned Judge's attention to detail and initiative for gathering the information, points, and authorities necessary to support his initial learning curve and ensure the ongoing integrity of his decisions was and remains impressive, albeit time consuming.

Counsel for children and parents are provided under a Master Public Defender contract through the Administrative Office of the Court. The contract includes four primary attorneys and a handful of additional attorneys to insure representation for all parties. The attorneys on the contract are well versed in dependency and have worked in Lake County for considerable periods of time. Each attorney carries a mixed caseload of children and parents based on an informal rotation that takes attorney/client conflicts and scheduling issues into account. Despite high caseloads and some attorneys' obligations in multiple counties, they are active partners in the dependency process and on behalf of their clients.

Prospective juvenile dependents are appointed counsel at the detention hearing and these attorneys remain in place until the dependency is dismissed. Parents are appointed a public defender if their financial circumstances prevent them from affording an attorney. Each parent submits a JV-132 Financial Declaration at the first hearing they attend to assess their eligibility for a public defender.

Child Welfare is represented by a designated Deputy County Counsel through the office of the County Counsel. The current agreement provides a half time county counsel staff person for CWS. It also accommodates support from additional County Counsel staff to insure representation for concurrent hearings.

The Court Appointed Special Advocate (CASA) program was reactivated on July 1, 2011. CASA of Mendocino and Lake Counties administers the program and is a member of the National CASA Association. The number of trained advocates fluctuates considerably and most cases are represented by the CASA Director. Per the Memorandum of Understanding (MOU), the priorities for a CASA referral are children with a permanent plan other than adoption or guardianship, children with special medical / mental health / educational / developmental or other special needs, and dependent youth crossing over in the delinquency.

Representatives of Juvenile Probation and Child Welfare meet and confer on issues affecting both departments. The W&I 241.1 process provides a collaborative approach for cases that shift in either direction between child welfare and probation. There is a written W&I 241.1 Protocol and approved form to meet the mandates of a 241.1 assessment. The form insures collaboration between CWS and Probation and includes a joint recommendation for the Court. Dependency is suspended when a child comes under jurisdiction as a delinquency ward and reinstated or dismissed as appropriate when the delinquency issues are resolved.

## **NOTICES**

CWS is responsible for noticing all parties for each hearing and complies with the notification requirements in W&I sections 290.1 through 297. The one exception is the initial notice to

parents for transfer-in hearings. This task was appropriately taken on by the court in late 2014. Child Welfare notices are generated in CWS/CMS and the related information populates into the CWS/CMS court report templates. ICWA and W&I 366.26 notices have been an ongoing focus due to the likelihood for continuance or appeal when done improperly.

## **COURT REPORTS**

Social Workers write their own petitions and reports. Emergency response workers write the petition and jurisdiction reports for their investigations and the Family Reunification/Family Maintenance (FR/FM) workers write the disposition and all status review reports for children on their caseload. FR/FM social workers write post jurisdiction W&I 342 petitions, and post disposition W&I 387 and 388 filings for their cases.

W&I 366.26 reports are written by a Permanency Planning (PP) social worker who carries a specialized caseload for which services have been terminated and a permanency planning hearing is scheduled and pending. The child(ren)'s Concurrent Planning/ Adoption social worker prepares a written assessment that is included as an attachment to the PP worker's 366.26 report.

Court reports are written in CWS/CMS. There are pros and cons for this process. On the positive side, a number of sections self-populate and the reports are saved in the system for easy access by any county. Unfortunately, reports are occasionally corrupted or completely lost by system deficiencies and user errors, and the templates are outdated or otherwise insufficient.

## **INDIAN CHILD WELFARE ACT**

The Indian Child Welfare Act (ICWA) is addressed in preparation for a detention hearing and throughout the life of a case as circumstances warrant. ER social workers assist parents in the completion of an ICWA-020 which is attached to the petition to initiate the process for an ICWA determination. When a parent's whereabouts are unknown, or the parent is otherwise unavailable, ER staff interview extended family as known and available to facilitate proper ICWA findings at detention and initiate notices. ICWA placement preferences are considered throughout the life of a case for children who are or may be American Indian/Alaska Native.

## **HEARINGS**

Detention hearings are held within 72 hours of protective custody. Lake County public defenders are committed to making themselves available as needed when timeframes force a detention hearing outside the regular Monday calendar. When a detention is necessary on an alternate day, the court schedules it at the outset of their morning calendar.

Attorneys are appointed for all minors and any parent present at the detention hearing. Child welfare attempts to meet with parents prior to the detention hearing to complete the JV-132 Financial Declaration documents necessary for the court's assessment of parent's eligibility for a public defender. The advance preparation of these documents saves considerable time during the hearing. The JV-132 document is signed by the parent and filed with the Court during the

hearing. The Advisement of Rights documents are reviewed and signed by the parent and their attorney during the hearing and immediately filed with the Court. If parents are not present at the detention hearing these tasks are completed at the time of their first appearance. Detention hearings are rarely contested or continued and it is exceedingly rare that they do not result in the setting of a jurisdiction hearing.

Jurisdiction hearings and Disposition hearings are typically held separately. The common exceptions to this practice are the jurisdiction and disposition hearings for a W&I 387 Petition, which are commonly combined.

Jurisdiction hearings are usually set within the 15 day statutory time frame following the detention hearing. Time waivers of a few days are usually granted to accommodate midweek detentions and court holidays. When the jurisdiction hearing is contested and/or parents are incarcerated out of county and requesting transport to attend in person, the hearings are not always able to be resolved within the 60 day statutory time frame. Prolonged jurisdiction hearings create a variety of challenges, for example, compromised Title IV-E findings, uncertainty for children in out of home care, and parental resistance to services. It is exceedingly rare for a case to be dismissed at the jurisdiction hearing.

Disposition hearings are generally set within the 10 days of the jurisdiction findings whether or not the children are in out of home care. CWS rarely concludes an ICWA determination that a child is an Indian and a member or eligible for membership in a federally recognized tribe by the Disposition hearing. If there is evidence that ICWA may apply, CWS requests appropriate findings and make arrangements for written and/or oral testimony by a Qualified Expert Witness to speak to the issue of whether continued custody by the parents is likely to result in serious physical or emotional damage to the child(ren). For local tribes, CWS attempts to engage a member of the Indian child's prospective or known tribe to serve as the Expert Witness. CWS retains a qualified professional to fulfill the Expert Witness requirement for tribes that are unable to provide their own. To date, the option for transferring jurisdiction to an Indian child's tribal court has been extremely rare; occurring only twice with large tribes outside of California. In the past year, the seven local tribes began exploring options for a collaborative tribal court to take jurisdiction of dependent Indian children. When a finding that the ICWA may apply occurs at disposition, CWS continues active efforts pending the final determination.

The short turnaround between Jurisdiction and Disposition hearings is extremely challenging. Recommendations to bypass services for parents create additional challenges, most notably, the task of procuring legal evidence from other counties and the likelihood of such hearings being contested. Recommendations to bypass services have been an area of concern for timely permanency, particularly for children under the age of three at time of removal.

The 6-month, 12-month, and 18-month pre-permanency and permanency status review hearings are set according to statutory requirements that take the child's age, date of removal, and date of jurisdiction into account. When a pending ICWA determination is resolved, CWS

files an ICWA Compliance report for consideration at the next regularly scheduled status review hearing. The compliance report details notice efforts, the tribes' responses, and additional evidence as required to make an ICWA determination.

Use of the 24-month permanency hearing is exceedingly rare, having only occurred twice since the last assessment.

The initial W&I 366.26 hearing is consistently set within statutory time frames. Insufficient notices are the primary cause for the continuance of these hearings. Lake County has a high recommendation rate for termination of parental rights with a plan of adoption at the 366.26 hearing. When an adoptive home has been identified and the benefits of a permanent plan of adoption appear to be in a child's best interests, the Court does not shy away from termination of parental rights. If an adoptive family has not been identified for a child who appears likely to be adopted, it is common practice to identify adoption as the permanent plan and leave parental rights intact pending a 180 day continuance. CWS is generally successful in identifying an adoptive family during the additional 180 days.

W&I 366.26 hearings for Indian children address the option for Tribal Customary Adoption and include written and/or oral testimony by a Qualified Expert Witness for a recommendation to terminate parental rights.

Post Permanency hearings are conducted at six month intervals for children without a plan of adoption or legal guardianship. Each child's plan is reassessed in collaboration with the Adoption Unit on an annual basis to determine the appropriateness of setting a new 366.26 hearing.

## **COURT RELATED CHALLENGES AND STRATEGIES FOR IMPROVEMENT**

There is no formalized method for mediation or settlement conferences to discuss potential resolution in contentious cases. This means contested cases go to hearings that delay decisions for families and children. The practice of setting contested matters outside the regular calendar was instituted about three years ago to expedite their resolution without delaying the balance of the dependency calendar.

A similar tact was taken with W&I 366.26 hearings in the fall of 2014. After noting the frequency for a contested 366.26 hearing, the Court began setting them on a separate Wednesday morning calendar. These changes have reduced the number of continuances due to the shortage of time when a contested hearing takes up the better part of the regular calendar.

Despite time saving efforts such as those noted above, the long standing 3.5 hour weekly schedule for dependency court is increasingly insufficient for CWS's needs. During this review period, the dependency calendar typically occurred at 1:15 on Monday afternoons. In recent months dependency cases have also been set for Monday morning and other days of the week to offset continuances due to attorney absences, complex decisions, and untimely filings. While the court's effort to expedite hearings is helpful for meeting permanency outcomes, the

irregular schedule is a challenge for CWS staff. On July 1, 2015, the dependency calendar will shift to Monday mornings at 8:15 and routinely overflow into the afternoon delinquency calendar as time permits.

The current court culture was a major challenge identified in the focus groups with Child Welfare and Probation staff. Staff expressed a need to find a collaborative solution to significant delays in hearings. These delays cause workers to delay providing services to children and families, to keep cases open longer than necessary, and to prevent children from achieving timely reunification or permanency. Workers also expressed a desire to look for ways to work with the courts and attorneys to address these delays and better serve families, including more communication with supervisors and attorneys regarding cases and possible reestablishment of the Blue Ribbon Commission or other resource to train and support court personnel.

The courthouse is located in the county seat of Lakeport. Public transportation to and from the courthouse is burdensome for families who live in the southern and remote areas of the county; particularly for families traveling with small children. Bus stops are limited or nonexistent in many residential areas and traveling from one end of the county to the other can require multiple bus changes. When hearings last until or after 5:00 pm, clients are at risk of missing the last bus. The challenges of public transportation will be reversely impacted by the upcoming change to an 8:15 morning calendar in July as parents confront the task of balancing morning responsibilities for school age children with the task of catching a 7:00 am bus for court.

Staff turnover, ongoing vacancies, and time management deficits present an ongoing challenge to achieving timely permanence. The provision of proper notice and the timely filing of court reports continue to be an area of focus for improvement. CWS tried a number of case assignment and supervision strategies with mixed success. The best improvements were achieved in the area of ICWA and W&I 366.26 notices.

To address inconsistencies in procedure and reduce the potential for untimely and improper notices ICWA and W&I 366.26 notices were assigned to a specific staff person rather than having the case carrying social worker do them. Since centralizing ICWA notice and Expert Witness scheduling responsibilities, shortly after the last assessment, ICWA related appeals and continuances decreased significantly.

CWS initiated a centralized W&I 366.26 notice process in April 2014. The option to monitor all 366.26 notices in progress with a single staff person suggests promising results for improvement in this area. A noteworthy aspect of this strategy is the increase in personal service to parents, with some notices being served at the hearing when services are terminated and the 366.26 hearing is set.

Another 366.26 notice strategy that emerged since the last assessment is the practice of substituting notice to the parent's attorney when the court determines there has been due

diligence in attempting to locate and serve the parent. County counsel and dependency attorneys were reluctant to accept the process despite multiple attempts by CWS to promote its legality and effectiveness. Time constraints in court and persistence by CWS management ultimately paid off and the process was accepted as routine in 2014.

CWS's struggle to file timely court reports across all hearing types is a significant area of focus and concern. A variety of approaches were implemented to improve in this area with intermittent success. Disposition reports, with their short turnaround time frame from jurisdiction, remain the biggest challenge. A combination of time management deficits and staff vacancies / turnover appears to be the largest factors for performance in this area.

Increases in workload imposed by outside entities also impact CWS's ability to meet timeframes that support timely permanence for children. The Court's July 2012 requirement for the use of California Judicial Council forms for Findings and Orders (F&O) rather than CWS's vetted, county F&O documents is a prime example. The CWS F&Os were single document templates that incorporated all F&Os for each specific type of dependency hearing and accommodated all children named in the matter without the need for attachments. Judicial council forms are child specific with multiple attachments that must be created and filled individually in CWS/CMS. On average, the judicial council F&Os require a minimum of nine pages for each child as compared to an average of 3 pages total to address all children in a case with the county F&Os. The CWS staff focus groups identified the court findings and orders as problematic. Staff thought using standard JV Forms for findings and orders and training staff on their use would address this concern.

While the learning curve for completing the Judicial Council F&Os has leveled off for many workers, ongoing training and oversight is needed to insure the accuracy of these documents and to absorb the additional time required to prepare, copy and assemble them. Additionally, the Judge's line by line review of every form increased each hearing by as much as 10-15 minutes which is significant in the context of a 3.5 hour weekly calendar. Strategies to improve performance in this area include the completion of a policy detailing the required forms and attachments for each hearing and the addition of a paralegal position to centralize the task to insure consistency and accuracy.

Other challenges that compromised CWS's ability to move cases through court in a timely manner were scheduling conflicts for attorneys working in multiple counties and intermittent health issues, both of which resulted in multiple continuances. With respect to scheduling conflicts, the court tries to accommodate them within statutory time frames or asks that Lake County cases be given priority. With respect to health issues, the Master Public Defender contract was renegotiated earlier this year and cases are being reassigned to insure adequate representation.

## CASE PLANNING

CWS has a collaborative relationship with Lake County Behavioral Health (LCBH) to insure the provision of appropriate mental health services and planning for children and families. A long standing pattern of monthly Inter Agency Placement Review Team (IRPT) meetings for monitoring group care, Wraparound, and Intensive Foster Care placements laid a good foundation for the complexities required to implement Katie A.

The collaborative efforts for Katie A include a team of line staff and management from CWS and LCBH who meet monthly to develop and monitor Katie A. services for dependent youth. The process requires an initial Child and Adolescent Needs and Strengths (CANS) screening for every incoming dependent, age 5 and up. The CANS are completed by social workers in CWS's Special Program Unit. The results of the screening determine the need for a referral to LCBH. When children are referred, LCBH conducts a full mental health assessment to determine diagnoses and medical necessity per Katie A. When services are warranted, LCBH initiates a Treatment Family Team Meeting (TFTM) to engage involved parties, including the child, in the development of a treatment plan. Treatment plans are updated during quarterly TFTMs. Children who were not deemed to be in need of services are rescreened annually to insure ongoing well-being or a referral to services as needed. If a child exhibits symptoms that suggest the need for services between their annual reviews, the case carrying social worker requests an emergency screening to determine the need for a referral to LCBH. In exceptional cases where a child appears to present a danger to their self or others, the social worker or caregiver takes the child to a local hospital emergency room for a 5150 assessment. Child Welfare, LCBH, and hospital staff work collaboratively as needed when children require hospitalization for observation and treatment.

Over the past year, CWS's Special Program Unit made considerable progress in completing a CANS screening for all children who were in care prior to Katie A. Children in out of county placements are an area of continued focus due to the complicated logistics of collaborating with mental health agencies outside the county's jurisdiction.

The value of a trauma informed approach to mental health services for juvenile dependents appears widely accepted among local mental health providers as evidenced by their increased use of cognitive, behavioral, and family therapy procedures to target specific difficulties exhibited by children experiencing PTSD symptoms in response to abuse, neglect, and other childhood traumas. This shift in practice is yielding promising results similar to those gained through CWS's Nurturing Parenting education program that employs a trauma-focused cognitive behavioral based approach to help parents overcome trauma-related parenting challenges by reducing their negative emotional and behavioral responses to their children.

The limited availability of adult mental health services is an area of concern. LCBH's adult service program is limited to the most severe clients, which meant that prior to the Affordable

Care Act, services for parents had to be purchased and provided by a limited number of private practice providers who were willing to accept fees at or near Medi-Cal rates.

CWS uses SDM to assess safety, permanency and well-being across the continuum of child welfare services. The ER Intake Screener uses the Hotline Tools for every referral to determine acceptance for an in-person response and the time frame and path of response.

The ER investigator completes a Safety Assessment for every in-person response to determine whether or not the child can remain safely at home and a Family Risk assessment for all substantiated and inconclusive in-person responses to determine whether an ongoing case needs to be opened. ER and ongoing social workers are trained to complete a Family Strengths and Needs assessment (FSNA) within the first 30 days of a case and every six months thereafter in preparation for updating the case plan.

The Risk and Reunification reassessments are completed prior to or during the group supervision case review held prior to each status review. The case review is a Safety Organized Mapping process that captures harm and danger, complicating factors, safety, supporting strengths, and next steps. The case consultation guides the recommendation for the upcoming hearing and sets the stage for a Family Team Meeting (FTM) to address case planning for the next period of review.

FTMs are facilitated by social worker in the Special Programs Unit so the case carrying social worker can be an active participant. Clients are encouraged to invite any party who is an active or potential participant of their support network. Participants include parents, children, extended family, church members, neighbors, service providers, substitute care givers, and attorneys. As families increase safety and well-being, their support network shifts from an array of formal to informal participants who will remain intact when dependency is dismissed. When children are too young or otherwise unable to represent their own views in an FTM, the case carrying social worker helps the child complete an SOS Safety House and/or 3-House drawing that can be presented on their behalf. The raw emotion of a child's perspective as captured by these tools has often played a significant role in their parent's commitment to long term change.

Visitation planning is an ongoing area of focus for CWS. Parent-Child visitation is valued at all levels of staff as a powerful tool to change parenting practices, maintain family attachments, and help children comprehend what has happened to them. Despite vacancies and staff turnover, management remains committed to the staffing and resources needed for a strong progressive visitation program. By example, LCDSS renovated an off-site property to accommodate a Lakeport CWS Family Center with two large visitation rooms, a kitchen, and a conference room for classes. CWS also has a dedicated visitation room in Lower Lake and a dedicated visitation room in the Lakeport CWS office. To support case carrying social workers, CWS added the equivalent of two specialized visitation social workers who supervise up to 50% of a family's visits during reunification. Because the specialized visitation social workers also

facilitate CWS's in-house parenting education classes they are familiar with the parents and have a unique perspective for evaluating the parents' progress toward internalizing the information taught in the class.

Because so many dependents are placed in foster homes outside the county, transportation to and from visits can be a time consuming burden for everyone involved. CWS has had some success with identifying an appropriate midpoint to conduct visits and is exploring options to pay for reputable supervision at off-site venues in cases that are stable and progressing toward reunification.

CWS's concerns about the lack of strong progressive visitation program were echoed by social workers and parents in the CSA focus groups. Next steps will require a written plan for recurring assessments to insure timely modifications to the length, frequency, and level of supervision needed on an ongoing basis between status review hearings.

Social workers have frequent and routine contact with local service providers. CWS uses agency specific forms for detailed referrals based on the client's individual needs. CWS's MOUs and contracts with community partners include written expectations and procedures for follow up to measure client progress toward achieving the goal for the service and service providers are common participants in case planning FTMs.

CWS's three-stage, in-house parenting education series is a significant vehicle for engaging parents. The first stage is an eight-week parent engagement group that teaches parents about the Juvenile Court process and helps them accept responsibility for their role in the case. The second stage is a 20-week parent education class that addresses the five Nurturing Parenting® constructs of positive self-worth, building empathy, alternatives to physical punishment, appropriate family roles, and empowering power and independence in children and adults. The class employs a trauma-focused, cognitive behavioral approach to help parents address their own trauma and develop the capacity to respond to their children. The third stage is an 8-week parent empowerment group wherein parents demonstrate their progress through assignments and mentoring opportunities with clients in earlier stages of the program.

## **RELATIONSHIPS WITH LEGAL PARTNERS**

CWS makes a concerted effort toward positive working relationships with the Court, attorneys, and county counsel to sustain a professional atmosphere under complex and adverse conditions. In an effort to increase communication and develop a venue to address ongoing procedural obstacles, CWS initiated a monthly collaborative meeting with the dependency Judge and Attorneys. Despite a general willingness by all parties, the plan took nearly a year to implement due to staffing and scheduling issues. Since the meetings became consistent earlier this year CWS has addressed a wide range of topics to improve capacity for timely hearings with fewer continuances. Some of the topics addressed include paternity inquiries, notice and transport orders for out of county incarcerated parents, and transportation logistics for locally incarcerated parents. The meetings take place during the lunch hour in the jury room adjacent

to the dependency court room. The time and location were chosen for convenience to support the ongoing viability of the process.

Dependency Drug Court (DDC) is administered by a Superior Court Judge, not the juvenile dependency judge, and held separate from juvenile court on a weekly basis. Participants are referred at the outset of their case and DDC is presented as an enhanced opportunity for service and family engagement. Incentives are used to reward participants for progress in recovery and enhance their opportunities for family engagement, particularly during reunification.

The working relationships between CWS, AODS and the Court are well established but under developed for DDC. Staff turnover and reorganizational efforts at AODS and Child Welfare have eroded the number of DDC referrals over the past year and client enthusiasm is lagging accordingly. As of this writing, monthly oversight meetings with Child Welfare and AODS have been reinstated to revive the program and address client concerns that DDC is more taxing than rewarding.

CWS's relationships with the seven local Indian Tribes has improved considerably since the last CSA. Every two months representatives from the Tribes and tribal community meet with a CWS program manager and ICWA liaison to address the needs of children in the dependency system. Issues of concern are discussed, areas of potential growth and development are identified, and collaborative efforts are outlined. Some of the objectives worked on by the group include fostering more designated tribal placements for Native youth in out-of-home care, exploring possibilities for a group home for tribal youth owned and operated by the tribes, addressing training needs of the tribal community and CWS staff, increasing the cultural sensitivity of CWS staff, increasing the presence of tribal ICWA representatives in family team meetings and other planning efforts, actively integrating traditional practices and culturally appropriate services into case plans, and increasing positive perception of CWS staff within the Tribes. Another context for ongoing collaboration is the quarterly ICWA Round Table meeting, typically attended by representatives of the tribal community, the Tribes' ICWA representatives, CWS program manager and other staff as needed, and community partners from the school system and law enforcement. The Round Table meetings are facilitated by an attorney familiar with dependency law and Indian issues, and are hosted by the Tribes. Round Table discussion have been useful in bringing needed training into Lake County (such as training on tribal customary adoption), and in helping to ensure that community partners are aware of the needs of Native Youth and integrating appropriate efforts into their programs and service delivery. To date, local dependency attorneys and judicial officers have not had a presence at the Round Table meetings, and participation by these important parties is a future objective.

The relationship between CWS and CASA is tenuous and under developed. An August 17, 2012 verbal agreement between CWS and CASA for a renewed commitment to the MOU objective of establishing a collaborative working relationship based on communication and a commitment to teamwork in order to promote the best interests of the children went unfulfilled. This

outcome was the result of mutual failure to follow up with specific infrastructure to support the plan. Because there was no formal venue to share perspectives along the way, disagreements between CWS and CASA went undiscovered until they were brought up in open court, thereby eliminating the opportunity for timely collaboration and resolution on behalf of the children served. In an effort to enhance the relationship between CWS and CASA and improve outcomes moving forward, CWS is drafting language for a monthly case review process for consideration in the anticipated MOU renewal process.

The working relationships between CWS and the three FFAs who administer homes in Lake County are generally positive. Unfortunately, foster homes administered by an FFA without a local administrative base, regardless of whether or not they have a satellite office in Lake County, do not have a sufficient level of oversight and support to address ongoing needs.

The relationship between CWS and Probation has improved considerably since the last assessment. Ongoing collaborations on shared programs such as Wraparound, IPRT, and WIC §241.1 assessments, had a positive influence the levels of trust and familiarity for staff in both agencies.

## **C. FOSTER AND ADOPTIVE PARENT LICENSING, RECRUITMENT AND RETENTION**

### **GENERAL LICENSING**

Lake County Child Welfare Services does not license foster homes. Residents of Lake County interested in becoming foster parents work with either the California Department of Social Services, or local foster family agencies (FFAs). Practically speaking, FFAs certify almost all of the foster homes operating in Lake County.

Lake County CWS does assess relatives and extended family members for possible placement. Standards for relative and extended family caregivers are set by the California Code of Regulations. The following staff persons are involved in evaluating relatives for placement:

- Placement Specialist & Supervisor
- Adoption / Concurrent Planning Social Worker & Supervisor
- Case-carrying / Family Reunification Social Worker & Supervisor
- Program Manager

Applicants are evaluated per program regulations and statutory considerations, including WIC §361.3. Consideration is given to multiple factors including, but not limited to, the relationship of the caregiver to the child, potential for concurrent placement, reliability of the home, level of cooperation in meeting the child's needs, appropriateness for the well-being of the child, cooperation with the child's service plan, ability to meet sibling placement needs, protection from risk, and household composition.

All potential resource parents submit to a criminal background check and review of child welfare history in California; this is the first steps in the application process. When an applicant is found to have a criminal record, the history is reviewed by the Placement Specialist in order

to determine if the applicant qualifies for a possible exemption as outlined by the State Department of Social Services (references: Title 22 Regulations, Division 6, Chapter 7.5 and Division 12, Chapter 3; H&S Code section 1522(g); WIC Code Section 361.4). All steps required by regulation are followed.

Once relatives/NREFMs pass a criminal background check, a psychosocial assessment is completed using the Structured Analysis Family Evaluation (SAFE) Home Study tools.<sup>ix</sup> The assessment is typically completed by adoption social workers and is always completed with a view toward concurrent planning. If reunification does not occur, the relatives are in a position to have an abbreviated adoption home study completed using the original home study as a base, theoretically expediting the time to permanence. Some challenges have arisen in this approach, with staff shortages and caseload demands impacting the timely completion of home studies. As a result, Lake County CWS is exploring the possibility of contracting with a private agency for some services relevant to relative and NREFM assessments.

Lake County has a significant Native American population and CWS works closely with tribal representatives to place Native American children entering the dependency system into tribally designated homes or tribally approved homes. Tribes are notified of the need for placement as early as possible to allow time for tribal placement options to be identified and tribal resolutions to be completed. Per statute, Lake County CWS is responsible for CLETS clearances and fingerprinting for tribally designated homes. Per regulation, tribally designated homes are not subject to licensing standards relevant to home capacity, etc. Barring concerns for safety, Lake County CWS honors tribally designated placements.

A significant challenge facing Lake County CWS is the lack of foster and adoptive homes in county. Dependents are regularly placed outside of Lake County because of lack of local placement options. Given the geographic realities of the area, it is not unusual for dependents to be placed two or more hours away. Given limited placement options, siblings may be separated. All of this poses challenges to reunification efforts as well as concurrent planning.

Cross-jurisdictional efforts to improve timeliness of adoptive and permanent placements include having social workers and supervisors participate in the Bay Area Supervisors of Adoptions (BASA) meetings and the Valley Exchange meetings, both of which provide opportunities for exchange of information regarding families waiting to adopt and children in need of permanent homes. Additionally, the Interstate Compact on the Placement of Children (ICPC) process is used, as opportunities arise, to facilitate placement with relatives/NREFMs living outside of California, but within the United States.

## **RECRUITMENT**

Recruitment for foster parents is done by the foster family agencies licensed to operate in Lake County. While at least two private adoption agencies are licensed to operate in Lake County, no active recruitment of adoptive/concurrent planning families has been occurring; discussions are underway to promote more active recruitment.

Lake County CWS is involved in child-specific recruitment through early and ongoing efforts to identify relatives and extended family members who may be suitable placement resources. Additionally, concurrent planning and adoptive families are sought via involvement in exchange meetings and child-specific outreach on a case by case basis.

### **RETENTION OF CAREGIVERS / INDIVIDUAL SUPPORT / PEER SUPPORT**

In Lake County, the FFAs have the main responsibility for providing individual support to foster parents certified through their agencies. Peer support is sometimes available through the FFAs as well, and also occurs informally within the foster parent community. In like manner, the FFAs are responsible for orchestrated efforts to retain foster parents. Lake County CWS works to support and retains relative and NREFMs by connecting them with resources and supports, such as furniture needed for placement, therapeutic services and parenting information.

### **RESPIRE CARE**

Because virtually all of the foster homes in Lake County are certified by Foster Family Agencies, the FFAs arrange respite care for their families. Sometimes a respite worker is identified to come into the foster home while the foster parents are away. At other times the children are temporarily placed in another foster home certified by the same FFA as the identified placement family.

## **D. STAFF, CAREGIVER, AND SERVICE PROVIDER TRAINING**

### **STAFF TRAINING**

Lake CWS engages social workers in training in-house and through contracted trainers. In-house training is provided by supervisors, peers, and analysts. The main contracted trainer is the Northern Training Academy, operated by University of California, Davis. Occasionally, other organizations provide specialty training, as needed.

When new staff members are first hired, they shadow more experienced staff before being assigned a caseload. In this way, and through one-on-one and group supervision, policies and procedures are transmitted to new staff.

Also, all new social workers attend the state required Core training, provided by the Northern Training Academy. Social Workers complete Phase 1 Core during their first year of hire and Phase 2 Core within their second year of hire, as required by law and CDSS regulations. Phase 2 Core covers these topics: court procedures, educational advocacy, family violence, children's health issues, Indian Child Welfare Act (ICWA), interviewing, mental health, Multi-Ethnic Placement Act (MEPA), multiculturalism or diversity, sexual abuse, self-care or stress or time management, substance abuse, and values and ethics in social work.

Social Worker Supervisors complete the Supervisory Core program within their first year of hire. Topics covered include performance management; case consultation; coaching; Structured

Decision Making (SDM); Safe Measures®; organization skills; fiscal essentials; policy and practice; and agency and community leadership.

Capacity to complete all Core requirements timely is sometimes hampered by class unavailability and cancellations. For example, the required Court Procedures class was offered only once in fiscal year 2014/2015 and in May and June of 2014 nearly all classes were cancelled due to lack of funds as the fiscal year drew to a close.

Following completion of all Core training, social workers and supervisors complete at least 40 hours training every two years in compliance with the law and CDSS regulations, with most completing many more hours.

Additionally, LCDSS requires all staff members who work with the public to complete annually two trainings: Confidentiality and Ethics in Social Work and Cultural Awareness/Working with Diverse Populations.

Other in-house training is provided at monthly division meetings, conducted by staff or by community partner agencies. Division meeting trainings included a presentation on tribal services and cultural awareness provided by a panel of local tribe members; foster care educational services provided by the Lake County Office of Education foster care liaison; CWS/CMS AFCARS data entry and new releases by CWS the help desk analyst; resources for youth by Redwood Community Services; drug testing procedures by Redwood Toxicology Laboratory; Katie A. collaboration by Lake County Behavioral Health and CWS Special Programs Supervisor.

From January 2011 through December 2014 training completed through the Northern Training Academy included the following topics: AB12/Extended foster care; advancing permanency through adoptions; courtroom advocacy; CWS/CMS training for New Users, new releases, and data entry in AFCARS, Health and Education Passport (HEP), and National Youth in Transition Database (NYTD); Katie A. implementation and practice; RED Team; Wraparound; writing court reports and writing skills in general. Nearly all staff have completed Safety Organized Practice (SOP) foundational training and SOP Harm and Danger Statements and Safety Mapping. Additional staff members have been trained in SOP Family Team Meeting (FTM) facilitation.

Through other sources staff received training in Adoptions SAFE home studies; tribal customary adoptions; Nurturing Parenting® facilitator; teaching life skills; CANS screening and assessments; mandated reporter train the trainer; Harris hearing procedures; Dr. Bruce Perry on trauma informed practice; and local training on visiting inmates in the local jail; reading and interpreting CLETS; defensive driving; Fierce Conversations® communication skills; car seat use; and Tribal Health services.

Training needs are identified through caseload reviews, group supervision in unit meetings, one-on-one supervision, and staff requests. One training topic recently requested by staff, which will be addressed in the upcoming year, is on obtaining client DNA samples and submission to the laboratory for parentage testing. Another training issue which arose from

the Katie A. collaborative meeting is the need to review protocols for psychotropic medications and train staff; a subcommittee was established and will address this training need in the upcoming year.

Staff training needs identified during their focus group included: Motivational Interviewing, concurrent planning, CWS/CMS, court testimony, and Core training for all new workers. Staff also identified the need for training on available services to better know how to refer clients to the appropriate service, as well as ensuring all staff know what resources are available in their area. Staff would also like to have enough time and coverage, as well as supervisor support, to participate in and integrate their trainings into practice.

Probation Officers identified a need for more ongoing training in the use of CWS/CMS, and for engaging families and accessing services for their youth and parents. They identified a need to improve communication with programs like ILP to help officers know how to better access services for their youth and to build capacity for transitional housing for youth. Currently, probation youth may participate in ILP, but officers would like to see an increase in the level of partnership with CWS to be better informed of program changes and youth progress.

### **CAREGIVER TRAINING**

Most foster parent caregivers in Lake County are licensed through a foster family agency, which is responsible for their training. Some classes are offered through Mendocino Community College, nearly all at the location in Ukiah, a 40 minute drive from Lakeport. CWS did offer local training through the Northern Training Academy, *The Impact of Trauma on Child Development*, on May 25 and 26, 2011, attended by 24 foster parents and ten CWS social workers.

Relative caregivers in their focus group expressed their desire to see an increase in the level of training and support they are offered in caring for children, including more information on how to support and deal with secondary trauma and its impact on their families, children with trauma, and how to access services. Appropriate training resources have been identified and efforts are underway to make those resources available in Lake County beginning in fall of 2015.

### **SERVICE PROVIDER TRAINING**

The Northern Training Academy welcomes community partners or members to attend training, and some of them have used this opportunity. For example, in October 2011 a two-day training on *SOP Family Team Meeting Facilitation* was attended by community partners from LCOE and LFRC, including Differential Response staff, the Children's Council chairperson, the Foster Care Liaison, and others. Some of the community partners attended *Recognizing Drug Abuse in the Home* in December 2012 and March 2013.

### **CAPIT AND CBCAP FUNDED TRAINING**

Some training is funded by CAPIT and CBCAP. CAPIT funds Nurturing Parenting® classes open to the community at large. The curriculum includes a series for parents of infant, toddlers, and

preschoolers; a series for parents of school aged children; and stand-alone Nurturing Parenting® skills sessions. CBCAP funds training for parent partners and occasionally for Children’s Council members. A parent partner team, who are Children’s Council members, attended the *Child Abuse Prevention Summit* in Sacramento in October 2013 using CBCAP funds.

## **E. AGENCY COLLABORATION**

CWS partners and collaborates with a wide array of agencies to assure that the needs of children and families are addressed. These partnerships each focus on a particular area in the prevention/intervention of child maltreatment, but coordinate their efforts in a manner that creates a common county goal for improving child welfare outcomes and child and family well-being. These groups share responsibility and development of resources, and support blending/braiding of multiple funding streams. Many of the agency representatives serve on multiple committees; communication among agencies results in less duplication of efforts and a more comprehensive approach to addressing the needs of Lake County families.

In Lake County family support organizations have taken a strength-based approach in working through complex issues with the children and families they serve. The majority of these organizations also promote the development of protective factors and resiliency among those they serve. Ground work has been put in place for becoming identified as a “protective factor community.” The goal is for protective factors, which are rooted in prevention of child maltreatment and abuse, to be incorporated throughout the service continuum.

A community collaborative project that crosses multiple agencies is the development of a trauma-informed services protocol. Factors that led to the development of this protocol include the County’s poor overall health profile, ever-increasing awareness of the role that ACEs (Adverse Childhood Experiences) play in all aspects of health, the inclusion of ACE issues among County Behavioral Health priorities, a growing commitment across organizations to implement trauma-informed best practices, and an ACE pilot survey conducted by the Children’s Council, to better understand ACE prevalence in the community. This protocol is a fundamental step in addressing the ripple effect of ACE factors across the continuum of service delivery. It continues to build on steps already taken toward implementing trauma informed best practices and is intended to be a component of a larger systems approach to the multi-faceted impact of trauma exposure. The five key components to be implemented across organizations include: (1) Training, (2) Staff Supervision and Support, (3) Screening, (4) Findings and Referral, and (5) Follow-up. Participants in the Protocol MOU include County Health Services, County Office of Education, County Social Services, County Behavioral Health, First 5 Lake, Family Court Services—Lakeport Superior Court, Lake Family Resources Center, North Coast Opportunities, St. Helena Family Health Center—Clear Lake, Lakeside Health Center (MCHC), Community Care Corporation, and the Health Leadership Network.

Another example of shared vision and strong agency partnerships is the Nurturing Parenting® Collaborative. County partners identified a need and worked together to identify a comprehensive parenting program that could be used across multiple agencies. The Nurturing Parenting® Programs are designed for the prevention and treatment of child abuse and neglect. To meet the specific needs of families, programs have been identified according to the standard levels of prevention: primary, secondary (intervention) and tertiary (treatment). This collaborative was spearheaded in 2007 by CWS, the Health Leadership Network, First 5 Lake, Lake County Office of Education and the Lake Family Resource Center. The directors of these agencies meet regularly as the oversight committee for the project. Nurturing Parenting classes are provided throughout the county by a variety of agencies using multiple funding sources. The collaborative now has three certified Nurturing Parenting facilitator trainers, allowing for local ongoing training for new facilitators. CWS participates in the collaborative by providing Nurturing Parenting classes designed for child welfare parents. Probation has benefited from Nurturing Parenting classes designed for parents of adolescents and plans are in place to expand that resource.

The following are community collaborative meetings attended by CWS leadership:

- Children’s Council
- Children’s Council Executive Committee
- First Five Lake County Commission
- Healthy Start Council
- Health Leadership Network
- 4-P’s Oversight Committee
- ICWA Roundtable
- Nurturing Parenting® Oversight Committee

Monthly agency partner meetings attended by CWS leadership to coordinate programs/services for CWS families are as follows:

- CalWORKs/ Linkages
- Interagency Placement Review Team (IPRT)
- The Sexual Abuse Response Team (SART)
- Differential Response Oversight Committee
- ICWA Representative meetings
- Probation/CWS collaborative meetings
- Dependency Drug Court
- Juvenile Court/Judges and attorneys
- Wraparound Executive Committee
- Katie A. Collaborative
- CalWORKs Behavioral Health

Collaborative case management meetings attended at least monthly by supervisors and social workers are as follows:

- CalWORKs /Linkages
- Alcohol and Other Drug Services/Dependency Drug Court
- Lake County Behavioral Health/Katie A.
- Differential Response
- Wraparound case management
- Interagency Placement Review Team (IPRT)
- Multidisciplinary team meeting with law enforcement/DA/Victim Witness

In addition, CWS consults and coordinates regularly with local Tribes in general through quarterly meetings with the local ICWA representatives and bi-monthly ICWA Roundtable meetings. In specific cases involving tribal families, the ICWA representative for the specified Tribe is always consulted and invited to participate in Family Team Meetings. Whenever possible, children removed from Indian families are placed in tribally approved homes.

The Probation Department partners with many, if not most, of the same agencies identified by CWS. Additionally, Probation also meets with local and State law enforcement and judiciary agencies and participates in local task forces including gangs, narcotics and community recovery.

## **F. SERVICE ARRAY**

CWS collaborates or contracts with other governmental or community-based agencies to initiate and retain services to prevent child abuse and neglect and to assist families who are at risk, or in pre-placement prevention, or in reunification. CWS has developed a referral and exchange of information process with each agency to expedite the intake process for families and children. The majority of the agencies have outside funding, and there are no direct fees to the client or CWS. Most agencies have a formal system to provide documented verification of client participation and progress with case plan goals on a monthly or quarterly basis. This helps ensure the safe and timely return of children to parental custody.

The majority of available services can be accessed and provided during either the pre-placement prevention or reunification phase of a given case. Some agencies employ a sliding scale fee system for prevention services. If the services are court ordered, CWS typically covers expenses. CWS regularly collaborates with and refers clients to many of the services listed below. The County's service array is discussed below, arranged by Prevention Services first, and then Intervention Services second.

### **PREVENTION SERVICES**

Lake County has a number of programs working to prevent child abuse and neglect and to support families and children. Multiple services are listed below, with the first four programs highlighted as strong multi-agency collaboratives.

#### **Collaborative Partnerships**

##### **Family PRO/Differential Response**

Family PRO (Positive Results and Outcomes) has actively served families since 2007. This program, using a differential response model, is a collaborative effort between CWS, CalWORKs, Lake County Office of Education (LCOE), and Lake Family Resource Center (LFRC). Funding from Child Welfare Services, CalWORKs, PSSF Family Preservation, PSSF Family Support, and CWSOIP are braided together to support this program. This program was developed to reduce child abuse and neglect. It utilizes home-based, individualized services with an emphasis on the parent-child relationship, child development, and parent education. Participation is voluntary. CWS obtains consent before referring families to the program. Families with children ages 0-3 and those with domestic violence issues are referred to LFRC. Families with school-aged children or who are Spanish speaking are referred to LCOE. A specialized CalWORKs social worker works with LFRC and LCOE to coordinate Welfare-to-Work activities and connect families with benefits as eligible. The Family Developmental Matrix (FDM) is used as the assessment tool. Case Management is structured around the “Five Protective Factors” to build parent resilience and strengthen families, so that children can remain safely at home. The five Protective Factors are:

- Parental resilience
- Social connections
- Knowledge of parenting and child development
- Concrete support in times of need
- Social and Emotional Competence of Children

DR resources and support for families include, but are not limited to:

- Home-based Nurturing Parenting®
- Developmental assessments
- Advocacy for legal assistance
- School system advocacy
- Basic needs for families
- Health and nutrition education
- Translation assistance and increasing access to services
- Transportation assistance
- Life skills instruction

### **Nurturing Parenting®**

As discussed in the Collaboration section of this report, Lake County partners identified the Nurturing Parenting® Program as the comprehensive parenting program to be provided across agencies. Nurturing Parenting® Programs are a family-centered initiative designed to build nurturing parenting skills as an alternative to abusive and neglectful parenting and child-rearing practices. The nurturing philosophy of non-violent parenting focuses on the development of empathy, self-worth, self-awareness, empowerment, discipline with dignity, appropriate family roles, and age-appropriate expectations of children’s development.

The long term goals are to prevent recidivism in families receiving social services, lower the rate of teenage pregnancies, reduce the rate of juvenile delinquency and alcohol abuse, and stop the intergenerational cycle of child abuse by teaching positive parenting behaviors. Lake County agencies provide a variety of curriculums that address the standard levels of prevention: primary, secondary (intervention) and tertiary (treatment).

Lake County Office of Education coordinates the countywide program, provides facilitator training, and provides classes at multiple locations including elementary school sites, Migrant Head Start, the Department of Corrections, and a home based program as part of their Differential Response program. Their goal next year is to offer the program to all preschools in Lake County.

Lake Family Resource Center (funded by CAPIT) provides Nurturing Parenting® classes for families with Infants and Toddlers and families with School Age children. They also provide classes in the DV shelter and Community classes at the Kelseyville and Lower Lake HUB. Their DR program provides home-based Nurturing Parenting.

Other classes are offered through Child Welfare Services, Tribal Health, and Behavioral Health.

### **CalWORKs Family Stabilization**

Family Stabilization (FS) is a voluntary CalWORKs program, administered by Employment Services, designed to assist families experiencing a crisis or situation that is destabilizing the family and interfering with the adult clients' ability to participate in Welfare-to-Work (WTW) activities. The goal is to increase client success in becoming self-sufficient.

Expanded services offered under the FS program may include:

- Intensive case management by a Social Worker Unit
- Prompt referral to community resources
- Development of individual FS plans for participating families
- Services for family members and/or ineligible, unaided individuals in the Assistance Unit (AU)
- Homelessness assistance
- Increased substance abuse, mental health and domestic violence assistance
- Assistance in transitioning into WTW activities
- Development of family household budget

### **The HUB**

The HUB is a cooperative venture to provide community based services to children and families that directly support children's success in school. The HUB serves as a central location for service providers and allows families greater access to programs and services that support student learning and well-being. With two locations in Lake County, one in Lower Lake and one in Upper Lake, the HUB is a collaboration among the following agencies: Lake County Office of Education, Upper Lake High School District, Upper Lake Elementary School District, Konocti

Unified School District, Lake Family Resource Center, Redwood Community Services, Head Start, Lake County Behavioral Health, LCDSS, Sutter Lakeside Hospital, Healthy Start, and Marymount California University. Core Services include:

- Foster Youth Services—Redwood Children’s Services
- Nutrition Education—Snap Ed, LCHS
- Health Insurance—Tribal Health and LCHS
- Counseling—Tribal Health, RCS and LCBH
- Medi-Cal Assistance—LCDSS
- After School Student Services—RCS and LCOE
- Parent Support—RCS
- Student and Family Services—Healthy Start

## **Education Resources**

### **Healthy Start**

Lake County school sites provide the following services:

#### **Student Support**

- School supplies
- Case Managed Health Care
- Referrals for Priority Placement in School Programs
- Referrals to Community Agency Support

#### **Student School Placement Advocacy**

- Immediate Enrollment Advocacy
- Assistance in Obtaining Birth Certificate and Immunization Records
- School of Origin Advocacy
- Advocacy and Parent Education on School Transportation

#### **McKinney-Vento Services Coordinator**

- Update District Liaisons and Administration on Legislative Provisions
- Advocacy for Student Immediate Enrollment
- Advocacy for School of Origin Placement Issues
- Dispute Resolution on Transportation Issues

### **Safe Schools Healthy Students**

#### **School-Based Therapy and Counseling Services**

The School-Based Therapy and Counseling Program helps students learn to manage feelings of anxiety, depression, phobias, and other emotional or behavioral health issues that may be interfering with school and life functioning. School-Based services provide school aged children convenient access to counseling in the familiar setting of their school. Eligible students must currently attend a school served by the School-Based Therapy and Counseling Program and be motivated, along with their family, to work towards treatment goals.

#### **Educationally Related Mental Health (ERMHS)**

Children may be referred for educationally related mental health services through their school. These services depend on the student's needs, but can include school-based therapy, family therapy, parent counseling and training, behavior support, and case management. These services are conveniently offered at the school site. Students will have an individualized education plan (IEP) and be referred for educationally related mental health services through their school. An assessment will be completed to determine eligibility.

### **Migrant Education**

The Migrant Education Program is a federally funded program designed to provide supplementary educational and support services to children and youth of migrant families, ages 3 to 21 years. Services include identification and recruitment, after school tutorial, assessment, preschool programs, limited medical and dental, emergency food and clothing, Reading Recovery, staff development, and parent education and involvement. Nurturing Parenting<sup>®</sup> classes are provided to the migrant community at the center in Spanish.

### **Health**

#### **Lake County Department of Public Health**

Public Health provides the following services:

##### **Dental Disease Prevention Program**

Education on dental health, safety and nutrition is available through classrooms (preschool to sixth grade) and to all community groups. The program also teaches brushing, flossing, and fluoride rinsing and provides a dental sealant program. Dental screening for pre-school through high school children is provided annually through First 5 Lake and other funding sources.

##### **Immunization Program**

Immunizations are provided on weekdays. The program specifically serves infants, toddlers and school-aged children.

##### **Women's Preventive Health**

Lake County Public Health provides reproductive health care by appointment. The services are intended for low-income women without health insurance.

##### **Maternal Child and Adolescent Health Program (MCAH)**

The Maternal, Child and Adolescent Health (MCAH) programs offer referrals for prenatal, parenting and child health issues. Home visitation is also available for high risk infants.

### **Community-Based and Specialty Clinics**

#### **Lakeside Health Center, Lakeport**

LHC provides integrated primary care, a behavioral health program and Psychiatry. Available languages are English and Spanish. They are located near a bus stop and have a van available for transportation.

#### **Lake County Tribal Health Consortium, Lakeport**

LCTHC provides Individual and family counseling and child-play therapy, Cultural wellness, Support Groups, Therapeutic parent child development program. A van is available for transportation for eligible Native American Lake County residents.

#### St Helena Hospital Clearlake

Clearlake Family Health Center, Clearlake (co-located with the Clearlake Family Dental Clinic) provides primary care and has Clinical psychologists and clinical social workers available. They also operate the Kelseyville Family Health Center in Kelseyville.

### **Services to Native American Children and their Families**

#### **The Lake County Tribal Health Consortium (LCTHC)**

LCTHC provides medical, dental, human services, public health & outreach services. It is located in Lakeport, with a satellite clinic in Clearlake and a specialized Pediatric and Obstetric clinic in Lakeport. Additional programs include:

- Parent-Child Assistance Program (PCAP): Case management-based home visiting model with a focus on preventing substance-exposed pregnancies & births.
- Nurturing Parenting
- Tribal Home Visiting
- 4P's Program: screens pregnant women for drug and alcohol use and, as needed, refers them to appropriate services
- Individual and group outpatient recovery support and relapse prevention counseling

#### **California Tribal TANF Partnership (CTTP)**

CCTP provides career development, life skills workshops, youth services, teen pregnancy prevention program, parenting workshops, marriage promotion and counseling, culturally-relevant support services, and cash assistance.

#### **Local tribes**

The tribes provide an array of other services for tribal families including a preschool, a youth center, Boys' and Girls' Clubs, and parenting classes.

### **Early Childhood Development Programs**

#### **Head Start Child Development Program**

Head Start is a focused, center-based child development program providing healthcare, mental health, nutrition, education, disabilities services, and other services to low income pregnant women and children from birth to age 5. The program has five locations countywide and has Spanish and English speaking staff.

#### **Early Head Start/ Lake Family Resource Center (LFRC)**

Early Head Start provides low-income families with children 0-3 and expectant mothers with home based and center based services. Services include a comprehensive child development

program, prenatal and parent education, parent involvement activities, family fun nights, and comprehensive family services. The program is free to qualified families and has Spanish and English speaking staff.

### **Services for Children and Families with Disabilities**

Redwood Coast Regional Center (RCRC)

RCRC provides services and supports to children and adults with developmental disabilities including: Information and referral, assessment and diagnosis, prenatal diagnostics, early intervention supports and services, lifelong individualized planning, behavioral supports, employment and day services, health and medical services, family support, residential care, and transportation.

### **California Children’s Services (CCS)**

The California Children’s Services (CCS) program is available for children with physically-handicapping conditions. The program provides diagnostic evaluations, treatment, and case management services for income-eligible families.

### **Easter Seals of the Bay Area**

Easter Seals provides services to children aged 0-3 with developmental disabilities and special needs. Services include consultation, early intervention, school-based social skills, and therapeutic services.

### **Programs for Teen Parents**

#### **Adolescent Family Life Project (AFLP)/Cal-Learn Program**

Provided by Lake Family Resource Center, AFLP is an intensive case management program serving pregnant or parenting teens. It focuses on the prevention of poor perinatal outcomes and promotion of early and consistent prenatal care. LCDSS also contracts with Adolescent Family Life Program (AFLP) to provide Cal-Learn services. This program assists pregnant and parenting teens to receive their high school diploma or equivalent. Supportive services include assistance with childcare, transportation, and any other expenses related to participation in the Cal-Learn program.

#### **NEST – Nurturing Education and Skills Training**

The NEST is a long-term residential program for homeless pregnant and parenting youth ages 18-21. The services offered are designed to help young people who are homeless make a successful transition to self-sufficient living and successful parenting. A program provided through Redwood Community Services.

### **Other Community Family Resources**

#### **The Harbor on Main**

Redwood Community Services designed this program to address the needs of transition age youth in Lake County. It provides a learning environment to maximize youth potential through coordinated activities that support independence, such as assistance with Medi-Cal, CalFresh, housing, and health and dental applications.

### **Mother-Wise Program**

Mother-Wise is an initiative to assist new moms with prenatal mood and anxiety disorders, funded in part with a small grant from the Children’s Council CBCAP funds. Mother-Wise provides prenatal information, child development and parenting information, peer parenting mentors, and increases social supports. Weekly groups are available in Clearlake and Lakeport.

### **Foster Grandparent Program**

The Foster Grandparent Program promotes volunteerism of adults 55 and up as tutors and mentors to Lake County youth.

### **Women, Infants & Children (WIC)**

WIC is a nutrition program which provides supplemental food vouchers for low income pregnant, lactating, and postpartum women, infants, and children to age 5 years. WIC also provides nutrition education and counseling, and breastfeeding support services. All services are provided at no charge.

## **INTERVENTION SERVICES**

CWS provides voluntary and court-ordered family maintenance (FM) services when the child can safely remain at home with the provision of these services. The family works with their CWS Social Worker who provides case management, and participates in an array of services described below. However, if a child cannot remain safely at home, the child is placed in out-of-home care and services are provided to the family to support reunification. Families receive a combination of services directly provided by CWS Social Work Staff and those provided by other public and private agencies. CWS social workers assess family needs and broker services for children and families. Service referrals are made depending on the needs of children and parents that are determined in the assessments.

An array of services is provided in-house by CWS staff for families receiving FM and FR services. These include:

### **Assessment**

All families who enter the child welfare system in Lake County receive screenings for services. CWS has specialized social workers who complete mental health/AODS screening for parents and mental health screening for children. The public health nurse completes the Ages and Stages Questionnaire (ASQ) for children aged 0-5. CWS utilizes several screening and assessment tools including the following:

- Alaska Screening tool (AST)

- Adult Adolescent Parenting Inventory (AAPI-2)
- Nurturing Skills Competency Scale-2 (NSCS-2)
- Child and Adolescent Needs and Strengths (CANS)
- Ages and Stages Questionnaire (ASQ)
- Adverse Childhood Experiences Questionnaire (ACE)

### **Family Team Meeting Facilitation**

CWS has trained social workers who provide facilitation of Family Team Meetings (FTM) for all case planning activities. Using the principles of Safety Organized Practice, each family receives FTM's at each decision making point in their case. They occur, at a minimum, prior to each court hearing and more often as needed and determined by the team. FTM participants include CWS staff, any support individuals identified by the parent, and service providers.

### **Parent Education**

As described under the prevention section, there are several parent education models available in the county. CWS will frequently refer families to these programs if a CWS case is not opened. If a case is opened, families will receive a series of parenting education and support provided by CWS staff.

The first intervention in the parenting series is the Parent Engagement Group. The main goal of the Engagement Group is to assist parents in understanding the CWS system, address issues related to anger, grief and trauma, and maintain a period of sobriety so they are ready to fully embrace their parent education.

After parents have successfully completed the Parent Engagement group they are ready to enter Nurturing Parenting® classes. CWS has designed its Nurturing Parenting program for the specific needs of parents whose have an open CWS case and children are under the jurisdiction of the Juvenile Court. The children can be in out-of-home placement or placed with their parents. The classes are held weekly for 20 weeks and are taught by two CWS social workers trained in Nurturing Parenting® facilitation. The classes are taught in 4 week modules with the following topics:

- Appropriate Expectations
- Discipline
- Empathy
- Parent/child roles
- Child Development and children's power and dependence

CWS uses the following Nurturing Parenting® curricula to design the classes:

- Families in Substance Abuse Treatment & Recovery
- Parents & Their School-Age Children 5-11 Years
- Parents & Their Infants, Toddlers & Preschoolers

Parents are assessed using the AAPI and the NSCS and are periodically reassessed as they progress through the program. Nurturing Parenting® Coaching is utilized during visitation by social worker/facilitators.

After successful completion of Nurturing Parenting classes, the parent enters the Parent Empowerment Group. This group is focused on supporting parents as their children transition back into their home.

### **Wraparound**

Implemented in October 2010, Wraparound is a collaboration between CWS, BH, Probation, and Redwood Community Services utilizing foster care funds as authorized by SB 163. The program currently serves 14 youth and their families with the intent to increase to 17 youth in July 2015. The slots are shared by Probation and CWS, and placement decisions are made by the Interagency Placement Review Team. The program utilizes the Wraparound principles with the goal of preserving and strengthening the home environment and increasing a family's capacity to engage natural supports in order for children to continue to live in their home.

### **Family Wraparound**

Family Wraparound is a new program developed through the Title IV-E waiver program. It is a partnership between CWS, Probation and Redwood Community Services. Family Wraparound applies Wraparound principles and philosophy through a family focus instead of focus on an identified client or individual. Therefore a need could be represented anywhere within a family context and not specifically through a child or youth. Family Wraparound is used by CWS to prevent out-of-home placement and to provide after-care services to families who are reunifying, with the goal of shortening time to reunification and to prevent reentry. The Family Wraparound Team works in collaboration with the Family Maintenance social worker. It can either be a voluntary or court-ordered intervention. Family Wraparound is used by Probation to work with families with the goal of preventing youth from reoffending.

Family Wrap focuses on identifying the pressing safety and well-being need, and creating a Plan of Care to address these needs within 12 life domains: Safety, Family, Social/Friends, Emotional/Behavioral, Educational/Vocational, Money, Work, Housing, Health/Medical, Cultural/Spiritual, Legal, and Recreational. Services are individualized based on the family's identified needs and strengths. A significant way of addressing these needs is through referral and collaboration with other agencies and resources. The focus is on connecting these families with services, organizations, and sustainable community supports that will be in place when the family graduates.

### **Substance Abuse Services**

#### **Lake County Behavioral Health/ Alcohol and Other Drug Services (AODS)**

CWS collaborates with AODS to provide substance abuse services to parents. AODS operates two clinics, one in Lucerne and one in Clearlake. CWS and AODS have a long standing screening

and assessment process that ensures parents are quickly engaged in services. The day a parent is screened by CWS an appointment is made with AODS. The goal is for the AODS assessment to occur within a week of the referral. A communication process is in place to ensure appointments are kept and to follow up if appointments are missed. Alcohol and Drug (AOD) counselors conduct assessments with referred parents, and then make a treatment recommendation. Depending on the parent's needs, he or she may be referred to detoxification services, methadone treatment, outpatient or inpatient treatment, and/or 12 step meetings. Social Workers and AODS counselors have a scheduled time each week set aside for casework collaboration.

### **Dependency Drug Court (DDC)**

Parents receiving either CWS Family Maintenance or Family Reunification services who are substance involved and meet specific criteria may participate in Dependency Drug Court. This is a voluntary treatment court whose purpose is to assist parents in addressing their substance abuse issues in order to prevent removal of their children due to abuse or neglect, or to increase their chances of family reunification in the event that removal has already taken place. The program is a collaboration between CWS, Lake County Behavioral Health/AODS, and the Lake County Juvenile and Superior Courts.

### **Hilltop Recovery Services**

This treatment facility serves persons with mental and substance abuse disorders. They provide Suboxone, drug replacement therapy, and substance abuse residential treatment. Hilltop is comprised of:

Men's residential treatment facility in Middletown with 63 beds. It is the only men's residential treatment facility in Lake County. Services include addiction resources, drug and alcohol rehabilitation, counseling and mental health. Groups include nutrition, Nurturing Parenting®, anger management, and job preparedness.

Women's residential treatment facility in Lucerne with 6 beds. Groups include trauma, parenting, helping women to recover, domestic violence, and anger management.

### **Healthy Opportunities for Mothering Experiences (HOME)**

HOME is a program provided by Redwood Community Services. It is designed to be a place for perinatal pregnant and parenting mothers struggling with substance abuse to receive treatment, build community, and nurture opportunities to build connections with their children. The program is intended to improve the health and well-being of women, children and family members and increase family reunification.

### **Stakeholder Feedback on Substance Abuse**

In their focus groups, parents and relative caregivers stated that they would like to see more residential treatment facilities in-county where children can be placed with their parents, similar to a "wrap style" setting. They feel this would help families be more successful long-

term and allow families to remain in their own community with access to their local support system.

Participants at the Stakeholder meeting cited substance abuse, especially chronic and generational substance abuse, as on-going challenges for Lake County.

### **Mental Health Services**

#### **Lake County Behavioral Health-Adults**

LCBH operates two clinics, one in Lucerne and one in Clearlake, that provide mental health services. The agency also operates a drop-in center with transitional housing in Clearlake. The range of services at the County clinics includes screening and assessment for serious mental illness; psychiatry and medication management and intensive case management; individual, group, and family counseling; outreach to older adults, Native American, and Latino populations; home visits; and transportation assistance by arrangement.

Treatment services are limited for CWS parents who do not have a serious mental illness diagnosis. If eligible for Linkages Services, parents can access mental health services through the CalWORKs behavioral health contract.

Probation's focus group identified a need for more resources for treatment of mental health needs of youth and their parents on the probation side; this is a large need identified by staff in most cases and there is limited funding for probation to pay for treatment not covered by Medi-Cal.

Access to mental health services was identified also by stakeholders, parent and caregiver focus groups, and social worker focus groups as one of the biggest challenges and resource needs within the community. A lack of providers, or the turnover in the mental health department, has caused perceived delays in accessing services as well as the challenge for youth to get to know a new therapist. Additionally, caregivers and parents must meet a treatment threshold in order to receive services through county mental health or must seek an outside treatment option.

#### **Lake County Behavioral Health- Children's Mental Health**

Children's Mental Health therapists provide individual and family therapy to children who meet medical necessity criteria for mental health treatment. They work in close collaboration with CWS social workers. All children aged five and older are screened using the CANS by CWS social workers and referred for mental health services as indicated. Mental Health staff use the CANS assessment. Katie A. mental health services are provided for all children who meet the subclass criteria for these services. Child and family teams are established for these families, and the team meetings are facilitated by a CWS social worker, trained in FTM facilitation, and the treatment plan is coordinated by the therapist. Participants in the treatment team meeting include the mental health therapist, the CWS social worker, the family, foster family, and other

service providers. Treatment reviews occur on a quarterly basis and all children are screened every six months.

Lake County Behavioral Health contracts with Redwood Community Services, Children's Therapeutic Services, for additional children's mental health services. RCS is part of the Katie A. Collaborative. As part of their Specialty Mental Health Services, RCS offers Rehabilitation Services as group or individualized on-to-one services for children and youth, and Therapeutic Behavioral Services (TBS).

Social workers report that though there has been increased access to mental health services for child welfare clients under Katie A, as well as more timely assessment and screening for all foster youth, parents and caregivers still have difficulty accessing services or transportation to reach services. Tribal Health was identified as a collaborative partner who has been able to offer in-home, culturally sensitive services to members and to help with removing barriers to client engagement.

### **Domestic Violence Counseling and Shelter Services for Women and Children**

Lake Family Resource Center (LFRC) provides a 24-hour hotline; domestic violence (DV) services including support groups and DV Shelter; counseling and mental health services; and rape crisis services. LFRC has bilingual staff and all services are available in Spanish. Flyers for LFRC services and community events are published in Spanish and English.

### **Foster Youth Services**

The Foster Youth Services program was established to meet the unique academic, emotional and basic needs of foster children. Many foster children perform below grade level, are held back in school, and have lower graduation rates than their peers due to multiple school placements and complex family, social and environmental conditions. The Foster Youth Services Program:

- Provides individualized case management to support academic achievement, attendance and positive school behavior
- Provides high school to college transitional support services
- Provides individual school or community-based tutoring services for foster youth students
- Advocates for foster youths' educational needs
- Advocates locally and state-wide to improve school & child welfare policies
- Facilitates communication and collaboration between school and county agency staff

### **Independent Living Services**

#### **Independent Living Program (ILP)**

Lake County CWS has a social worker assigned as the ILP coordinator. This social worker partners with other community agencies to assist current and former foster and probation

placement youth ages 15-24 in building the skills, self-esteem, and support system necessary to make a successful transition to independent living in the community. Services include monthly ILP workshops that focus on budgeting, nutrition, career planning, continued education, foster youth rights, etc. The Lake County Office of Education Liaisons routinely meet with youth for education/career planning. They work with the ILP social worker to arrange field trips to colleges and trade schools.

### **Transitional Housing Programs**

Lake County CWS offers two transitional housing programs through contracts with Redwood Community Services, Inc.:

- Transitional Housing Placement Program (THPP) is for dependent youth aged 16 to 18 years.
- Transitional Housing Program-Plus (THP-Plus) is for youth aged 18-24 who aged out of foster care and are no longer dependents of the court.

Both of the transitional housing programs meet the state requirements for the given program, providing not only housing but also services to assist youth in the transition to independence. For over a year, no youth have participated in THP-Plus as most are opting to remain in extended foster care as non-minor dependents. Nonetheless, CWS maintains the contract for THP-Plus to serve former foster youth aged 21-24 and to serve youth aged 18-21 who either opt out of or fail to meet the eligibility criteria for extended foster care.

Additionally, CWS offers the Transitional Housing Program-Plus-Foster Care (THP-Plus-FC) for youth aged 18 to 21 who opt to remain dependents in extended foster care and the Supervised Independent Living Placement (SILP) to non-minor dependents on a case-by-case basis, usually for youth attending college or a school program. In the past year, four youth have been in SILPs.

### **SERVICES FUNDED THROUGH PSSF/CAPIT/CBCAP**

**CAPIT** funds Nurturing Parenting® (NP) program classes for the community at large provided by Lake Family Resource Center.

**CBCAP** funds the Children’s Council, which in turn funds Children’s Council meetings; agency collaboration and capacity building; April Child Abuse Prevention Month education and activities; and Parent Partner development and stipends. Direct programs and services funded by the Children’s Council, provided by subcontractors, include the following:

- Mother-Wise addresses post-partum depression and provides support to mothers of newborns through pairing mothers with home-visiting volunteer mentors and through group meetings. Although Mother-Wise volunteers are not professional therapists, the support they provide helps mitigate post-partum issues, helping fill the gap in available mental health services. Finding and training volunteers is a continuing challenge. To mitigate transportation difficulties, groups meet in both Lakeport and Clearlake.

- Easter Seals infant massage training program provides instruction to parents in infant massage to promote parent/child bonding and attachment, reduce infant colic, and improve infant sleep.
- Adolescent Family Life Program (AFLP) bus passes assist youth in AFLP to access transportation to classes and services.
- 4-P's is program for pregnant mothers to provide screening and referrals by health care providers to reduce or eliminate substance use during pregnancy. By preventing or reducing substance use during pregnancy, the program aims to eliminate birth defects and other disabilities, thus reducing one of the risk factors for child abuse and neglect. When screening indicates substance use, clients are referred for services. Creating a "warm hand-off" process has been a challenge.
- Snuggle Nest Project distributes the Snuggle Nest infant sleeping device to make co-sleeping with adults safer and prevent infant injury or death.

**PSSF** Adoptions Promotion and Support component is used in-house to support Family Team Meetings where adoption is the case plan goal or concurrent plan. Also, the PSSF Time Limited Family Reunification component is used in-house to pay for mental health therapy services for parents whose goal is family reunification.

**PSSF** Family Support and Family Preservation components pay for Differential Response (DR) services provided by community partner contractors. DR provides prevention services to isolated families throughout the county through home visiting services and referrals to limited resources. CWS contracted a professional evaluator to design data collection and methods to determine the effectiveness of DR in strengthening families and preventing entry into the Child Welfare system.

## **G. QUALITY ASSURANCE SYSTEM**

### **CWS QUALITY ASSURANCE – GENERAL**

The CWS quality assurance system process utilizes a variety of multi-level staff engagement and technological tools to evaluate ongoing practice, policies, and procedures and to ensure quality planning and delivery of services across the continuum of child welfare.

CWS has a full time Systems Support Analyst position dedicated to the CWS/CMS Help Desk and quality assurance reviews. The analyst randomly reviews individual social worker caseloads in CWS/CMS for quality of documentation, case management, underutilized data fields, and compliance with all regulations. As areas for improvement are identified, training is provided and policies are developed by Staff Services and Systems Analysts.

The Systems Support Analyst provides monthly CWS/CMS Business Objects and SafeMeasures® reports to the CWS Program Managers and Social Worker Supervisors. The reports are reviewed to determine if tasks are completed effectively and in a timely manner, and if

information is being input correctly into CWS/CMS. Strategies are developed to improve outcomes for identified deficits.

The Leadership Team of two Program Managers, three Social Worker Supervisors, a Special Programs Supervisor, a CQI/CSFR Supervisor, and a Staff Services Analyst Supervisor meet weekly to review the court process, schedule group supervision case consultations, administer the schedule for concurrent planning reviews, and discuss practice implications for new ACLs and ACINs. SafeMeasures<sup>®</sup> reports are distributed and reviewed monthly, and data reports are distributed and reviewed quarterly. The Leadership Team provides input for Policies and Procedures (P&Ps) and form updates as needed.

Monthly Child Welfare Division meetings, with required attendance by supervisors, and social workers, are used to inform staff of new P&Ps, changes to forms, and new service programs. Community partners are invited to present training and information about their agencies' services. Analysts and office support staff attend Division meetings when the material presented is relevant to their work.

Social Worker Supervisors facilitate a minimum of two group supervision meetings a month with the staff in their respective units to discuss casework challenges and conduct trainings specific to their units.

All Supervisors conduct weekly or bi-weekly 1:1 conferences with the staff in their unit to provide guidance and support for worker specific casework, competencies and performance issues. Social workers bring their CWS/CMS caseload summaries and individual SafeMeasures<sup>®</sup> reports to review at these meetings.

Case Consultations are conducted for removal of a child from the home, filing of a petition, and recommendations for disposition, status reviews, and 366.26 hearings. The consultations include the primary Social Worker, multiple supervisors, the program managers and/or the Deputy Director as available to insure multiple perspectives and a thorough assessment of the situation that addresses safety, well-being, planning for permanence, ICWA mandates, the appropriateness of the placement, reasonable /active efforts, the effectiveness of services, and parental progress toward their case plan goals.

In advance of every hearing, social workers receive a hearing-specific checklist detailing the noticing, report preparation, and family / case planning engagement responsibilities associated with the hearing. As tasks are completed the social worker initials and dates that item on the checklist. When the hearing documents are approved and ready for filing, the supervisor reviews the case file and signs off on the checklist for quality assurance purposes.

When cases transfer between units (e.g., between ER and FR/FM after Jurisdiction or between FR/FM and PP after termination of services) a transfer staffing is conducted involving the transferring and receiving social workers and supervisors. The transferring social worker completes the checklist for the most recent hearing and organizes the case file in preparation

for the transfer staffing. The transferring social worker's supervisor must sign and date the checklist as an indication of review and approval before the transfer is approved.

In February 2015, CWS created an additional supervisor position for Continuous Quality Improvement (CQI) and the CFSR Federal Case Reviews. Although the review process is barely underway, CWS is finding the process useful for identifying trends that will inform the CQI program and upcoming SIP.

### **COMPLIANCE WITH ICWA**

Child welfare has two written ICWA policies. The 2008 ICWA SWII Duty Statement fell out of use when the practice of assigning all ICWA cases to a specialized worker became impractical due to staff turnover, and the timing and volume of cases. The 2011 ICWA policy and procedure (P&P) is a 66 page document detailing all required practices across the continuum of child welfare services per state and federal law. The P&P was written by CWS staff with input from the tribes.

The 2011 policy promotes efforts to reduce reliance on detention, to keep Indian families together, to ensure the safety of Indian children, to exercise active and reasonable efforts on behalf of Indian children and families, to honor placement preferences, and to secure timely permanence for Indian children.

Because ICWA notices are centralized with a specific social worker, the process is relatively simple to monitor. The social worker responsible for ICWA notices is also the placement social worker, which insures additional consistency for compliance across CWS ICWA practices.

Other practices that promote capacity for monitoring compliance with ICWA are the longstanding practice of participating in a quarterly ICWA Roundtable with representatives from multiple agencies that provide services to Indian children and families and a bi-monthly ICWA Representative Meeting with the seven local tribes.

### **PLACEMENT DECISIONS**

Placement decisions are a collaborative effort that includes, at a minimum, the case carrying social worker, concurrent planning social worker, and social worker supervisors. The exception to this practice is emergency placements that occur after hours; in these instances, the situation is staffed in a group supervision setting to determine the appropriateness of the placement and next steps. CWS also has a quarter-time placement social worker who assists staff in identifying available and appropriate placement options whenever possible.

CWS Staff are trained to consider the full array of available information when seeking placement. Delays in placement based solely on race, color, or national origin of the parent or child are prohibited in accordance with the Multi Ethnic Placement Act.

The Interagency Placement Review Team (IPRT) meets monthly to assess the appropriateness of pending and ongoing placements in a level 12 or higher group home, Intensive Treatment

Foster Care (ITFC), and Wraparound. Group home placements are reviewed every six months while ITFC and Wraparound placements are reviewed every 3 months. At each review, the team assesses the service plan and evaluates the child's progress toward goals that will support a step-down to a lower level of care. The team includes representatives from CWS, Probation, and Behavioral Health. A consensus is required for all initial and ongoing approvals of the placements reviewed. Emergency email approvals for placements occurring between meetings are accepted with the agreement that the case is reviewed at the next meeting.

### **PSYCHOTROPIC MEDICATION**

CWS has a written policy for the JV-220 Psychotropic Medication process. Court approval is required prior to the administration of psychotropic medication to any dependent child in out-of-home care. CWS and the court take the issue of psychotropic medications very seriously.

When children are initially placed or moved, child welfare requires a signed agreement by the caregivers acknowledging their understanding of the requirement for a court order prior to administering any psychotropic medication.

Prescribing doctors prepare initial JV-220 applications for any new prescription and a subsequent JV-220 every 180 days for continuing medications. Subsequent JV220 hearings are scheduled on the court calendar 2 weeks ahead of their 180 day expiration and a letter notifying the prescribing physician of the upcoming hearing is sent 4 weeks prior to the hearing to insure timely renewals. The Public Health Nurse reviews the applications prior to filing to check for inconsistencies and insure compliance with the Guidelines used by the court. The PHN follows up with the prescribing physician for clarification and corrections as needed. The court is mindful of the notice requirements for JV-220 applications and consistently rejects or continues filings that do not meet the requirement for 10 days advance notice. The court generally orders a second opinion review for JV-220s including more than 3 medications or duplicate medications. If the medications subject to a second opinion are continuing medications as opposed to new medications, the court typically signs the order pending the results of the second opinion.

### **CHILDREN'S HEALTH AND EDUCATIONAL NEEDS**

Children in out-of-home placement are subject to routine Child Health and Disability Program (CHDP) reviews to monitor their physical and dental health. SafeMeasures® is used to monitor compliance with timely medical and dental examinations. The Public Health Nurse (PHN) assists with health data entry in CWS/CMS to insure Health and Education Passports (HEPs) contain current information.

Educational needs are assessed and monitored with the assistance of the Lake County Office of Education Foster Youth Services program. An LCOE-FY coordinator spends 4 hours a week in the child welfare office to meet with social workers about individual students and share educational data. The coordinator helps plan and strategize for AB 490 placement changes,

tutoring and mentoring services, and IEPs to promote the specific educational needs of dependent children, regardless of whether they live with their parent or in out-of-home care.

### **EFFECTIVENESS OF SERVICES FOR CHILDREN AND FAMILIES WITH SPECIAL NEEDS**

The PHN completes an Ages and Stages Questionnaire for all children aged 0-5 in out-of-home care to assess their development and identify areas of need for additional assessments and/or services. Children are reassessed at regular intervals to insure ongoing progress with developmental milestones. Initial and ongoing assessments are completed for dependents that remain in their parents care as warranted. With the PHN's assistance children that score below the recommended norm for their age group are referred to an appropriate provider in the community where they are placed or live.

School-aged children are monitored informally and referred for specialized assessments as indicated by their level of functioning at home and school. Child Welfare collaborates with Early Start, Redwood Cost Regional Center, the California Hawaii Elks, and California Children's Services to insure the timely provision of services for special needs children and their families.

### **CHILD AND FAMILY INVOLVEMENT IN CONCURRENT PLANNING**

Concurrent planning efforts are initiated as soon as a child is placed in out-of-home care, though staffing shortages and casework demands sometimes delay this process. Once the emergency response worker has initiated a concurrent planning referral, an adoption/concurrent planning social worker is assigned to the case. The concurrent planning social worker initiates discussions with the family, explaining the nature of and need for concurrent planning efforts, inquiring about possible relative or non-related extended family placements, and—unless contraindicated—advising the family of their right to relinquish their child(ren) for adoption planning. The family is encouraged to actively participate in concurrent planning by providing information for possible relative or NREFM caretakers, including designated relinquishments. Older children are engaged in like manner in identifying placement options with known adults, and in conversations regarding the purposes of concurrent planning.

### **MEETING TPR TIMELINES & COMPELLING REASONS FOR UNMET TIMELINES**

Challenges to timely termination of parental rights include extended reunification services, extensive litigation at numerous hearings, improper notice for the hearing pursuant to WIC 366.26, late filing of adoption assessments, and delays initiating concurrent planning and family finding efforts. Lake County CWS is working to ensure that concurrent planning referrals and efforts are made in a timely manner via training and regular collaborative case conferencing. A venue for monthly conversations with the court has been established and it is hoped that discussion can occur relevant to the delays to TPR represented by extensive and extended litigation. Efforts are underway to hire a staff person dedicated to all responsibilities related to proper notice of hearings pursuant to WIC 366.26.

## **TRANSITIONAL INDEPENDENT LIVING PLANS**

A Transitional Independent Living Plan (TILP) is developed in collaboration between the case carrying social worker and any foster child, age 16 and above, to address transition issues and supportive services. The written policy provides detailed guidance on how to work with youth to accomplish the task of a meaningful TILP. TILPS are updated every six months, signed by the youth and attached to the court report as an addendum to the primary case plan. The Systems Support Analyst runs a quarterly report to identify youth approaching the age of 16 to assist supervisor and manager to provide oversight for compliance with these requirements.

Foster youth with a TILP are eligible to participate in monthly group activities facilitated by the in-house Independent Living Program Coordinator. The youth are also eligible for an ILP Incentives Program that provides monetary compensation for semester grades of “C” or better and \$10 an hour for successful completion of various TILP goals.

The Lake County Office of Education provides a full time Foster Youth Services Transition Specialist (FYS-TS) who works with 11<sup>th</sup> and 12<sup>th</sup> grade foster youth at the local high schools and Juvenile Hall to assist with graduation plans and career or college plans. The FYS-TS also acts as a liaison with high school counselors, psychologists and administrators, and collaborates with child welfare to facilitate trips to college campuses and multi-county events, such as Independent City and Computer Camp.

## **SAFETY ASSESSMENTS**

The ER screener uses the SDM hotline tool to assess safety issues for incoming referrals and determine a response. ER social workers conduct an in-person safety assessment in the process of conducting an investigation for allegations of abuse and/or neglect. When an investigation indicates safety issues that appear to warrant the opening of a case, with or without court intervention, SDM is used in combination with a group supervision conference to verify safety issues and identify the options for intervention that should be made available to the family.

Social workers receive training and support to conduct assessments and develop plans with parents and substitute caregivers on an as needed basis to insure a child’s safety.

Per State law, every case carrying social worker is trained to have a private conversation with each child during their monthly social worker/child contact to address safety issues. Social workers are instructed to include the specifics of these conversations in their CWS/CMS contact narratives so their supervisors and CQI staff can monitor them for content and consistency.

## **REUNIFICATION SERVICE DELIVERY**

Group supervised case consultations and Family Team Meetings are used in combination to address reunification service needs at every stage of a case and in preparation for every court recommendation.

## **FOSTER PARENT-TO-CHILD RATIO**

The standards for foster parent-to-child ratio are determined by the licensing agency for a given home. CWS is not a licensing agency and the Foster Family Agencies are subject to California Community Care Licensing (CCL) standards. The prospective foster parent's application is the basis for a CCL determination of how many foster children are allowed to live in the home. CCL considers the following information when making their determination:

- 1) The caregiver's ability to comply with applicable law and regulations.
- 2) Any other household members including but not limited to children under guardianship or conservatorship, who reside at the home and their individual needs.
- 3) Homes that accept a minor parent and his/her child(ren) shall have such child(ren) included in the home's licensed capacity.
- 4) Physical features of the home, including available living space.

Additionally, no more than two children with or without special health care needs shall reside, even on a temporary basis, in a specialized foster family home with the following exception:

A specialized foster family home may accept a third child with or without special health care needs provided that the licensed capacity, as determined by the licensing agency, is not exceeded, and specific conditions, including a written exception by the placing agency, are met.

## **CAPIT/CBCAP/PSSF QUALITY ASSURANCE**

It is the responsibility of CWS to monitor quality assurance for programs supported with CAPIT/CBCAP/PSSF funds. The CWS CAPIT/CBCAP/PSSF Liaison, Deputy Director, and other staff work closely and meet regularly with the agencies granted these funds. As well, LCDSS has contracted with a professional evaluator since fiscal year 2013/14 to design quality assurance processes for these programs.

Programs and services funded by CAPIT, CBCAP, and PSSF include the following:

- CAPIT funds Nurturing Parenting® (NP) program classes for the community at large provided by Lake Family Resource Center.
- CBCAP funds the Children's Council, which in turn funds Children's Council meetings; agency collaboration and capacity building; April Child Abuse Prevention Month education and activities; and Parent Partner development and stipends. Direct programs and services funded by the Children's Council, provided by subcontractors, include the following:
  - Mother-Wise is a program to address post-partum depression and provide support to mothers of newborns.
  - Easter Seals infant massage training program provides instruction to parents in infant massage to promote parent/child bonding and attachment, reduce infant colic, and improve infant sleep.
  - Adolescent Family Life Program (AFLP) bus passes assist youth in AFLP to access transportation to classes and services.

- 4-P's is program for pregnant mothers to provide screening and referrals by health care providers to reduce or eliminate substance use during pregnancy.
- Snuggle Nest Project distributes the Snuggle Nest infant sleeping device to make co-sleeping with adults safer and prevent infant injury or death.
- PSSF funds are used for Differential Response services, CWS client therapy services, and CWS Adoptions services.

CAPIT funds were granted to Lake Family Resource Center (LFRC) in response to its proposal submitted to a 2009 LCDSS Request for Proposals to provide Nurturing Parenting® (NP) program classes for the community at large. LFRC keeps detailed records of participant numbers, demographics, and attendance on forms designed to capture information required for the annual report. These forms are given to CWS semi-annually for monitoring. Client progress is measured by pre- and post-tests. The pre and post-test evaluations completed by participants contain a section for feedback on the classes. Also, families are always asked for their thoughts and feelings during and after each session in an attempt to review and revise the program structure to meet the needs of the community served. Further assessment of service quality is conducted by the Nurturing Parenting® Oversight Committee, composed of the LCOE Healthy Start Director, who is also the CAPC chair; Health Leadership Network director; CWS Deputy Director; and the Healthy Start Nurturing Parenting® coordinator. The committee meets regularly to assess services, review feedback provided on parent questionnaires, recommend changes to the program to meet community needs, and to determine ways to expand NP countywide. Additionally, LCDSS fiscal staff annually audits LFRC.

CBCAP is granted to the Lake County Office of Education (LCOE) for the Lake County Children's Council (local CAPC). The CWS CAPIT/CBCAP/PSSF Liaison and the CWS Deputy Director attend Children's Council Executive Committee meetings and ensure that all proposals for expenditure of CBCAP funds meet CBCAP requirements. LCOE requires subcontractors to keep detailed records of demographics and number of service recipients, services provided, and any tools used to measure client progress and client satisfaction. LCOE provides the forms designed to capture the information needed for the annual CAPIT/CBCAP/PSSF report to the subcontractors and collects them quarterly to provide to CWS. All subcontractors also report on their programs at the quarterly Children's Council meetings. LCDSS fiscal staff annually audits LCOE's CBCAP expenditures.

PSSF components for Family Support and for Family Preservation are provided to LFRC and LCOE respectively to provide Differential Response (DR) services. Participant demographic and services data are captured on forms collaboratively designed by CWS, LCOE, and LFRC, and provided to CWS quarterly. The agencies meet monthly to review protocols and data, and have worked with a professional evaluator to measure program effectiveness, and to design systems to compare CWS data with DR data, such as reviewing recurrence of maltreatment outcomes for DR clients. Also, DR uses the Family Development Matrix (FDM), which was supported by OCAP. The FDM is administered to the family at specified intervals during the course of

receiving services, with improved scores indicating program effectiveness. In instances where scores didn't improve, the service providers evaluated what services might be lacking and worked to determine other approaches or services to put into place.

Quality assurance for the PSSF Adoption Promotion and Support and the Time Limited Family Reunification components, which are used in-house, is provided by the PSSF Liaison, who works with the social workers to track services and to collect data from CWS/CMS for those cases where PSSF funds are applied.

To date, corrective action has not been required for any of the CAPIT/CBCAP/PSSF funded programs. The CAPIT/CBCAP/PSSF Liaison has the responsibility of monitoring LCDSS contracts for the CWS. All LCDSS contracts contain provisions for reporting requirements, records retention, and audits. LCDSS's policy for audits (program and fiscal) provides for a schedule for notice to contractor of areas needing improvement, contractor response, and creation of corrective action plans. Annual fiscal audits, routinely conducted by LCDSS fiscal staff, ensure that funds are properly expended by contractors and subcontractors.

## Critical Incident Review Process

Lake County currently lacks a child death review team (CDRT). Reviving the CDRT will be one of the strategies in the new SIP due in November 2015. Lake County Public Health tracks child deaths and, in response to three infant deaths in 2014 due to co-sleeping, expanded the Snuggle Nest Project, funded by CBCAP, to distribute infant co-sleeping devices to families.

In the meantime, CWS does have protocols for reviewing child deaths that occur in the County. When CWS determines that a child died or could have died due to abuse or neglect in Lake County, CWS takes the following steps:

- The social worker (SW) who receives the report will immediately inform the following individuals per the Lake County Critical Incident Response Guidelines policy: a CWS Supervisor, CWS Program Manager, CWS Deputy Director, and Lake County Department of Social Services (LCDSS) Director.
- The CWS screening SW will generate a referral for every report of a child fatality or near fatality when there is reasonable suspicion that the event was the result of abuse or neglect. The SW will update the demographic page in CWS/CMS. The SW will also enter, in the Screener Alert box in the CWS/CMS referral, "Child Fatality Referral" or "Near Fatality Report."
- The CWS screening SW will complete the referral and cross-report to the law enforcement agency in the jurisdiction where the death occurred.

- If the deceased child has no siblings and there is no open services case, the screening SW will evaluate-out the referral.
- If deceased child has siblings, the screening SW will create a referral for the siblings.
- Referrals of this nature are made sensitive in CWS/CMS.

If given an Immediate Response or 10-Day priority, the referral is forwarded to the emergency response (ER) Supervisor to assign it. The emergency response social worker will maintain open channels of communication with all persons involved in the investigation.

Following the policy, the CWS supervisor will complete the Child Fatality-Near Fatality County Statement of Findings and Information, SOC 826, to report child fatalities and near fatalities to the California Department of Social Services (CDSS). The supervisor will distribute the SOC 826 to the case file, CDSS, CWS program manager and CWS deputy director. A copy is also maintained in the Fatalities and Near Fatalities binder.

The CWS program manager will confirm all information sent to CDSS in this regard on a quarterly basis.

## National Resource Center (NRC) Training and Technical Assistance

This section is not applicable as Lake County CWS has not used the NRC for training or technical assistance.

## Peer Review Results

### FOCUS AREA

The Peer Review process, conducted every five years, is used in California as an avenue for each county's child welfare and probation to conduct an in-depth qualitative analysis on one specific focus area or outcome measure. This process requires both agencies to conduct a quantitative analysis of each state report outcome measure and, in partnership with the California Department of Social Services, to select the outcome measure which requires a closer look. Lake County CWS selected Measure C1.3, Reunification within 12 months. Lake County Probation selected Measure C3.1, Exits to Permanency.

## **METHOD**

The recent Peer Review was conducted in Upper Lake, California, from February 10 through 12, 2015. Child Welfare social workers from San Benito, Mariposa, Lassen, and Placer Counties and Probation Officers from Calaveras and Nevada Counties participated as peer reviewers. Peer counties were selected to conduct the review based on a review of statewide data showing counties which consistently perform well on the selected outcome measures.

The Peer Review opened on the morning of February 10, 2015, with introductions and training, which included an overview of the C-CFSR, a description of Lake County, identification of the outcomes which would be the focus of the review, and a discussion of County performance and progress on these outcomes. Participating were California Department of Social Services consultants, Northern Training Academy staff (facilitators for the review), and Lake County CWS and Probation staff and administrators. The presentation was followed by training on the interview process and tools for the peer reviewers.

During the three-day review, eight interview sessions were conducted, reviewing six CWS cases and two Probation cases. Cases were selected which the peer review planning team believed would elucidate both strengths and challenges existing in the system which contribute to the county performance on the appropriate outcome measure.

The California Department of Social Services provided standardized tools for use during the Peer Review, based on a review of the literature for best practices relating to each focus area.

Once the cases were identified, social workers and probation officers who were the primary practitioners on the case reviewed the appropriate interview tool to prepare. Four CWS social workers and two probation officers were interviewed. Lake County Probation has two officers responsible for juveniles in out-of-home care, both of whom were interviewed.

Following the completion of interviews, peers were provided time to debrief, during which they analyzed the interview information to identify common themes regarding strengths and challenges of the Lake County CWS and Probation systems. They also provided recommendations for improvement.

On the final day, February 12<sup>th</sup>, all (CDSS consultants, Northern Training Academy staff, Peer reviewers, Probation Officers, CWS administrators, and nearly all CWS staff) gathered for a presentation of the results and recommendations from the Peer Review.

## **SUMMARY OF FINDINGS – CHILD WELFARE**

In the course of their individual case review and debrief, peer reviewers identified and assessed promising practices and barriers/challenges, made recommendations for improvement, and shared promising practices from their own counties on outcome measure C1.3, Reunification within 12 months.

## STRENGTHS

Peer reviewers identified strengths and best practices which successfully impact reunification, both systemically and individually, in several areas of practice.

### Partnerships/services

Lake County CWS has a clearly demonstrated history of collaborating with partner agencies and service providers. The commitment to collaboration and service delivery assists CWS in providing comprehensive and timely services to children and families in Lake County.

- CWS maintains a clearly established collaborative partnership with the Lake County Behavioral Health Department (LCBH), which has facilitated the provision of services to clients. LCBH provides a formalized dual diagnosis group which targets the highest need clients and is strongly supported by mental health partners. Progress of CWS clients is shared between agencies through joint staffing, reports, and other internal methods of communication agreed upon between both agencies.
- CWS is dedicated to providing mental health services to clients; in cases where LCBH is unable to provide therapeutic services CWS will pay for private therapy services.
- CWS maintains a strong partnership with LCBH's Alcohol and Other Drug Services (AODS), which serves many of the adult clients working with CWS. Both agencies have developed means for reporting progress on these joint clients treatment through multidisciplinary team meetings, direct staff communication, and written feedback. When clients are in need of services that are not available through Behavioral Health, CWS has developed additional funding to pay for treatment. Families are more readily able to access services and experience fewer delays in getting into services.
- The Lake County Dependency Drug Court (DDC) provides avenues for both support of and accountability for clients' sobriety. In addition, the DCC program provides comprehensive treatment services. Lake County is fortunate to have a local residential treatment program which allows families to seek treatment without the barrier of having to leave their home and other local services, and supports visitation.
- Lake County CWS leadership is committed to identifying needs or gaps in services and is progressive and proactive in seeking options or changing programs to meet these needs. The use of programs such as Wraparound services, Linkages, and DDC also demonstrate the collaborative efforts with partners to serve families and meet their needs.
- Social workers report that Lake County maintains comprehensive services to address safety, which for a county this size is uncommon.
- Both the Foster Care Educational Liaison and the Foster Care Nurse are co-located on-site at the CWS office, which provides significant increased availability to staff.
- Social workers report, and evidence was found, that their professional judgment is respected and trusted by the court system. This relationship is clearly valued and is maintained in order to provide for best practices with families.

## **Family Engagement**

It is apparent through peer interviews that Lake County CWS is committed to engaging children and families in the child welfare process.

- Social workers report that CWS has established practice around the early and frequent use of family team meetings (FTMs) throughout the life of the case. FTMs embrace the inclusion of the family in the decision making process and actively seek to empower the family to participate in making decisions in their case, which includes case planning and placement decisions.
- Lake County has implemented Safety Organized Practice (SOP) which has clearly made a positive impact on practice by helping social workers to understand both safety and risk and how to achieve safety while supporting the reunification of families.
- CWS has developed a model for parent engagement and services which include both evidence-based parenting classes and early engagement groups. Parents begin by entering a parent engagement group where they receive an overview of the child welfare system, share their story of why they are involved with CWS, and present a letter to the group when they feel they are ready to graduate and move on to the next group. This model offers accountability and readiness to engage in treatment, and involves families in accepting and understanding the reasons they are working with CWS. They proceed to a Nurturing Parenting® group that uses evidence-based curriculum to address parenting, attachment, and other issues the family may be facing. Once parents complete this course and graduate from services, they can move into the Parent Empowerment group, an aftercare parenting support program.
- Social workers strive to engage extended family members in case planning. For example, when faced with limitations or challenges in providing supervised visitation, social workers looked to extended family members to provide supervised visitation for families that had graduated to lower levels of supervision, which is inclusive of the family and offers a more natural setting.
- CWS strives to maintain connections, offer visitation, and provide placement stability to youth in placement. They prioritize placement of youth with relatives and work to support these placements and maintain children with their families. This includes visitation, case management, and strong family finding at the beginning and throughout the life of a case.

## **Staffing**

- Peer reviewers found Lake County CWS staff to be passionate and committed to their work. They are a strengths-based department with a demonstrated commitment to serve families in their community.
- CWS staff maintains extensive knowledge of their clients' cases and have a vested interest in the families' success. CWS social workers provide direct supervision over visitation in the early stages of each case and are very involved with and knowledgeable

about their families. Social workers report being comfortable voicing their concerns to leadership and are proactive in looking for solutions to meet their needs.

## **CHALLENGES**

Peer reviewers identified specific challenges Lake County CWS faces which may increase the likelihood of extended time in foster care or delay reunification.

### **Systemic Issues**

- Social workers report that at times communication between units within the department could be improved. For example, the social workers in the ongoing unit versus the concurrent planning unit are not consistently discussing case updates and changes between the workers or jointly planning where there is overlap.
- Social workers identified a need for a progressive visitation model which would allow for additional visitation schedule options or workers to help support the increased number of visits or more flexible hours. They would also like to see an increase in options for visitations to occur in more natural settings to allow for more typical parent/child dynamics.
- At times, the family team meetings are used to inform the family of the department's decisions, rather than as a collaborative meeting that includes the family in the decision making process.
- Cases/clients are currently being transferred from one worker to another without a clear protocol or process for a smooth transition.

### **Training Issues**

- Additional training is needed for both social workers and foster families regarding concurrent planning and how to have "hard" conversation with parents, relatives, and foster parents when reunification is not possible. Much of this need is due to the recent reorganization of the agency, which has caused staff movement between units. Another change has been establishing an Adoptions unit in the department and integrating it with the Permanency Planning unit.
- Social workers report that almost 30% of the social workers on staff have been there less than a year. This influx of new workers necessitates an increase of supervision, coaching, and training.

### **Court Issues**

- A clear pattern was identified regarding the court and legal culture within the county. Though the court often supported the recommendations of CWS, the judge delayed making many rulings, dragging out hearings and delaying important timelines for reunification. Additionally, a lack of leadership within the courtroom had also led to a very adversarial relationship with the children's and parents' attorneys. With all of these challenges, pressure has increased on county counsel's role in training and representing the child welfare department in court. A clear need was identified to

provide training to Social workers, attorneys, and the court to increase understanding of statutory requirements for permanency and protecting a child’s right to permanency when reunification is failing. Specifically, the court needs to adhere to the timelines for achieving permanency and schedule court hearings within timeline parameters in the Welfare and Institutions Code §300.

- Court process was identified as a systemic issue that would also need to be addressed on a leadership level to change the court culture.

### **Service Gaps**

- Social workers discussed a need for increased opportunities for father engagement within the community and in service provision.
- Transportation options in rural areas are typically minimal and social workers would like to see an increase in services to support participation in court, visitation, and other services. Additionally, offering increased childcare support during services would help.
- There are several high needs areas within the county that have little to no service offerings. In order to offer services in these high need areas, consider providing satellite offices or services in Clearlake or other high traffic areas.
- In several cases that were reviewed, clients needed residential substance abuse treatment that could not be funded through the Dependency Drug Court. Social workers interviewed suggested the county consider looking for expanded funding to support additional spots in residential treatment for clients who do not qualify under the Dependency Drug Court programs.

## **SUMMARY OF FINDINGS – PROBATION**

### **STRENGTHS & CHALLENGES**

Peer reviewers identified several areas of best practices as well as challenges for Probation impacting Exits to Permanency. Because only two cases were reviewed, the sample size made it difficult to identify clear themes; however, the following is a combined summary of strengths and challenges found by the review.

- Caseloads are stable. Lake County Probation boasts very low turnover in its placement unit, and as a result probation officers can carry cases from beginning to end with little to no change in assigned officers which allows for consistency in case management.
- Probations officers were extremely committed to the youth in their caseloads and went to great lengths to access any and all services they could find to serve youth and their families.
- Probation is committed to maintaining permanent connections for youth who are exiting to independent living rather than reunification. Officers strove to connect youth with their parents through visitation; involve parents, when appropriate, in case planning; and use Family Finding to connect extended family and friends to the youth to

create support networks prior to them exiting care or transitioning into Transitional Housing Programs. Currently the Probation Department contracts out its Family Finding through a partnership with Child Welfare.

- Probation officers describe intensive efforts to find absent fathers.
- When family was not an option for placement or as support for youth, probation officers worked hard to develop lifelong connections with other support people in the youth's life. They additionally tried to address attachment issues the youth might be facing, which required dedication from the officer to the youth's success, as well as in seeking out appropriate supports and services for the youth.
- Officers clearly demonstrated that they knew their youth and had a good understanding of the youth's clinical issues. They were proactive in using that knowledge to inform decisions about the case, seek appropriate placements and services, and recommend appropriate options for the youth's exit from care.
- Probation Officers consistently communicated with youth and knew their needs and desires regarding their case plans and long term goals. They worked hard to find a placement for each youth that was a good fit and met all safety and service needs. They also viewed the youth as individuals, allowed them to be themselves, and supported them to achieve their goals.

## **PEER PROMISING PRACTICES**

### **CWS PROMISING PRACTICES**

Peer reviewers were asked to make recommendations to improve outcomes for child welfare regarding reunification by sharing their counties' promising practices. Recommendations identified during the peer review for CWS included:

- Great Beginnings, a promising practice from San Benito combines Parent Child Interactive Therapy with visitation and offers coaching to the parents to help improve the quality of their visits and their ability to parent.
- Continue the use of Safety Organized Practice and offer additional training and coaching to new staff. Consider the use of additional models, such as Safety Circles, as a case planning tool.
- Focus Family team meetings to ensure that families are more involved in the case planning process.
- Due to the success of family placements and the use of extended family as support in helping families reunify, increase use of family/safety networks to support families with visitation, transportation, safety, and aftercare services.
- Continue to increase the use of Family Finding, both at the beginning of a reunification case and throughout the life of a case as part of concurrent planning.

- Develop policies and procedures on graduated visitation model and resources to implement. Also, leverage Foster Family Agencies to support or conduct visitation for families that have lower level supervision needs.
- Provide additional training to social workers on legal mandates, Welfare and Institutions Code, timelines, and court process to help support their timeliness in supporting families in reunification. Additionally, provide training and support for concurrent planning, and communication between ongoing and permanency planning units.
- Increase transportation and housing supports, possibly by providing a satellite office in high need areas of the community, like Clearlake, to support families' ability to access services.

### **PROBATION PROMISING PRACTICES**

Peer reviewers were asked to make recommendations to improve outcomes for Probation regarding Exits to Permanency. Recommendations identified during the peer review for Probation included the following:

- Use or expand use of Motivational Interviewing and case management training to help Probation Officers support youth to identify their goals earlier in the case.
- Use the multidisciplinary team model to make decisions about accessing services. This model should include probation line staff in the decision making process, or the case carrying worker to ensure that all relevant case information is provided to make case decisions.
- Expand CWS/CMS training for Probation staff, as well as training and support on additional case management tools, like SafeMeasures, if available, to help officers and supervisors monitor cases. Also, support review of outcome measures for Probation.
- Offer visitation supports to families to help youth maintain connections, such as providing transportation to family members for youth in group home placements, or bus or fuel vouchers to help families see children placed out of the area. Perhaps provide phone visitation.
- Develop local transitional housing options to support youth who are exiting care. Currently a lack of local placement options means youth have to leave their community and supports to enter these programs.
- Ensure consistent case transfer procedures between workers to help support youth when transitions do occur, such as when an officer retires or when the youth transitions into a Transitional Housing Program with a new case manager.

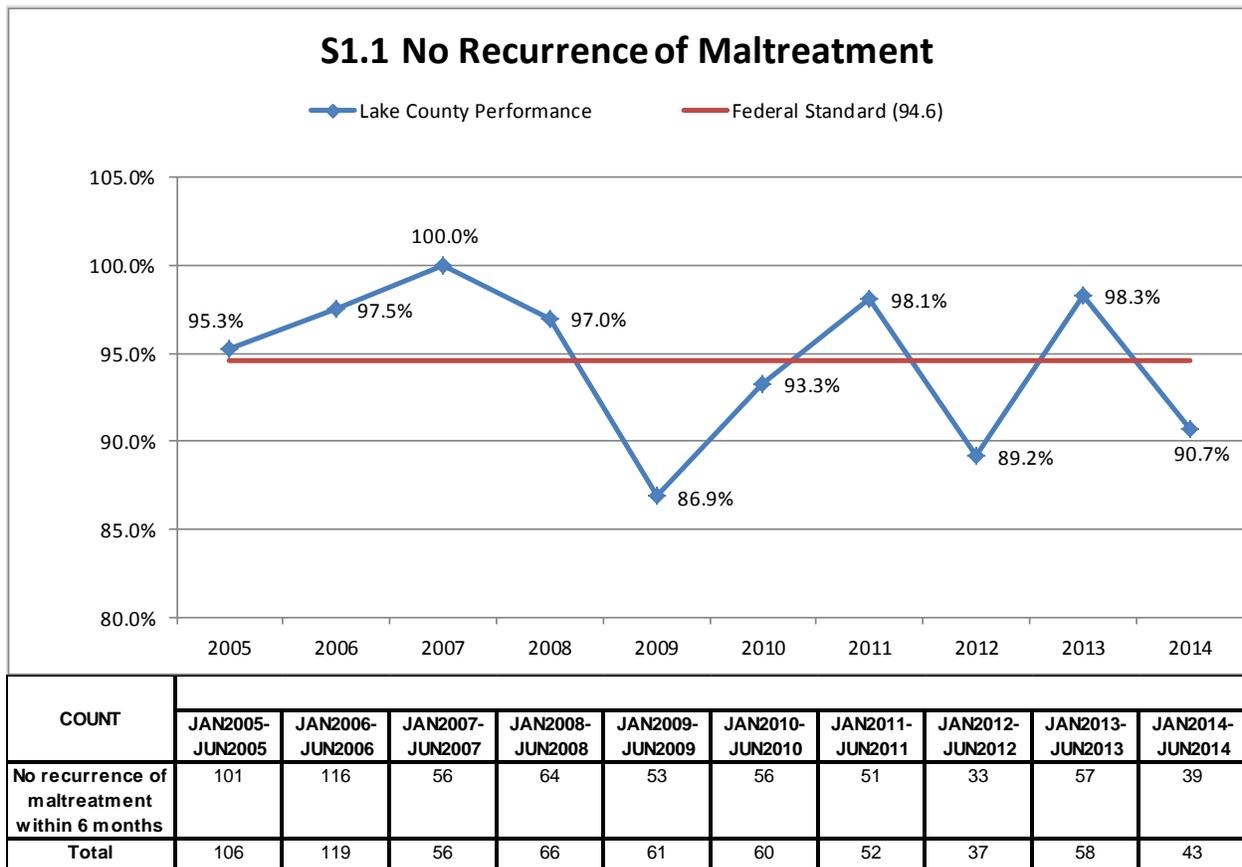
# Outcome Data Measures

## S1.1 NO RECURRENCE OF MALTREATMENT

Of all children who were victims of a substantiated maltreatment allegation during the 6-month period, what percent were not victims of another substantiated maltreatment allegation within the next 6 months? (National standard = 94.6%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction (5-year change)	One-Year Percent Change	Five-Year Percent Change
1/1/2014	6/30/2014	39	43	90.7	↑	-7.7%	4.4%

Citation for the above chart<sup>x</sup>



Citation for graph and chart above<sup>xi</sup>

### ANALYSIS

Data for this measure fluctuates within a range of 4.7 % below to 3.8% above the national goal, averaging 92.8% over 6 years of data. Since the last CSA (2011), the number of children

showing recurrence ranges from one to four individuals per year, which heavily affects percentages in a county with small total numbers of children.

Since 2010, 14 children were victims of recurrence of maltreatment within six months. These children are associated with seven referrals. A case review revealed that a primary allegation for these referrals involved parental substance abuse. Stakeholders identify that recurrence of maltreatment rates in Lake County are impacted by generational challenges of poverty, substance abuse, mental health and homelessness. For a majority of the individuals, services were put in place for in-home support through the use of the Differential Response program, Family Team Meetings, Voluntary Family Maintenance Services or other identified community support networks under a Safety Plan. In all of these cases, when these services failed to adequately protect the children, a subsequent referral was received which resulted in the children being removed from the home by the Tribe or through court intervention. Stakeholders identified that it is difficult to help families break the cycle and have better outcomes, including no recurrence of maltreatment. Additionally, the lack of providers to diagnose more advanced issues, like Fetal Alcohol Spectrum Disorder or disability, and offer appropriate treatment or services in the local area present a challenge in accessing these services in a timely manner. High need coupled with limited services means that county mental health must triage mental health services for families, prioritizing extreme high needs cases unless there is a special situation, such as a suicide attempt.

A secondary identified reason for the recurrence of maltreatment occurred due to data entry issues; specifically, when a referral was opened as a 10 Day investigation and, during that investigation, the children were detained by law enforcement. Although often times the removal occurred within the 10 days and prior to completing contact with the family, when this incident occurred, a new referral in CWS/CMS was generated as an Immediate Investigation and both referrals were substantiated.

To ensure that children remain safe in their homes and to provide services to prevent or eliminate the need for removal after a substantiation, the Emergency Response Unit in Lake County has access to the programs and support under the Service Array. Additionally, Lake County is using RED Team Meetings to evaluate all incoming referrals, the Structured Decision Making (SDM) tool to assess referrals, and Safety Organized Practice (SOP) staffings to evaluate high risk referrals and substantiations.

Stakeholders also discussed what's working well in Lake County. Differential Response services, Nurturing Parenting® classes, educational supports and assessments in coordination with foster youth services, and additional referrals to mental health or AODS as needed are all strengths that have directly impacted and helped to prevent the recurrence of maltreatment.

The County also utilizes Family Team Meetings as a resource to families for case planning, making referrals and involving community partners and offering more support to families. This is an engagement tool that uses the cooperative effort of the group and supports the use of

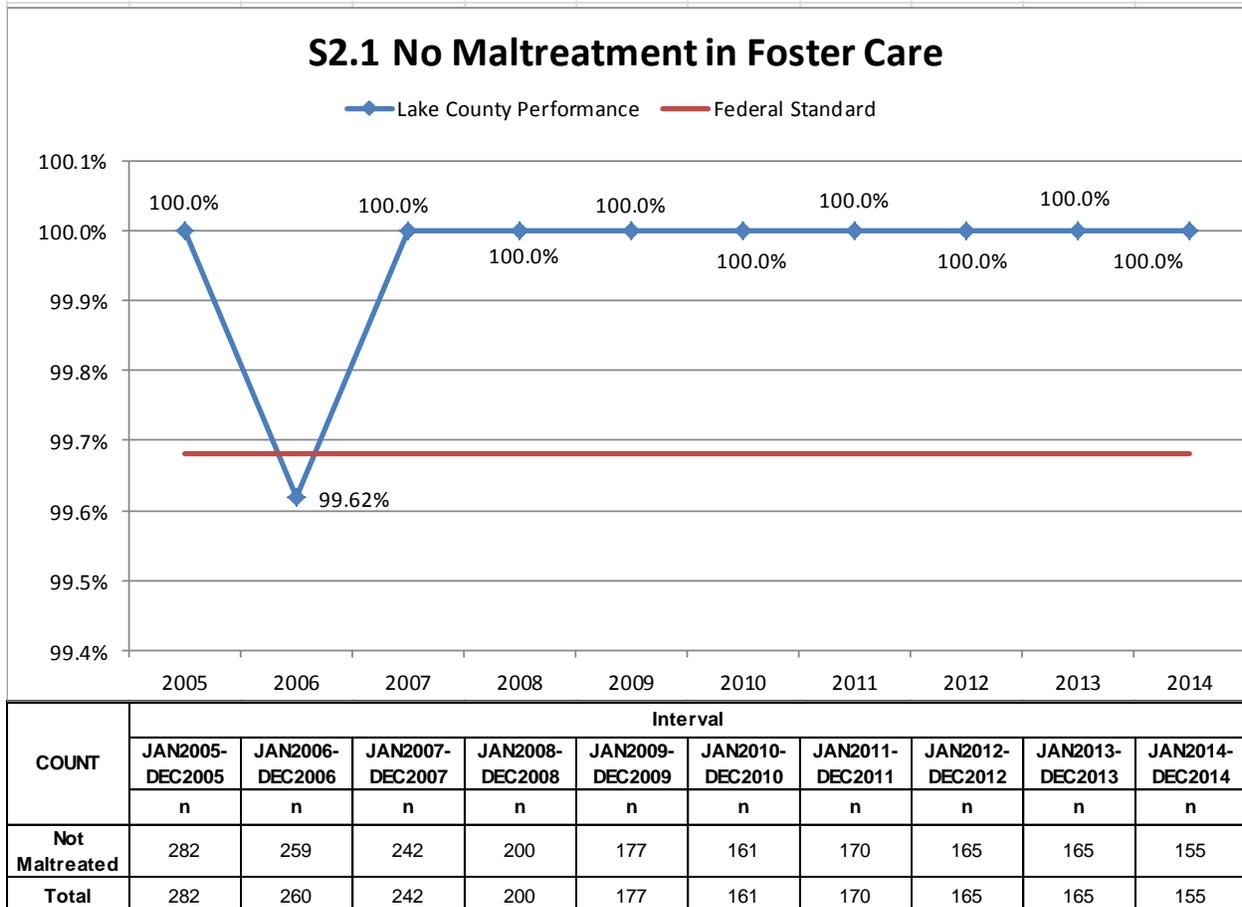
SOP. An additional program that was identified as a strength is the Public Health Home Visitation Program, which offers services on a voluntary basis and makes additional referrals for clients, though stakeholders would like to see referrals made earlier.

To determine if Differential Response services, funded in part by PSSF, are resulting in a reduction of recurrence of maltreatment, CWS has contracted a professional evaluator and is in the process of collecting and analyzing data comparing recurrence of maltreatment in families who did receive DR services to those who did not.

### S2.1 NO MALTREATMENT IN FOSTER CARE

Of all children served in foster care during the year, what percent were not victims of a substantiated maltreatment allegation by a foster parent or facility staff member? (National Standard = 99.68%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	155	155	100.0	=	0.0%	0.0%



## ANALYSIS

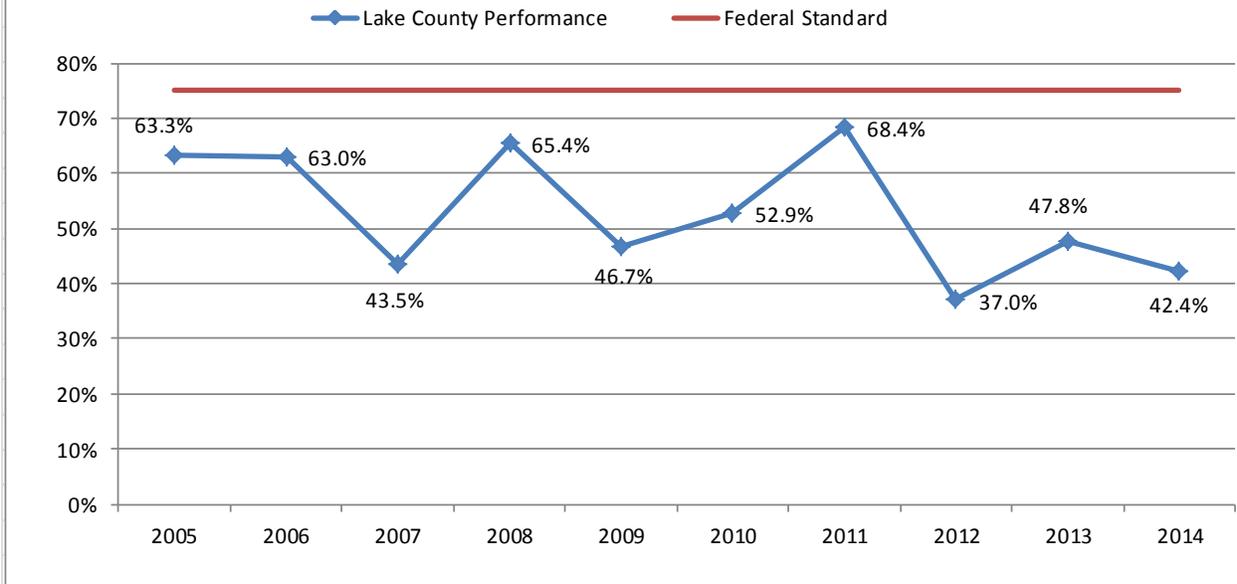
Lake County exceeds the national standard (99.68%) for this measure, and it is one that CWS will continue to monitor. From January 1, 2007 through December 31, 2014, no child was a victim of a substantiated maltreatment allegation by a substitute care provider or facility staff member. The one fluctuation above in 2006 is due to one child involved in Lake County. Given the small number of children in placement, this one incident caused a decrease of 0.38%, putting Lake County's rate below the national goal. Improvements in this area include shared decision making opportunities, such as FTMs, case planning, SOP staffings, and increased communication with agency and community partners.

### C1.1 REUNIFICATION WITHIN 12 MONTHS (EXIT COHORT)

Of all children discharged from foster care to reunification during the year who had been in foster care for 8 days or longer, what percent were reunified in less than 12 months from the date of the latest removal from home? (National standard = 75.2%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	14	33	42.4	↓	-11.3%	-9.1%

### C1.1 Reunification Within 12 Months

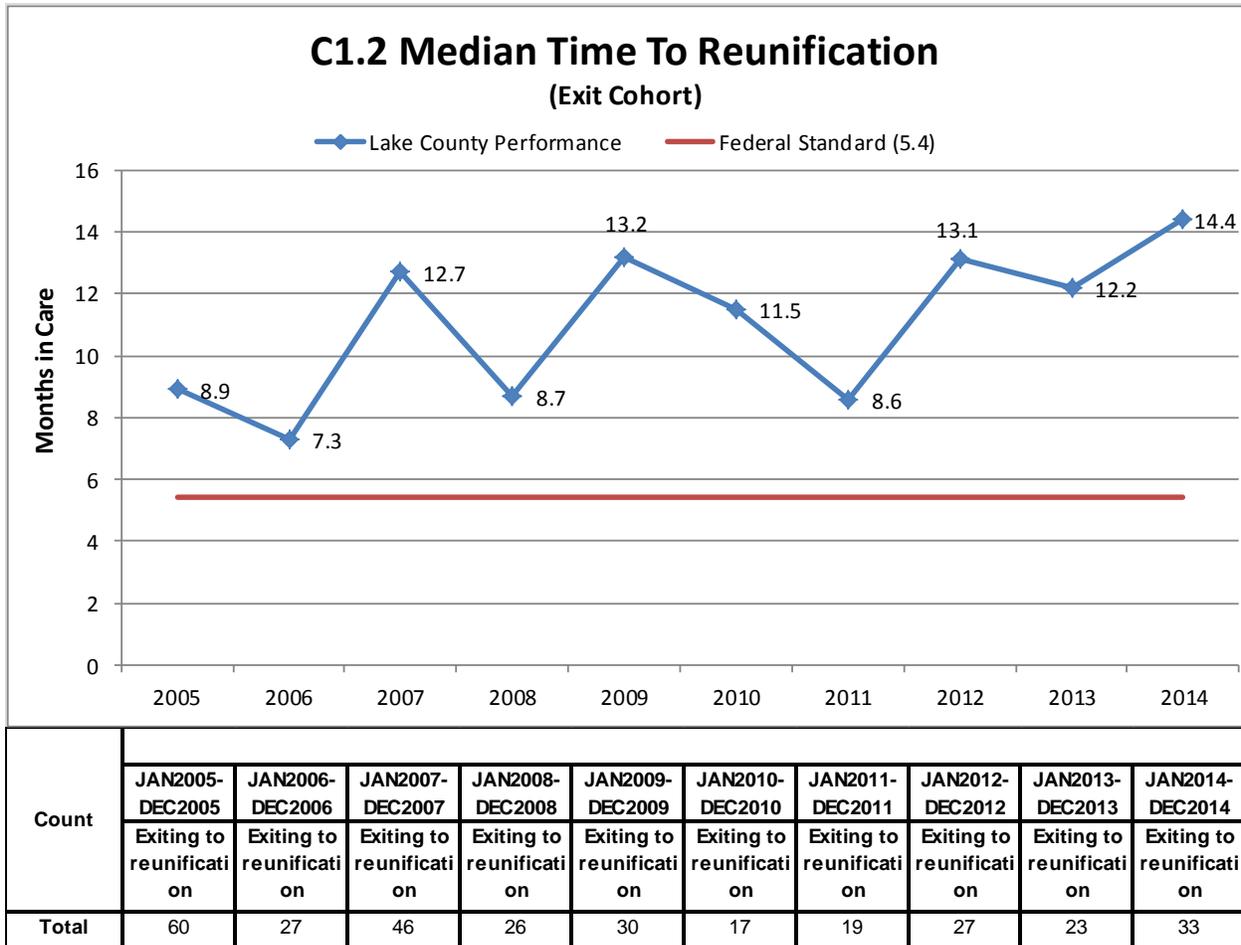


COUNT	Interval									
	JAN2005- DEC2005	JAN2006- DEC2006	JAN2007- DEC2007	JAN2008- DEC2008	JAN2009- DEC2009	JAN2010- DEC2010	JAN2011- DEC2011	JAN2012- DEC2012	JAN2013- DEC2013	JAN2014- DEC2014
	n	n	n	n	n	n	n	n	n	n
Reunified in less than 12 months	38	17	20	17	14	9	13	10	11	14
Total	60	27	46	26	30	17	19	27	23	33

### C1.2 MEDIAN TIME OF REUNIFICATION (EXIT COHORT)

Of all children discharged from foster care to reunification during the year who had been in foster care for 8 days or longer, what was the median length of stay (in months) from the date of latest removal from home until the date of discharge to reunification? (National standard = 5.4- months)

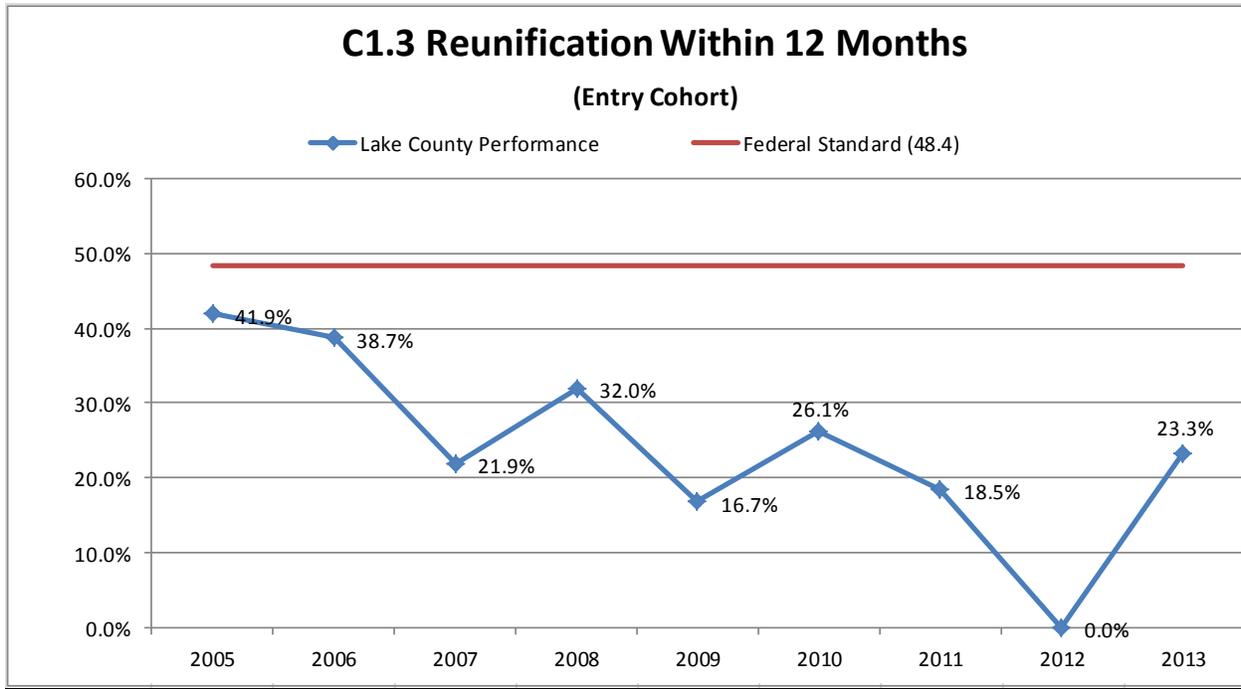
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	N.A.	33	14.4	↑	18.0%	9.1%



### C1.3 REUNIFICATION WITHIN 12 MONTHS (ENTRY COHORT)

Of all children entering foster care for the first time in the 6-month period who remained in foster care for 8 days or longer, what percent were discharged from foster care to reunification in less than 12 months from the date of latest removal from home? (National standard = 48.4%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
7/1/2013	12/31/2013	5	22	22.7	↑	263.6%	-31.8%



COUNT	Entry Cohort								
	JAN2005- JUN2005	JAN2006- JUN2006	JAN2007- JUN2007	JAN2008- JUN2008	JAN2009- JUN2009	JAN2010- JUN2010	JAN2011- JUN2011	JAN2012- JUN2012	JAN2013- JUN2013
Reunified	13	12	7	8	5	6	5	.	7
Total	31	31	32	25	30	23	27	19	30

### ANALYSIS

Lake County’s outcome measures are currently below the national standard for reunification within the 12 months in the entry (48.4%) and exit (75.2%) cohorts, and similarly, Lake County exceeds the national standard for median time to reunification (5.4 months). A case review revealed that since 2010, of the 81 children who did not reunify within 12 months, 29 did reunify within 14 months. Upon analyzing these cases, Lake County found that cases had continuances prior to setting the 12 month hearing and never adjusted the 12 month status review hearing so that the case could be heard within 12 months from jurisdiction or 60 days since removal.

Indications are that the high prevalence of substance abuse issues in Lake County poses severe challenges to timely/rapid reunification. Data from the State of California, Department of Alcohol and Drug Programs suggests that the issue is more pervasive in Lake County than in many other areas of the state. Lake County’s substance use exceed all rates in California, with the rate of admissions to alcohol and other drug treatment in 2008 for Lake County nearly double that of California’s rate. Stakeholders’ concerns about high rates of substance abuse in Lake County are confirmed by the data. Once in foster care, children whose parents have substance abuse problems tend to remain in care for longer periods of time than other children as treatment is generally a lengthy process.

PSSF Time Limited Family Reunification funds are used to pay for mental health services for parents on a fee for services basis. Not only is a lack of mental health services a barrier to reunification, but so is affordability, and this use of the PSSF funds assures that no parent lacks needed services due to an inability to pay. CWS is working with a professional evaluator to design systems to determine how this use of PSSF funding is impacting reunification measures.

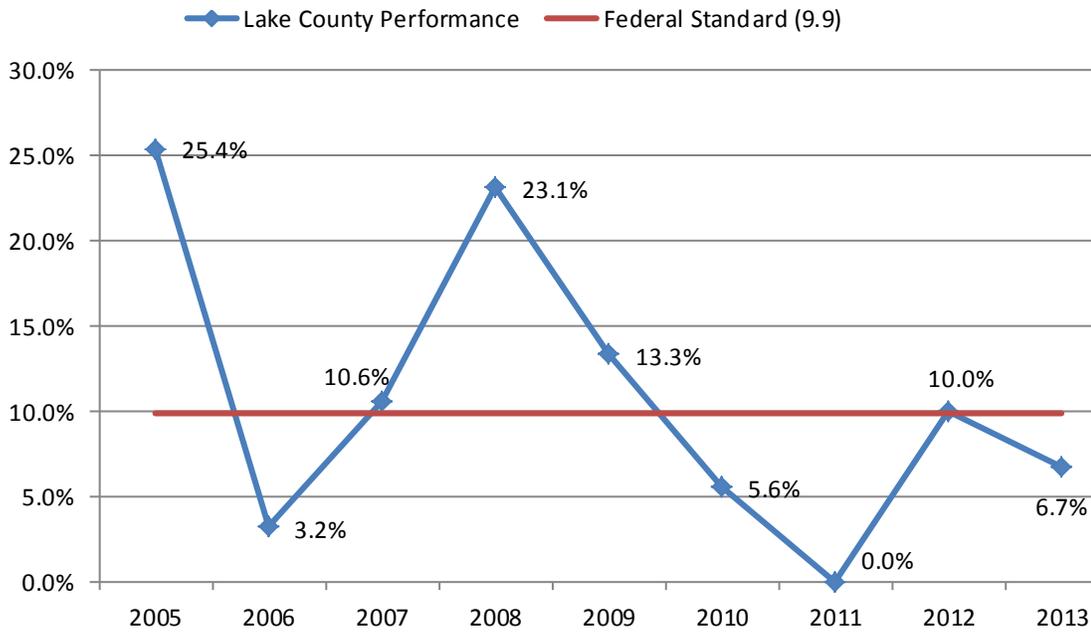
Some recommendations from focus group participants include increasing communication between service providers and families regarding case plan compliance; wrapping services around families prior to the return of children; and increasing court training regarding timelines, cultural sensitivity, services and local challenges. A number of stakeholders advocated for enhancements to Lake County’s existing visitation program. Lake County’s increase of the use of technology such as Skype and FaceTime has been a promising addition to maintaining connections between children in placement and their families. Stakeholders also noted that a lack of cultural awareness and services could slow the reunification process. The Department is actively engaged in ICWA Roundtable and coordination meetings and is currently developing new placement options through the Tribal Resolution process.

#### **C1.4 REENTRY FOLLOWING REUNIFICATION**

Of all children discharged from foster care to reunification during the year, what percent reentered foster care in less than 12 months from the date of the earliest discharge to reunification during the year? (National standard = 9.9%-)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2013	12/31/2013	2	30	6.7	↓	-33.3%	-71.1%

## C1.4 Reentry Following Reunification (Exit Cohort)



COUNT	JAN2005- DEC2005	JAN2006- DEC2006	JAN2007- DEC2007	JAN2008- DEC2008	JAN2009- DEC2009	JAN2010- DEC2010	JAN2011- DEC2011	JAN2012- DEC2012	JAN2013- DEC2013
	Reentered in less than 12 months	18	1	5	6	4	1	.	3
Total	71	31	47	26	30	18	19	30	30

### ANALYSIS

Lake County’s performance in this area has been mixed, but has remained lower than the national standard of 9.9% for most of the last five years. Currently, Lake County is doing better than the national standard for this measure with a 6.7% reentry rate in the most recent data, 01/01/2013 to 12/31/2013. Lake County’s data indicates continual progress in the right direction.

Lake County focused on this outcome measure in the 2011 SIP and has succeeded in reducing the percentage of re-entries. One of the key 2011 SIP strategies was to integrate Safety Organized Practices (SOP) and enhance Family Team Meetings, a process that was continual throughout the SIP time period of 2011 to the present. This practice provides an opportunity for Lake County social workers, service providers, the support network, and family to join together prior to reunification. Lake County believes that these FTMs and integration of SOP has contributed substantially to the continued reduction in re-entries to foster care.

Stakeholders identified the need for continued substance abuse treatment options in the community and the need for funding for in-patient treatment as a service gap. Not only does

drug and alcohol use impede reunification, but given the long term process and relapse risks, it also increases the risk for re-entry into foster care for children. A random case review revealed that, when a parent did not engage with in-patient substance abuse treatment, the risk for re-entry into foster care increased.

Stakeholders identified several best practices strengthening timely and successful reunification efforts including Child Welfare staff's use of the following programs and services:

- Family Team Meetings
- Wraparound
- Linkages
- Safety Organized Practice
- ICWA collaborations
- Internal communication and staffing

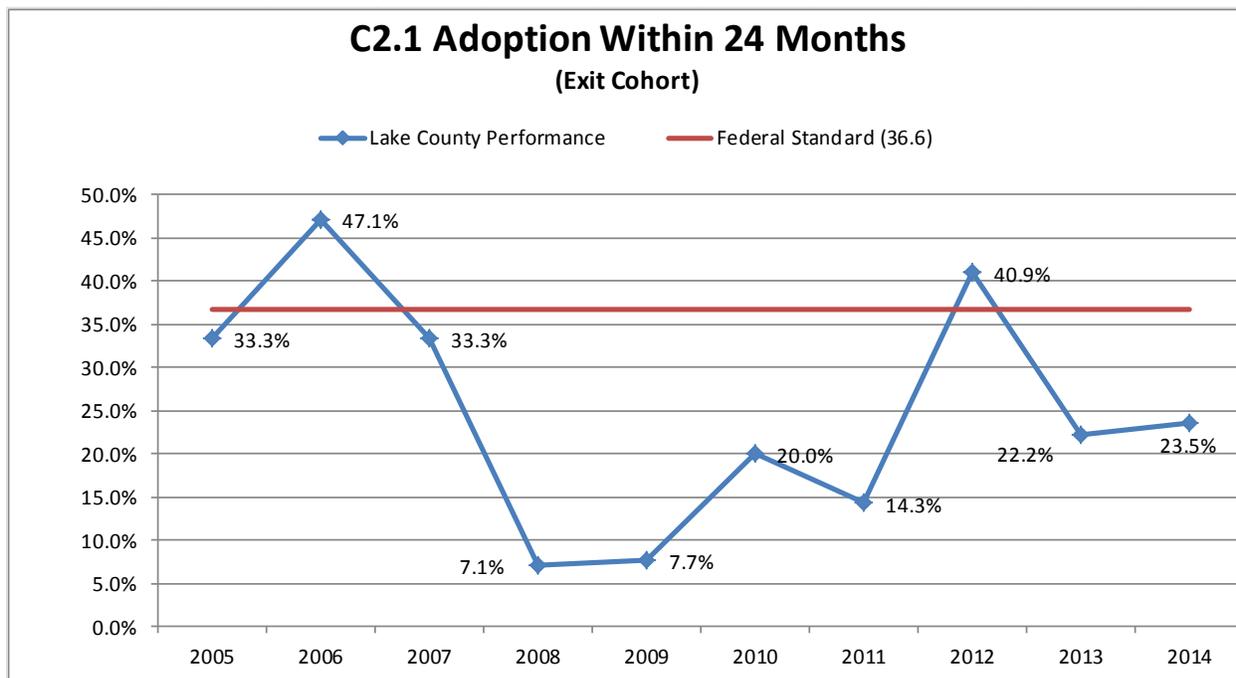
Stakeholders identified some challenges to successful reunification. Though the county works to utilize all available services, they are limited due to the lack of local resources, and families struggle with transportation, child care, and paying for services. Lack of understanding by families and communication with social workers and service providers regarding available services causes delays in families accessing services. Stakeholders feel that there is a need for more education between service providers, social workers and families to better access resources within the community. The legal timelines for reunification can be prohibitive to families' success. A period of 12 months is not always long enough for families to have real and lasting change, especially in the face of substance addiction or generational issues that take longer to address.

During the case review, an identified trend was that the parent's service compliance was not related to a behavioral change. A continual goal for Lake County is to ensure that the necessary changes and supports are in place prior to the return of children. Additionally, by including the family's natural supports, they are better able to support the reunification process. This trend was also discussed by Stakeholders as they felt that communication between service providers does not happen consistently, and tribes do not have a means to communicate with foster families or other providers. Communication with social workers may be inconsistent, and often meaningful discussions are hindered due to information sharing restrictions.

## C2.1 ADOPTION WITHIN 24 MONTHS (EXIT COHORT)

Of all children discharged from foster care to a finalized adoption during the year, what percent were discharged in less than 24 months from the date of the latest removal from home? (National standard = 36.6%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	4	17	23.5	↑	5.9%	205.9%

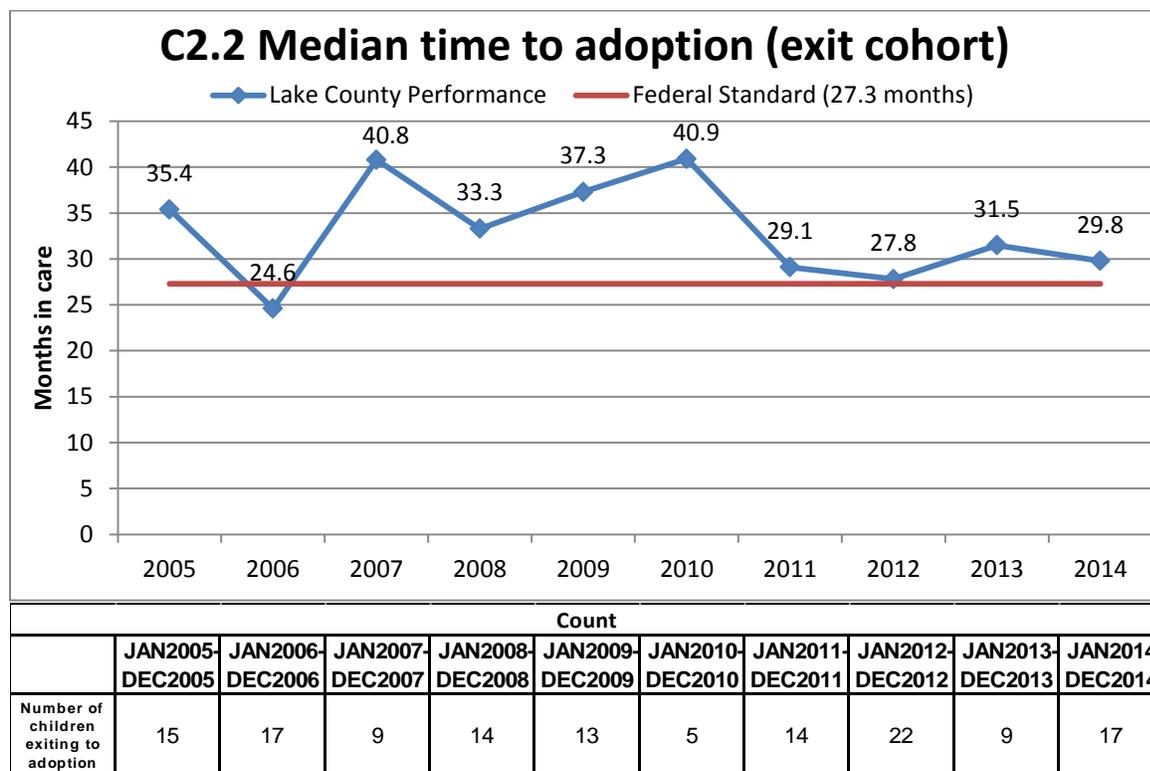


COUNT										
	JAN2005-DEC2005	JAN2006-DEC2006	JAN2007-DEC2007	JAN2008-DEC2008	JAN2009-DEC2009	JAN2010-DEC2010	JAN2011-DEC2011	JAN2012-DEC2012	JAN2013-DEC2013	JAN2014-DEC2014
Adopted within 24 months	5	8	3	1	1	1	2	9	2	4
Total	15	17	9	14	13	5	14	22	9	17

## C2.2 MEDIAN TIME TO ADOPTION (EXIT COHORT)

Of all children discharged from foster care to a finalized adoption during the year, what was the median length of stay (in months) from the date of latest removal from home until the date of discharge to adoption? (National standard = 27.3- months)

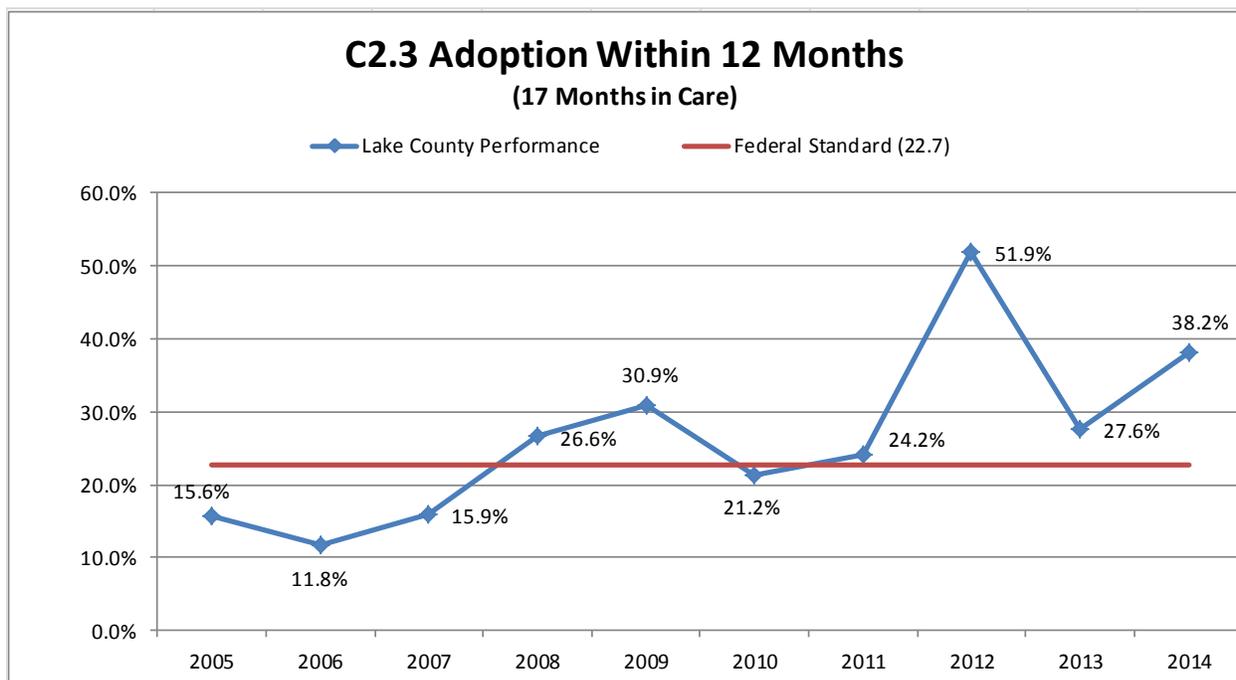
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	N.A.	17	29.8	↓	-5.4%	-20.1%



### C2.3 ADOPTION WITHIN 12 MONTHS (17 MONTHS IN CARE)

Of all children in foster care for 17 continuous months or longer on the first day of the year, what percent were discharged to a finalized adoption by the last day of the year? (National standard = 22.7%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	13	34	38.2	↑	38.6%	23.8%

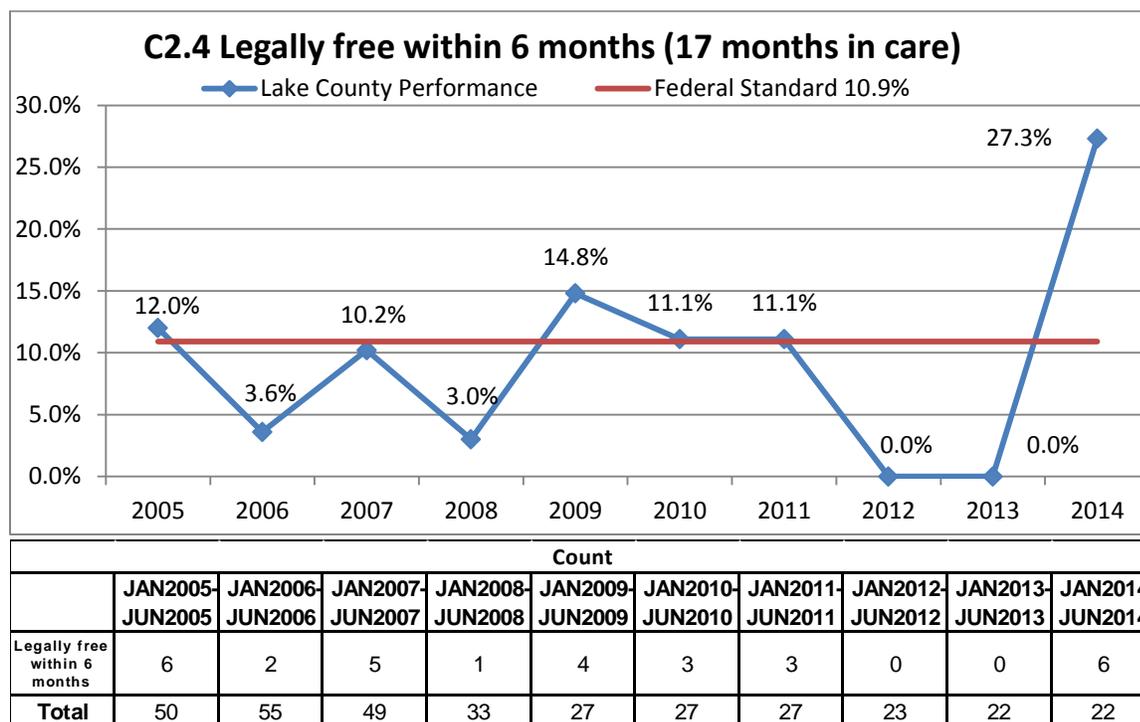


Count										
	JAN2005-DEC2005	JAN2006-DEC2006	JAN2007-DEC2007	JAN2008-DEC2008	JAN2009-DEC2009	JAN2010-DEC2010	JAN2011-DEC2011	JAN2012-DEC2012	JAN2013-DEC2013	JAN2014-DEC2014
Adopted by the end of the year	10	10	13	21	21	14	16	28	8	13
Total	64	85	82	79	68	66	66	54	29	34

## C2.4 LEGALLY FREE WITHIN 6 MONTHS (17 MONTHS IN CARE)

Of all children in foster care for 17 continuous months or longer and not legally free for adoption on the first day of the period, what percent became legally free within the next 6 months? (National standard = 10.9%+)

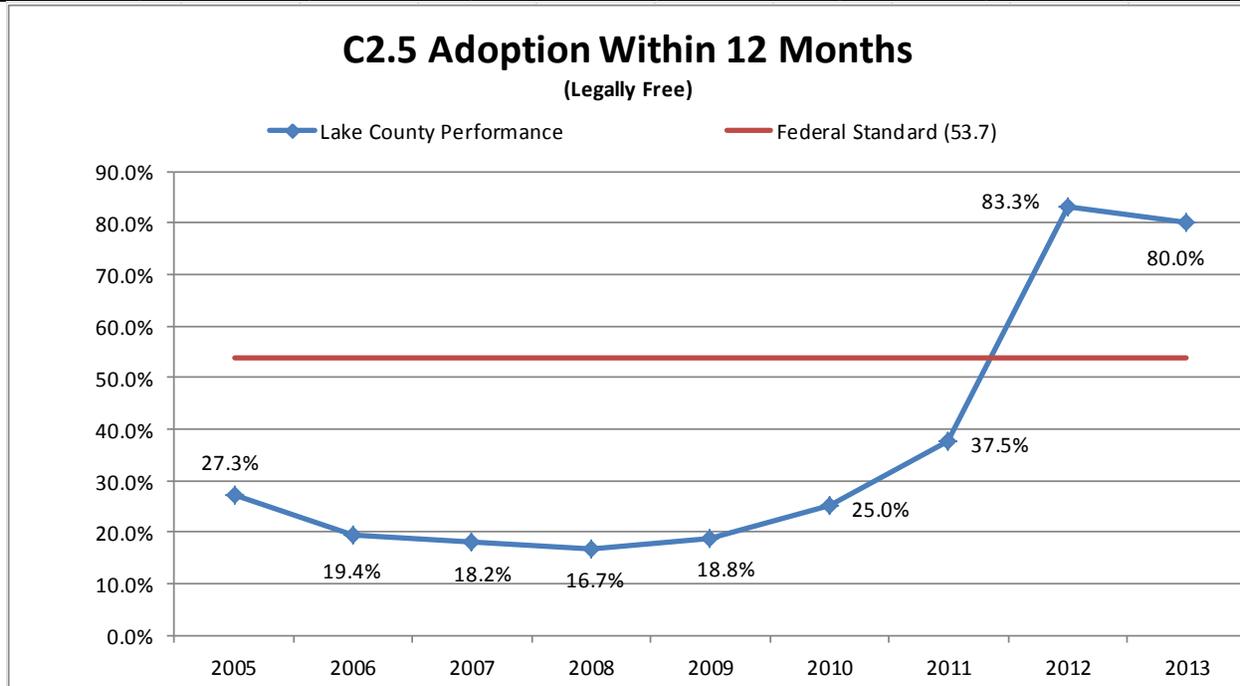
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	6/30/2014	6	22	27.3	↑	N.A.	84.1%



## C2.5 ADOPTION WITHIN 12 MONTHS (LEGALLY FREE)

Of all children in foster care who became legally free for adoption during the year, what percent were then discharged to a finalized adoption in less than 12 months? (National standard = 53.7%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2013	12/31/2013	8	10	80.0	↑	-4.0%	380.0%



COUNT	Interval								
	JAN2005-DEC2005	JAN2006-DEC2006	JAN2007-DEC2007	JAN2008-DEC2008	JAN2009-DEC2009	JAN2010-DEC2010	JAN2011-DEC2011	JAN2012-DEC2012	JAN2013-DEC2013
Adopted in less than 12 months	9	6	4	3	3	6	6	10	8
Total	33	31	22	18	16	24	16	12	10

### ANALYSIS

For the five preceding adoptions outcome measures, Lake County's performance has fluctuated over the last several years, but continues to improve in these areas. These improvements reflect Lake County's strong commitment to strengthening permanency through adoption. Lake County exceeded the national goal for a majority of these measures, including the median time to adoption (C2.2), adoption within 12 months (C2.3), legally free within 6 months (C2.4), and since becoming legally free, adoption within 12 months (C2.5). Stakeholders identified key strengths in Lake County for implementing a greater focus on permanency, concurrent planning, SOP staffing with group decision making, and increased cross training opportunities.

The one area which Lake County has not recently exceeded the national goal is with adoptions within 24 months (C2.1): with 23.5% of children discharged from foster care to a finalized adoption in less than 24 months, this is 13.1% below the national goal.

In an effort to improve Adoptions outcomes, CWS embeds adoptions social workers in Family Team Meetings (FTMs) from the outset of cases to provide concurrent planning. The PSSF Adoptions component is used for FTMs where adoption is the case goal or the concurrent plan, but CWS has not been able to determine how that has affected the adoptions measures.

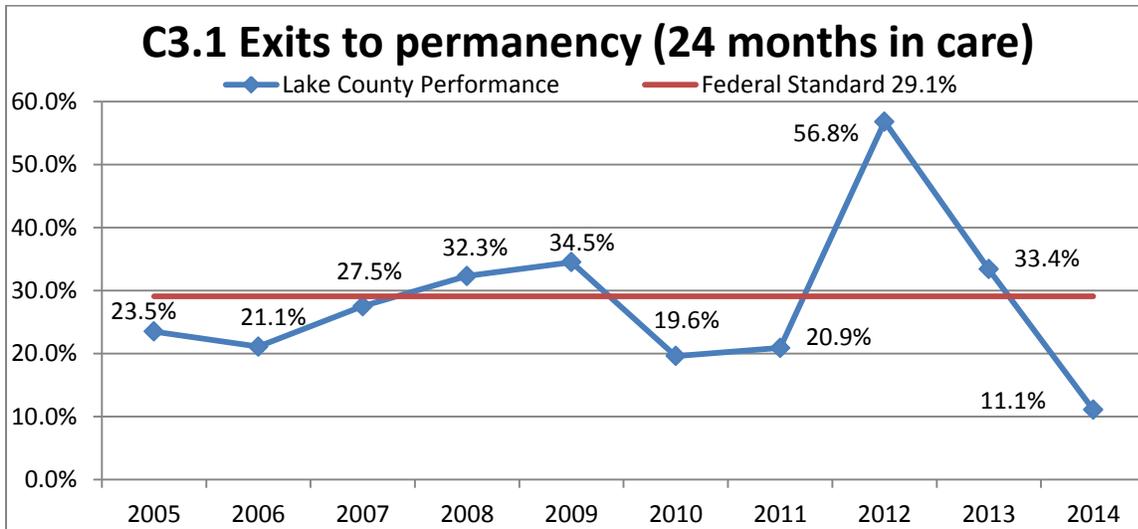
Stakeholders identified that communication between units within Lake County require improvements. Stakeholders recommend increased joint case reviews and group staffing for cases when they are transitioning to a new social worker and/or unit and when there is a change in the service component. Other recommendations from stakeholders include an increased focus on early Family Finding and increased support and communication with extended family and non-related family members. Stakeholders also suggest that providing additional training to adoptive families prior to adoption would help them better understand the needs of the child in their care and address behaviors tied to trauma, as well as a better knowledge of what resources are available to meet these needs.

In an effort to maintain these positive adoption outcomes, Lake County has re-designed and streamlined some processes such as bringing in assistance for post-permanency 366.26 noticing and post-termination of services staff to focus on the 366.26 process.

### C3.1 EXIT TO PERMANENCY (24 MONTHS IN CARE)

Of all children in foster care for 24 months or longer on the first day of the year, what percent were discharged to a permanent home by the end of the year and prior to turning 18? (National standard = 29.1%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	2	18	11.1	↓	-66.7%	-67.8%



	Count									
	JAN2005- DEC2005	JAN2006- DEC2006	JAN2007- DEC2007	JAN2008- DEC2008	JAN2009- DEC2009	JAN2010- DEC2010	JAN2011- DEC2011	JAN2012- DEC2012	JAN2013- DEC2013	JAN2014- DEC2014
Exited to reunification by end of year and before age 18	3	3	6	0	3	0	1	0	1	0
Exited to adoption by end of year and before age 18	9	5	10	20	17	11	8	22	5	2
Exited to guardianship by end of year and before age 18	0	4	6	0	0	0	1	7	1	0
Exited to non-permanency by end of year	7	3	6	4	5	2	2	3	2	2
Still in care	32	42	52	38	33	43	36	19	12	14
<b>Total</b>	<b>51</b>	<b>57</b>	<b>80</b>	<b>62</b>	<b>58</b>	<b>56</b>	<b>48</b>	<b>51</b>	<b>21</b>	<b>18</b>

#### ANALYSIS

Lake County exceeded the national goal for measure C3.1 in 2012 and 2013, but fell below in 2014. In 2014, of the children who did not exit to permanency, a case review revealed that some children had run away and were AWOL a substantial amount of time, had severe mental health and/or behavioral issues which required a higher level of care, and had been in care for an excessive number of years.

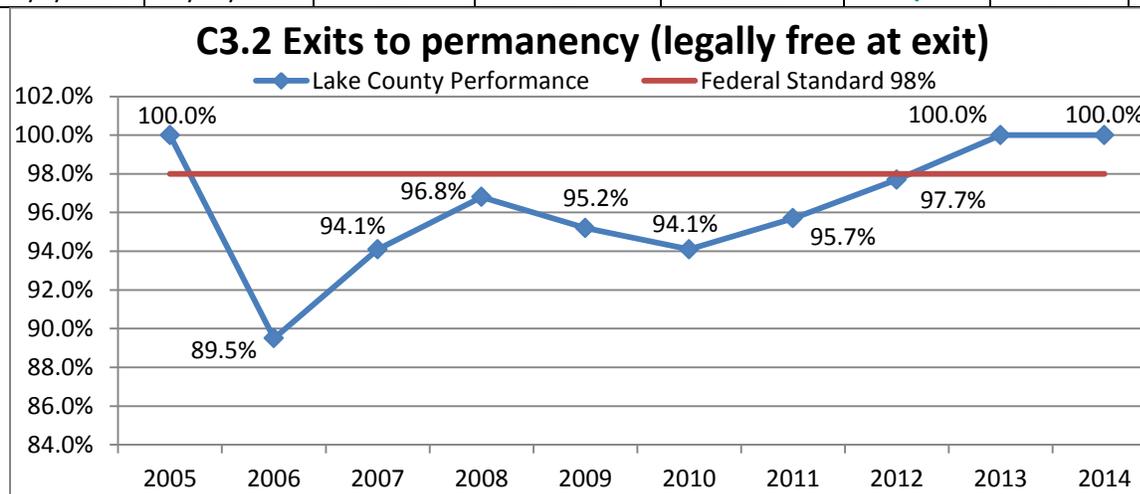
One child exited in 2014 after being in care for 8 years and another child, who remains in care, has been in higher level placements for 11 years. The most recent performance period from the most current data extracted from Children’s Research Center SafeMeasures®, *Lake County, Measure C3.1: Exits to Permanency (24 Months in Care), 04/01/2013 to 03/31/2015*, retrieved 05/05/2015 from Children’s Research Center website: <https://www.safemeasures.org/ca/> indicates continual, positive progress from 2013-2015. The SafeMeasures® data show that, as

of 03/31/2015, Lake County had 8 children exit to permanency (30.8%), which exceeds the national goal of 29.1%.

### C3.2 EXITS TO PERMANENCY (LEGALLY FREE AT EXIT)

Of all children discharged from foster care during the year who were legally free for adoption, what percent were discharged to a permanent home prior to turning 18? (National standard = 98.0%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	17	17	100.0	↑	0.0%	5.0%



	Count									
	JAN2005- DEC2005	JAN2006- DEC2006	JAN2007- DEC2007	JAN2008- DEC2008	JAN2009- DEC2009	JAN2010- DEC2010	JAN2011- DEC2011	JAN2012- DEC2012	JAN2013- DEC2013	JAN2014- DEC2014
Exited to permanency before age 18	15	17	16	30	20	16	22	42	10	17
Total	15	19	17	31	21	17	23	43	10	17

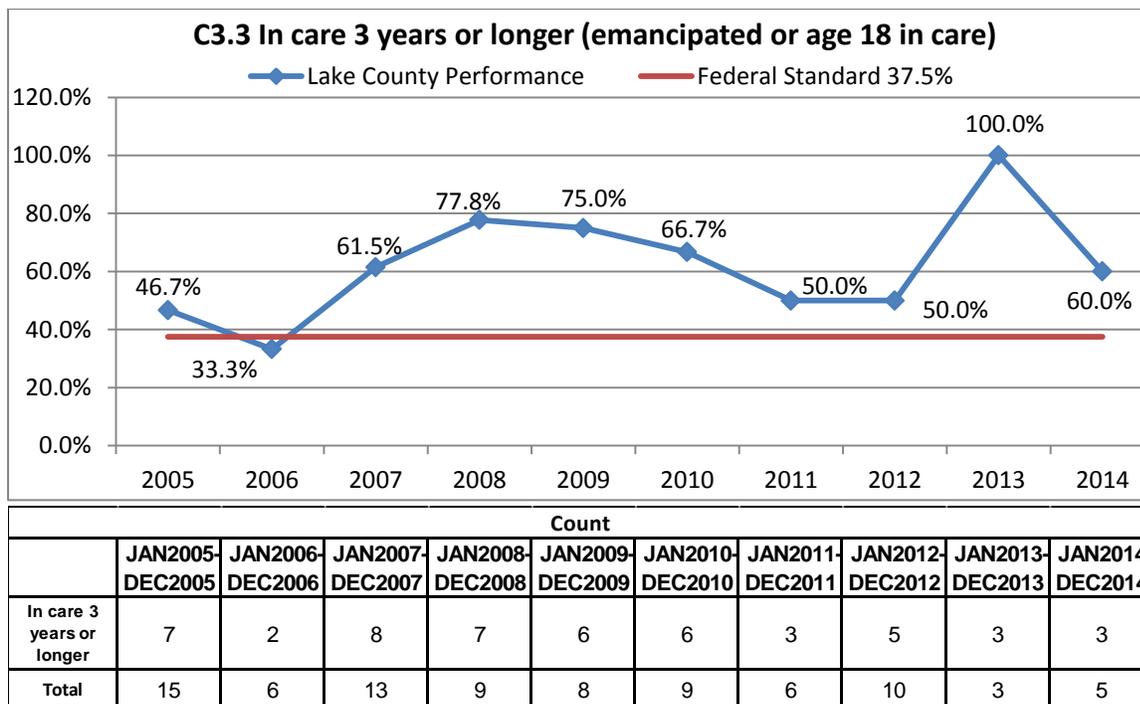
#### ANALYSIS

Lake County's performance in Exits to Permanency, Legally Free at Exit (C3.2) currently exceeds the national goal. Since 2010, Lake County has shown consistent improvements in this area, remaining above the federal standard since 2013.

### C3.3 IN CARE 3 YEARS OR LONGER (EMANCIPATION/AGE 18)

Of all children in foster care during the year who were either discharged to emancipation or turned 18 while still in care, what percent had been in foster care for 3 years or longer? (National standard = 37.5%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	3	5	60.0	↓	-40.0%	-20.0%



## ANALYSIS

Lake County's performance for measure C3.3 has exceeded the national goal since 2007. In recent years, there has been significant fluctuation, which is primarily attributed to the small numbers in this area.

For the three preceding outcome measures for permanency, Lake County's performance has fluctuated over time. Because of the small number of cases being measured, individual cases have a large impact on percentages.

Lake County has continued to increase efforts at finding relatives and other important people to the child to assist in achieving permanency for the child. Lake County also continues to offer a variety of services to transitional age youth designed to achieve and support permanency as well as successful emancipation through the Independent Living Program (ILP). Stakeholders found that Lake County's ILP program is offered in-county and makes referrals for placements out-of-county, encouraging all youth to participate in Independent Living Programs to build needed skills. Stakeholders identified that Lake County social workers, ILP workers or Probation officers complete TILPs with youth to help them prepare for success every 6 months, updating goals and finding individualized plans for each youth. One of these goals is the identification of

lifelong connections and engaging community supports to create informal network supports to prepare youth for independence, life skills, coping skills, etc. Lake County has the Transitional Housing Placement Program (THPP) and Transitional Housing Program-Plus (THP-Plus) program for foster youth. A majority of Lake County youth who emancipate from foster care opt into the AB12 Extended Foster Care program. Since 2012, fifteen of the twenty youth who emancipated (75%), entered the Extended Foster Care program at least once. Additionally, a case review of the five cases in which they did not choose to go into Extended Foster Care, there is documentation that the program and their eligibility to re-enter the program was discussed with the youth prior to the case closing.

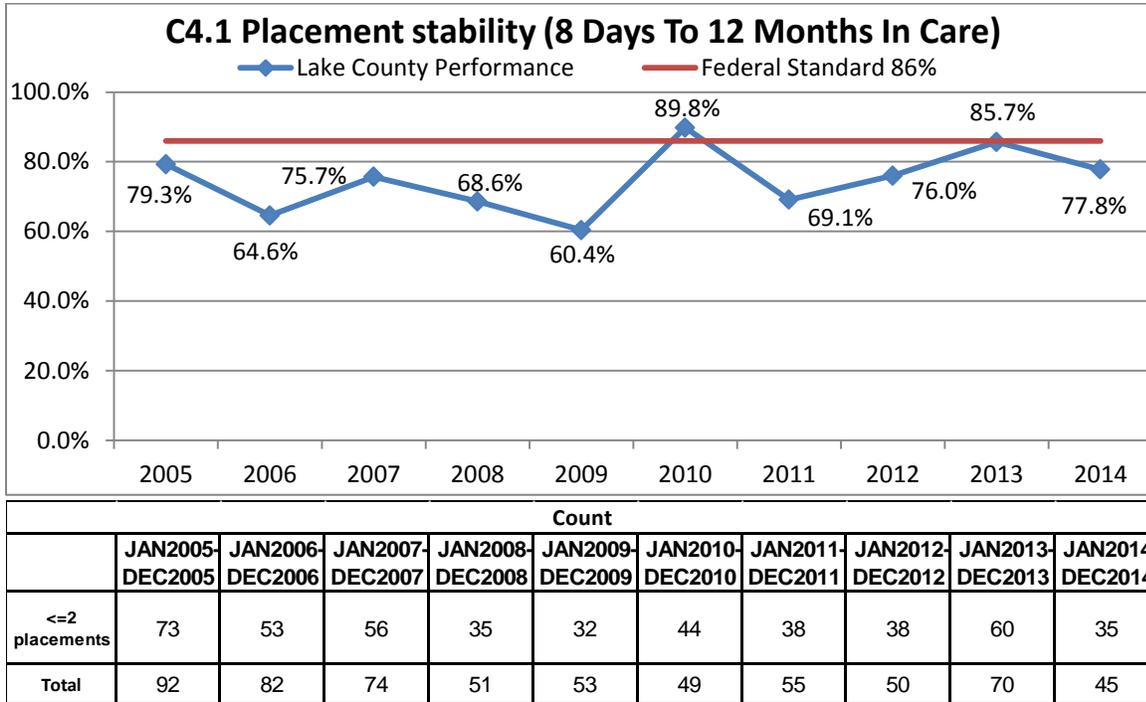
Stakeholders identified several services or practices that could help youth have better permanency outcomes. One of the primary identified needs was mental health, and the expansion of trauma informed services and mental health interventions would help to build a better network to help support youth after exit from care. Increased access and support to get mental health treatment when crises arise, and offering youth priority treatment may help to stabilize youth prior to the crisis evolving. Increased engagement of ILP or aftercare program and providers, like mental health, to better serve this population would also expand the aftercare network.

Other suggestions were to increase recruitment, training and supportive services for resource families, relative and non-relative caregivers, and foster/adoptive parents to improve placement stability and the quality of care and to improve retention of these families. Whenever possible, place siblings together, and offer relative and siblings visits.

#### **C4.1 PLACEMENT STABILITY (8 DAYS TO 12 MONTHS IN CARE)**

Of all children served in foster care during the year who were in foster care for 8 days to 12 months, what percent had two or fewer placement settings? (National standard = 86.0%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	35	45	77.8	↑	-9.3%	28.8%



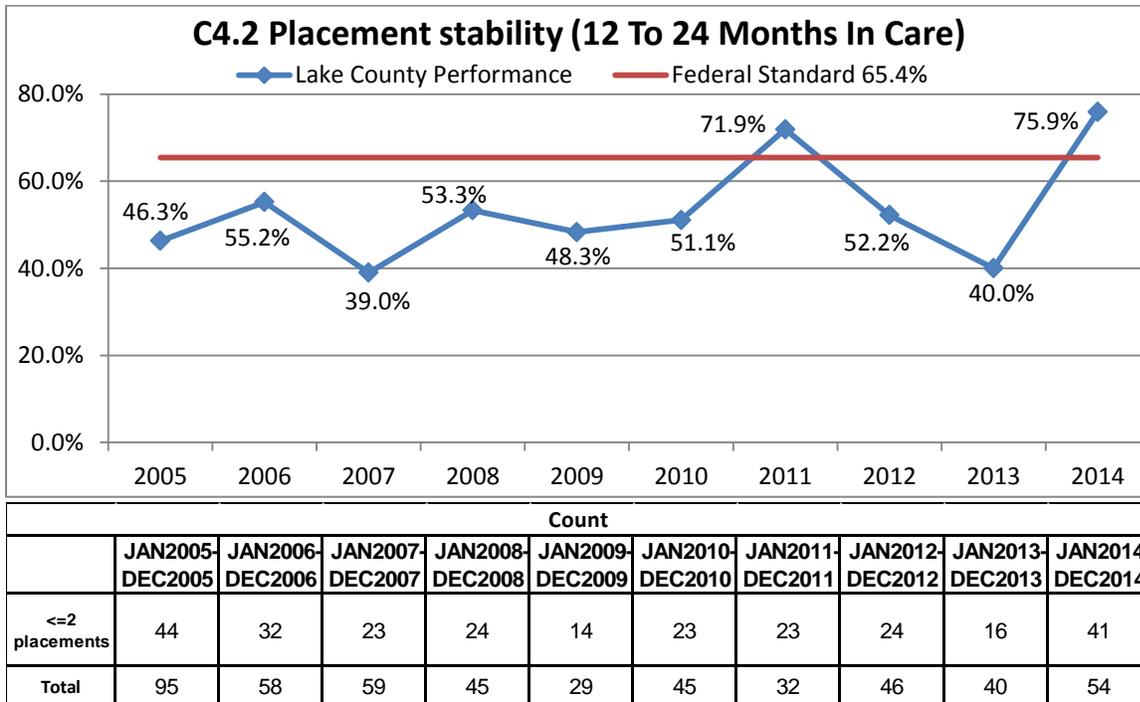
#### ANALYSIS

The most recent performance period from the most current data extracted from Children’s Research Center SafeMeasures®, *Lake County, Measure C4.1: Placement stability (8 days to 12 months in care), 04/01/2013 to 03/31/2015*, retrieved 05/05/2015 from Children’s Research Center website: <https://www.safemeasures.org/ca/>, indicates continual progress in the right direction. The SafeMeasures® data show that, as of 03/31/2015, Lake County had 45 children with two or fewer placements (81.8%), which is below the national goal of 86%, but does indicate continued improvement in this area.

#### C4.2 PLACEMENT STABILITY (12 MONTHS TO 24 MONTHS IN CARE)

Of all children served in foster care during the year who were in foster care for 12 to 24 months, what percent had two or fewer placement settings? (National standard = 65.4%+)

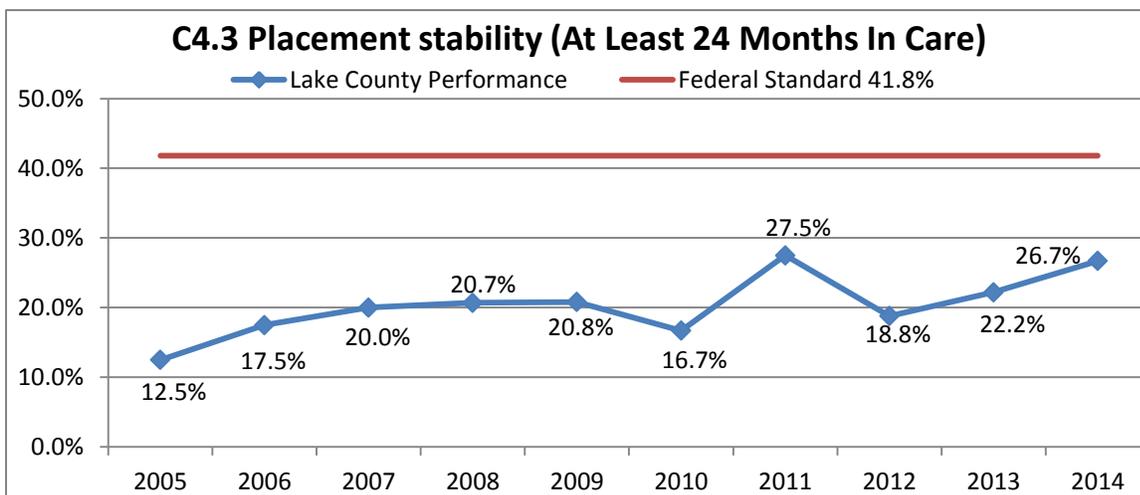
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	41	54	75.9	↑	89.8%	57.3%



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

Of all children served in foster care during the year who were in foster care for at least 24 months, what percent had two or fewer placement settings? (National standard =41.8%+)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	12	45	26.7	↑	20.0%	28.3%



	Count									
	JAN2005- DEC2005	JAN2006- DEC2006	JAN2007- DEC2007	JAN2008- DEC2008	JAN2009- DEC2009	JAN2010- DEC2010	JAN2011- DEC2011	JAN2012- DEC2012	JAN2013- DEC2013	JAN2014- DEC2014
<=2 placements	10	18	19	17	16	10	19	9	8	12
Total	80	103	95	82	77	60	69	48	36	45

## ANALYSIS

The most recent performance period from the most current data extracted from Children’s Research Center SafeMeasures® data, *Lake County, Measure C4.3: Placement stability (at least 24 months in care), 04/01/2013 to 03/31/2015*, retrieved 05/05/2015 from Children’s Research Center website: <https://www.safemeasures.org/ca/>, indicates continual progress in the right direction. The SafeMeasures® data show that, as of 03/31/2015, Lake County had 16 children with two or fewer placements (31.4%), which is below the national goal of 41.8%, but does indicate continued improvement in this area.

In all measures dealing with placement stability, Lake County has continued to make positive strides in these areas, but still has room for improvement. The data reflects the difficulty in finding a stable placement for some children. These measures do not take into account the emergency placement of children into foster or relative care which results in a period of assessment of the child and family’s needs. This often necessitates movement in those early stages. Additionally, the measures do not take into account the social worker’s efforts to move children to a least restrictive setting, such as from a group home to a foster family home, and does not take into account placements which were successful after more than two changes.

Stakeholders identified areas that represent challenges or barriers to placement stability, including lack of placement resources, a deflated economy, and the culture of generational poverty. The County lacks a sufficient number of quality foster parents. Many families are not adequately trained or supported and are not prepared to support youth with trauma issues, so when difficult behaviors arise, they often give notice and interrupt placement stability. Additionally, many of the foster parents are not sure of their level of commitment to a child, and are not always able to be a concurrent placement, adding to possible placement moves. Many of the behavioral issues that children exhibit may be due to trauma and mental health, and increased treatment or supports for these children and their families are needed.

Stakeholders discussed that mental health and behavioral issues are often tied to disruption in placement. Many of these behaviors are tied to developmental delays and trauma impacts from prenatal substance abuse that cannot be diagnosed when children are very young. Many adoptive families that take placement of children do not anticipate possible challenges that arise later in life for these children. These families are often unprepared for these challenges and may struggle to maintain children in their placements.

The stakeholders agreed that when looking at concurrent planning, Native American children have the added involvement of the Tribes under ICWA. Early tribal involvement in the case can

help to promote better placement matching early in the case and prevent later placement moves when the Tribe and CWS do not agree on the concurrent placement. Native families face additional challenges in accessing services, often needing to go out-of-county for assessments and to receive services through Tribal Health programs.

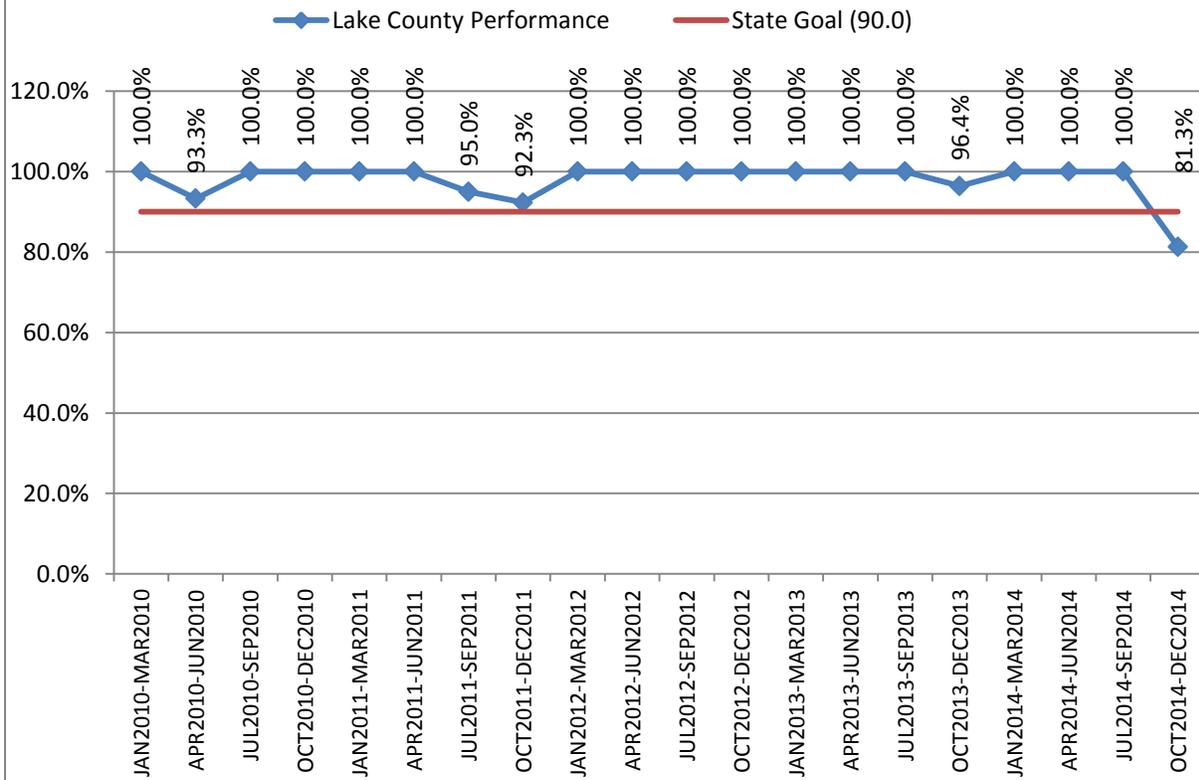
Stakeholders and CWS staff report that identifying relatives early in a case and involving ICWA and the Tribe prior to placement also contribute to placement stability. According to CWS staff, barriers to relative placement include strict regulations, economic difficulties, and the lack of a clear procedure for relative placements; these issues hinder placing children immediately with relatives. Lake County has been hit hard by the economy. Lake County's median household income is about half that of California's and the County has a 25% poverty rate. This can directly affect successful placement early in a case, such as relatives not having enough housing space to accommodate the placement of relative children. CWS is focusing on increasing the ability to assess and assist relatives in preparing their homes for the children quickly, which will decrease the need for other emergency placements. CWS will also be integrating additional licensing of homes, which will allow for better matching of children to their placement home so that they can remain stable and work with relatives around the regulations for foster placement.

**2B PERCENT OF CHILD ABUSE/NEGLECT REFERRALS WITH A TIMELY RESPONSE**

**IMMEDIATE RESPONSE COMPLIANCE**

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
10/1/2014	12/31/2014	13	16	81.3	↓	-15.7%	-18.8%

## 2B Timely Response (Immediate)



COUNT	Jan 10-10	APR 10-10	JUL 10-10	OCT 10-10	JAN 11-11	APR 11-11	JUL 11-11	OCT 11-11	JAN 12-12	APR 12-12	JUL 12-12	OCT 12-12	JAN 13-13	APR 13-13	JUL 13-13	OCT 13-13	JAN 14-14	APR 14-14	JUL 14-14	OCT 14-14
	Timely Response	19	14	24	12	19	8	19	12	13	16	9	22	23	21	21	27	23	23	30
Total	19	15	24	12	19	8	20	13	13	16	9	22	23	21	21	28	23	23	30	16

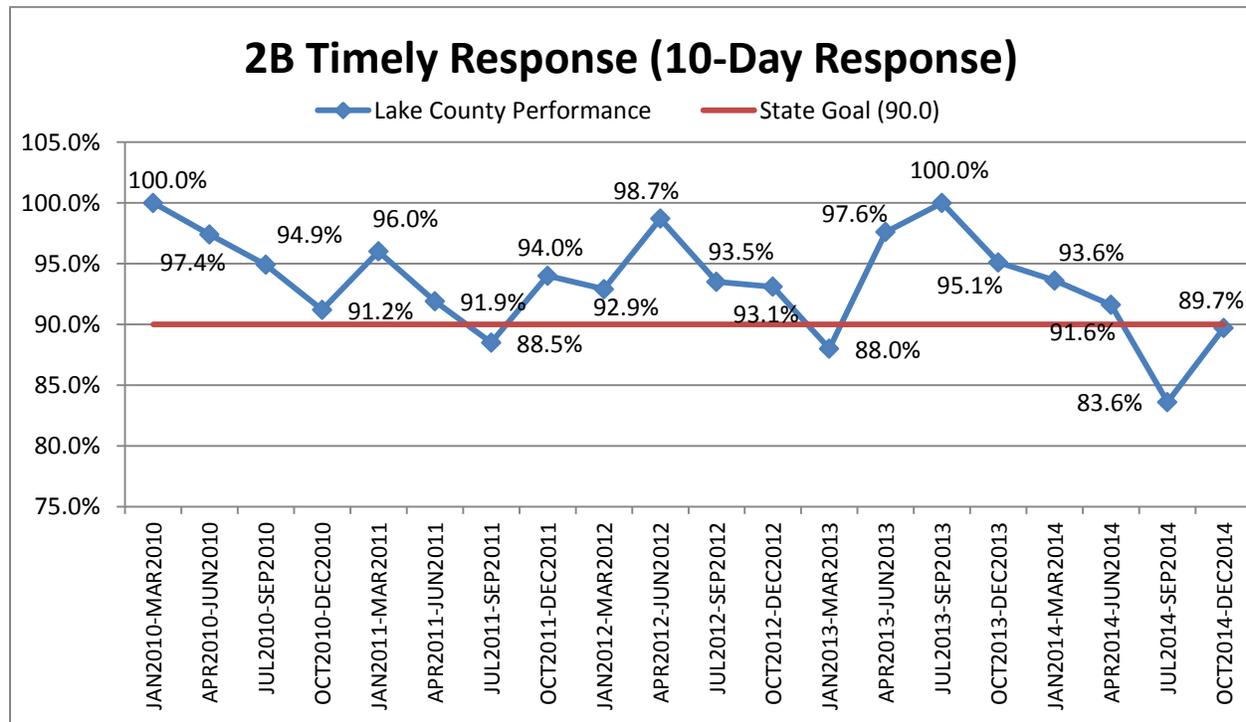
### ANALYSIS

The most recent performance period from the most current data extracted from Children’s Research Center SafeMeasures®, *Lake County, Measure 2B Percent of Child Abuse/Neglect Referrals with a Timely Response (Immediate), Q2, 2011 through Q4, 2014*, retrieved 05/05/2015 from Children’s Research Center website: <https://www.safemeasures.org/ca/>, indicates that Lake County has consistently remained in 100% compliance with this measure.

A case review of the referrals revealed that a data entry error occurred when children were detained by the CWS on-call social workers on weekends or holidays. Although the social worker did respond, meet with the children, and place them into care, the contact was not entered in a timely manner by workers who are often times not in the Emergency Response Unit.

## TEN-DAY RESPONSE COMPLIANCE

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
10/1/2014	12/31/2014	70	78	89.7	↓	-5.7%	-10.3%



COUNT	JAN 10-	APR 10-	JUL 10-	OCT 10-	JAN 11-	APR 11-	JUL 11-	OCT 11-	JAN 12-	APR 12-	JUL 12-	OCT 12-	JAN 13-	APR 13-	JUL 13-	OCT 13-	JAN 14-	APR 14-	JUL 14-	OCT 14-
	MAR 10	JUN 10	SEP 10	DEC 10	MAR 11	JUN 11	SEP 11	DEC 11	MAR 12	JUN 12	SEP 12	DEC 12	MAR 13	JUN 13	SEP 13	DEC 13	MAR 14	JUN 14	SEP 14	DEC 14
Timely Response	91	76	93	93	97	102	77	78	78	76	87	108	103	121	104	117	117	98	92	70
Total	91	78	98	102	101	111	87	83	84	77	93	116	117	124	104	123	125	107	110	78

### ANALYSIS

The most recent performance period from the most current data extracted from Children's Research Center SafeMeasures®, *Lake County, Measure 2B Percent of Child Abuse/Neglect Referrals with a Timely Response (Ten-day), Q3, 2011 through Q4, 2014*, retrieved 05/05/2015 from Children's Research Center website: <https://www.safemeasures.org/ca/>, indicates that although this measure has fluctuated, CWS has remained above the national goal of 90.0%. The SafeMeasures® data show the following:

- July 2011-September 2011 Lake County was at 90.8%,
- January 2013 to March 2013 Lake County was at 90.6%,
- July 2014 to September 2014 Lake County was at 90.0%, and
- October 2014 to December 2014 Lake County was at 97.5%.

A case review of these referrals revealed a data entry error occurred with several referrals when the purpose of the contact was coded as “Delivered Services to Client” and not the correct option of “Investigate Referral,” therefore this caused a tracking error when data was retrieved. These percentage differences can occur based on the fact that SafeMeasures® is based on biweekly updates while U.C. Berkeley statistics are updated in six month intervals. After the review of these referrals, it was concluded that Lake County social workers do make an initial contact within regulatory time frames, but the contact is not being entered in a timely manner, thus making it appear that the contact is not being made within the specified timeframe. The chart above reflects the effects of data entry timing. Even though CWS social workers are expected to enter contacts within five days, this may not always be possible due to the workload. Management is aware of this and the issue is constantly being addressed between the supervisors and social workers.

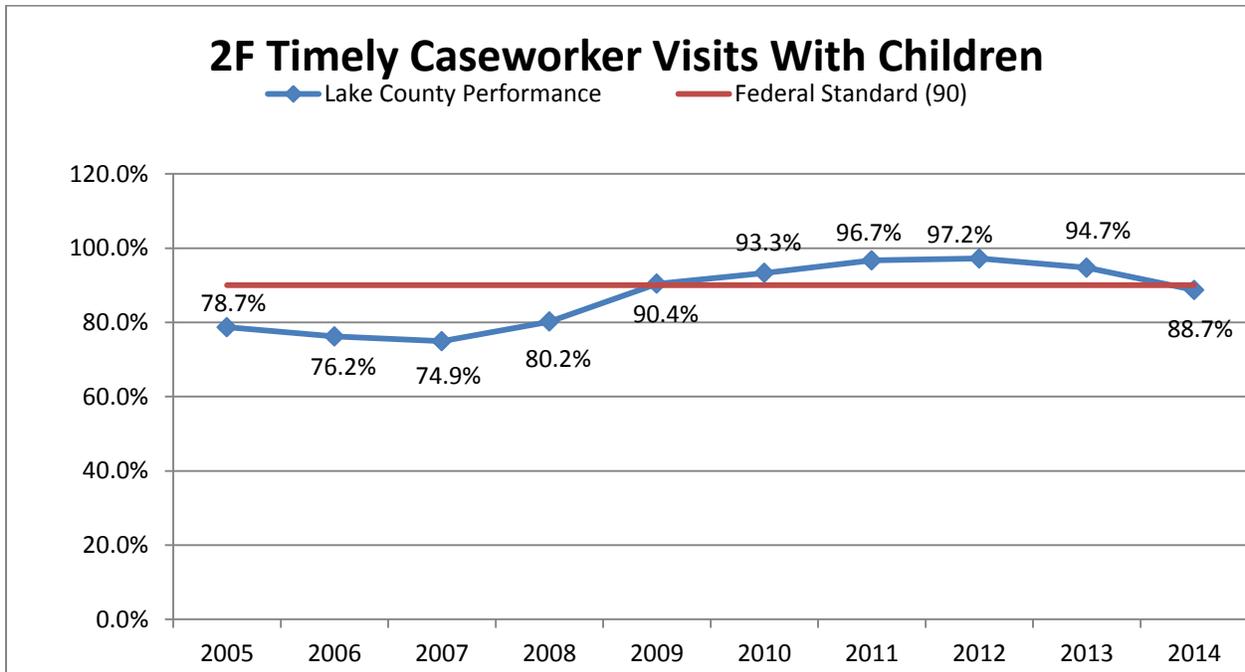
Lake County CWS has recently adopted a new and promising practice in the Emergency Response Unit by implementing daily RED Team meetings. These meetings promote comprehensive screening and result in faster assignment and response.

## 2F TIMELY CASEWORKER VISITS WITH CHILDREN

These reports calculate the percentage of children in placement who are visited by caseworkers. Each child in placement for an entire month must be visited at least once. The reports summarize monthly data by 12-month periods.

### 2F MONTHLY VISITS (OUT OF HOME)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	1,088	1,227	88.7%	↓	-6.4%	-1.9%

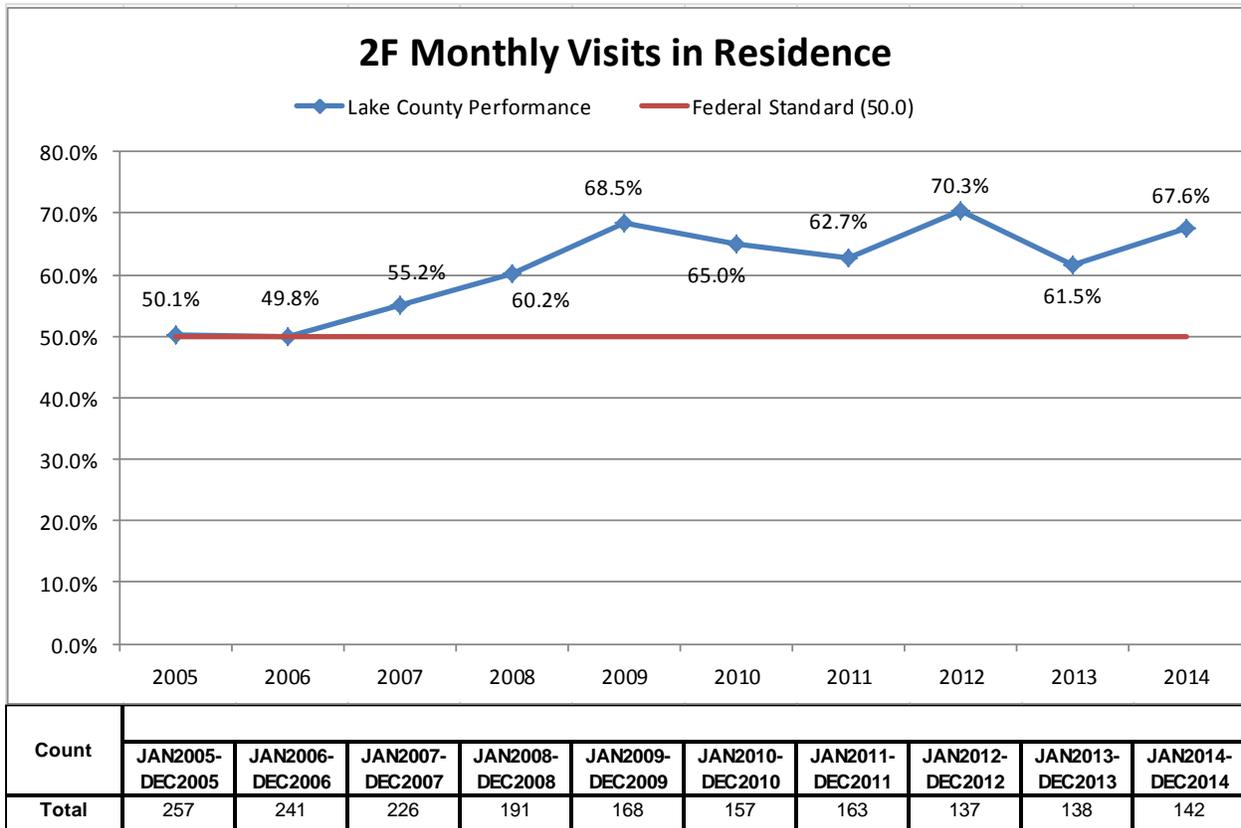


#### ANALYSIS

The most recent performance period from the most current data extracted from Children’s Research Center SafeMeasures®, *Lake County, Measure 2F - Timely Monthly Caseworker Out-of-Home Visits, 01/01/2014 to 12/31/2014*, retrieved 05/05/2015 from Children’s Research Center website: <https://www.safemeasures.org/ca/>, indicates that Lake County is at 93.7% in compliance with monthly contacts, which exceeds the national goal of 90.0%.

#### 2F MONTHLY VISITS IN RESIDENCE (OUT OF HOME)

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	736	1,088	66.7%	↑	10.0%	-1.3%



## ANALYSIS

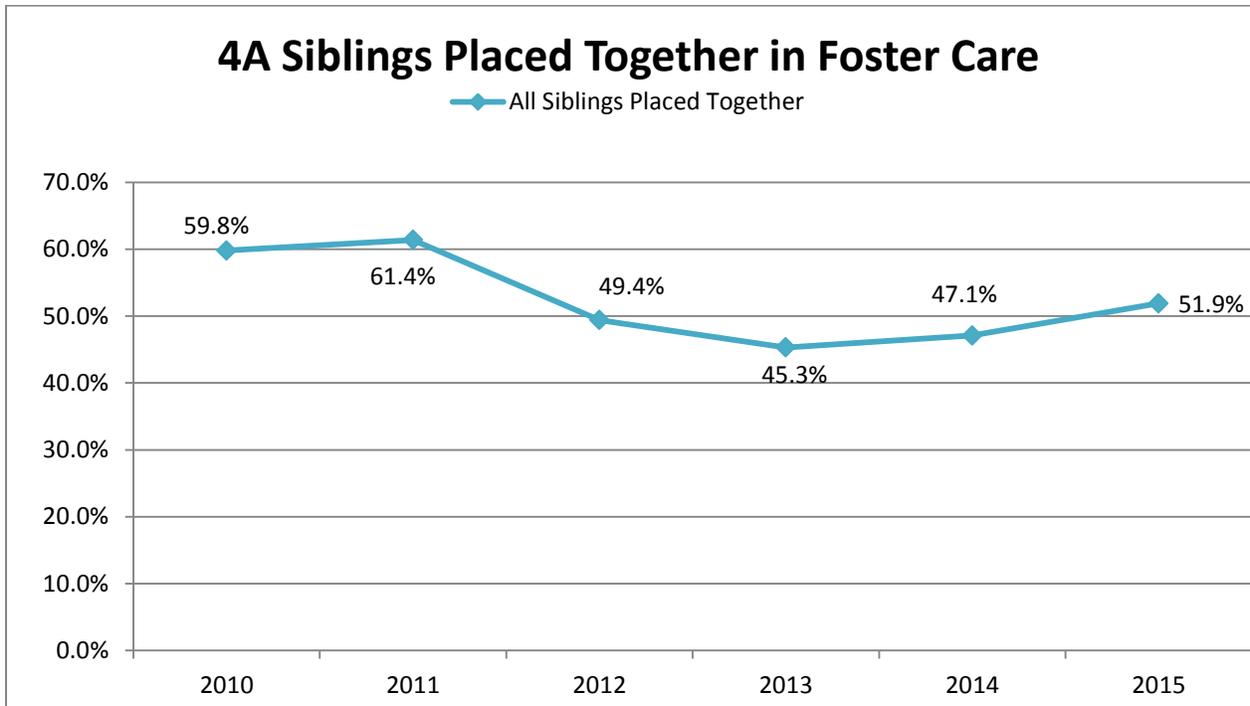
Lake County exceeds the national goal for timely caseworker visits with children. The U.C. Berkeley data reflects a dip in monthly contacts in 2014, but SafeMeasures® reflects that Lake County is in compliance. After the review of cases in 2014, it was concluded that Lake County social workers do make monthly contacts within regulatory time frames, but the contact is not being entered in a timely manner, thus making it appear that the contact is not being made within the specified timeframe.

CWS management has continued to focus on these outcomes, making timely social worker visits and visits in the residence a high priority through close and constant monitoring of these outcomes. Staff report that the use of SafeMeasures® has also assisted in ensuring compliance in these outcomes.

## 4A SIBLINGS PLACED TOGETHER IN FOSTER CARE

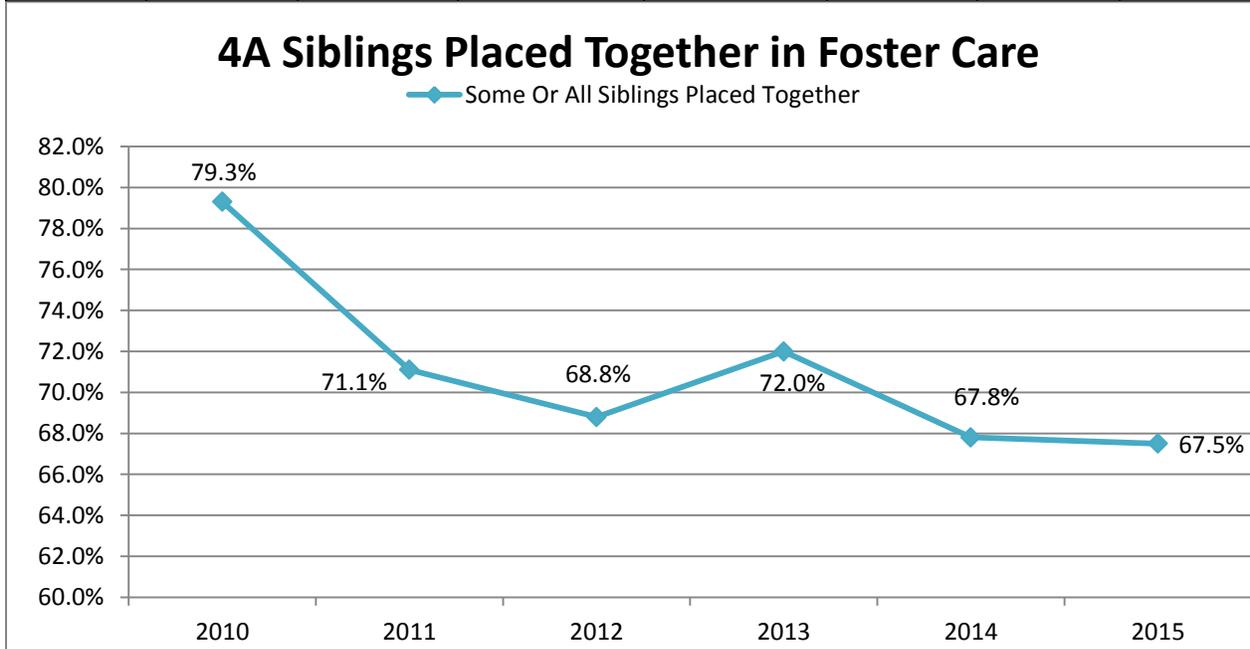
### 4A Siblings Placed Together in Foster Care- All

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2015	1/1/2015	40	77	51.9	↓	10.2%	-13.1%



#### 4A Siblings Placed Together in Foster Care- Some or All

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2015	1/1/2015	52	77	67.5	↓	-0.4%	-14.9%



## ANALYSIS

When children require out-of-home placement, Lake County social workers make every effort to place them with relatives in their home community and in their current schools when possible and appropriate. Lake County has a specialized social worker position designed to assist in finding placement and, to the extent that it is possible, find placement matches which support the children's continued connections to their siblings and community. Lake County social workers strongly support foster children in placements connected with their families, friends, and their cultural, religious and other community based activities. However, limitations of available placements can negatively impact these efforts as can difficulties in maintaining one of the siblings in the placement due to special needs or behavior that is potentially harmful to the siblings.

Lake County primarily uses Foster Family Agencies to obtain placements. Therefore, CWS is limited to the availability of the homes offered by these agencies. For Native American children, Lake County is actively working with the local Tribes for preapproved Tribal resolution homes that can maintain children with their siblings in their community and culture.

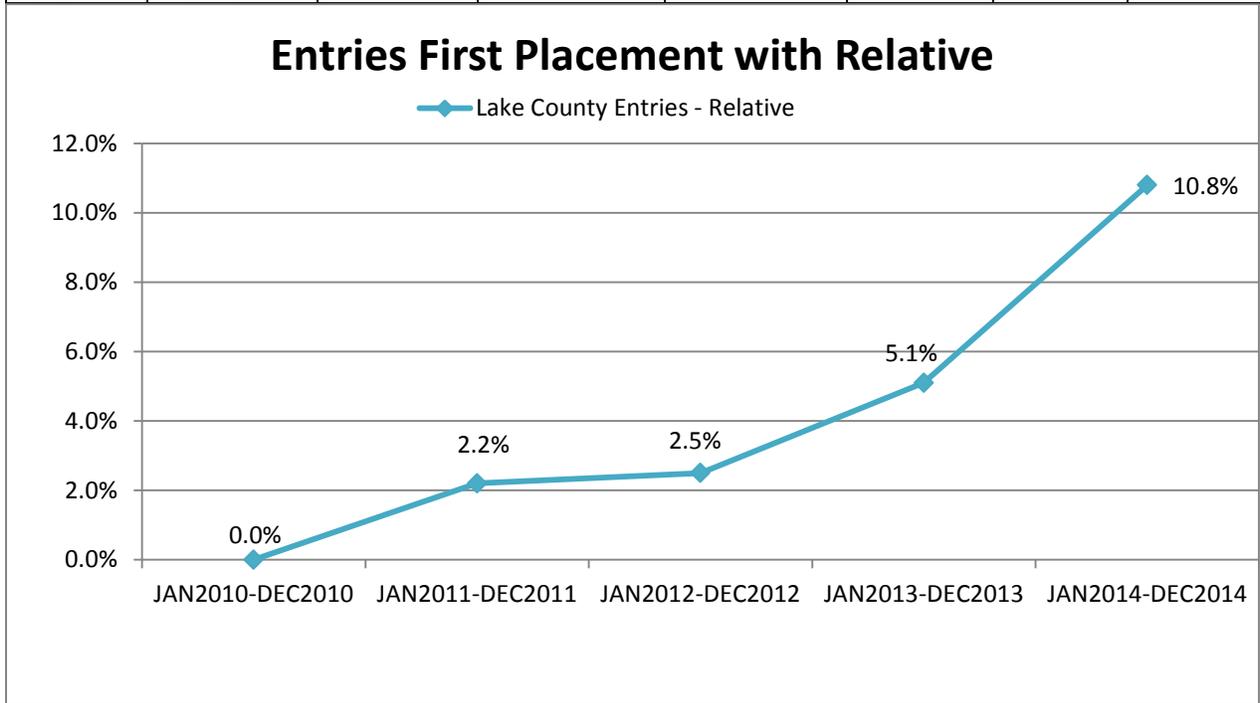
The most recent performance period from the most current data extracted from Children's Research Center SafeMeasures®, *Lake County, AB 636 Measure 4A: Placement with Siblings*, Q1, 2015, retrieved 05/07/2015 from Children's Research Center website: <https://www.safemeasures.org/ca/>, indicates that a majority of Lake County's children are placed with all siblings (56.2%) or at least with some siblings (16.4%). Lake County currently has 20 children (27.4%) who are not placed with any of their siblings. A case review of the 20 children who were not placed with any siblings revealed the following placement types:

- Five children were placed in a non-related legal guardian case (25.0%) and are being monitored by CWS.
- Four children are placed in their adoptive homes (16.0%).
- Four children are in a group home setting (16.0%).
- One child is a Probation youth (5.0%) and the siblings are not on probation.
- One child is placed with a relative, who is not able to care for the toddler sibling (5.0%).
- One child is a non-minor dependent (5.0%) under the AB12 Extended Foster Care program.
- Four children are placed with Foster Family Agencies (16.0%) and, due to allegation and behavior concerns between the sibling sets, it would not be appropriate to place them together in the same home.

### 4B LEAST RESTRICTIVE PLACEMENT (ENTRIES FIRST PLACEMENT)

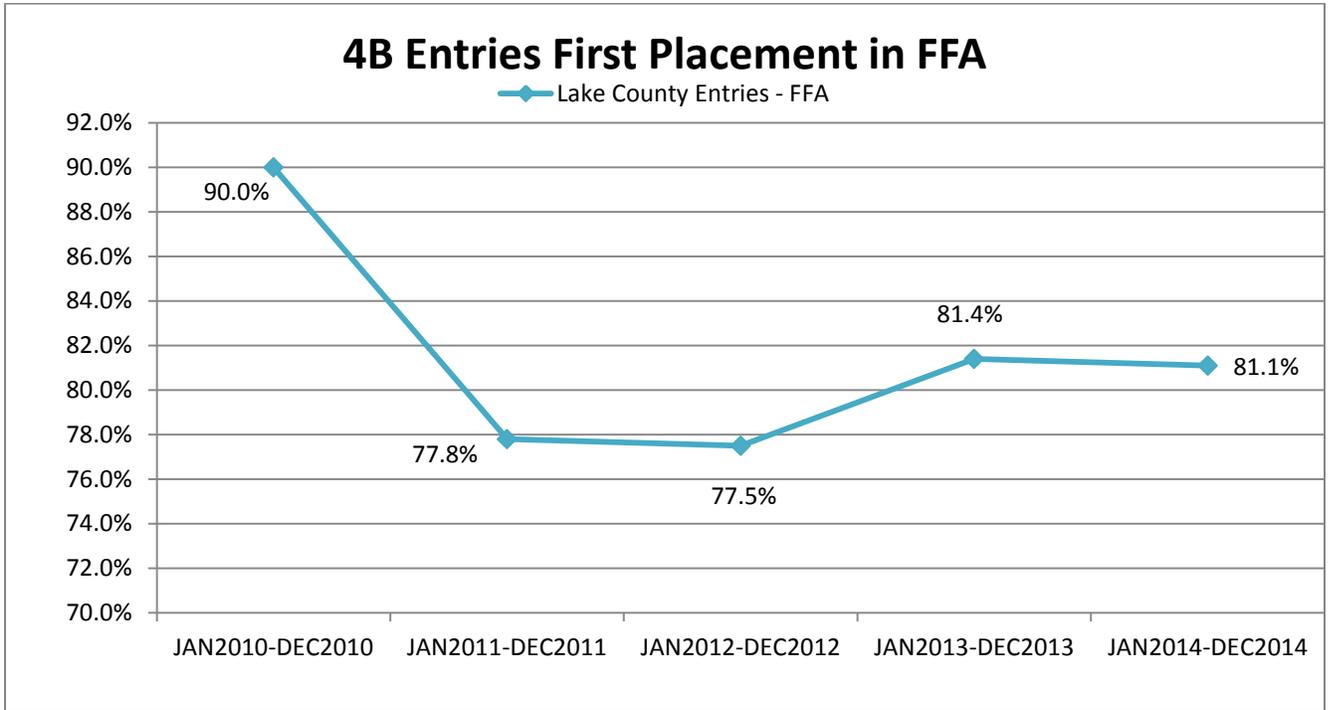
#### 4B Least Restrictive (Entries First Placement) – Relative

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	5	44	11.4	↑	187.9%	N.A



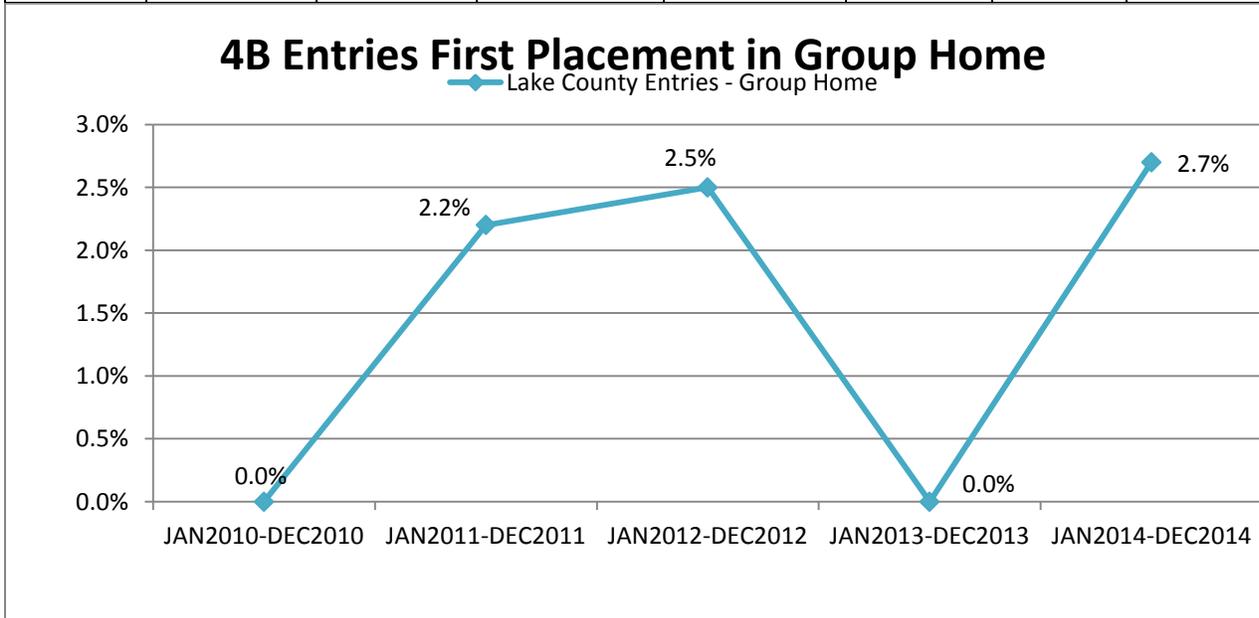
#### 4B Least Restrictive (Entries First Placement) – FFA

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	35	44	79.5	↑	-7.0%	-11.8%



#### 4B Least Restrictive (Entries First Placement) – Group Home

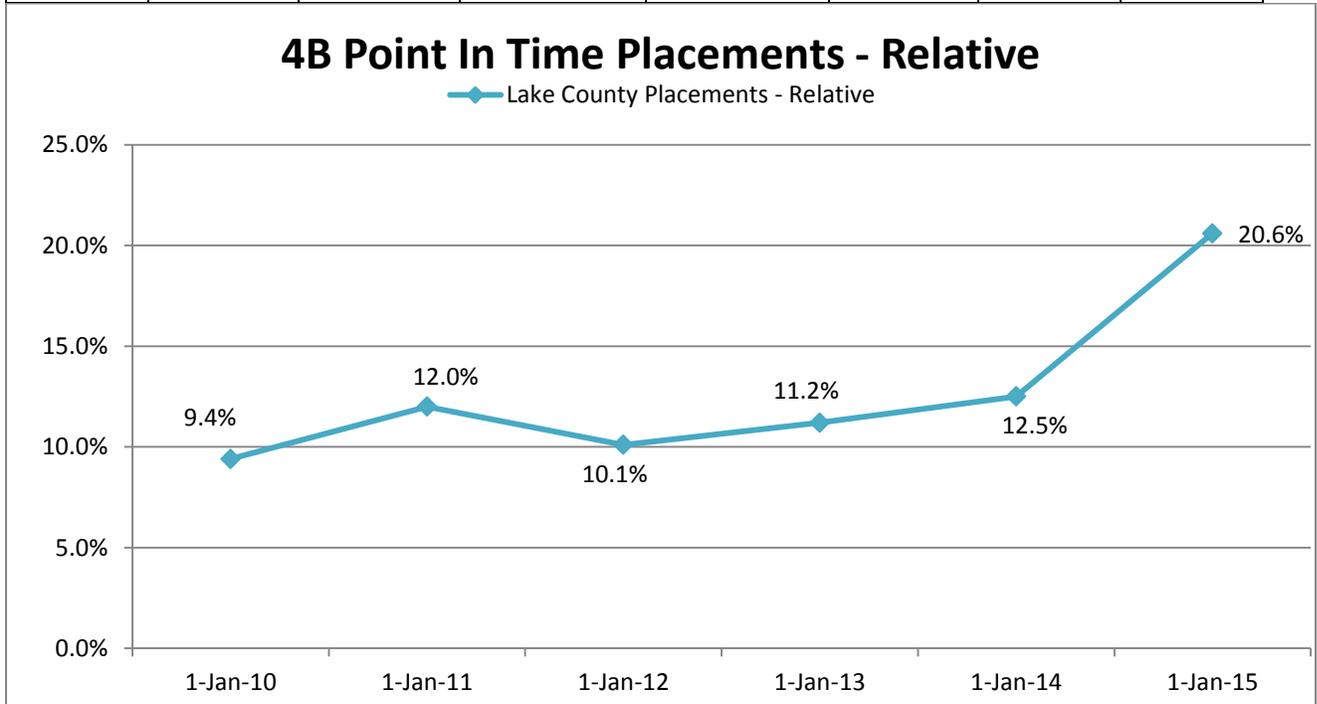
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	2	44	4.5	↑	245.5%	15.9%



#### 4B LEAST RESTRICTIVE PLACEMENT (POINT IN TIME)

##### 4B Least Restrictive (PIT Placement) – Relative

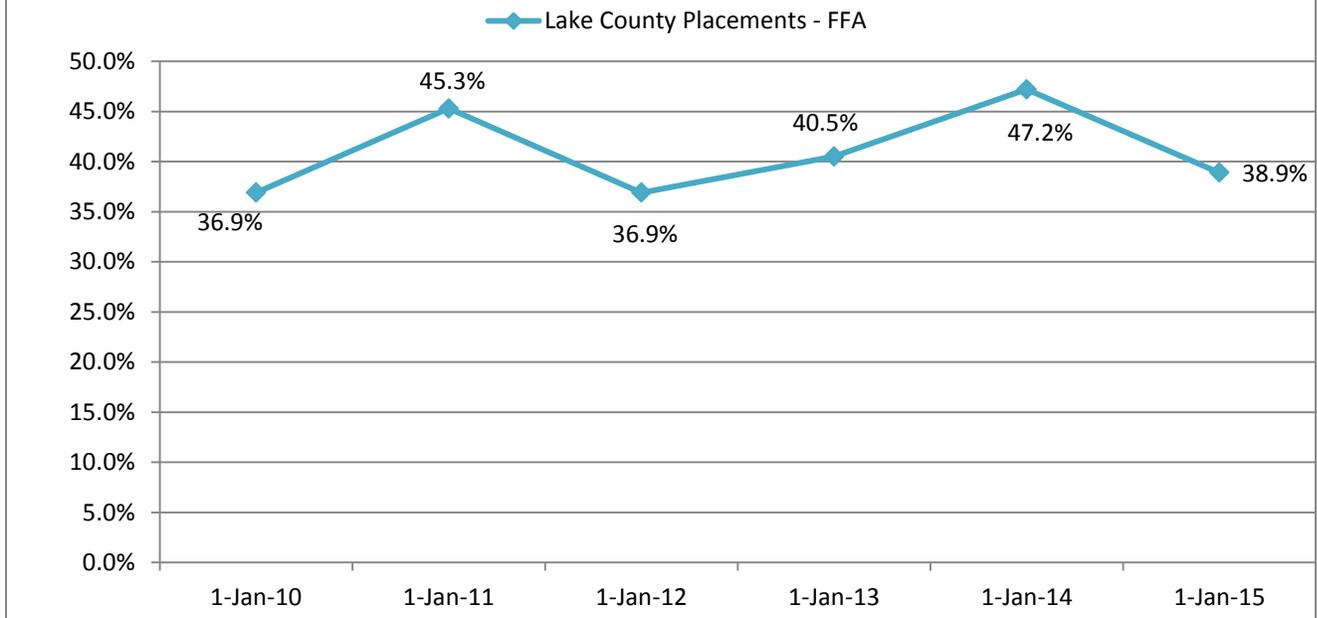
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2015	1/1/2015	26	126	20.6	↑	65.1%	119.6%



##### 4B Least Restrictive (PIT Placement) – FFA

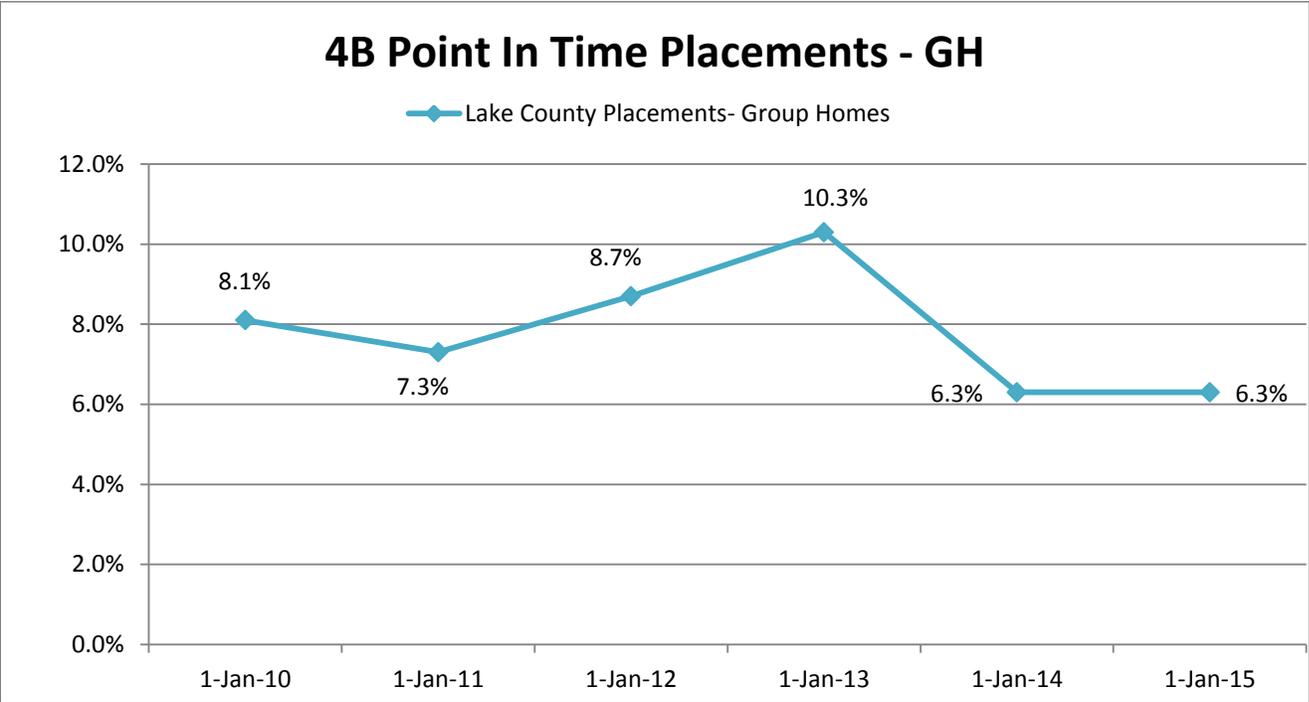
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2015	1/1/2015	49	126	38.9	↑	-17.6%	5.4%

## 4B Point In Time Placements - FFA



### 4B Least Restrictive (PIT Placement) – Group Home

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2015	1/1/2015	8	126	6.3	↓	1.6%	-21.2%



**ANALYSIS**

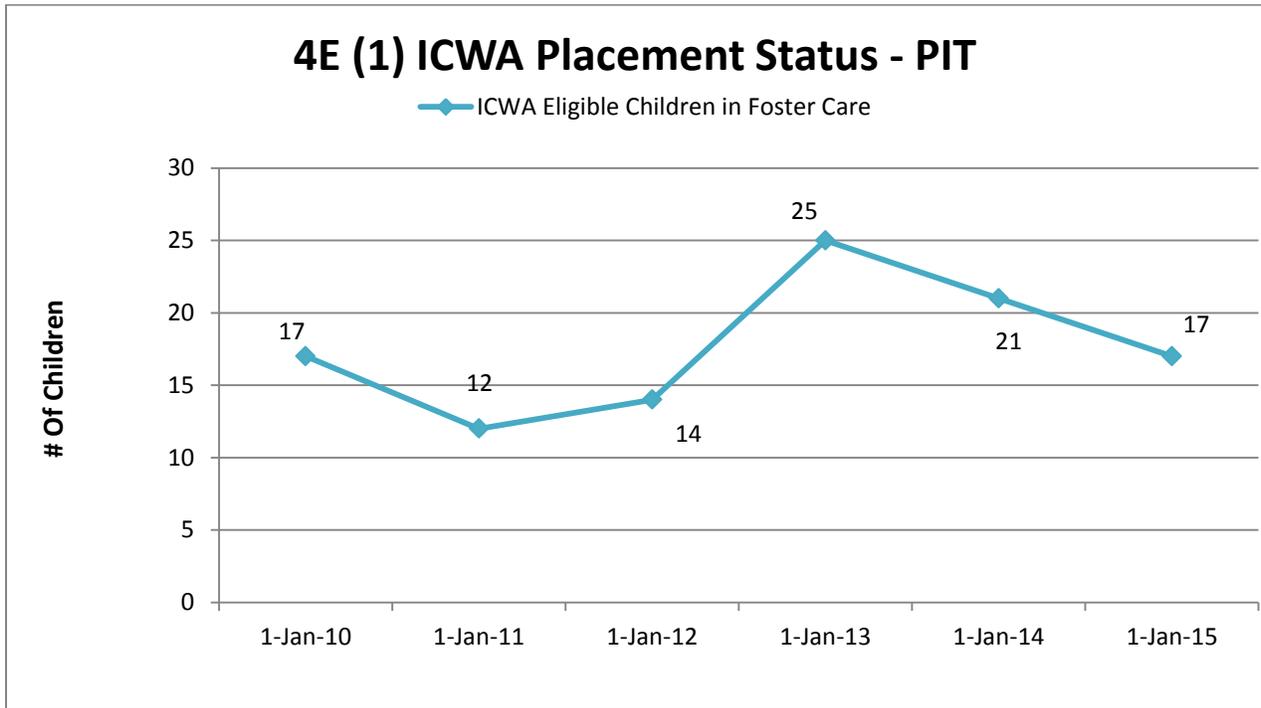
National goals are not established for the preceding outcome measures for placing children in the least restrictive setting. However, in recent years CWS has increased placements with relatives and decreased placements in Foster Family Agency (FFA) homes at the time of the first placement. Stakeholders identified the need for upfront assessment of relatives for placement and early intervention with the Tribes for placement support. CWS has increased training for initial placements and worked diligently with all local law enforcement offices to assist in the legal evaluation of relatives for placement at the time of removal.

On an ongoing basis, Lake County also focuses on all group home placements. Lake County has a placement review team consisting of CWS, Probation, and Behavioral Health staff, who meet regularly to discuss and assess children who are placed in a group home setting. Also, CWS has a designated social worker whose caseload primarily focuses on children in group home settings in order to develop comprehensive plans to step-down the child to a lower level of care as soon as it is safely possible to do so.

Lake County provides training opportunities for local foster parents, relatives, and non-related relatives, but agrees with the stakeholders that these trainings need to be increased. FFAs provide their foster parents training and the additional support of a FFA worker, while relatives and non-related relative placements are often lacking this hands-on support. Lake County focuses on trauma informed trainings for the placements and now provides Wraparound services to relative and non-related relative placements to assist in making and maintaining difficult placements.

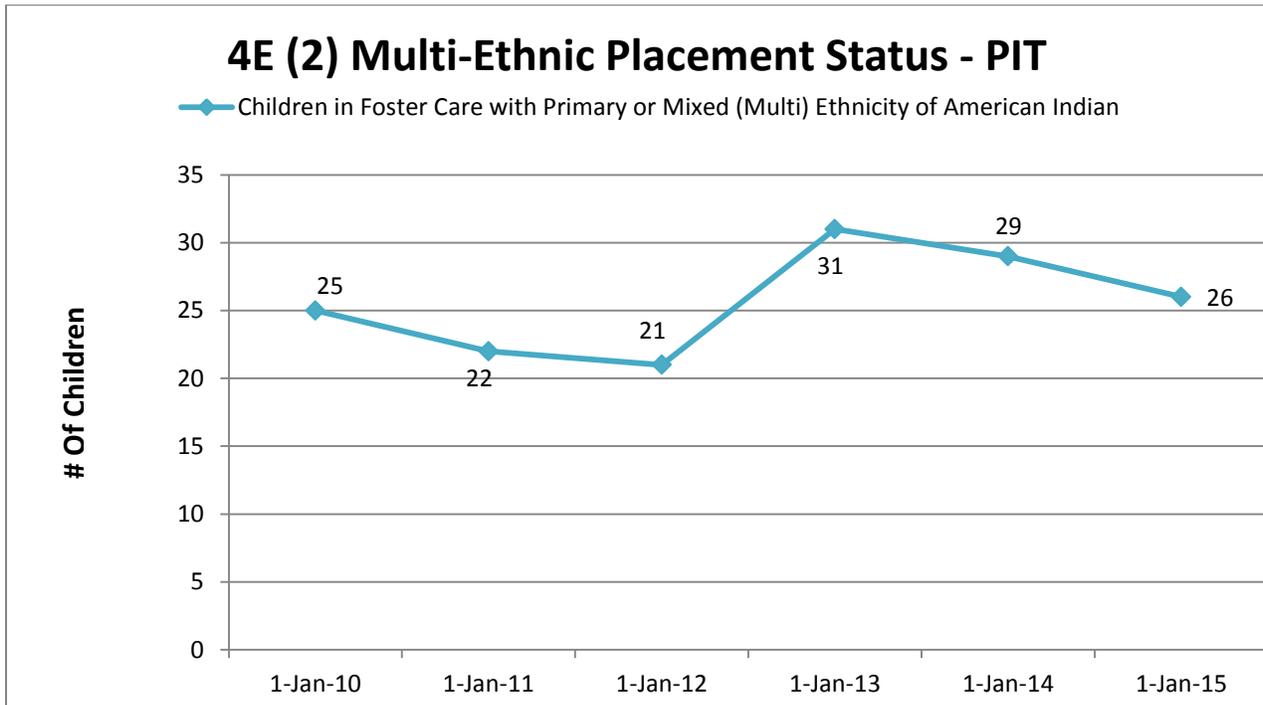
## 4E ICWA & MULTI-ETHNIC PLACEMENT STATUS

### 4E (1) ICWA Eligible Placement Status



Placement Status						
	1-Jan-10	1-Jan-11	1-Jan-12	1-Jan-13	1-Jan-14	1-Jan-15
<b>Relatives</b>	6	5	7	7	3	9
<b>Non Relatives, Indian SCPs</b>	2	2	2	2	2	5
<b>Non Relatives, Non Indian SCPs</b>	4	3	4	14	11	1
<b>Non Relatives, SCP Ethnic Missing</b>	4	1	1	2	3	1
<b>Group Homes</b>	1	1	.	.	2	1
<b>Total</b>	17	12	14	25	21	17

## 4E (2) Multi-Ethnic Placement Status



Placement Status						
	1-Jan-10	1-Jan-11	1-Jan-12	1-Jan-13	1-Jan-14	1-Jan-15
Relatives	6	6	7	7	3	9
Non Relatives, Indian SCPs	2	2	2	2	2	5
Non Relatives, Non Indian SCPs	7	8	7	17	15	5
Non Relatives, SCP Ethnic Missing	7	4	4	4	5	3
Group Homes	2	2	1	1	3	1
Other	1	.	.	.	1	2
Missing	.	.	.	.	.	1
<b>Total</b>	<b>25</b>	<b>22</b>	<b>21</b>	<b>31</b>	<b>29</b>	<b>26</b>

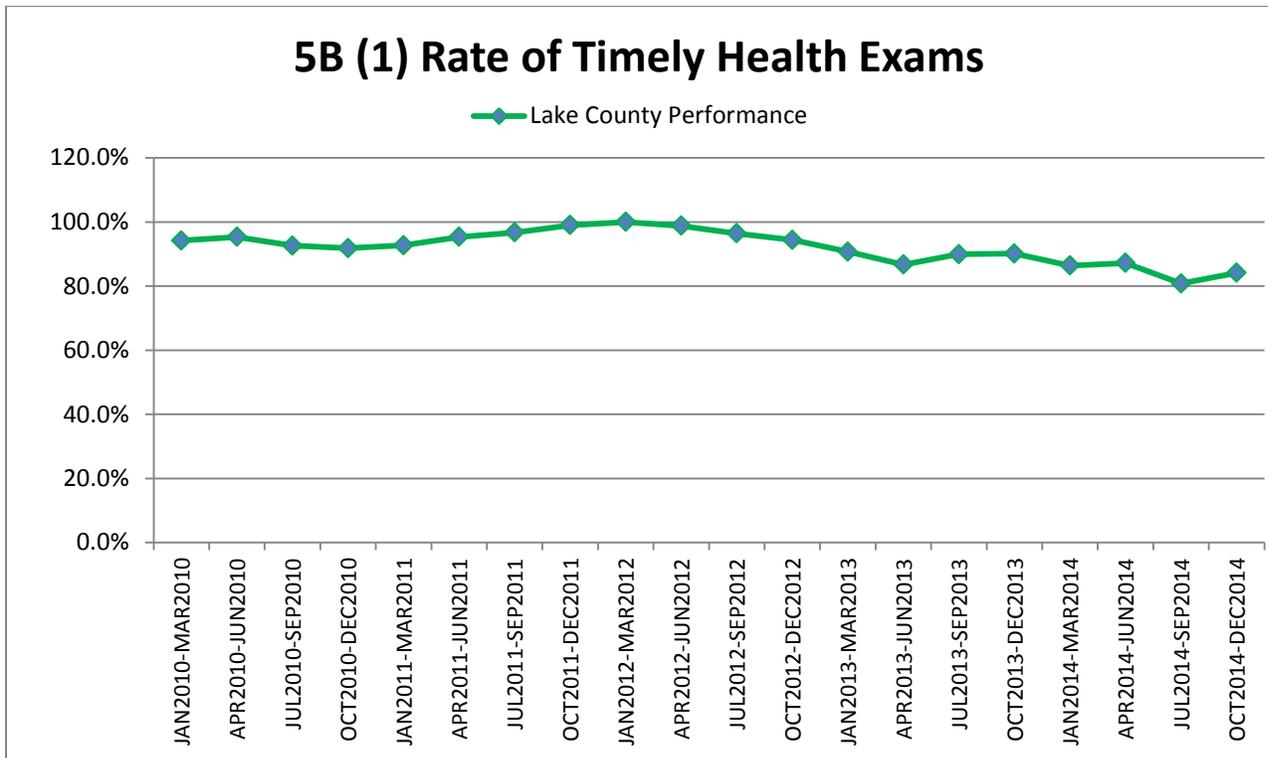
### ANALYSIS

Measure 4E(1) examines the placement status of Indian Child Welfare Act eligible children. Measure 4E(2) examines the placement status of children with primary or mixed (multi) ethnicity of American Indian. In both of these measures, placement status takes placement type, child relationship to substitute care provider, and substitute care provider ethnicity into account. These two graphs and charts for Measures 4E(1) and (2) represent point-in-time data. There is no baseline or comparison data.

Seven federally recognized Tribes are within Lake County. Native Americans constitute a significant portion of Lake County’s population at 3.5%. Whenever possible, Native American children in foster care are placed with Native American relatives or in homes which have been tribally approved for placement. Lake County CWS attends regular meetings with local Tribal representatives and the 2015 focus of these meetings primarily has been improving tribally approved homes and timely Tribal resolutions.

**5B (1) RATE OF TIMELY HEALTH EXAMS**

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-year Percent Change	Five-year Percent Change
10/01/2014	12/31/2014	74	88	84.1	↓	-6.7%	-14.2%



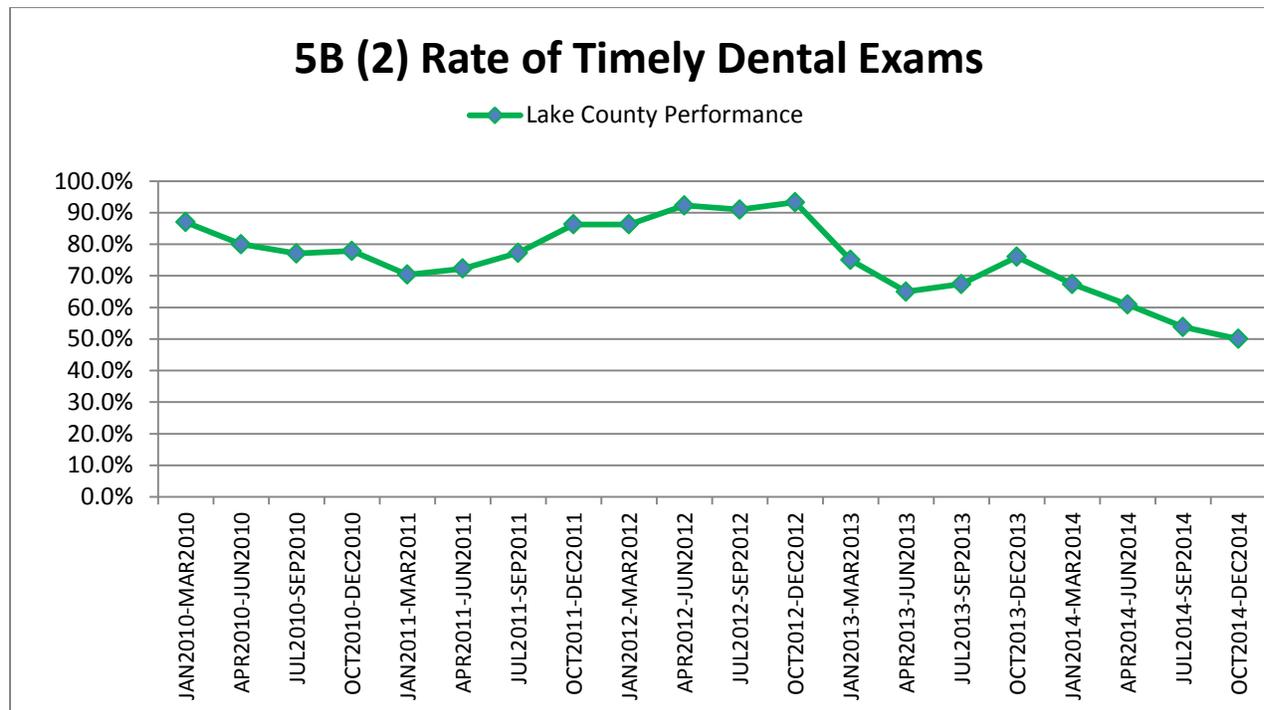
**ANALYSIS**

The above data indicate timeliness of health exams has decreased in Lake County by almost 7%. It is unclear if this is a true reflection of service provision, or if this is a data entry issue. CWS has designated an office assistant to enter CHDP information into CWS/CMS, but due to recent staff changes and vacancies, this data entry has fallen behind. Medical exams are discussed in each status review court report and Lake County CWS has a Public Health Nurse (PHN) in-office to assist when medical issues or concerns arise. CWS will continue to monitor this measure and investigate the cause for this decrease.

## 5B (2) RATE OF TIMELY DENTAL EXAMS

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-year Percent Change	Five-year Percent Change
10/01/2014	12/31/2014	35	70	50.0	↓	-34.2%	-42.3%

CWS Outcomes System Summary, Report Publication April 2015

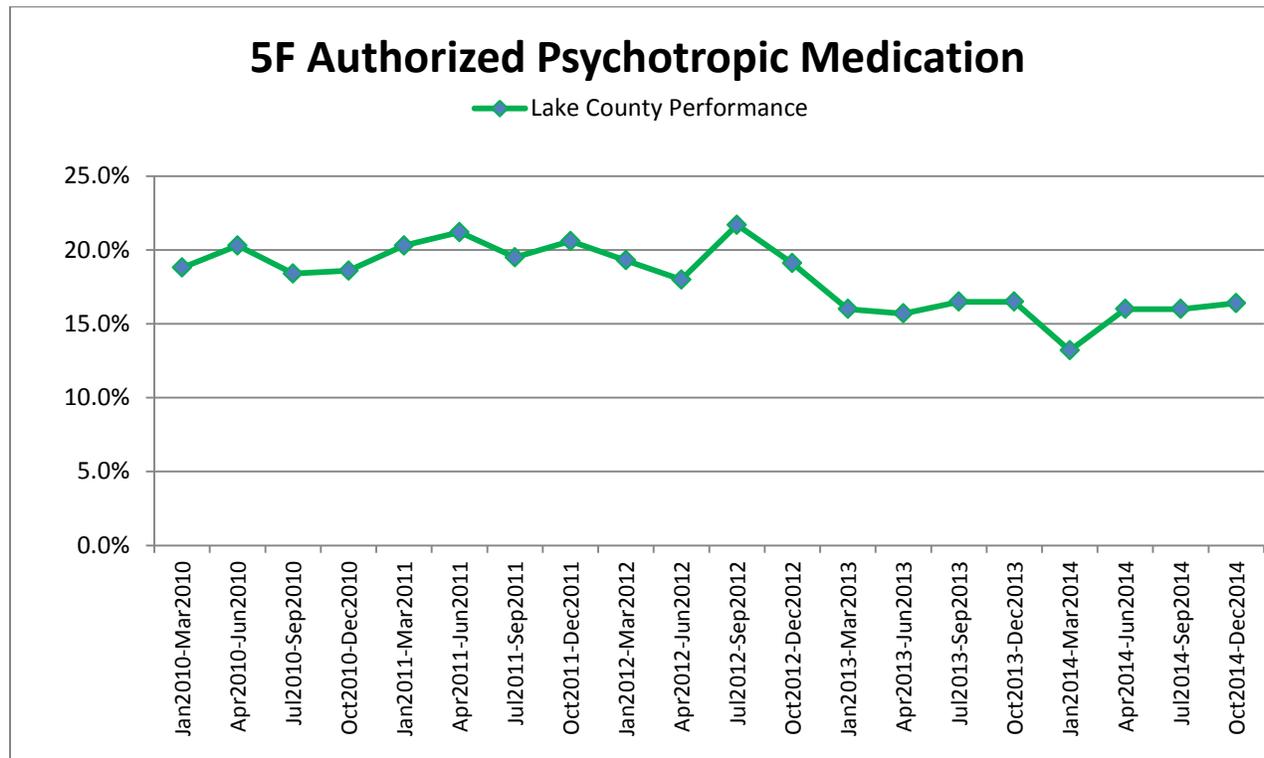


### ANALYSIS

The above data show the timeliness of dental exams decreasing by 26% in the past year. As noted in the analysis of health exams data, it is unclear if this is a true reflection of services, or a data entry problem. There have been many recent changes in the Lake County CWS office assistance staff with the recent retirement of a long time staff person and multiple promotions out of that position. There are several services which Lake County utilizes to meet foster children's dental needs which focus groups reported, but the current data do not reflect this. Lake County will investigate the causes of this decrease and address both health and dental exams.

## 5F PSYCHOTROPIC MEDICATIONS

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-year Percent Change	Five-year Percent Change
10/01/2014	12/31/2014	18	110	16.4	↓	-1.0%	-17.6%



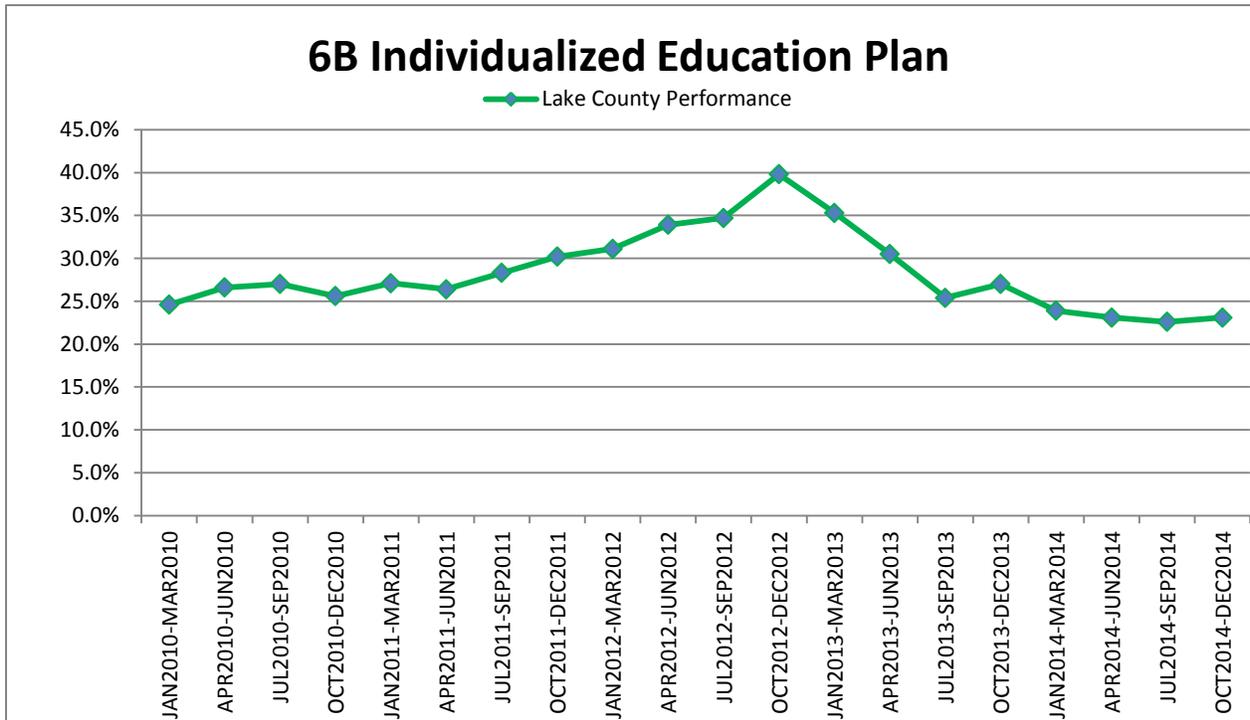
### ANALYSIS

Measure 5F for authorized psychotropic medication includes all children with open cases and open out-of-home placements in the CWS system. A decrease in the number of children in care who are taking psychotropic medications is seen. The most recent performance period from the most current data extracted from Children’s Research Center SafeMeasures®, *Lake County, AB 636 Measure 5F: Psychotropic Medication Authorization, Q1, 2015*, retrieved 05/07/2015 from Children’s Research Center website: <https://www.safemeasures.org/ca/>, indicates 17 of 109 children (15.6%) currently receive psychotropic medications.

Lake County has recently implemented a new tracking mechanism for psychotropic medications which includes signed agreements with substitute care providers when a child is taking the medications. Any psychotropic medication is closely monitored by the Lake County CWS PHN and reviewed every six months by the court with the goal to safely limit the time a child receives psychotropic medications.

## 6B INDIVIDUALIZED EDUCATION PLAN

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-year Percent Change	Five-year Percent Change
10/1/2014	12/31/2014	25	108	23.1	↓	-14.4%	-0.2%

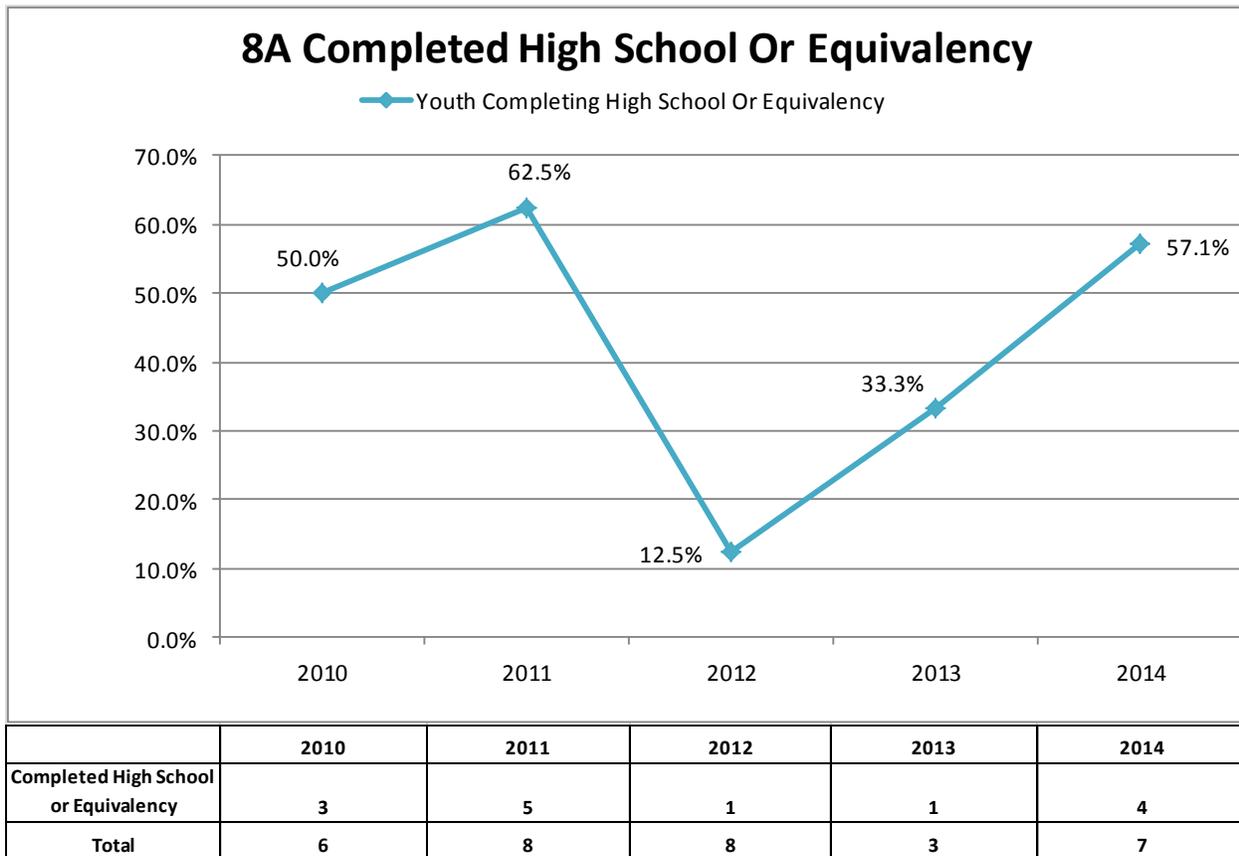


### ANALYSIS

From the above point-in-time data, since 2012, Lake County has had a continual decrease in the number of children in care who have an Individualized Education Plan (IEP) at any point during any placement episode. When comparing Lake County’s data to California as a whole, Lake County averages double the number of children with an IEP than the state. Lake County has also followed the most recent California trend of decreasing the number of children with IEPs.

Recently, Lake County CWS has had a Foster Care Educational Services Liaison on site part-time to evaluate children in care and ensure that their educational needs are being met. This will help to ensure that all IEP services are provided to foster youth and that periodic evaluations occur in a timely manner. This is another area where Lake County needs to continue to focus on the documentation entry into the system to accurately track this outcome measure.

## 8A COMPLETED HIGH SCHOOL EQUIVALENCY

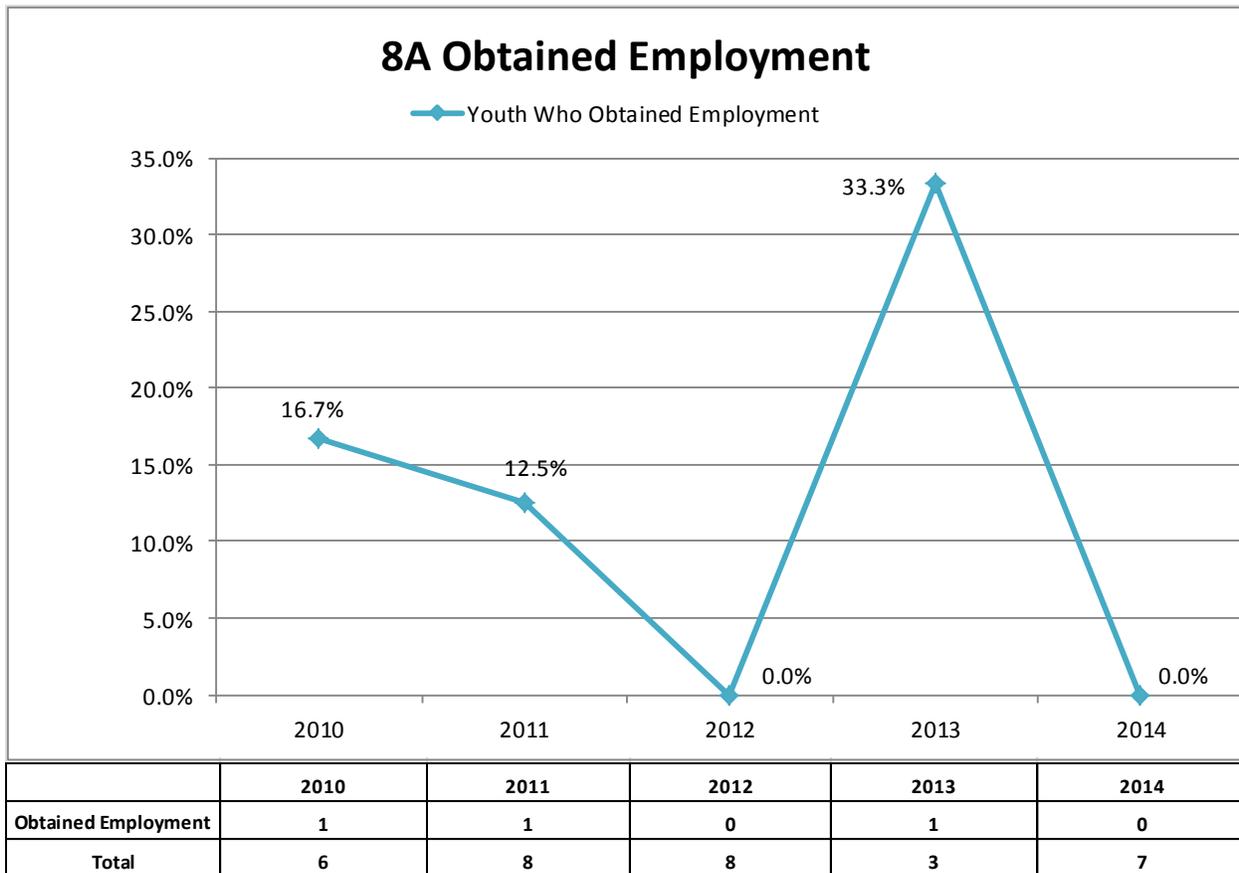


### ANALYSIS

The 8A series of measures only count youth exiting foster care at age 18, a very small number due to youth remaining in Extended Foster Care (AB 12); thus, percentages are skewed. In 2014, only seven youth exited foster care, and four completed high school or equivalency even though Lake County's ILP program provides ongoing support to foster youth to assist them in meeting their educational goals.

Stakeholders had several recommendations for improving well-being of foster youth. Education is an important part of supporting long term well-being, so, in order to support school success, stakeholders recommended making efforts to minimize the need for placement changes. Whenever possible, placement changes or school changes should be timed after the school year is completed to support completing a grade level, maintaining credits, and not causing falling behind, as well as maintaining youth's social support system. Additional recommendations include building supports with schools, establishing ILP programs, mentoring to help youth manage successful transitions and make life choices, increasing access to skills based programs for youth throughout the community that are fluid in the transition from child to adult, and offering more opportunities for positive social activities to support healthy social interactions and build support networks.

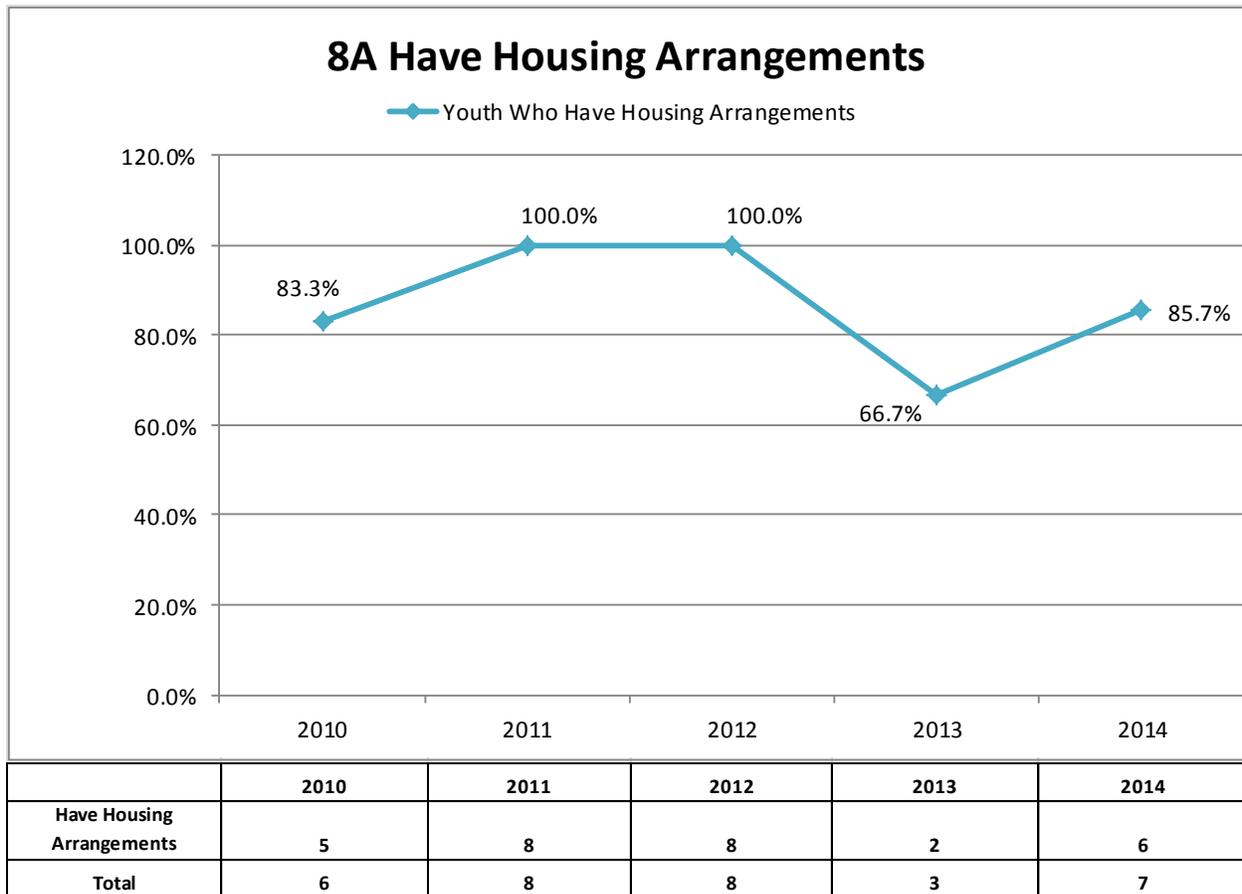
## 8A OBTAINED EMPLOYMENT



### ANALYSIS

As mentioned earlier, the number of youth exiting foster care at age 18 has become very small as a result of the AB12 Extended Foster Care program. 75.0% of all foster youth who have reached age 18 in foster care opted for the AB12 program. Lake County’s ILP program provides workshops to assist youth in preparing resumes and seeking employment. Employment is an area that many stakeholder groups recognized as a critical need for youth, both while in care and upon transition out of the foster care system.

## 8A HOUSING ARRANGEMENTS

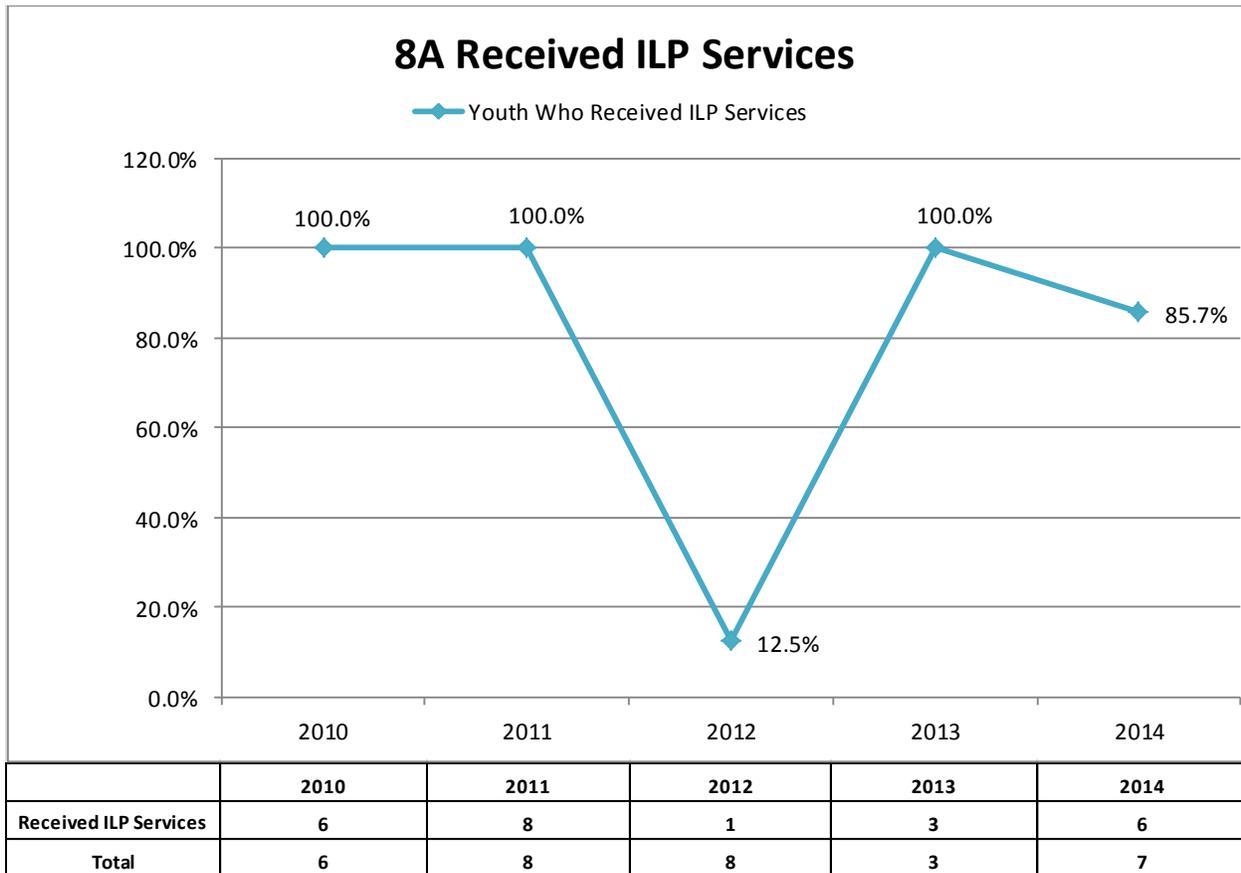


### ANALYSIS

This measure addresses those youth exiting foster care who had housing arrangements. As previously addressed, 75% of all emancipated youth opted to remain in extended foster care. The data above reflect a single youth without housing out of the seven who did not opt in to extended foster care. In all cases when youth emancipate, there is supportive documentation of the efforts to engage the youth in ILP and transitional services to support them in housing, including advising them of the possibility of entering the Transitional Housing Program-Plus (THP-Plus).

Stakeholders identified the need for additional housing assistance for transitional youth and the lack of available transportation and well-paying jobs in the area. Lake County is actively working with Redwood Community Services, contractor for THP-Plus, to locate and secure additional housing for transitioning youth and youth in extended foster care.

## 8A RECEIVED ILP SERVICES

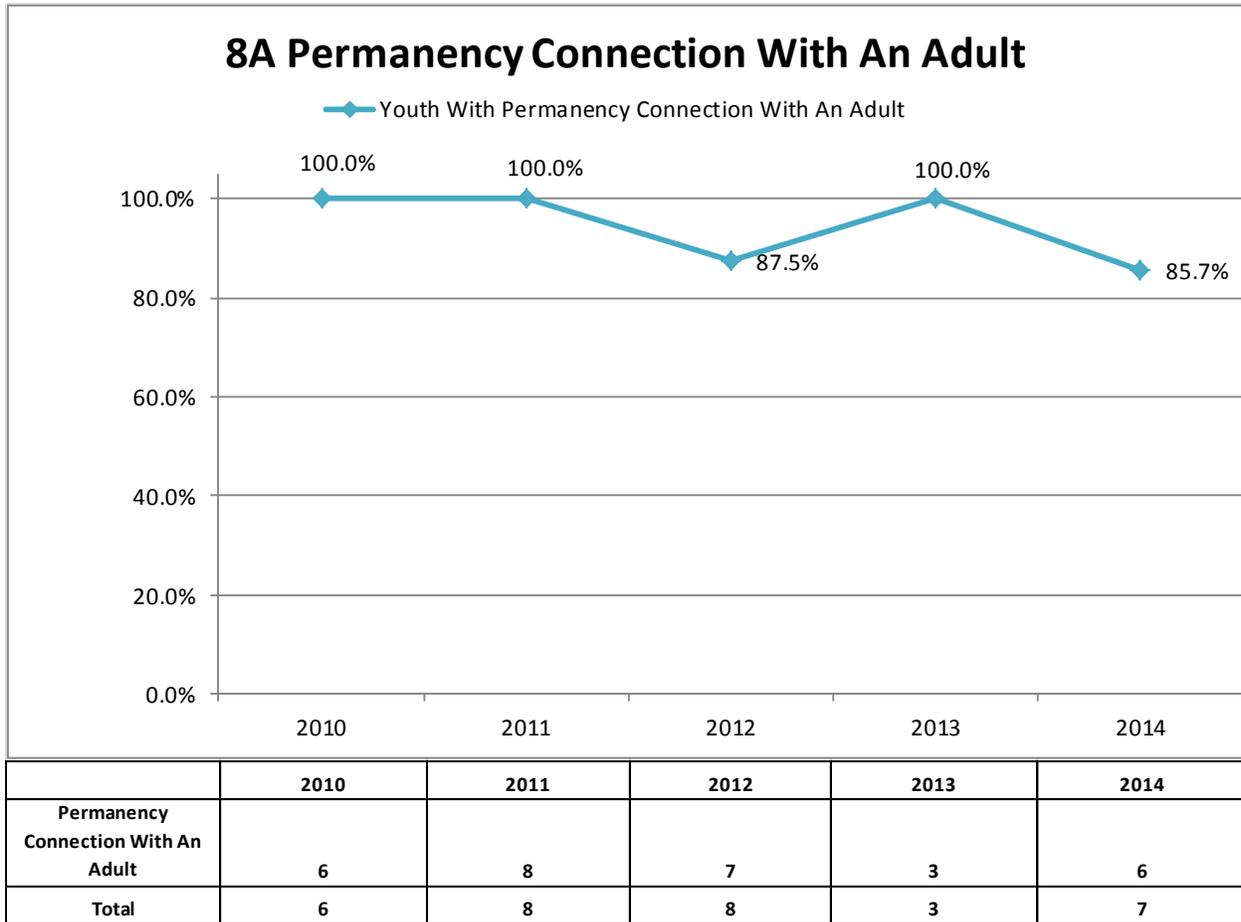


### ANALYSIS

Lake County has consistently provided ILP services to eligible youth, with the exception of an anomaly in 2012. Due to measuring only the number of youth who aged out of foster care **and** received ILP services, numbers in this area are low. SafeMeasures® indicates the number of all youth receiving ILP services, not just youth who age out, is much larger.

Stakeholders in multiple focus groups expressed satisfaction with Lake County’s ILP services and the efforts Lake County social workers will go through to make referrals and obtain services for ILP eligible youth placed outside Lake County.

## 8A PERMANENCY CONNECTION WITH AN ADULT



### ANALYSIS

The above data indicate that over 85% (6 of 7) youth exiting from foster care had a strong connection with an adult.

Stakeholder identified as a barrier that youth may choose to leave the area upon leaving foster care due to the lack of jobs and the rural nature of the County. Stakeholders recommended that Lake County offer more opportunities for positive social activities to support healthy social interactions and building support networks.

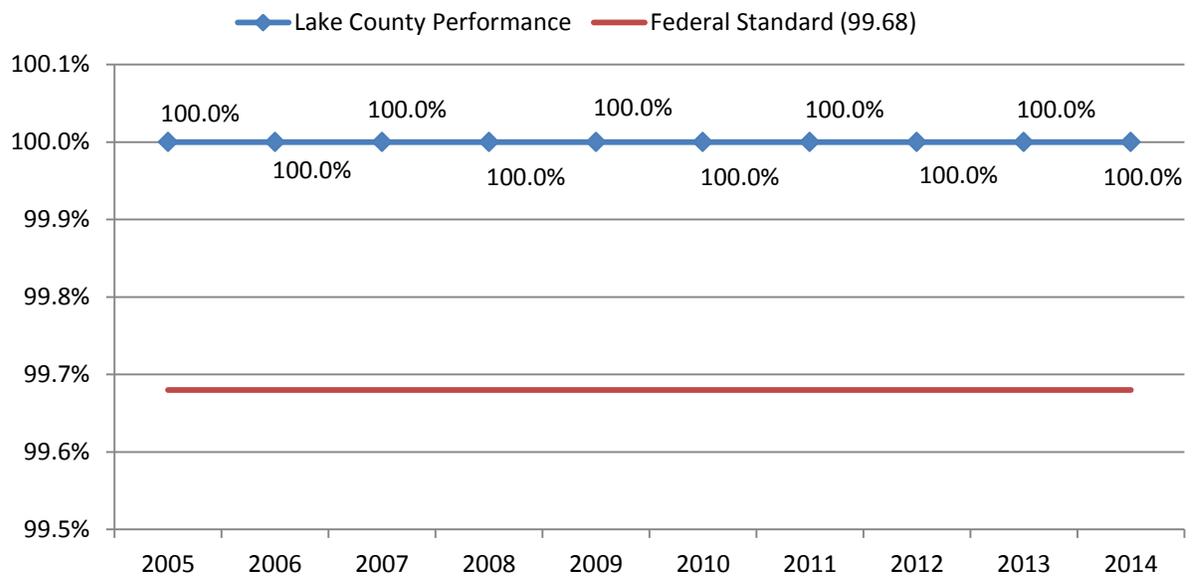
## PROBATION OUTCOME MEASURES

### S2.1 No Maltreatment in Foster Care – Probation

*Of all children served in foster care during the year, what percent were not victims of a substantiated maltreatment allegation by a foster parent or facility staff member?*

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	30	30	100.0	=	0.0%	0.0%

### S2.1 No Maltreatment in Foster Care - Probation

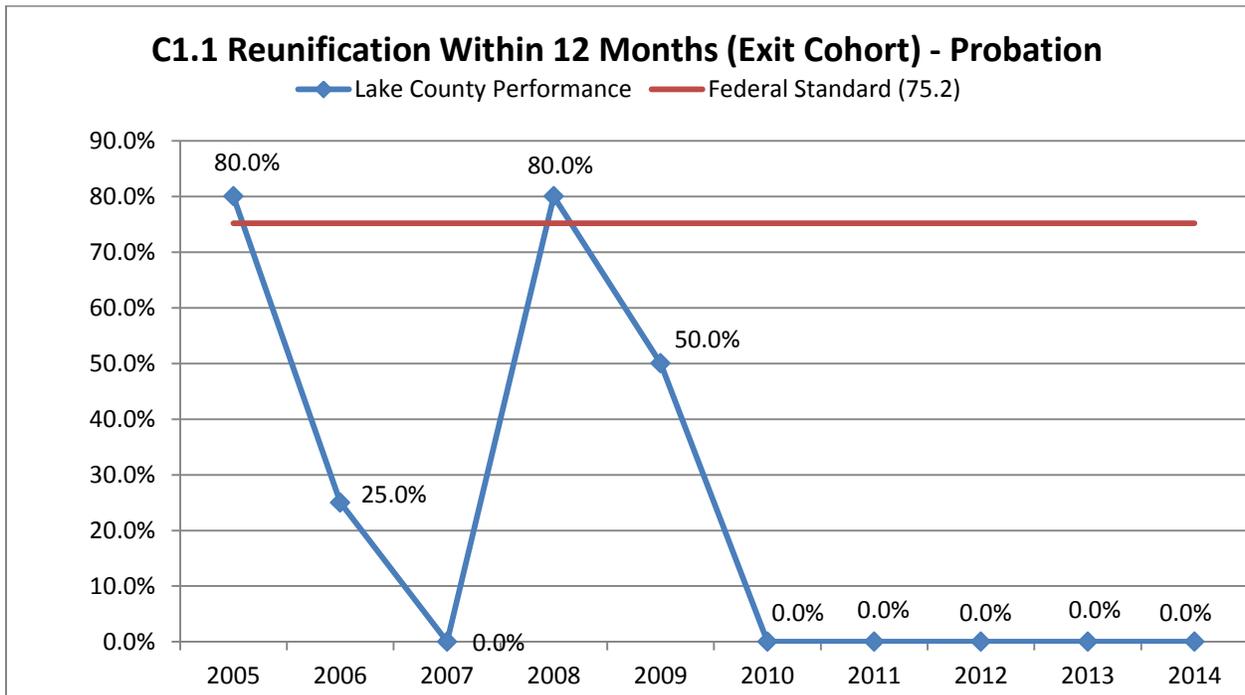


COUNT										
	JAN2005-DEC2005	JAN2006-DEC2006	JAN2007-DEC2007	JAN2008-DEC2008	JAN2009-DEC2009	JAN2010-DEC2010	JAN2011-DEC2011	JAN2012-DEC2012	JAN2013-DEC2013	JAN2014-DEC2014
Not Maltreated	27	22	23	25	20	21	24	31	27	30
Total	27	22	23	25	20	21	24	31	27	30

### C1.1 Reunification Within 12 Months (Exit Cohort) - Probation

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

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	0	3	0.0	↓	N.A	-100%

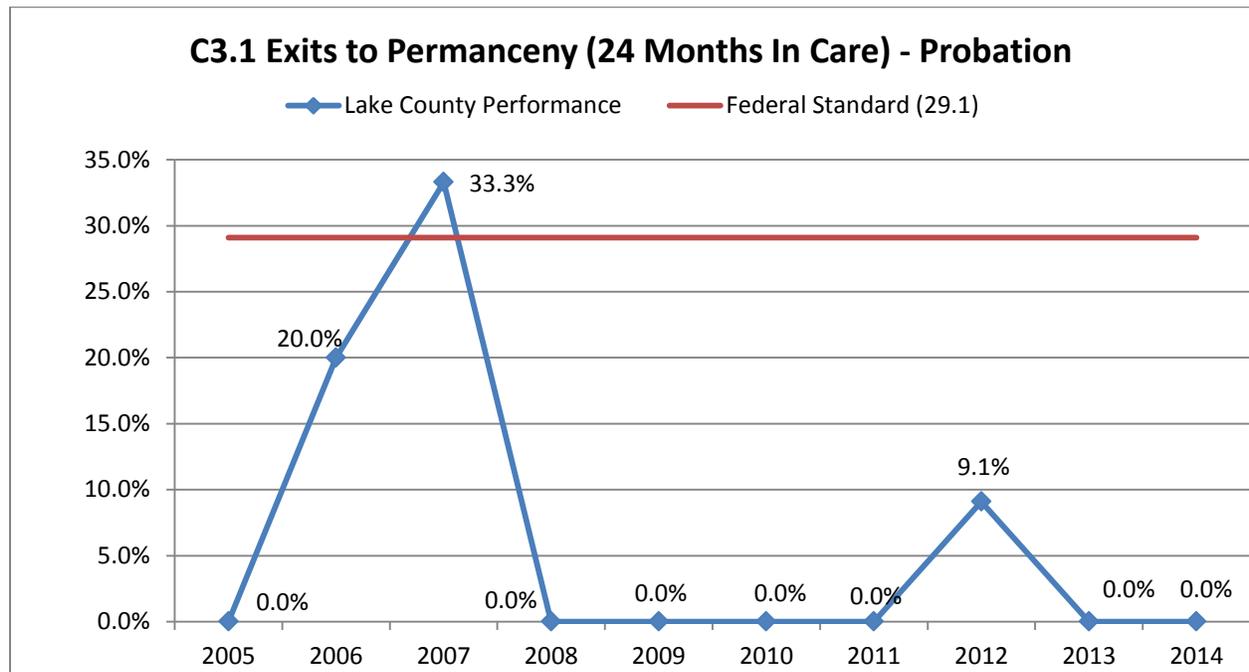


COUNT	JAN2005- DEC2005	JAN2006- DEC2006	JAN2007- DEC2007	JAN2008- DEC2008	JAN2009- DEC2009	JAN2010- DEC2010	JAN2011- DEC2011	JAN2012- DEC2012	JAN2013- DEC2013	JAN2014- DEC2014
	Reunified in less than 12 months	4	1	.	4	1	.	.	.	.
Reunified in 12 months or more	1	3	3	1	1	.	.	1	.	3
Total	5	4	3	5	2	.	.	1	.	3

### C3.1 Exits to Permanency (24 Months In Care) – Probation

Of all children in foster care for 24 months or longer on the first day of the year, what percent were discharged to a permanent home by the end of the year and prior to turning 18?

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	0	4	0.0	N.A	N.A.	N.A

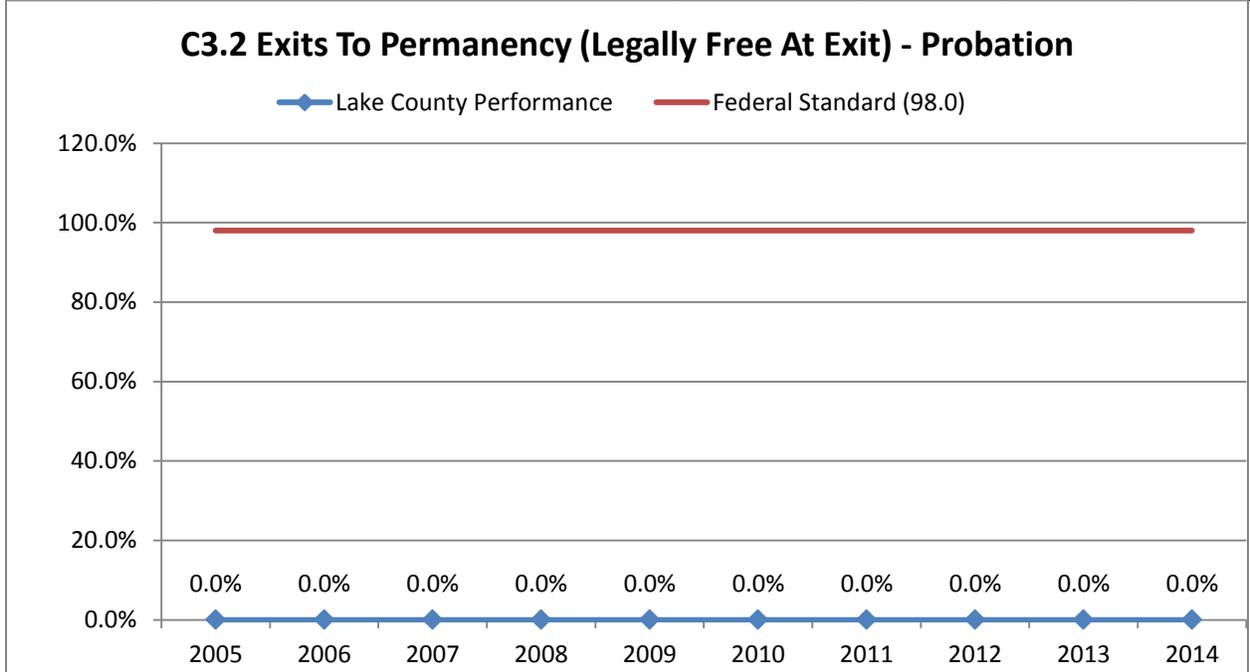


	Interval									
	JAN2005-DEC2005	JAN2006-DEC2006	JAN2007-DEC2007	JAN2008-DEC2008	JAN2009-DEC2009	JAN2010-DEC2010	JAN2011-DEC2011	JAN2012-DEC2012	JAN2013-DEC2013	JAN2014-DEC2014
Exited to reunification by end of year and before age 18	.	.	2	.	.	.	.	1	.	.
Exited to adoption by end of year and before age 18	.	1	.	.	.	.	.	.	.	.
Exited to guardianship by end of year and before age 18	.	.	.	.	.	.	.	.	.	.
Exited to non-permanency by end of year	4	1	2	2	1	1	.	3	.	3
Still in care	1	3	2	.	2	2	5	7	6	1
<b>Total</b>	<b>5</b>	<b>5</b>	<b>6</b>	<b>2</b>	<b>3</b>	<b>3</b>	<b>5</b>	<b>11</b>	<b>6</b>	<b>4</b>

### C3.2 Exits To Permanency (Legally Free AT Exit) – Probation

Of all children discharged from foster care during the year who were legally free for adoption, what percent were discharged to a permanent home prior to turning 18?

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	0	0	0		N.A	N.A

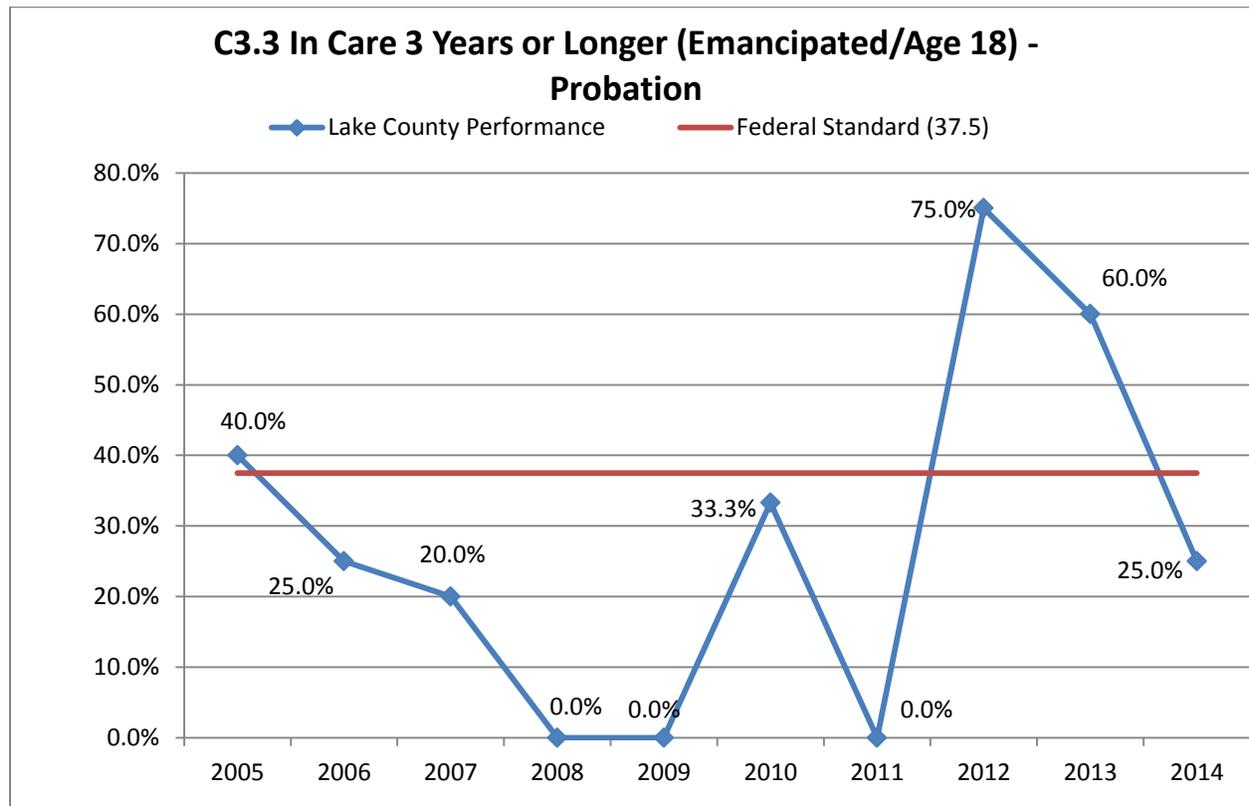


COUNT										
	JAN2005-DEC2005	JAN2006-DEC2006	JAN2007-DEC2007	JAN2008-DEC2008	JAN2009-DEC2009	JAN2010-DEC2010	JAN2011-DEC2011	JAN2012-DEC2012	JAN2013-DEC2013	JAN2014-DEC2014
Exited to permanency before age 18	.	.	.	.	.	.	0	.	.	.
Did not exit to permanency before age 18	.	.	.	.	.	.	1	.	.	.
<b>Total</b>	.	.	.	.	.	.	1	.	.	.

### C3.3 In Care 3 Years Or Longer (Emancipated/Age 18) – Probation

Of all children in foster care during the year who were either discharged to emancipation or turned 18 while still in care, what percent had been in foster care for 3 years or longer?

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	1	4	25.0		-58.3%	N.A

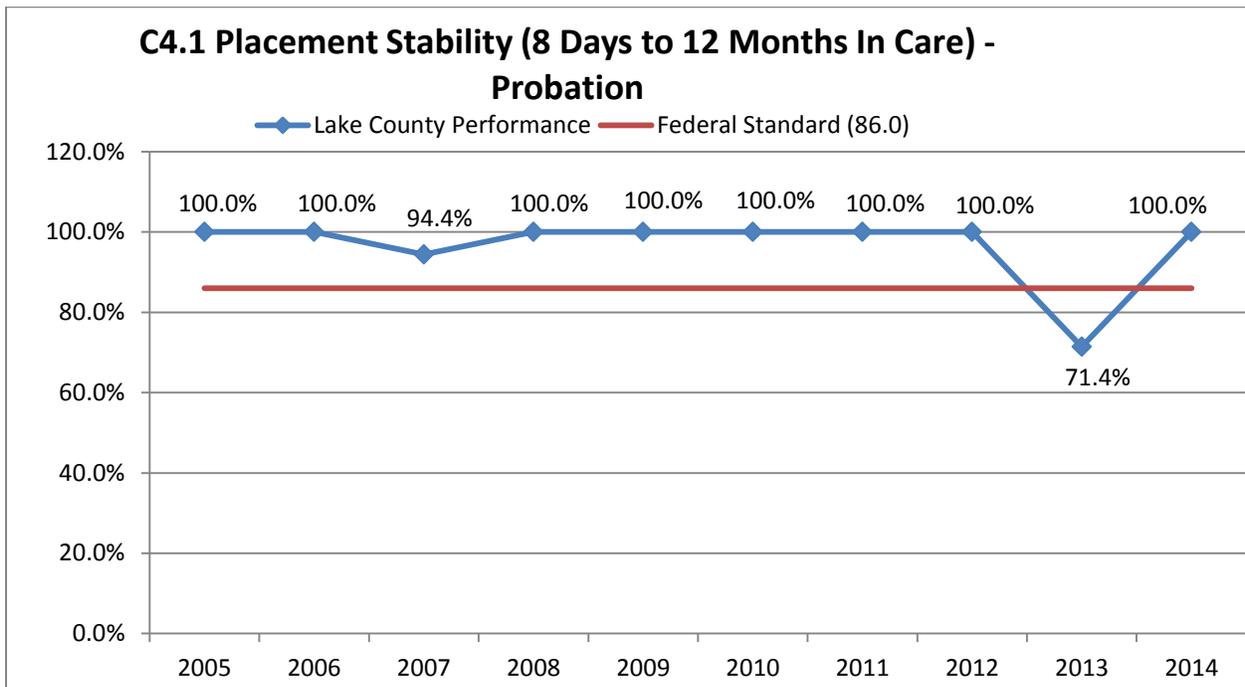


COUNT	Year									
	JAN2005-DEC2005	JAN2006-DEC2006	JAN2007-DEC2007	JAN2008-DEC2008	JAN2009-DEC2009	JAN2010-DEC2010	JAN2011-DEC2011	JAN2012-DEC2012	JAN2013-DEC2013	JAN2014-DEC2014
In care 3 years or longer	2	1	1	.	.	2	.	3	3	1
Total	5	4	5	4	5	6	2	4	5	4

### C4.1 Placement Stability (8 Days To 12 Months In Care) – Probation

Of all children served in foster care during the year who were in foster care what percent had two or fewer placement settings?

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	12	12	100.0	↑	40.0%	0.0%

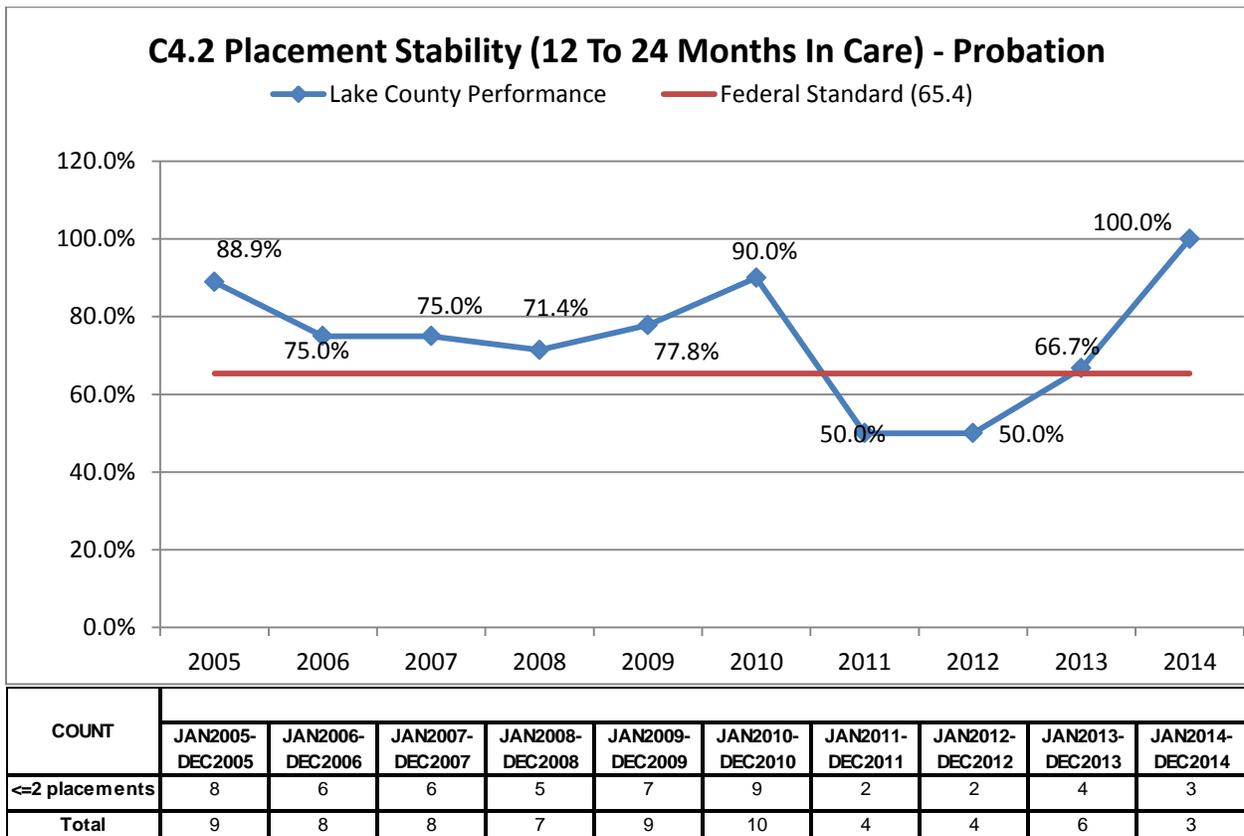


COUNT	JAN2005-DEC2005	JAN2006-DEC2006	JAN2007-DEC2007	JAN2008-DEC2008	JAN2009-DEC2009	JAN2010-DEC2010	JAN2011-DEC2011	JAN2012-DEC2012	JAN2013-DEC2013	JAN2014-DEC2014
	<=2 placements	11	20	17	18	12	4	4	8	5
Total	11	20	18	18	12	4	4	8	7	12

## C4.2 Placement Stability (12 To 24 Months In Care) – Probation

Of all children served in foster care during the year who were in foster care what percent had two or fewer placement settings?

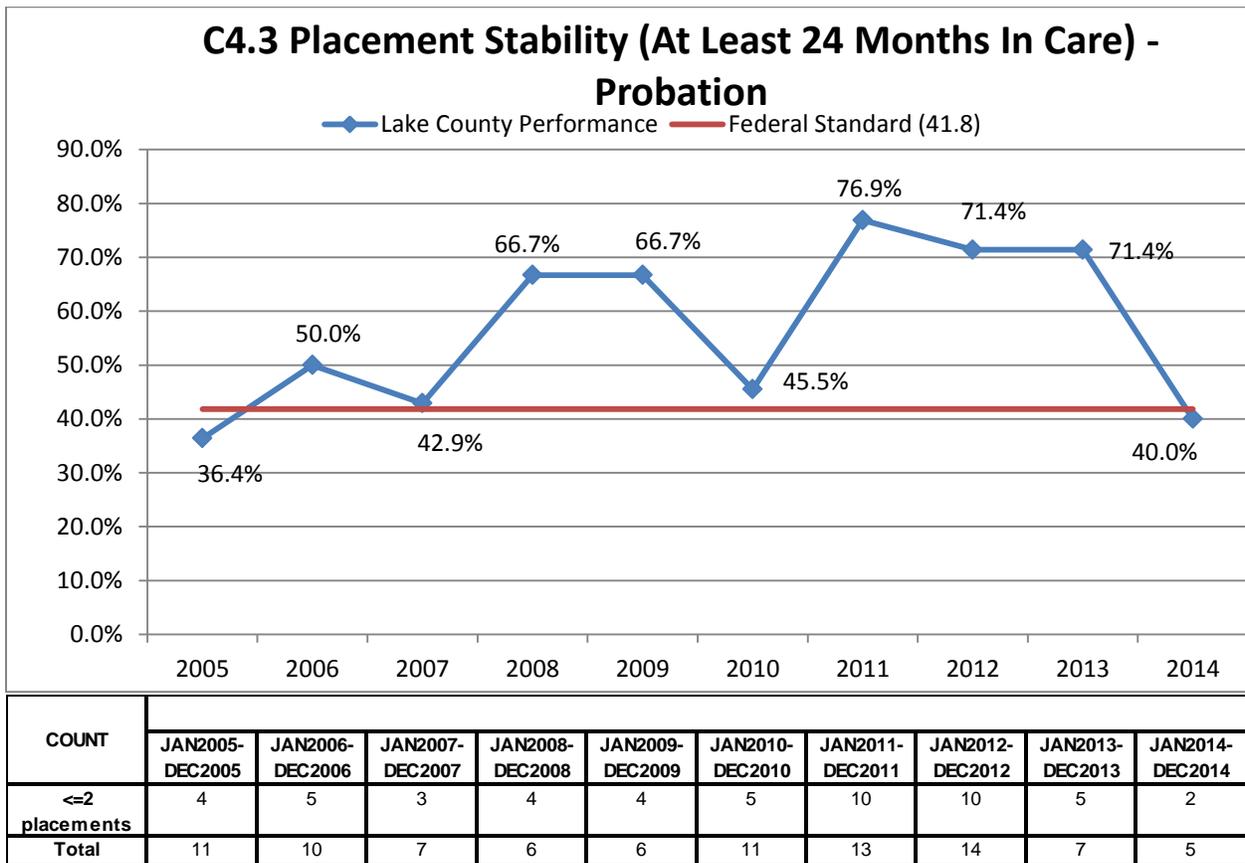
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	3	3	100.0	↑	50.0%	28.6%



### C4.3 Placement Stability (At Least 24 Months In Care) – Probation

Of all children served in foster care during the year who were in foster care what percent had two or fewer placement settings?

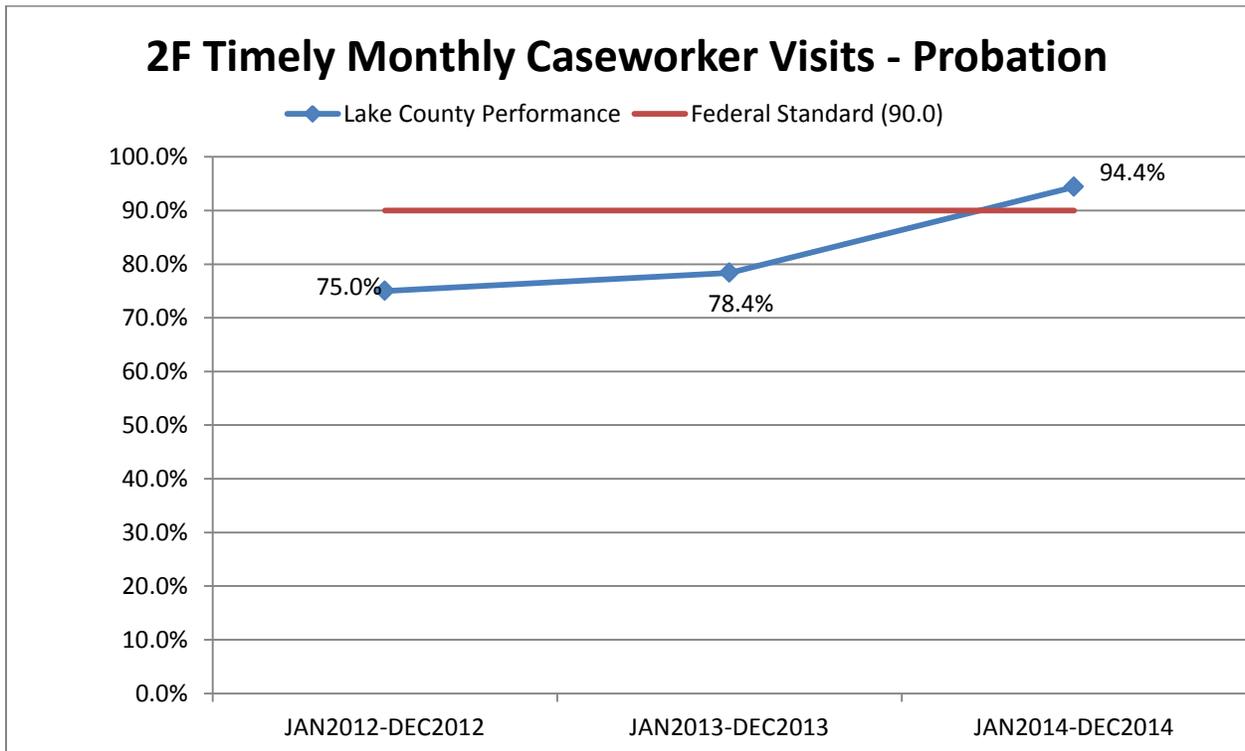
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	2	5	40.0	↓	-44.0%	-40.0%



## 2F Timely Monthly Caseworker Visits (Out Of Home) – Probation

These reports calculate the percentage of children in placement who are visited by caseworkers. Each child in placement for an entire month must be visited at least once. The reports summarize monthly data by 12-month periods.

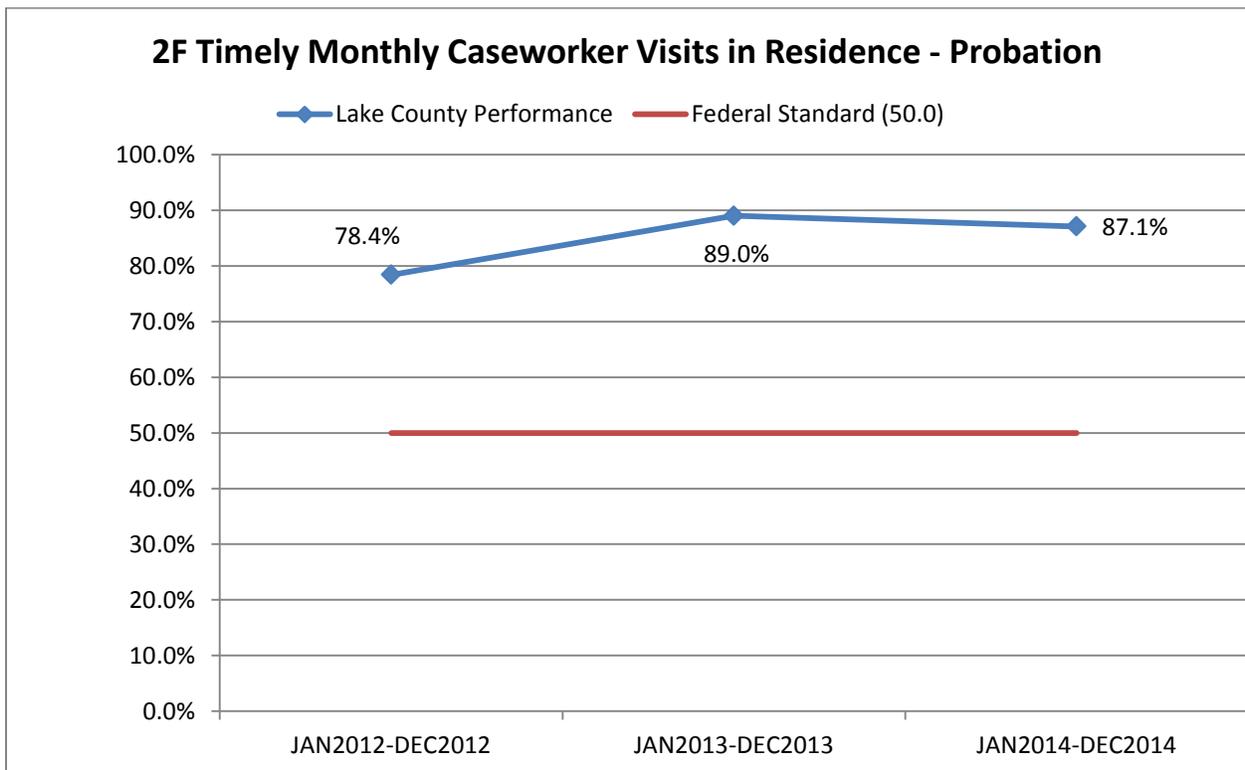
Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	85	90	94.4	↑	20.4%	N.A



## 2F Timely Monthly Caseworker Visits in Residence – Probation

These reports calculate the percentage of children in placement who are visited by caseworkers. Each child in placement for an entire month must be visited at least once. The reports summarize monthly data by 12-month periods

Most Recent Start Date	Most Recent End Date	Most Recent Numerator	Most Recent Denominator	Most Recent Performance	Direction	One-Year Percent Change	Five-Year Percent Change
1/1/2014	12/31/2014	74	85	87.1	↑	-2.2%	N.A



## Summary of Findings

The County Self-Assessment is one of three components required by the California Child and Family Services Review (C-CFSR) to assess the effectiveness of child welfare services across child safety, permanency and well-being. The process emerged as a result of California's Child Welfare System Improvement and Accountability Act (AB 636) and requires extensive feedback from county-wide stakeholders. In 2015, as required by AB 636, Lake County CWS and Juvenile Probation analyzed their performance on critical outcomes and key systemic factors. The process also included an analysis of the expenditure of federal and state funds for the Promoting Safe and Stable Families (PSSF), Child Abuse Prevention, Intervention and Treatment (CAPIT) and Community Based Child Abuse Prevention (CBCAP) funding streams.

The conclusions from this CSA, as set forth below, will form the basis of CWS's upcoming five-year System Improvement Plan (SIP) due November 7, 2015.

### **KEY FINDINGS – CHILD WELFARE SERVICES**

The population currently served by CWS is mainly families who struggle with poverty and substance abuse and have young children, and these are the families at greatest risk of maltreatment.

Stakeholder responses and data outcomes highlighted a number of factors, including gaps in resources and services. Staffing concerns due to turnover and recruitment challenges were a major factor across the continuum of County and child welfare services. Commonly cited needs included increasing or expanding the following:

- availability of public transportation or other transportation options
- identification of local foster homes and concurrent planning placements
- support for relative and NREFM caregivers
- substance abuse treatment options and intensive residential services for parents and their children
- access to after care services
- adult mental health services
- progressive visitation
- educational support for school age children
- ILP services for transitioning youth

Other areas cited for improvement include smoother or fewer transitions between social workers and an increase in communication between CWS and the court and caregivers.

The assessment also identified a number of strengths to build on including the dedication and passion of CWS staff who work for the benefit of the children and families they serve. Additional

strengths noted were support for AB12 placements, the Wraparound program, dedication to community partnerships, DDC, and family engagement throughout the life of a case.

### **STRATEGIES TO ADDRESS GAPS**

CWS has already taken action to address staffing issues with the inclusion of a request for a paralegal position and expanded support for a staff recruitment and retention program in the recommended budget for the upcoming year. Strategies being implemented to address gaps in services include expanded implementation of the Core Practice Model to meet safety, well-being and permanency outcomes, specialized coaching through the U. C. Davis extension to improve staff competencies and offset supervisor vacancies, and expanded collaboration with Public Health local FFAs, and the Office of Education.

### **COUNTY PERFORMANCE ON OUTCOME MEASURES**

#### **CHILD WELFARE**

For the comparison period of 2011 to the most recent outcome data, CWS's performance met or exceeded the following 13 national performance standards:

- S1.1 No recurrence of maltreatment within a specific 6 month period
- S2.1 No maltreatment in foster care
- C1.4 Reentry following reunification (exit cohort)
- C2.3 Adoption within 12 months (17 months in care)
- C2.4 Legally Free within 6 months (17 months in care)
- C2.5 Adoption within 12 months (legally free)
- C3.2 Exits to permanency (Legally Free at Exit)
- C3.3 In care 3 years or longer and either emancipated or turned 18 prior to exit
- C4.2 Placement stability (12 to 24 months in care)
- 2B Immediate Response Referrals with a timely response
- 2B 10-Day referrals with a timely response
- 2F Monthly visits (out of home)
- 2F Monthly visits in residence (out of home)

For the same comparison period, CWS's performance was below the national standard on the remaining eight (8) outcomes:

- C1.1 Reunification with 12 months (exit cohort)
- C1.2 Median time to reunification (exit cohort)
- C1.3 Reunification within 12 months (entry cohort)
- C2.1 Adoption within 24 months
- C2.2 Median time to adoption
- C3.1 Exits to permanency (24 months in care)
- C4.1 Placement stability (8 days to 12 months in care)
- C4.3 Placement stability (At least 24 months in care)

As with every complex system, there are areas to improve which will be further explored and addressed in the upcoming SIP. In terms of timely reunification for CWS families, participants in the Peer Review and various other stakeholder groups suggested that Lake County's longer time to reunification may not be negative, notwithstanding the national standard. On a case-by-case basis, the longer period of reunification services may be an appropriate level of intervention, given the multigenerational severity of many families' issues, especially regarding substance abuse and poverty. While this makes sense and appears to be reinforced by a low instance of reentries after reunification, CWS is committed to continuing efforts to meet the national standard for timely reunifications.

While Lake County has not yet met or exceeded the national goals for adoptions, it has continued to improve in these areas since the adoption program was brought in-house in July 2012. As the current trends suggest, Lake County is on track to meet the national goal for timely permanency through adoption. To support continued improvements in this area, CWS is continuing to explore the option to bring a licensing program in-house, which will improve access and services to local foster homes.

To improve placement stability CWS will explore options to provide additional training and support to foster parents, particularly relatives who don't have the advantage of a foster agency for support.

## **PROBATION**

For the comparison period, the Juvenile Probation met or exceeded six (6) national standards applicable to youth in placement through Probation:

- S2.1 No maltreatment in foster care
- C3.3 In Care 3 Years Or Longer (Emancipated/Age 18)
- C4.1 Placement Stability (8 Days To 12 Months In Care)
- C4.2 Placement Stability (12 To 24 Months In Care)
- 2F Timely Monthly Caseworker Visits (Out Of Home)
- 2F Timely Monthly Caseworker Visits in Residence

For the same comparison period, Juvenile Probation was below the national standards for youth in juvenile probation placement on the following three (3) measures:

- C1.1 Reunification Within 12 Months (Exit Cohort) - Probation
- C3.1 Exits to Permanency (24 Months In Care) – Probation
- C4.3 Placement Stability (At Least 24 Months In Care) – Probation

It is important to note that the majority of the youth in these cohorts were high risk youth with numerous crime related risk factors as well as low protective factors which in and of itself presents a challenge to meet the re-entry measures. In addition, these youth are returning to the same high risk environments which include but are not limited to minimal parental supervision, high gang activity and safety issues in their communities. Encompassed in this were efforts to address non-compliant behaviors, community safety, accountability and family and

community engagement. Probation has implemented a Family Wrap program to address these issues.

## **CONCLUSION**

Over the next several months, CWS, Juvenile Probation and the SIP Steering Committee will review and consider the results of this Self-Assessment, and develop a five-year System Improvement Plan that is due to the State in early November. The agencies look forward to this process and the increased benefits it will yield for the families they serve.

## References (Endnotes)

- <sup>i</sup> McKinney-Vento Homeless Education Assistance Act  
[http://center.serve.org/nche/downloads/briefs/who\\_is\\_homeless.pdf](http://center.serve.org/nche/downloads/briefs/who_is_homeless.pdf)
- <sup>ii</sup> California Department of Education at <http://www.ed-data.org/county/Lake>
- <sup>iii</sup> [www.Kidsdata.org](http://www.Kidsdata.org)
- <sup>iv</sup> IDENTIFYING PRIORITY HEALTH NEEDS - COMMUNITY HEALTH NEEDS ASSESSMENT - Prepared for the Lake County Collaborative of Health and Community-Based Organizations, Barbara Aved Associates, October 2010, p. 39
- <sup>v</sup> *Ibid.*
- <sup>vi</sup> [http://www.co.lake.ca.us/Assets/Mental+Health\\_AODS/docs/MH/NBSP+Project+-+Lake+County\\_newer.pdf](http://www.co.lake.ca.us/Assets/Mental+Health_AODS/docs/MH/NBSP+Project+-+Lake+County_newer.pdf)
- <sup>vii</sup> <http://www.kidsdata.org/topic/600/special-needs-ccs/table#jump=why-important&fmt=822&loc=2,337&tf=67&ch=1037,1038&sortColumnId=0&sortType=asc>
- <sup>viii</sup> Needell, B., Webster, D., Armijo, M., Lee, S., Dawson, W., Magruder, J., Exel, M., Cuccaro-Alamin, S., Putnam-Hornstein, E., King, B., Morris, Z., Sandoval, A., Yee, H., Mason, F., Benton, C., & Pixton, E. (2015). *CCWIP reports*. Retrieved 4/24/2015, from University of California at Berkeley California Child Welfare Indicators Project website. URL: [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)
- <sup>ix</sup> <http://www.safehomestudy.org/SAFE/SAFE-Overview.aspx> SAFE provides practitioners with uniform information gathering tools that support the home study interview to identify strengths, as well as issues to be addressed early in the home study process.
- <sup>x</sup> Data for all of the charts in this format are from the CWS Outcomes System Summary for Lake County, Report Publication: April 2015, Data Extract Q4-2014. C.D.S.S. / UC Berkeley California Child Welfare Indicators Project (CCWIP) [http://cssr.berkeley.edu/ucb\\_childwelfare](http://cssr.berkeley.edu/ucb_childwelfare)
- <sup>xi</sup> Data for all of the graphs and charts in this format are from *Ibid.*, Needell B., et al, retrieved on various dates between 4/24/2015 and 5/5/2015.

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## Appendices

Exhibit A: Stakeholder Meeting Participation List

Exhibit B: Lake County Child Welfare Services Organization Chart

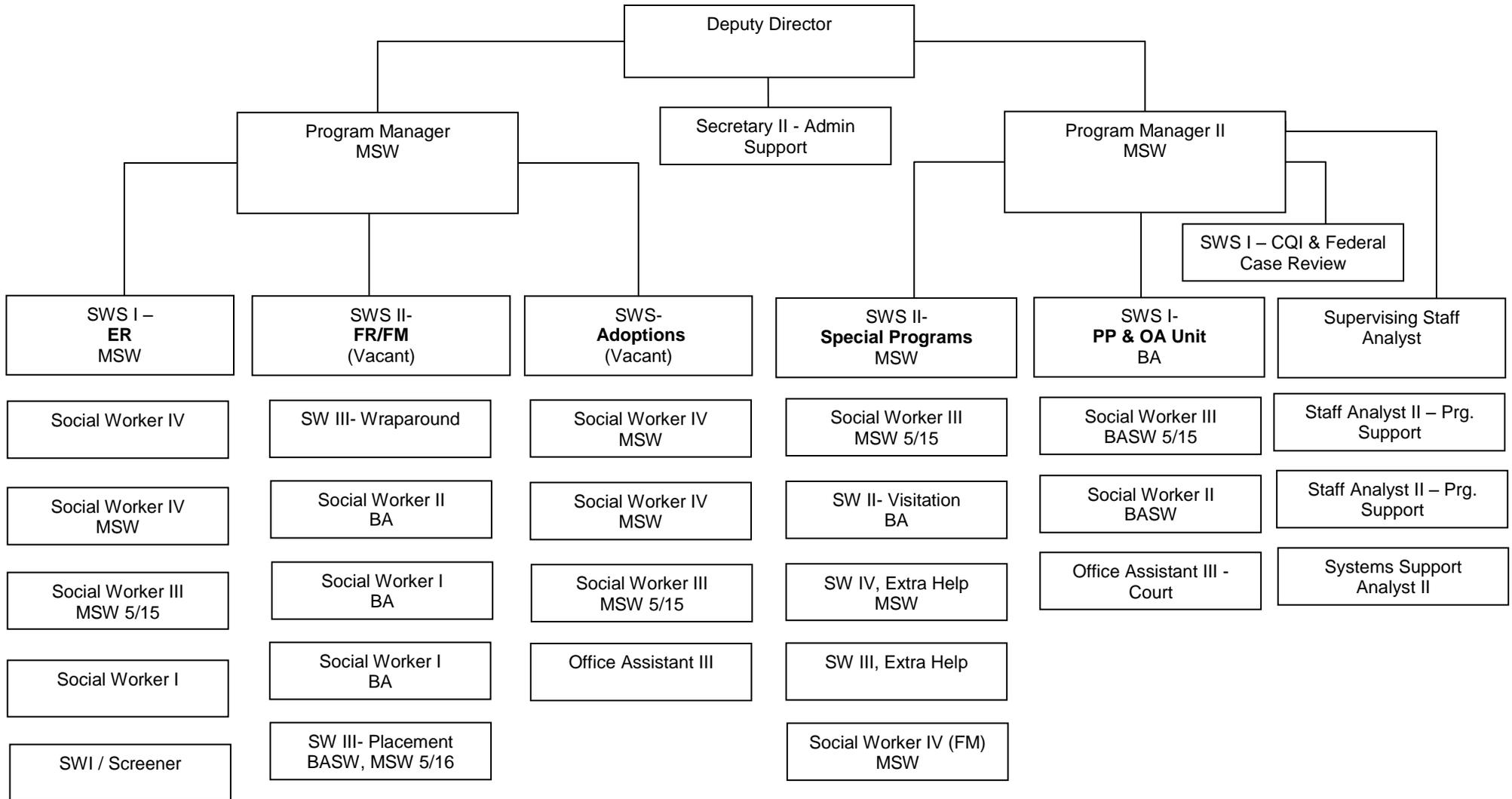
Exhibit C: Lake County Probation Organization Chart

Exhibit D: Lake County Government Organization Chart

**Attendance Roster**  
 County of Lake CSA Stakeholder's Meeting  
 March 4, 2015

Participant Name	Agency/Organization	Position/Title
Nancy Hernandez	Big Valley Rancheria	ICWA Liaison
Veronica Aparicio	Big Valley Rancheria	ICWA
Barbara Ricciuti-Columbo	CDSS	Social Services Consultant III
Irma Muñoz	CDSS	Social Services Consultant III
Jamie Schechter	District Attorney	Sr. Deputy District Attorney
Nick Brown	Elem Indian Colony	ICWA Liaison
Thomas Leon Brown	Elem Indian Colony	Tribal Administrator
Jaclyn Ley	First 5 Lake	Director, Mother-Wise Program
Dolli Rose	Indian Child & Family Preservation Prog	
Matthew Strahl	Konocti Unified School Dist.	
Andrew Goodwin	Lake County Office of Education	
Berdie Guerrero	Lake County Office of Education	Healthy Start
Debbie Ogulin	Lake County Office of Education	Healthy Start/PAL Program
Doreen Gilmore	Lake County Office of Education	Healthy Start Foster Youth
Gina Griffin	Lake County Office of Education	Child Development
Joan Reynolds	Lake County Office of Education	Healthy Start Director & Children's Council Chair
Marta Fuller	Lake County Office of Education	Dental Disease Prevention
Stephanie Wayment	Lake County Office of Education	Director Accountability & Education
Kim VanHorn	Lake Family Resource Center	HUB
Stephanie Lilly	Lake Family Resource Center	Director of Programs
Teresa Stewart	Lake Family Resource Center	PM- Teen Programs
François Van Wyk	LC Behavioral Health	Deputy Director
Kathy Herdman	LC Behavioral Health	Mental Health Case Manager
Linda Morris	LC Behavioral Health	Director
Daphne Colación	LC Tribal Health	Home Visit Program Coordinator
Michele Dibble	LCDSS	Deputy Director
Heather Woldemar	LCDSS Child Welfare Services	Supervisor- Special Programs
John Griffith	LCDSS Child Welfare Services	Supervisor- FR/FM
Kathy Maes	LCDSS Child Welfare Services	Deputy Director
Leila Haddad	LCDSS Child Welfare Services	Supervising Analyst
Mary Pagan	LCDSS Child Welfare Services	Social Worker III
Melinda Lahr	LCDSS Child Welfare Services	Social Worker Supervisor - CQI
Patti Powell	LCDSS Child Welfare Services	Program Manager
Tavi Granger	LCDSS Employment Services	Supervisor- ES Social Workers
Gloria Bradford	North Coast Opportunities	Head Start
Teri Sedrick	North Coast Opportunities	Rural Childcare
Terri Rivera	Probation	Chief Deputy Probation Officer
Wendy Mondfrans	Probation	Deputy Probation Officer
Eva Lambert	Public Health	Public Health Nurse
Suzan Starke	Redwood Coast Regional Center	Client Services Manager
Jillian Barna	Redwood Community Services, Inc.	
Kari VanBrakle	Redwood Community Services, Inc.	Wraparound Coordinator
Michele (Mike) Mix	Redwood Community Services, Inc.	
Victoria Schraeder	Redwood Community Services, Inc.	Program Manager
Pat Iaccino	Upper Lake High School	
Helaine Moore	WIC Program eCenter	Child Health Coordinating Supe.

# Child Welfare Services Organizational Chart



# LAKE COUNTY PROBATION

# ORGANIZATIONAL CHART

**Chief Probation Officer**  
Rob Howe

**Asst. Chief Prob Officer**  
*Vacant*

**Finance**

**Staff Serv. Analyst Senior**  
Marcie Cadora

**Staff Serv. Analyst**  
*vacant*

**Office Assistant**  
Angela Wilson-Johnsen

**Probation Services**

**Adult Division**

**Chief Deputy**  
*vacant*

**Senior DPO**  
Meredith Noyer  
Murph Trueblood

**DPO**  
Lynn Demelle  
Earl Idings  
Teddi Walker  
Jose Martinez  
Kristine Weigel  
Anthony Coulter  
Roberto Morfin  
Todd Freitas  
Dan Driver  
Alice Anamosa  
Michael Johnson  
Ashley Torres  
Jeremy Moore  
*vacant*  
*vacant (unfunded)*  
*vacant(unfunded)*

**Probation Aide**  
Brenda Morgan

**Legal Secretary II/II**  
Kelly Morin  
Julie Steiner

**Juvenile Division**

**Chief Deputy**  
Terri Rivera

**Senior DPO**  
Wendy Mondfrans  
Dennis Reynolds

**DPO**  
Danielle Bean  
Kevin O'Brien  
Luis Loza  
Kevin Luis  
Eva Lara  
Kyle Studer

**Probation Aide**  
Josey Sinclair

**Legal Secretary II/ III**  
Carol Sewall  
Teresa Murray

**Juvenile Home**

**Chief Deputy Juv Home Super.**  
Dean Thornquist

**Senior JCO**  
Julianna Bisaccio  
Amy Stephenson  
Ralph Reynolds  
Christopher McVey

**JCO**  
Jennifer Irwin  
Claudia Acosta  
Brittani Walker  
Jesse Weaver  
Jesse Sanchez  
Bob Stone  
Daniel Paminto  
Kaitlyn Reynolds  
Steven Groves  
Preston Herdt  
Agustin Perez  
Dale Hoskins  
Kerri Meyers  
*vacant*

**Extra Help JCO**  
Becky Wilson

**JC Aide**  
Marty Bigrigg

**Welfare Fraud Inv.**

**WFI Supervisor**  
Mike Owens

**WF Investigator**  
Brenda Penhall  
Kenneth Mondfrans

**KEY**

Management Staff

Supervisory Staff

Line Staff

Extra Help Staff



**COUNTY OF LAKE  
ORGANIZATIONAL CHART**

As of September 2012

